North Central Health District
COVID-19 Operational Summary

January 4, 2021



This is an emerging and dynamic situation, therefore our data and recommendations are subject to change. North Central Health District (NCHD) is part of the Georgia Department of Public Health (DPH) and serves individuals residing in 13 Central Georgia counties: Baldwin, Bibb, Crawford, Hancock, Houston, Jasper, Jones, Monroe, Peach, Putnam, Twiggs, Washington, and Wilkinson. This report describes the NCHD operations in response to the COVID-19 pandemic.
The purpose of this report is to provide situational awareness to our district partners and community members.

## Workforce

NCHD has a total of 334 employees. Since before the response to COVID-19 started, NCHD staff have been planning and preparing for the response. In January 2020, the Epidemiology and Emergency Preparedness programs began watching the situation closely, educating partners, and monitoring travelers. Today, we have scaled back our normal operations to be able to respond to this event appropriately and have employees dedicated full time to the response with many additional employees assisting on an as-needed basis. Public health staff are working on a variety of tasks from epidemiology (which includes data management, case investigation, contact tracing, and outbreak investigations), vaccination, Partner Coordination, SPOC operations, and ensuring our regulated facilities are operating according to the newest executive order. In addition to our workforce, NCHD has

158

## Public Health Responders

 received several temporary staff (i.e. nursing, administrative support, case investigators, and contact tracers) from the state office that are assisting with Epidemiology and SPOC operations.
## COVID-19 Vaccination

North Central Health District received its initial allocation of COVID-19 vaccine Dec. 23. After administrating vaccine to a small group of public health staff and community partners on Dec. 26, the district began the first vaccination of the Phase 1A group Dec. 28. At this time, our district The information in this portion of the report is accurate as of $1 / 4 / 2021$ at 12 PM.

## Current Vaccination Phase



We are currently in Phase 1A of COVID-19 vaccine distribution. Phase 1A includes the following:

- Healthcare personnel including, but not limited to:
- Public health staff
- Hospital staff
- EMS and first responders who respond to medical calls
- Urgent care staff
- Staff in clinical settings
- Physicians, nurses, pharmacists, EMS, laboratory staff, environmental services, etc.
- Residents and employees of long-term care facilities

On Dec. 30, Governor Kemp and Commissioner Toomey announced the plans to expand Phase 1A vaccination eligibility to all adults over age 65 and all first responders. This expansion is expected to begin within the next few weeks, however it is dependent on how much of the vaccine is received locally. This expansion is not yet implemented - North Central Health District will announce local expansion when it is implemented.

We are currently working through vaccinating Phase 1A as quickly as possible. Appointments for vaccination are booked though the week of Jan. 11. Our district schedules vaccination based on our supply of COVID-19 vaccine on-hand in order to ensure individuals can receive vaccine as scheduled. Current vaccine supply in the district has been allocated to community members in Phase 1A.

## Specimen Points of Collection (SPOC)

On March 18, 2020, NCHD stood up our first SPOC in Houston County, in the following weeks we expanded to 3 additionals locations in Jasper, Jones, and Washington Counties. The activities of these locations were limited in capacity due to state-supplied specimen collection kits. On 4/17/2020, due to an increase in the state's capacity to supply specimen collection kits, we opened our fifth location in Bibb County. On 5/3/2020, we expanded testing to all 13 of our county health departments.

The information in this portion of the report is accurate as of $1 / 3 / 2021$ at 10 PM.
The data shown on this page only reflects specimens collected from NCHD public health points of collection and not representative of all specimens collected within our 13-county area.

NOTE: Over the past several weeks there have been delays in laboratory reporting. The week-to-week changes may be affected by such delays. These delays are outside of the operations of NCHD.
Number of Specimens Collected by Residency


782
Specimens Collected Between 12/20/202012/27/2020 38,280

Total Specimens Collected
3.2 minutes is the average time spent per patient for specimen collection.

| County of |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Residence | Total <br> Specimens <br> Collected by <br> $1 / 3 / 2021$ <br> Specimens <br> Collected <br> Between <br> 12/27/2020-1 <br> $/ 3 / 2021$ | Amount of <br> Labs <br> Pending (\%) | Total <br> Positivity <br> Rate (\%) <br> $\mathbf{3 / 1 8 / 2 0 2 0 - 2 0 2 1 ~}$ | 21 Day <br> Positivity <br> Rate (\%) <br> $\mathbf{1 2 / 1 4 / 2 0 2 0 ~}$ <br> $-\mathbf{1 / 3 / 2 0 2 1}$ |  |
| BALDWIN | 3903 | $2 \%$ | $4 \%$ | $11 \%$ | $19 \%$ |
| BIBB | 8239 | $1 \%$ | $0 \%$ | $8 \%$ | $26 \%$ |
| CRAWFORD | 679 | $0 \%$ | $0 \%$ | $11 \%$ | $38 \%$ |
| HANCOCK | 944 | $4 \%$ | $5 \%$ | $12 \%$ | $28 \%$ |
| HOUSTON | 11955 | $1 \%$ | $0 \%$ | $10 \%$ | $45 \%$ |
| JASPER | 764 | $1 \%$ | $0 \%$ | $8 \%$ | $14 \%$ |
| JONES | 1733 | $2 \%$ | $2 \%$ | $10 \%$ | $17 \%$ |
| MONROE | 1032 | $3 \%$ | $0 \%$ | $6 \%$ | $6 \%$ |
| PEACH | 1577 | $2 \%$ | $0 \%$ | $10 \%$ | $45 \%$ |
| PUTNAM | 2047 | $1 \%$ | $2 \%$ | $9 \%$ | $20 \%$ |
| TWIGGS | 370 | $1 \%$ | $0 \%$ | $12 \%$ | $35 \%$ |
| WASHINGTON | 2135 | $1 \%$ | $0 \%$ | $11 \%$ | $25 \%$ |
| WILKINSON | 716 | $3 \%$ | $1 \%$ | $12 \%$ | $21 \%$ |
| Out of District | 1404 | $1 \%$ | $0 \%$ | $10 \%$ | $22 \%$ |
| Total | 37498 | $1 \%$ | $1 \%$ | $9 \%$ | $28 \%$ |

## Epidemiology - Data Definitions

The information in the rest of the report is a breakdown by Presumptive and Confirmed Cases by each county within NCHD.

Confirmed Cases are those tested using a Molecular Test (i.e. PCR) since 3/1/2020.
Presumptive Cases are those tested using an Antigen Test since 3/1/2020
Due to the reporting, interview, and data analysis processes, there may be delays in reporting cases as an outbreak. The Epidemiology Program is working closely with all partners to ensure data accuracy.

An outbreak is considered closed if it has been 2 incubation periods since the last symptom onset date. Not all cases within an outbreak are counted within the county the outbreak occurs (i.e. staff of a facility may live in another county).

14-Day incidence rate indicates newly reported confirmed COVID-19 cases among county residents per 100,000 residents during the 14- day period indicated, using 2018 U.S. Census data to derive county population. Rates cannot be accurately calculated for Counties with $<5$ cases.

Transmission Levels are based on the incidence rate and defined as:

- Substantial Spread: greater than 101 cases per 100,000 county residents
- Moderate Spread: 51-100 cases per 100,000 county residents
- Minimal Spread: >11-50 cases per 100,000 county residents
- Low Spread: > 0-10 cases per 100,000 county residents
- Insufficient Data: A rate is not calculated for less than 5 cases reported. These counties may likely have low levels of transmission but may be affected by other factors such as levels of COVID-19 testing.

Counties of Interest are identified by counties that have within the most current week (most recent 7 days) to the previous week [ $>5 \%$ increase in COVID syndrome/ILI syndrome (if $>2$ visits) AND $>5 \%$ increase in cases (if $>2$ cases)] OR [>25\% change in cases AND >10 cases during most recent week].

Syndromic surveillance (SS) provides a method for timely detection of potential clusters or outbreaks of specified diseases/events. SS data include emergency department (ED) visits based on the patient's chief complaint upon admission and/or discharge diagnosis. SS data used within this report is based on county of residence NOT facility.

- Covid-19 Syndrome includes: Chief complaint text for "coronavirus", "covid", "c-19", or "ncov". Selected discharge diagnosis codes (ICD or Snomed) relevant to COVID-19; including confirmed COVID-19, suspected/probable COVID-19, unspecified coronavirus infection, exposure to COVID-19, or severe acute respiratory syndrome.
- ILI Syndrome includes: Chief complaint text for fever, influenza, RSV, viral infection, viral pneumonia, cough (if fever), or sore throat (if fever).
- Note: Covid-19 Syndrome excludes select visits related to Covid-19 testing or exposure with no mention of symptoms. Criteria for syndromes are subject to change as additional information is received.

The information is accurate as of 1/3/2021 at 10 PM.

# CURRENT 2 WEEK PERIOD: 

12/14/2020-12/27/2020
PREVIOUS 2 WEEK PERIOD:

## Epidemiology - Overview

NCHD's Epidemiology Program is responsible for investigating every reported case of laboratory-confirmed COVID-19. The following information describes the activities of the epidemiology program and provides a description of the current situation with the district.
NCHD Epidemiology only reports Confirmed* and Presumptive* cases that reside within the 13 counties that make up the district. Although serology (i.e. antibody tests) are reportable, they do not meet the CDC case definition for a confirmed or presumptive case, therefore number of serology tests are not included in this report.
Any reductions in numbers are a result of data error corrections (i.e. duplication, incorrect case classification, residency, etc). Data corrections are made as soon as they are found and data accuracy is checked daily by NCHD epidemiology staff. The information in this portion of the report is accurate as of $1 / 3 / 2021$ at 10 PM.

## SUBSTANTIAL SPREAD

| -MEAD |  |  |  |  | Current 14-Day |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Total Number of Confirmed and Presumptive Cases |  |  | 32,732 |  | Incidence Rate <br> he incidence rate of COVID-19 for NCH for the Current 2-Week Period was |  |  |
| Median Age (Age Range) |  |  | 42 (0-103 Years) |  |  |  |  |
| Hospitalizations |  |  | 2864 (9\%) |  | 100,000 population ( $\mathrm{n}=4502$; |  |  |
| Deaths |  |  | 752 (2.3\%) |  | population=530,945). The previous 2 -w |  |  |
| Deaths Median Age (Age Range) |  |  | 74 (24-100 Years) |  | Incidence Rate was 571 per 100,000 popu ( $\mathrm{n}=3031$ ). |  |  |
| Deaths that were Hospitalized |  |  | 526 (70\%) |  |  |  |  |
| County | Total Confirmed Cases as of 1/3/2021 10PM | Total <br> Presumptive <br> Cases as of <br> 1/3/2021 <br> 10PM | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $1 / 3 / 2021$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $1 / 3 / 20212$ | Percent Change Between $12 / 27 / 2020$ $-1 / 3 / 2021$ | Total <br> Hospitalizations (Presumptive and Confirmed) | Total Deaths (Presumptive and Confirmed) |
| Baldwin | 2971 | 315 | 3286 | 3074 | 7\% | 234 | 74 |
| Bibb | 9653 | 885 | 10538 | 9681 | 9\% | 1182 | 254 |
| Crawford | 378 | 63 | 441 | 392 | 13\% | 47 | 8 |
| Hancock | 645 | 42 | 687 | 603 | 14\% | 79 | 47 |
| Houston | 6449 | 2052 | 8501 | 7405 | 15\% | 576 | 129 |
| Jasper | 421 | 448 | 869 | 783 | 11\% | 32 | 9 |
| Jones | 1091 | 150 | 1241 | 1088 | 14\% | 76 | 24 |
| Monroe | 1318 | 344 | 1662 | 1498 | 11\% | 131 | 64 |
| Peach | 1257 | 348 | 1605 | 1441 | 11\% | 149 | 32 |
| Putnam | 1199 | 192 | 1391 | 1285 | 8\% | 95 | 31 |
| Twiggs | 385 | 63 | 448 | 380 | 18\% | 72 | 19 |
| Washington | 1201 | 215 | 1416 | 1305 | 9\% | 96 | 43 |
| Wilkinson | 548 | 99 | 647 | 588 | 10\% | 95 | 18 |
| Total | 27516 | 5216 | 32732 | 29523 | 11\% | 2864 | 752 |

Age Distribution of Cases
Previous 2-Week Period $\square$ Current 2-Week Period


All data is based on patient county of residence when known.
${ }^{*}$ Confirmed Cases are those tested using a Molecular Tests (i.e. PCR) since 3/1/2020.
*Presumptive Cases are those tested using an Antigen Test since 3/1/2020

From Start of Pandemic


NCHD COVID-19 CASES OVER TIME Last 60 Days


The date indicated for the newly confirmed COVID-19 cases is based on the combination of dates based on: 1 )date of symptom onset; 2)if the date is invalid or missing, the first positive collection date is used and 3 ) if both of those dates are invalid or missing, the date the case is reported is used.

* 14-day window - Confirmed cases over the last 14 days may not be accounted for due to illnesses yet to be reported or test results may still be pending.

Note - Data during the reporting period may be incomplete due to the lag in time between when the case was tested and/or reported and submitted to the Georgia DPH for reporting purposes. This delay can vary depending on the testing facility and/or jurisdiction.

## Number of Positive Confirmed and Presumptive COVID-19 Cases By Day of Report to NCHD



Number of Positive Confirmed and Presumptive COVID-19 Cases for the Last 60 Days By Day of Report to NCHD



Date
Hospitalizations Over Time



Date
Hospitalizations and Death By Date of Occurrence
— Hospitalizations — Deaths


Date
Hospitalizations and Death By Date of Occurrence Past 60 Days

- Hospitalizations — Deaths

$70 \%$ of Hospitalized Cases have been reported as being discharged. 7\% of Cases have been identified as Healthcare Workers.
$44 \%$ of Deaths are associated with a congregate setting outbreak. 8\% of Cases are associated with a congregate setting outbreak.

Race Distribution of Cases


Underlying Health Conditions


Yes (30.18\%) $\square$ No (23.47\%) $\square$ Unknown (46.35\%)

Gender Distribution of Cases


Unknown (0.6\%)

Race Distribution of Deaths


Underlying Health Conditions (Deaths)


Yes (65.35\%)
No (20.79\%)
Unknown (13.86\%)

Gender Distribution of Deaths

$\square$ Male (52.7\%) $\square$ Female (47.3\%)

## Baldwin County - Substantial Spread

AREA OF CONCERN: 10\% of Emergency Department Visits captured in syndromic surveillance for residents of Baldwin County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with ILI Syndromes, have increased amongst Baldwin County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 618

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 618 per 100,000 population ( $\mathbf{n}=277$; population=44,823). The previous 2-week Incidence Rate was 297 ( $\mathrm{n}=133$ ) per 100,000 population.



## 3\%

Current 2-week Period Outbreak Related Cases

The cases reported in Baldwin County for the Current 2-week period associated with an outbreak account for $3 \%(n=7)$ of the total cases reported during that time county-wide. During this time period, 100\% (n=7) of the outbreak-related cases are associated with a congregate care setting. The other $97 \%$ of cases reported during that timeframe in Baldwin County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 15\% ( $\mathrm{n}=483$ ) of cases reported in Baldwin County have been linked to an outbreak.

## Bibb County - Substantial Spread

AREA OF CONCERN: 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Bibb County were categorized as COVID-19 Syndrome since $12 / 19 / 2020$. Confirmed case counts, as well as emergency room visits associated with ILI Syndromes, have increased amongst Bibb County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

The incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 763 per 100,000 population ( $\mathbf{n}=1168$; population=153,095). The previous 2-week Incidence Rate was 555 ( $\mathrm{n}=849$ ) per 100,000 population.
$38 \%$ increase in newly Confirmed COVID-19 Cases amongst Bibb County residents between the Current and Previous 2-week periods.


Current 2-week Period Outbreak
Related Cases

The cases reported in Bibb County for the Current 2-Week Period associated with an outbreak account for $1 \%(n=9)$ of the total cases reported during that time county-wide. During this time period, $78 \%(n=7)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ of cases reported during that timeframe in Bibb County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 7\% (n=737) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

AREA OF CONCERN: $16 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Crawford County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

The incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 585 per 100,000 population ( $n=72$; population=12,318). The previous 2-week Incidence Rate was 447 ( $\mathrm{n}=55$ ) per 100,000 population.
$31 \%$ increase in newly Confirmed COVID-19 Cases amongst Crawford County residents between the Current and Previous 2-week periods.


## Hancock County - Substantial Spread

$13 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome since 12/19/2020.

1198
Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 1198 per 100,000 population ( $\mathrm{n}=100$; population=8,348). The previous 2-week Incidence Rate was 276 ( $\mathrm{n}=23$ ) per 100,000 population.


40\%
Current 2-week Period Outbreak Related Cases

The cases reported in Hancock County for the Current 2-Week Period associated with an outbreak account for $40 \%(n=40)$ of the total cases reported during that time county-wide. During this time period, $100 \%$ $(\mathrm{n}=40)$ of the outbreak-related cases are associated with a congregate care setting. The other $60 \%$ of cases reported during that timeframe in Hancock County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 42\% ( $\mathrm{n}=291$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

AREA OF CONCERN: 13\% of Emergency Department Visits captured in syndromic surveillance for residents of Houston County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Houston County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged. Incidence Rate

The incidence rate of COVID-19 for Houston County residents from the Current 2-Week Period was 1027 per 100,000 population ( $n=1596$; population=155,469). The previous 2-week Incidence Rate was 693 ( $\mathrm{n}=1078$ ) per 100,000 population.
$48 \%$ increase in newly Confirmed COVID-19 Cases amongst Houston County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Houston County
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


## 1\%

Current 2-week Period Outbreak Related Cases

The cases reported in Houston County for the Current 2-Week Period associated with an outbreak account for $1 \%$ ( $\mathrm{n}=11$ ) of the total cases reported during that time county-wide. During this time period, $45 \%(n=5)$ of the outbreak-related cases are associated with a congregate care setting. The other $99 \%$ of cases reported during that timeframe in Houston County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% ( $n=347$ ) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

AREA OF CONCERN: 18\% of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Jasper County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

1083
Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jasper County residents from the Current 2-Week Period was 1083 per 100,000 population ( $n=152$; population=14,040). The previous 2-week Incidence Rate was 855 ( $\mathrm{n}=120$ ) per 100,000 population.

27\% increase in newly Confirmed COVID-19 Cases amongst Jasper County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Jasper County


3\%
Current 2-week Period Outbreak Related Cases

The cases reported in Jasper County for the Current 2-Week Period associated with an outbreak account for $3 \%(n=5)$ of the total cases reported during that time county-wide. During this time period, $100 \%(\mathrm{n}=5)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 7 \%}$ of cases reported during that timeframe in Jasper County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 3\% ( $n=30$ ) of cases reported in Jasper County have been linked to an outbreak.

## Jones County - Substantial Spread

AREA OF CONCERN: $12 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Jones County were categorized as COVID-19 Syndrome since $12 / 19 / 2020$. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Jones County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 678

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 678 per 100,000 ( $\mathrm{n}=194$;
population=28,616). The previous 2-week Incidence Rate was 367 ( $\mathrm{n}=105$ ) per 100,000 population.

85\% increase in newly Confirmed COVID-19 Cases amongst Jones County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Jones County


# 2\% 

Current 2-week Period Outbreak Related Cases

The cases reported in Jones County for the Current 2-Week Period associated with an outbreak account for $2 \%(n=3)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=3)$ of the outbreak-related cases are associated with a congregate care setting. The other $98 \%$ of cases reported during that timeframe in Jones County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 6\% ( $n=70$ ) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

AREA OF CONCERN: 16\% of Emergency Department Visits captured in syndromic surveillance for residents of Monroe County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Monroe County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

930

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Monroe County residents from the Current 2-Week Period was 930 per 100,000 population ( $\mathbf{n}=\mathbf{2 5 6}$; population=27,520). The previous 2-week Incidence Rate was 690 ( $\mathrm{n}=190$ ) per 100,000 population.

Age Distribution of Cases in Monroe County
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


Current 2-week Period Outbreak Related Cases

The cases reported in Monroe County from the Current 2-Week Period associated with an outbreak account for $2 \%(n=6)$ of the total cases reported during that time county-wide. During this time period, $83 \%(\mathrm{n}=5)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Monroe County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, $11 \%$ ( $n=184$ ) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

AREA OF CONCERN: $13 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Peach County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

The incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 773 per 100,000 population ( $\mathbf{n}=211$; population=27,297). The previous 2-week Incidence Rate was 546 ( $\mathrm{n}=149$ ) per 100,000 population.


Age Distribution of Cases in Peach County


The cases reported in Peach County from the Current 2-Week Period

1\%
Current 2-week Period Outbreak Related Cases associated with an outbreak account for $1 \%(n=2)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=2)$ of the outbreak-related cases are associated with a congregate care setting. The other $99 \%$ of cases reported during that timeframe in Peach County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 3\% (n=54) of cases reported in Peach County have been linked to an outbreak.

## Putnam County - Substantial Spread

AREA OF CONCERN: 5\% of Emergency Department Visits captured in syndromic surveillance for residents of Putnam County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Putnam County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 816

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 816 per 100,000 population ( $\mathrm{n}=178$; population=21,809). The previous 2-week Incidence Rate was 564 ( $\mathrm{n}=123$ ) per 100,000 population.

Age Distribution of Cases in Putnam County


The cases reported in Putnam County from the Current 2-Week Period associated with an outbreak account for $1 \%(n=1)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=1)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ of cases reported during that timeframe in Putnam County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 5\% ( $n=68$ ) of cases reported in Putnam County have been linked to an outbreak.

## Twiggs County - Substantial Spread

AREA OF CONCERN: 15\% of Emergency Department Visits captured in syndromic surveillance for residents of Twiggs County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Twiggs County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

1148 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 1148 per 100,000 population ( $n=94$; population=8,188). The previous 2 -week period Incidence Rate was 489 ( $\mathrm{n}=40$ ) per 100,000 population.

135\% increase in newly Confirmed COVID-19 Cases amongst Twiggs County residents between the Current and Previous 2-week periods.


5\%
Current 2-week
Period Outbreak
Related Cases

The cases reported in Twiggs County from the Current 2-Week Period associated with an outbreak account for $5 \%(n=5)$ of the total cases reported during that time county-wide. During this time period, 100\% (n=5) of the outbreak-related cases are associated with a congregate care setting. The other $95 \%$ of cases reported during that timeframe in Twiggs County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 8\% ( $n=35$ ) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

AREA OF CONCERN: 10\% of Emergency Department Visits captured in syndromic surveillance for residents of Washington County were categorized as COVID-19 Syndrome since $12 / 19 / 2020$. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Washington County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged. Incidence Rate

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 569 per 100,000 population (n=116; population=20,386). The previous 2-week Incidence Rate was 481 ( $\mathrm{n}=98$ ) per 100,000 population.
$18 \%$ increase in newly Confirmed COVID-19 Cases amongst Washington County residents between the Current and Previous 2-week periods.


The cases reported in Washington County for the Current 2-week Period

Current 2-week Period Outbreak Related Cases
associated with an outbreak account for $4 \%(n=5)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=5)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 6 \%}$ of cases reported during that timeframe in Washington County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 14\% ( $\mathrm{n}=198$ ) of cases reported in Washington County have been linked to an outbreak.

## Wilkinson County - Substantial Spread

AREA OF CONCERN: 14\% of Emergency Department Visits captured in syndromic surveillance for residents of Wilkinson County were categorized as COVID-19 Syndrome since 12/19/2020. Confirmed case counts have increased amongst Wilkinson County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 974

 Current 14-Day Incidence RateThe incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 974 per 100,000 population ( $n=88$; population=9,036). The previous 2-week Incidence Rate was 753 ( $\mathrm{n}=68$ ) per 100,000 population.

29\%
29\% increase in newly Confirmed COVID-19 Cases amongst Wilkinson County residents between the Current and Previous 2-week periods.


## 0\%

Current 2-week Period Outbreak Related Cases

The cases reported in Wilkinson County for the Current 2-Week Period associated with an outbreak account for $0 \%(n=0)$ of the total cases reported during that time county-wide. 100\% of cases reported during that timeframe in Wilkinson County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 8\% ( $\mathrm{n}=50$ ) of cases reported in Wilkinson County have been linked to an outbreak. North Central Health District
COVID-19 Operational Summary

January 11, 2021
This is an emerging and dynamic situation, therefore our data and recommendations are subject to change. North Central Health District (NCHD) is part of the Georgia Department of Public Health (DPH) and serves individuals residing in 13 Central Georgia counties: Baldwin, Bibb, Crawford, Hancock, Houston, Jasper, Jones, Monroe, Peach, Putnam, Twiggs, Washington, and Wilkinson. This report describes the NCHD operations in response to the COVID-19 pandemic.
The purpose of this report is to provide situational awareness to our district partners and community members.

## Workforce

NCHD has a total of 334 employees. Since before the response to COVID-19 started, NCHD staff have been planning and preparing for the response. In January 2020, the Epidemiology and Emergency Preparedness programs began watching the situation closely, educating partners, and monitoring travelers. Today, we have scaled back our normal operations to be able to respond to this event appropriately and have employees dedicated full time to the response with many additional employees assisting on an as-needed basis. Public health staff are working on a variety of tasks from epidemiology (which includes data management, case investigation, contact tracing, and outbreak investigations), vaccination, Partner Coordination, SPOC operations, and ensuring our regulated facilities are operating according to the newest executive order. In addition to our workforce, NCHD has

158

## Public Health Responders

 received several temporary staff (i.e. nursing, administrative support, case investigators, and contact tracers) from the state office that are assisting with Epidemiology and SPOC operations.

## COVID-19 Vaccination

North Central Health District received its initial allocation of COVID-19 vaccine Dec. 23. After administrating vaccine to a small group of public health staff and community partners on Dec. 26, the district began the first vaccination of the Phase 1A group Dec. 28. At this time, our district is now administering vaccine to the Phase 1A+ group that includes adults age 65+ and select first responders. The information in this portion of the report is accurate as of 1/9/2021 at 4 PM.


Age Distribution of Vaccination
$\square$ Tota


## Current Vaccination Phase



We are currently in Phase 1A+ of COVID-19 vaccine distribution. Phase 1A+ includes the following:

- Healthcare personnel including, but not limited to:
- Public health staff
- Hospital staff
- EMS and first responders who respond to medical calls
- Urgent care staff
- Staff in clinical settings
- Physicians, nurses, pharmacists, EMS, laboratory staff, environmental services, etc.
- Residents and employees of long-term care facilities
- Adults age 65+ and caregivers (as applicable)
- Law enforcement officers, fire personnel (including volunteer fire departments), dispatchers and 911 operators

We are currently working through vaccinating Phase 1A+ as quickly as possible. Appointments for vaccination are booked though the week of Jan. 11 - Jan 16. Our district schedules vaccination based on our supply of COVID-19 vaccine on-hand in order to ensure individuals can receive vaccine as scheduled. Current vaccine supply in the district has been allocated to community members in Phase 1A+.

## Specimen Points of Collection (SPOC)

On March 18, 2020, NCHD stood up our first SPOC in Houston County, in the following weeks we expanded to 3 additionals locations in Jasper, Jones, and Washington Counties. The activities of these locations were limited in capacity due to state-supplied specimen collection kits. On 4/17/2020, due to an increase in the state's capacity to supply specimen collection kits, we opened our fifth location in Bibb County. On 5/3/2020, we expanded testing to all 13 of our county health departments.

The information in this portion of the report is accurate as of 1/10/2021 at 1 PM.
The data shown on this page only reflects specimens collected from NCHD public health points of collection and not representative of all specimens collected within our 13-county area.

NOTE: Over the past several weeks there have been delays in laboratory reporting. The week-to-week changes may be affected by such delays. These delays are outside of the operations of NCHD.

Number of Specimens Collected by Residency



Specimens Collected Between 1/3/20211/10/2021 39,400

Total Specimens Collected
3.2 minutes is the average time spent per patient for specimen collection.

| County of Residence | Total Specimens Collected by 1/10/2021 | \% Increase in <br> Specimens <br> Collected <br> Between <br> 1/3/2021- <br> 1/10/2021 | Amount of Labs Pending (\%) | Total Positivity Rate (\%) 3/18/20201/10/2021 | 21 Day Positivity Rate (\%) $12 / 21 / 2020-$ $1 / 10 / 2021$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| BALDWIN | 4073 | 1\% | 1\% | 12\% | 39\% |
| BIBB | 8501 | 2\% | 4\% | 8\% | 91\% |
| CRAWFORD | 719 | 2\% | 8\% | 12\% | 100\% |
| HANCOCK | 1032 | 5\% | 12\% | 13\% | 42\% |
| HOUSTON | 12716 | 4\% | 8\% | 10\% | 89\% |
| JASPER | 773 | 0\% | 0\% | 8\% | 40\% |
| JONES | 1840 | 4\% | 2\% | 11\% | 31\% |
| MONROE | 1082 | 2\% | 2\% | 6\% | 22\% |
| PEACH | 1642 | 3\% | 7\% | 10\% | 100\% |
| PUTNAM | 2174 | 3\% | 4\% | 10\% | 25\% |
| TWIGGS | 400 | 3\% | 6\% | 13\% | 60\% |
| WASHINGTON | 2200 | 2\% | 1\% | 12\% | 56\% |
| WILKINSON | 793 | 5\% | 2\% | 13\% | 34\% |
| Out of District | 1455 | 2\% | 4\% | 19\% | 96\% |
| Total | 39400 | 3\% | 5\% | 10\% | 56\% |

## Epidemiology - Data Definitions

The information in the rest of the report is a breakdown by Presumptive and Confirmed Cases by each county within NCHD.

Confirmed Cases are those tested using a Molecular Test (i.e. PCR) since 3/1/2020.
Presumptive Cases are those tested using an Antigen Test since 3/1/2020
Due to the reporting, interview, and data analysis processes, there may be delays in reporting cases as an outbreak. The Epidemiology Program is working closely with all partners to ensure data accuracy.

An outbreak is considered closed if it has been 2 incubation periods since the last symptom onset date. Not all cases within an outbreak are counted within the county the outbreak occurs (i.e. staff of a facility may live in another county).

14-Day incidence rate indicates newly reported confirmed COVID-19 cases among county residents per 100,000 residents during the 14- day period indicated, using 2018 U.S. Census data to derive county population. Rates cannot be accurately calculated for Counties with $<5$ cases.

Transmission Levels are based on the incidence rate and defined as:

- Substantial Spread: greater than 101 cases per 100,000 county residents
- Moderate Spread: 51-100 cases per 100,000 county residents
- Minimal Spread: >11-50 cases per 100,000 county residents
- Low Spread: > 0-10 cases per 100,000 county residents
- Insufficient Data: A rate is not calculated for less than 5 cases reported. These counties may likely have low levels of transmission but may be affected by other factors such as levels of COVID-19 testing.

Counties of Interest are identified by counties that have within the most current week (most recent 7 days) to the previous week [ $>5 \%$ increase in COVID syndrome/ILI syndrome (if $>2$ visits) AND $>5 \%$ increase in cases (if $>2$ cases)] OR [>25\% change in cases AND >10 cases during most recent week].

Syndromic surveillance (SS) provides a method for timely detection of potential clusters or outbreaks of specified diseases/events. SS data include emergency department (ED) visits based on the patient's chief complaint upon admission and/or discharge diagnosis. SS data used within this report is based on county of residence NOT facility.

- Covid-19 Syndrome includes: Chief complaint text for "coronavirus", "covid", "c-19", or "ncov". Selected discharge diagnosis codes (ICD or Snomed) relevant to COVID-19; including confirmed COVID-19, suspected/probable COVID-19, unspecified coronavirus infection, exposure to COVID-19, or severe acute respiratory syndrome.
- ILI Syndrome includes: Chief complaint text for fever, influenza, RSV, viral infection, viral pneumonia, cough (if fever), or sore throat (if fever).
- Note: Covid-19 Syndrome excludes select visits related to Covid-19 testing or exposure with no mention of symptoms. Criteria for syndromes are subject to change as additional information is received.

The information is accurate as of 1/11/2021 at 1 PM.

# CURRENT 2 WEEK PERIOD: 12/21/2020-1/3/2021 

PREVIOUS 2 WEEK PERIOD:

## PREVIOUS 7 DAYS: <br> 1/4/2021-1/10/2020

## Epidemiology - Overview

NCHD's Epidemiology Program is responsible for investigating every reported case of laboratory-confirmed COVID-19. The following information describes the activities of the epidemiology program and provides a description of the current situation with the district.
NCHD Epidemiology only reports Confirmed* and Presumptive* cases that reside within the 13 counties that make up the district. Although serology (i.e. antibody tests) are reportable, they do not meet the CDC case definition for a confirmed or presumptive case, therefore number of serology tests are not included in this report.
Any reductions in numbers are a result of data error corrections (i.e. duplication, incorrect case classification, residency, etc). Data corrections are made as soon as they are found and data accuracy is checked daily by NCHD epidemiology staff. The information in this portion of the report is accurate as of $1 / 11 / 2021$ at 1 PM.

## SUBSTANTIAL SPREAD

| Total Number of Confirmed and |  |
| :--- | :---: |
| Presumptive Cases | 36,042 |
| Median Age (Age Range) | $42(0-103$ Years) |
| Hospitalizations | $2994(8.3 \%)$ |
| Deaths | $787(2.18 \%)$ |
| Deaths Median Age (Age Range) | $74(24-100$ Years $)$ |
| Deaths that were Hospitalized | $537(68.2 \%)$ |


| Total |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Presumptive <br> Cases as of <br> $\mathbf{1 / 3 / 2 0 2 1}$ <br> $\mathbf{1 0 P M}$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{1 / 3 / 2 0 2 1}$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{1 / 3 / 2 0 2 1 2}$ | Percent <br> Change <br> Between <br> $\mathbf{1 2 / 2 7 / 2 0 2 0 - 3 / 2 0 2 1 ~}$ <br> $\mathbf{1 / 3}$ | Total <br> Hospitalizations <br> (Presumptive <br> and Confirmed) | Total Deaths <br> (Presumptive <br> and <br> Confirmed) |
| 388 | 3491 | 3286 | $6 \%$ | 240 | 75 |
| 1077 | 11354 | 10538 | $8 \%$ | 1230 | 261 |
| 75 | 475 | 441 | $8 \%$ | 48 | 8 |
| 58 | 748 | 687 | $9 \%$ | 84 | 48 |
| 2546 | 9742 | 8501 | $15 \%$ | 610 | 141 |
| 521 | 990 | 869 | $14 \%$ | 34 | 14 |
| 198 | 1379 | 1241 | $11 \%$ | 80 | 24 |
| 396 | 1786 | 1662 | $7 \%$ | 138 | 67 |
| 451 | 1805 | 1605 | $12 \%$ | 155 | 33 |
| 221 | 1524 | 1391 | $10 \%$ | 103 | 34 |
| 90 | 501 | 448 | $12 \%$ | 75 | 20 |
| 261 | 1543 | 1416 | $9 \%$ | 100 | 44 |
| 118 | 704 | 647 | $9 \%$ | 97 | 18 |
| 6400 | 36042 | 32732 | $10 \%$ | 2994 | 787 |

Age Distribution of Cases
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


All data is based on patient county of residence when known.
${ }^{*}$ Confirmed Cases are those tested using a Molecular Tests (i.e. PCR) since 3/1/2020.
*Presumptive Cases are those tested using an Antigen Test since 3/1/2020


NCHD COVID-19 CASES OVER TIME
Last 60 Days


The date indicated for the newly confirmed COVID-19 cases is based on the combination of dates based on: 1)date of symptom onset; 2) if the date is invalid or missing, the first positive collection date is used and 3) if both of those dates are invalid or missing, the date the case is reported is used.

* 14-day window - Confirmed cases over the last 14 days may not be accounted for due to illnesses yet to be reported or test results may still be pending.

Note - Data during the reporting period may be incomplete due to the lag in time between when the case was tested and/or reported and submitted to the Georgia DPH for reporting purposes. This delay can vary depending on the testing facility and/or jurisdiction.

## Number of Positive Confirmed and Presumptive COVID-19 Cases By Day of

 Report to NCHD

Number of Positive Confirmed and Presumptive COVID-19 Cases for the Last 60 Days By Day of Report to NCHD



Date
Hospitalizations Over Time



Hospitalizations and Death By Date of Occurrence
— Hospitalizations — Deaths
 Date
Hospitalizations and Death By Date of Occurrence Past 60 Days
— Hospitalizations — Deaths

$70 \%$ of Hospitalized Cases have been reported as being discharged. 7\% of Cases have been identified as Healthcare Workers.
$43 \%$ of Deaths are associated with a congregate setting outbreak. $8 \%$ of Cases are associated with a congregate setting outbreak.

Race Distribution of Cases


Underlying Health Conditions


Yes (29.22\%) $\square$ No (22.8\%) $\square$ Unknown (47.98\%)

Gender Distribution of Cases

Race Distribution of Deaths


Underlying Health Conditions (Deaths)



## Baldwin County - Substantial Spread

AREA OF CONCERN: 11\% of Emergency Department Visits captured in syndromic surveillance for residents of Baldwin County were categorized as COVID-19 Syndrome since 12/26/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Baldwin County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

> The incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 747 per 100,000 population ( $n=335$; population=44,823). The previous 2-week Incidence Rate was 471 (n=211) per 100,000 population.

59\% increase in newly Confirmed COVID-19 Cases amongst Baldwin County residents between the Current and Previous 2-week periods.


## Bibb County - Substantial Spread

AREA OF CONCERN: 8\% of Emergency Department Visits captured in syndromic surveillance for residents of Bibb County were categorized as COVID-19 Syndrome since 12/26/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Bibb County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

946 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 946 per 100,000 population ( $\mathrm{n}=1448$; population=153,095). The previous 2-week Incidence Rate was 666 ( $\mathrm{n}=1019$ ) per 100,000 population.
$42 \%$ increase in newly Confirmed COVID-19 Cases amongst Bibb County residents between the Current and Previous 2-week periods.


Current 2-week Period Outbreak
Related Cases

The cases reported in Bibb County for the Current 2-Week Period associated with an outbreak account for $1 \%(n=10)$ of the total cases reported during that time county-wide. During this time period, $70 \%(n=7)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ of cases reported during that timeframe in Bibb County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 7\% ( $\mathrm{n}=147$ ) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

AREA OF CONCERN: 21\% of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome since 12/26/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Crawford County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 649

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 649 per 100,000 population ( $n=80$; population=12,318). The previous 2-week Incidence Rate was 487 ( $\mathrm{n}=60$ ) per 100,000 population.
$33 \%$ increase in newly Confirmed COVID-19 Cases amongst Crawford County residents between the Current and Previous 2-week periods.


## Hancock County - Substantial Spread

AREA OF CONCERN: 12\% of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome since $12 / 26 / 2020$. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Hancock County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

1318 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 1318 per 100,000 population ( $n=110$; population=8,348). The previous 2-week Incidence Rate was 731 ( $\mathrm{n}=61$ ) per 100,000 population.

80\% increase in newly Confirmed COVID-19 Cases amongst Hancock County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Hancock County
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


19\%
Current 2-week Period Outbreak Related Cases

The cases reported in Hancock County for the Current 2-Week Period associated with an outbreak account for $19 \%$ ( $n=21$ ) of the total cases reported during that time county-wide. During this time period, $19 \%(n=4)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{8 1 \%}$ of cases reported during that timeframe in Hancock County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 39\% ( $\mathrm{n}=293$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

AREA OF CONCERN: 16\% of Emergency Department Visits captured in syndromic surveillance for residents of Houston County were categorized as COVID-19 Syndrome since $12 / 26 / 2020$. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Houston County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## The incidence rate of COVID-19 for Houston County residents from the

 Current 2-Week Period was 1265 per 100,000 population ( $n=1967$; population=155,469). The previous 2-week Incidence Rate was 960 ( $\mathrm{n}=1492$ ) per 100,000 population.Age Distribution of Cases in Houston County



## 1\%

Current 2-week Period Outbreak Related Cases

The cases reported in Houston County for the Current 2-Week Period associated with an outbreak account for $1 \%(n=9)$ of the total cases reported during that time county-wide. During this time period, $56 \%$ ( $n=5$ ) of the outbreak-related cases are associated with a congregate care setting. The other $99 \%$ of cases reported during that timeframe in Houston County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% (n=372) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

AREA OF CONCERN: 16\% of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome since 12/26/2020. Confirmed case counts have increased amongst Jasper County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

1040 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jasper County residents from the Current 2-Week Period was 1040 per 100,000 population ( $\mathrm{n}=146$; population=14,040). The previous 2-week Incidence Rate was 1104 ( $\mathrm{n}=155$ ) per 100,000 population.

6\% decrease in newly Confirmed COVID-19 Cases amongst Jasper County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Jasper County


Current 2-week Period Outbreak Related Cases

The cases reported in Jasper County for the Current 2-Week Period associated with an outbreak account for $3 \%(n=5)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=5)$ of the outbreak-related cases are associated with a congregate care setting. The other $97 \%$ of cases reported during that timeframe in Jasper County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 3\% ( $n=33$ ) of cases reported in Jasper County have been linked to an outbreak.

## Jones County - Substantial Spread

$11 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Jones County were categorized as COVID-19 Syndrome since 12/26/2020.

## 898

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 898 per 100,000 ( $n=257$;
population=28,616). The previous 2-week Incidence Rate was 559 ( $\mathrm{n}=160$ ) per 100,000 population.

61\% increase in newly Confirmed COVID-19 Cases amongst Jones County residents between the Current and Previous 2-week periods.


2\%
Current 2-week Period Outbreak Related Cases

The cases reported in Jones County for the Current 2-Week Period associated with an outbreak account for $2 \%(n=4)$ of the total cases reported during that time county-wide. During this time period, $75 \%(n=3)$ of the outbreak-related cases are associated with a congregate care setting. The other $98 \%$ of cases reported during that timeframe in Jones County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, $6 \%$ ( $n=77$ ) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

AREA OF CONCERN: 13\% of Emergency Department Visits captured in syndromic surveillance for residents of Monroe County were categorized as COVID-19 Syndrome since 12/26/2020. Confirmed case counts, as well as emergency room visits associated with ILI Syndromes, have increased amongst Monroe County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 1021

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Monroe County residents from the Current 2-Week Period was 1021 per 100,000 population ( $n=281$; population=27,520). The previous 2-week Incidence Rate was 810 ( $\mathrm{n}=223$ ) per 100,000 population.

Age Distribution of Cases in Monroe County


The cases reported in Monroe County from the Current 2-Week Period associated with an outbreak account for $2 \%(n=7)$ of the total cases reported during that time county-wide. During this time period, $71 \%(\mathrm{n}=5)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Monroe County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 10\% ( $n=187$ ) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

AREA OF CONCERN: 16\% of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome since $12 / 26 / 2020$. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Peach County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 1092

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 1092 per 100,000 population ( $\mathrm{n}=298$; population=27,297). The previous 2-week Incidence Rate was 656 ( $\mathrm{n}=179$ ) per 100,000 population.

# Age Distribution of Cases in Peach County 



## Putnam County - Substantial Spread

AREA OF CONCERN: 5\% of Emergency Department Visits captured in syndromic surveillance for residents of Putnam County were categorized as COVID-19 Syndrome since $12 / 26 / 2020$. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Putnam County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 908

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 908 per 100,000 population ( $n=198$; population=21,809). The previous 2-week Incidence Rate was 711 ( $\mathrm{n}=155$ ) per 100,000 population.

Age Distribution of Cases in Putnam County


The cases reported in Putnam County from the Current 2-Week Period

## 2\%

Current 2-week Period Outbreak Related Cases associated with an outbreak account for $2 \%(n=3)$ of the total cases reported during that time county-wide. During this time period, $33 \%(n=1)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Putnam County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, $5 \%(n=70)$ of cases reported in Putnam County have been linked to an outbreak.

## Twiggs County - Substantial Spread

$13 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Twiggs County were categorized as COVID-19 Syndrome since 12/26/2020. Incidence Rate

The incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 1307 per 100,000 population ( $\mathrm{n}=107$; population=8,188). The previous 2-week period Incidence Rate was 940 ( $\mathrm{n}=77$ ) per 100,000 population.
$39 \%$ increase in newly Confirmed COVID-19 Cases amongst Twiggs County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Twiggs County


Current 2-week Period Outbreak Related Cases

The cases reported in Twiggs County from the Current 2-Week Period associated with an outbreak account for $1 \%(n=1)$ of the total cases reported during that time county-wide. During this time period, 100\% ( $\mathrm{n}=1$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ of cases reported during that timeframe in Twiggs County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 8\% ( $n=38$ ) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

10\% of Emergency Department Visits captured in syndromic surveillance for residents of Washington County were categorized as COVID-19 Syndrome since 12/26/2020.

## 849

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 849 per 100,000 population ( $n=173$; population=20,386). The previous 2-week Incidence Rate was 466 ( $\mathrm{n}=95$ ) per 100,000 population.

82\% increase in newly Confirmed COVID-19 Cases amongst Washington County residents between the Current and Previous 2-week periods.


The cases reported in Washington County for the Current 2-week Period

Current 2-week Period Outbreak Related Cases
associated with an outbreak account for $1 \%(n=1)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=1)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ of cases reported during that timeframe in Washington County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 13\% ( $\mathrm{n}=195$ ) of cases reported in Washington County have been linked to an outbreak.

## Wilkinson County - Substantial Spread

AREA OF CONCERN: $16 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Wilkinson County were categorized as COVID-19 Syndrome since 12/26/2020. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Wilkinson County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged. Incidence Rate

The incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 1262 per 100,000 population ( $n=114$; population=9,036). The previous 2-week Incidence Rate was 885 ( $\mathrm{n}=80$ ) per 100,000 population.

43\% increase in newly Confirmed COVID-19 Cases amongst Wilkinson County residents between the Current and Previous 2-week periods.


## 2\%

Current 2-week
Period Outbreak Related Cases

The cases reported in Wilkinson County for the Current 2-Week Period associated with an outbreak account for $2 \%(n=2)$ of the total cases reported during that time county-wide. During this time period, $0 \%(\mathrm{n}=0)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Wilkinson County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 8\% ( $n=50$ ) of cases reported in Wilkinson County have been linked to an outbreak. North Central Health District
COVID-19 Operational Summary

January 18, 2021 - Updated Jan. 20, 2021


This is an emerging and dynamic situation, therefore our data and recommendations are subject to change. North Central Health District (NCHD) is part of the Georgia Department of Public Health (DPH) and serves individuals residing in 13 Central Georgia counties: Baldwin, Bibb, Crawford, Hancock, Houston, Jasper, Jones, Monroe, Peach, Putnam, Twiggs, Washington, and Wilkinson. This report describes the NCHD operations in response to the COVID-19 pandemic.
The purpose of this report is to provide situational awareness to our district partners and community members.

## Workforce

NCHD has a total of 334 employees. Since before the response to COVID-19 started, NCHD staff have been planning and preparing for the response. In January 2020, the Epidemiology and Emergency Preparedness programs began watching the situation closely, educating partners, and monitoring travelers. Today, we have scaled back our normal operations to be able to respond to this event appropriately and have employees dedicated full time to the response with many additional employees assisting on an as-needed basis. Public health staff are working on a variety of tasks from epidemiology (which includes data management, case investigation, contact tracing, and outbreak investigations), vaccination, Partner Coordination, SPOC operations, and ensuring our regulated facilities are operating according to the newest executive order. In addition to our workforce, NCHD has

158

## Public Health Responders

 received several temporary staff (i.e. nursing, administrative support, case investigators, and contact tracers) from the state office that are assisting with Epidemiology and SPOC operations.
## COVID-19 Vaccination

North Central Health District received its initial allocation of COVID-19 vaccine Dec. 23. After administrating vaccine to a small group of public health staff and community partners on Dec. 26, the district began the first vaccination of the Phase 1A group Dec. 28. At this time, our district is now administering vaccine to the Phase 1A+ group that includes adults age 65+ and select first responders. The information in this portion of the report is accurate as of 1/16/2021 at 4 PM.


## Current Vaccination Phase



We are currently in Phase 1A+ of COVID-19 vaccine distribution. Phase 1A+ includes the following:

- Healthcare personnel including, but not limited to:
- Public health staff
- Hospital staff
- EMS and first responders who respond to medical calls
- Urgent care staff
- Staff in clinical settings
- Physicians, nurses, pharmacists, EMS, laboratory staff, environmental services, etc.
- Residents and employees of long-term care facilities
- Adults age 65+ and caregivers (as applicable)
- Law enforcement officers, fire personnel (including volunteer fire departments), dispatchers and 911 operators

We are currently working through vaccinating Phase 1A+ as quickly as possible. Appointments for vaccination are limited though the week of Jan. 18-Jan 23. Our district schedules vaccination based on our supply of COVID-19 vaccine on-hand in order to ensure individuals can receive vaccine as scheduled. Current vaccine supply in the district has been allocated to community members in Phase 1A+.

## Specimen Points of Collection (SPOC)

On March 18, 2020, NCHD stood up our first SPOC in Houston County, in the following weeks we expanded to 3 additionals locations in Jasper, Jones, and Washington Counties. The activities of these locations were limited in capacity due to state-supplied specimen collection kits. On $4 / 17 / 2020$, due to an increase in the state's capacity to supply specimen collection kits, we opened our fifth location in Bibb County. On 5/3/2020, we expanded testing to all 13 of our county health departments.

The information in this portion of the report is accurate as of 1/17/2021 at 3 PM.
The data shown on this page only reflects specimens collected from NCHD public health points of collection and not representative of all specimens collected within our 13-county area.

NOTE: Over the past several weeks there have been delays in laboratory reporting. The week-to-week changes may be affected by such delays. These delays are outside of the operations of NCHD.
Number of Specimens Collected by Residency


743
Specimens Collected Between 1/10/20211/17/2021

Total Specimens Collected
3.2 minutes is the average time spent per patient for specimen collection.

| County of |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Residence | Total <br> Specimens <br> Collected by <br> $\mathbf{1 / 1 7 / 2 0 2 1}$ | Increase in <br> Specimens <br> Collected <br> Between <br> $\mathbf{1 / 3 / 2 0 2 1 - 1 / 1 ~}$ <br> 0/2021 | Amount of <br> Labs <br> Pending (\%) | Total <br> Positivity <br> Rate (\%) <br> $\mathbf{3 / 1 8 / 2 0 2 0 - 1 7 / 2 0 2 1 ~}$ | 21 Day <br> Positivity <br> Rate (\%) <br> $\mathbf{1 2 / 2 8 / 2 0 2 0 ~}$ <br> $\mathbf{- 1 / 1 7 / 2 0 2 1 ~}$ |
| BALDWIN | 4151 | $2 \%$ | $2 \%$ | $11 \%$ | $18 \%$ |
| BIBB | 8540 | $0 \%$ | $0 \%$ | $8 \%$ | $7 \%$ |
| CRAWFORD | 722 | $0 \%$ | $0 \%$ | $11 \%$ | $4 \%$ |
| HANCOCK | 1055 | $2 \%$ | $13 \%$ | $12 \%$ | $32 \%$ |
| HOUSTON | 13060 | $3 \%$ | $0 \%$ | $10 \%$ | $17 \%$ |
| JASPER | 776 | $0 \%$ | $0 \%$ | $9 \%$ | $47 \%$ |
| JONES | 1850 | $1 \%$ | $1 \%$ | $10 \%$ | $18 \%$ |
| MONROE | 1097 | $1 \%$ | $0 \%$ | $6 \%$ | $8 \%$ |
| PEACH | 1669 | $2 \%$ | $0 \%$ | $10 \%$ | $18 \%$ |
| PUTNAM | 2224 | $2 \%$ | $5 \%$ | $10 \%$ | $23 \%$ |
| TWIGGS | 412 | $3 \%$ | $0 \%$ | $12 \%$ | $11 \%$ |
| WASHINGTON | 2274 | $3 \%$ | $1 \%$ | $11 \%$ | $17 \%$ |
| WILKINSON | 839 | $6 \%$ | $0 \%$ | $13 \%$ | $18 \%$ |
| Out of District | 1474 | $1 \%$ | $1 \%$ | $14 \%$ | $69 \%$ |
| Total | 40143 | $2 \%$ | $1 \%$ | $10 \%$ | $18 \%$ |

## Epidemiology - Data Definitions

The information in the rest of the report is a breakdown by Presumptive and Confirmed Cases by each county within NCHD.

Confirmed Cases are those tested using a Molecular Test (i.e. PCR) since 3/1/2020.
Presumptive Cases are those tested using an Antigen Test since 3/1/2020
Due to the reporting, interview, and data analysis processes, there may be delays in reporting cases as an outbreak. The Epidemiology Program is working closely with all partners to ensure data accuracy.

An outbreak is considered closed if it has been 2 incubation periods since the last symptom onset date. Not all cases within an outbreak are counted within the county the outbreak occurs (i.e. staff of a facility may live in another county).

14-Day incidence rate indicates newly reported confirmed COVID-19 cases among county residents per 100,000 residents during the 14- day period indicated, using 2018 U.S. Census data to derive county population. Rates cannot be accurately calculated for Counties with $<5$ cases.

Transmission Levels are based on the incidence rate and defined as:

- Substantial Spread: greater than 101 cases per 100,000 county residents
- Moderate Spread: 51-100 cases per 100,000 county residents
- Minimal Spread: >11-50 cases per 100,000 county residents
- Low Spread: > 0-10 cases per 100,000 county residents
- Insufficient Data: A rate is not calculated for less than 5 cases reported. These counties may likely have low levels of transmission but may be affected by other factors such as levels of COVID-19 testing.

Counties of Interest are identified by counties that have within the most current week (most recent 7 days) to the previous week [ $>5 \%$ increase in COVID syndrome/ILI syndrome (if $>2$ visits) AND $>5 \%$ increase in cases (if $>2$ cases)] OR [>25\% change in cases AND >10 cases during most recent week].

Syndromic surveillance (SS) provides a method for timely detection of potential clusters or outbreaks of specified diseases/events. SS data include emergency department (ED) visits based on the patient's chief complaint upon admission and/or discharge diagnosis. SS data used within this report is based on county of residence NOT facility.

- Covid-19 Syndrome includes: Chief complaint text for "coronavirus", "covid", "c-19", or "ncov". Selected discharge diagnosis codes (ICD or Snomed) relevant to COVID-19; including confirmed COVID-19, suspected/probable COVID-19, unspecified coronavirus infection, exposure to COVID-19, or severe acute respiratory syndrome.
- ILI Syndrome includes: Chief complaint text for fever, influenza, RSV, viral infection, viral pneumonia, cough (if fever), or sore throat (if fever).
- Note: Covid-19 Syndrome excludes select visits related to Covid-19 testing or exposure with no mention of symptoms. Criteria for syndromes are subject to change as additional information is received.

The information is accurate as of 1/17/2021 at 3 PM.
CURRENT 2 WEEK PERIOD: 12/28/2020-7/10/2021

PREVIOUS 2 WEEK PERIOD:

## Epidemiology - Overview

NCHD's Epidemiology Program is responsible for investigating every reported case of laboratory-confirmed COVID-19. The following information describes the activities of the epidemiology program and provides a description of the current situation with the district.
NCHD Epidemiology only reports Confirmed* and Presumptive* cases that reside within the 13 counties that make up the district. Although serology (i.e. antibody tests) are reportable, they do not meet the CDC case definition for a confirmed or presumptive case, therefore number of serology tests are not included in this report.
Any reductions in numbers are a result of data error corrections (i.e. duplication, incorrect case classification, residency, etc). Data corrections are made as soon as they are found and data accuracy is checked daily by NCHD epidemiology staff. The information in this portion of the report is accurate as of 1/17/2021 at 3 PM.

| Total Number of Confirmed and Presumptive |  |
| :--- | :---: |
| Cases | 38,746 |
| Median Age (Age Range) | 42 (0-103 Years) |
| Hospitalizations | $3157(8.15 \%)$ |
| Deaths | $836(2.16 \%)$ |
| Deaths Median Age (Age Range) | $74(24-100$ Years) |
| Deaths that were Hospitalized | $563(67.34 \%)$ |

## 1094

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for NCHD residents for the Current 2-Week Period was 1094 per 100,000 population ( $n=5810$;
population=530,945). The previous 2-week period Incidence Rate was 926 per 100,000 population ( $\mathrm{n}=4914$ ).

| County | Total <br> Confirmed <br> Cases as of <br> $\mathbf{1 / 1 7 / 2 0 2 1}$ <br> 3PM | Total <br> Presumptive <br> Cases as of <br> $\mathbf{1 / 1 7 / 2 0 2 1}$ <br> $\mathbf{3 P M}$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{1 / 1 7 / 2 0 2 1 ~}$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{1 / 1 0 / 2 0 2 1 2 ~}$ | Percent <br> Change <br> Between <br> $\mathbf{1 / 1 0 / 2 0 2 0 - 1 / 1 7 / 2 0 2 1 ~}$ | Total <br> Hospitalizations <br> (Presumptive <br> and Confirmed) | Total Deaths <br> (Presumptive <br> and <br> Confirmed) |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Baldwin | 3242 | 434 | 3676 | 3491 | $5 \%$ | 247 | 78 |
| Bibb | 10852 | 1292 | 12144 | 11354 | $7 \%$ | 1300 | 275 |
| Crawford | 424 | 85 | 509 | 475 | $7 \%$ | 49 | 10 |
| Hancock | 717 | 59 | 776 | 748 | $4 \%$ | 87 | 50 |
| Houston | 7791 | 2857 | 10648 | 9742 | $9 \%$ | 648 | 151 |
| Jasper | 512 | 546 | 1058 | 990 | $7 \%$ | 44 | 16 |
| Jones | 1253 | 232 | 1485 | 1379 | $8 \%$ | 84 | 25 |
| Monroe | 1471 | 454 | 1925 | 1786 | $8 \%$ | 141 | 74 |
| Peach | 1433 | 499 | 1932 | 1805 | $7 \%$ | 166 | 34 |
| Putnam | 1385 | 239 | 1624 | 1524 | $7 \%$ | 108 | 34 |
| Twiggs | 435 | 102 | 537 | 501 | $7 \%$ | 78 | 24 |
| Washington | 1359 | 311 | 1670 | 1543 | $8 \%$ | 105 | 45 |
| Wilkinson | 625 | 137 | 762 | 704 | $8 \%$ | 100 | 20 |
| Total | 31499 | 7247 | 38746 | 36042 | $8 \%$ | 3157 | 836 |

## Age Distribution of Cases

Total $\square$ Previous 2-Week Period<br>$\square$ Current 2-Week Period



All data is based on patient county of residence when known.
*Confirmed Cases are those tested using a Molecular Tests (i.e. PCR) since 3/1/2020.
*Presumptive Cases are those tested using an Antigen Test since 3/1/2020


NCHD COVID-19 CASES OVER TIME
Last 60 Days


The date indicated for the newly confirmed COVID-19 cases is based on the combination of dates based on: 1)date of symptom onset; 2) if the date is invalid or missing, the first positive collection date is used and 3) if both of those dates are invalid or missing, the date the case is reported is used.

* 14-day window - Confirmed cases over the last 14 days may not be accounted for due to illnesses yet to be reported or test results may still be pending.

Note - Data during the reporting period may be incomplete due to the lag in time between when the case was tested and/or reported and submitted to the Georgia DPH for reporting purposes. This delay can vary depending on the testing facility and/or jurisdiction.

## Number of Positive Confirmed and Presumptive COVID-19 Cases By Day of

 Report to NCHD

Number of Positive Confirmed and Presumptive COVID-19 Cases for the Last 60 Days By Day of Report to NCHD



Hospitalizations Over Time


Deaths Over Time


Hospitalizations and Death By Date of Occurrence
— Hospializations - Deaths


Date
Hospitalizations and Death By Date of Occurrence Past 60 Days

- Hospitalizations — Deaths

$70 \%$ of Hospitalized Cases have been reported as being discharged. 7\% of Cases have been identified as Healthcare Workers.
$41 \%$ of Deaths are associated with a congregate setting outbreak.
7\% of Cases are associated with a congregate setting outbreak.

Race Distribution of Cases


Underlying Health Conditions


Yes (28.61\%) $\square$ No (22.22\%) $\square$ Unknown (49.17\%)

Gender Distribution of Cases


Race Distribution of Deaths


Underlying Health Conditions (Deaths)


Yes (65.35\%) No (21.78\%)

Unknown (12.87\%)


## Baldwin County - Substantial Spread

16\% of Emergency Department Visits captured in syndromic surveillance for residents of Baldwin County were categorized as COVID-19 Syndrome since 1/2/2021.

727Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 727 per 100,000 population ( $n=326$; population=44,823). The previous 2-week Incidence Rate was 665 ( $\mathrm{n}=298$ ) per 100,000 population. $9 \%$ increase in newly Confirmed COVID-19 Cases amongst Baldwin County residents between the Current and Previous 2-week periods.


## $4 \%$

Current 2-week Period Outbreak Related Cases

The cases reported in Baldwin County for the Current 2-week period associated with an outbreak account for $4 \%(n=12)$ of the total cases reported during that time county-wide. During this time period, $92 \%$ ( $\mathrm{n}=11$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 6 \%}$ of cases reported during that timeframe in Baldwin County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 14\% ( $\mathrm{n}=505$ ) of cases reported in Baldwin County have been linked to an outbreak.

## Bibb County - Substantial Spread

AREA OF CONCERN: 9\% of Emergency Department Visits captured in syndromic surveillance for residents of Bibb County were categorized as COVID-19 Syndrome since $1 / 2 / 2021$. Confirmed case counts, as well as emergency room visits associated withCOVID-19 and ILI Syndromes, have increased amongst Bibb County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

The incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 1044 per 100,000 population ( $\mathbf{n}=1599$; population=153,095). The previous 2-week Incidence Rate was 815 ( $\mathrm{n}=1247$ ) per 100,000 population.

28\% increase in newly Confirmed COVID-19 Cases amongst Bibb County residents between the Current and Previous 2-week periods.


## 2\%

Current 2-week Period Outbreak
Related Cases

The cases reported in Bibb County for the Current 2-Week Period associated with an outbreak account for $2 \%$ ( $n=25$ ) of the total cases reported during that time county-wide. During this time period, $88 \%(\mathrm{n}=22)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Bibb County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 6\% ( $n=766$ ) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

17\% of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome since 1/2/2021. Incidence Rate

The incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 601 per 100,000 population (n=74;
population=12,318). The previous 2-week Incidence Rate was 593 ( $\mathrm{n}=73$ ) per 100,000 population.
$1 \%$ increase in newly Confirmed COVID-19 Cases amongst Crawford County residents between the Current and Previous 2-week periods.


0\%
Current 2-week Period Outbreak
Related Cases

The cases reported in Crawford County for the Current 2-Week Period associated with an outbreak account for $0 \%(\mathrm{n}=0)$ of the total cases reported during that time county-wide. $\mathbf{1 0 0 \%}$ of cases reported during that timeframe in Crawford County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 8\% ( $\mathrm{n}=42$ ) of cases reported in Crawford County have been linked to an outbreak.

## Hancock County - Substantial Spread

AREA OF CONCERN: 16\% of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome since $1 / 2 / 2021$. Confirmed case counts, as well as emergency room visits associated withCOVID-19, have increased amongst Hancock County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 1030

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 1030 per 100,000 population ( $n=86$; population=8,348). The previous 2-week Incidence Rate was 1306 ( $\mathrm{n}=109$ ) per 100,000 population.

21\% decrease in newly Confirmed COVID-19 Cases amongst Hancock County residents between the Current and Previous 2-week periods.

# Age Distribution of Cases in Hancock County <br> $\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period 



## 2\%

Current 2-week Period Outbreak Related Cases

The cases reported in Hancock County for the Current 2-Week Period associated with an outbreak account for $2 \%(n=2)$ of the total cases reported during that time county-wide. During this time period, $100 \%$ ( $\mathrm{n}=2$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Hancock County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 38\% ( $\mathrm{n}=294$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

$15 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Houston County were categorized as COVID-19 Syndrome since 1/2/2021.

1326
Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Houston County residents from the Current 2-Week Period was 1326 per 100,000 population ( $\mathbf{n}=\mathbf{2 0 6 1}$; population=155,469). The previous 2-week Incidence Rate was 1144 ( $\mathrm{n}=1778$ ) per 100,000 population.
$16 \%$ increase in newly Confirmed COVID-19 Cases amongst Houston County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Houston County



1\%
Current 2-week Period Outbreak Related Cases

The cases reported in Houston County for the Current 2-Week Period associated with an outbreak account for $1 \%$ ( $n=13$ ) of the total cases reported during that time county-wide. During this time period, $62 \%(n=8)$ of the outbreak-related cases are associated with a congregate care setting. The other $99 \%$ of cases reported during that timeframe in Houston County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% (n=384) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

$13 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome since 1/2/2021.
$22 \%$ increase in newly Confirmed COVID-19 Cases amongst Jasper County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Jasper County


$4 \%$
Current 2-week Period Outbreak Related Cases

The cases reported in Jasper County for the Current 2-Week Period associated with an outbreak account for $4 \%(n=8)$ of the total cases reported during that time county-wide. During this time period, $88 \%$ ( $n=7$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 6 \%}$ of cases reported during that timeframe in Jasper County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% ( $n=38$ ) of cases reported in Jasper County have been linked to an outbreak.

## Jones County - Substantial Spread

AREA OF CONCERN: 11\% of Emergency Department Visits captured in syndromic surveillance for residents of Jones County were categorized as COVID-19 Syndrome since $1 / 2 / 2021$. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Jones County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 916

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 916 per 100,000 ( $n=262$;
population=28,616). The previous 2-week Incidence Rate was 730 ( $\mathrm{n}=209$ ) per 100,000 population.
$25 \%$ increase in newly Confirmed COVID-19 Cases amongst Jones County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Jones County



# 2\% 

Current 2-week Period Outbreak Related Cases

The cases reported in Jones County for the Current 2-Week Period associated with an outbreak account for $2 \%(n=6)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=6)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Jones County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 6\% ( $n=82$ ) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

AREA OF CONCERN: 10\% of Emergency Department Visits captured in syndromic surveillance for residents of Monroe County were categorized as COVID-19 Syndrome since $1 / 2 / 2021$. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Monroe County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 908

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Monroe County residents from the Current 2-Week Period was 908 per 100,000 population ( $\mathrm{n}=250$; population=27,520). The previous 2-week Incidence Rate was 985 ( $\mathrm{n}=271$ ) per 100,000 population.

## 8\% <br> 8\% decrease in newly Confirmed COVID-19 Cases amongst Monroe County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Monroe County


## 4\%

Current 2-week Period Outbreak Related Cases

The cases reported in Monroe County from the Current 2-Week Period associated with an outbreak account for $4 \%(n=9)$ of the total cases reported during that time county-wide. During this time period, $100 \%$ ( $n=9$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 6 \%}$ of cases reported during that timeframe in Monroe County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 10\% ( $n=197$ ) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

14\% of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome since 1/2/2021.

1176 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 1176 per 100,000 population ( $n=321$; population=27,297). The previous 2-week Incidence Rate was 876 ( $\mathrm{n}=239$ ) per 100,000 population.


Age Distribution of Cases in Peach County


The cases reported in Peach County from the Current 2-Week Period

Current 2-week Period Outbreak Related Cases associated with an outbreak account for $3 \%(n=9)$ of the total cases reported during that time county-wide. During this time period, $33 \%(n=3)$ of the outbreak-related cases are associated with a congregate care setting. The other $97 \%$ of cases reported during that timeframe in Peach County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 3\% ( $n=65$ ) of cases reported in Peach County have been linked to an outbreak.

## Putnam County - Substantial Spread

AREA OF CONCERN: 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Putnam County were categorized as COVID-19 Syndrome since $1 / 2 / 2021$. Confirmed case counts have increased amongst Putnam County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 990

Current 14-Day Incidence Rate


#### Abstract

The incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 990 per 100,000 population ( $\mathrm{n}=\mathbf{2 1 6 ;}$ population=21,809). The previous 2-week Incidence Rate was 890 ( $\mathrm{n}=194$ ) per 100,000 population.


$11 \%$ increase in newly Confirmed COVID-19 Cases amongst Putnam County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Putnam County



The cases reported in Putnam County from the Current 2-Week Period

## 2\%

Current 2-week Period Outbreak Related Cases associated with an outbreak account for $2 \%(n=4)$ of the total cases reported during that time county-wide. During this time period, 100\% ( $n=4$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Putnam County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% ( $n=73$ ) of cases reported in Putnam County have been linked to an outbreak.

## Twiggs County - Substantial Spread

$12 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Twiggs County were categorized as COVID-19 Syndrome since 1/2/2021. Incidence Rate

The incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 1246 per 100,000 population ( $\mathrm{n}=102$; population=8,188). The previous 2-week period Incidence Rate was 1282 ( $\mathrm{n}=105$ ) per 100,000 population.

3\% decrease in newly Confirmed COVID-19 Cases amongst Twiggs County residents between the Current and Previous 2-week periods.


## 1\%

Current 2-week
Period Outbreak
Related Cases

The cases reported in Twiggs County from the Current 2-Week Period associated with an outbreak account for $1 \%(n=1)$ of the total cases reported during that time county-wide. During this time period, $100 \%$ ( $\mathrm{n}=1$ ) of the outbreak-related cases are associated with a congregate care setting. The other $99 \%$ of cases reported during that timeframe in Twiggs County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 7\% (n=39) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

12\% of Emergency Department Visits captured in syndromic surveillance for residents of Washington County were categorized as COVID-19 Syndrome since 1/2/2021.

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 1094 per 100,000 population ( $n=223$; population=20,386). The previous 2-week Incidence Rate was 628 ( $\mathrm{n}=128$ ) per 100,000 population.

> A 74\%
> 74\% increase in newly Confirmed COVID-19 Cases amongst Washington County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Washington County
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


Current 2-week Period Outbreak Related Cases

The cases reported in Washington County for the Current 2-week Period associated with an outbreak account for $2 \%(n=5)$ of the total cases reported during that time county-wide. During this time period, $80 \%(n=4)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Washington County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 12\% ( $\mathrm{n}=208$ ) of cases reported in Washington County have been linked to an outbreak.

## Wilkinson County - Substantial Spread

16\% of Emergency Department Visits captured in syndromic surveillance for residents of Wilkinson County were categorized as COVID-19 Syndrome since 1/2/2021.

The incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 1018 per 100,000 population ( $\mathbf{n}=92$; population=9,036). The previous 2-week Incidence Rate was 1118 ( $\mathrm{n}=101$ ) per 100,000 population.

9\% decrease in newly Confirmed COVID-19 Cases amongst Wilkinson County residents between the Current and Previous 2-week periods.


## 3\%

## Current 2-week

Period Outbreak Related Cases

The cases reported in Wilkinson County for the Current 2-Week Period associated with an outbreak account for $3 \%(n=3)$ of the total cases reported during that time county-wide. During this time period, $100 \%(\mathrm{n}=3)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 7 \%}$ of cases reported during that timeframe in Wilkinson County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 7\% ( $n=55$ ) of cases reported in Wilkinson County have been linked to an outbreak. North Central Health District
COVID-19 Operational Summary

January 25, 2021


This is an emerging and dynamic situation, therefore our data and recommendations are subject to change. North Central Health District (NCHD) is part of the Georgia Department of Public Health (DPH) and serves individuals residing in 13 Central Georgia counties: Baldwin, Bibb, Crawford, Hancock, Houston, Jasper, Jones, Monroe, Peach, Putnam, Twiggs, Washington, and Wilkinson. This report describes the NCHD operations in response to the COVID-19 pandemic.
The purpose of this report is to provide situational awareness to our district partners and community members.

## Workforce

NCHD has a total of 334 employees. Since before the response to COVID-19 started, NCHD staff have been planning and preparing for the response. In January 2020, the Epidemiology and Emergency Preparedness programs began watching the situation closely, educating partners, and monitoring travelers. Today, we have scaled back our normal operations to be able to respond to this event appropriately and have employees dedicated full time to the response with many additional employees assisting on an as-needed basis. Public health staff are working on a variety of tasks from epidemiology (which includes data management, case investigation, contact tracing, and outbreak investigations), vaccination, Partner Coordination, SPOC operations, and ensuring our regulated facilities are operating according to the newest executive order. In addition to our workforce, NCHD has

158

## Public Health Responders

 received several temporary staff (i.e. nursing, administrative support, case investigators, and contact tracers) from the state office that are assisting with Epidemiology and SPOC operations.
## COVID-19 Vaccination

North Central Health District received its initial allocation of COVID-19 vaccine Dec. 23. After administrating vaccine to a small group of public health staff and community partners on Dec. 26, the district began the first vaccination of the Phase 1A group Dec. 28. At this time, our district is now administering vaccine to the Phase 1A+ group that includes adults age 65+ and select first responders. The information in this portion of the report is accurate as of 1/23/2021 at 4 PM.


Age Distribution of Vaccination

- Vaccines Administered



## Current Vaccination Phase



We are currently in Phase 1A+ of COVID-19 vaccine distribution. Phase 1A+ includes the following:

- Healthcare personnel including, but not limited to:
- Public health staff
- Hospital staff
- EMS and first responders who respond to medical calls
- Urgent care staff
- Staff in clinical settings
- Physicians, nurses, pharmacists, EMS, laboratory staff, environmental services, etc.
- Residents and employees of long-term care facilities
- Adults age 65+ and caregivers (as applicable)
- Law enforcement officers, fire personnel (including volunteer fire departments), dispatchers and 911 operators

We are currently working through vaccinating Phase 1A+ as quickly as possible. Appointments for vaccination are all filled though the week of Jan. 25-Jan 30. Our district schedules vaccination based on our supply of COVID-19 vaccine on-hand in order to ensure individuals can receive vaccine as scheduled. Current vaccine supply in the district has been allocated to community members in Phase 1A+.

## Specimen Points of Collection (SPOC)

On March 18, 2020, NCHD stood up our first SPOC in Houston County, in the following weeks we expanded to 3 additionals locations in Jasper, Jones, and Washington Counties. The activities of these locations were limited in capacity due to state-supplied specimen collection kits. On $4 / 17 / 2020$, due to an increase in the state's capacity to supply specimen collection kits, we opened our fifth location in Bibb County. On 5/3/2020, we expanded testing to all 13 of our county health departments.

The information in this portion of the report is accurate as of 1/24/2021 at 3 PM.
The data shown on this page only reflects specimens collected from NCHD public health points of collection and not representative of all specimens collected within our 13-county area.

NOTE: Over the past several weeks there have been delays in laboratory reporting. The week-to-week changes may be affected by such delays. These delays are outside of the operations of NCHD.
Number of Specimens Collected by Residency


445
Specimens Collected Between 1/17/20211/24/2021

## 40,588

Total
Specimens Collected
3.2 minutes is the average time spent per patient for specimen collection.

|  | Total <br> County of <br> Residence | Increase in <br> Specimens <br> Collected by <br> $\mathbf{1 / 2 4 / 2 0 2 1}$ <br> Collected <br> Between <br> $\mathbf{1 / 1 7 / 2 0 2 1 -}$ <br> $\mathbf{1 / 2 4 / 2 0 2 1}$ | Amount of <br> Labs <br> Pending (\%) | Total <br> Positivity <br> Rate (\%) <br> $\mathbf{1 / 2 4 / 2 0 2 0}$ | 21 Day <br> Positivity <br> Rate (\%) <br> $\mathbf{1 / 4 / 2 0 2 1 - ~}$ <br> $\mathbf{1 / 2 4 / 2 0 2 1}$ |
| :--- | :---: | :---: | :---: | :---: | :---: |
| BALDWIN | 4210 | $1 \%$ | $3 \%$ | $11 \%$ | $13 \%$ |
| BIBB | 8634 | $1 \%$ | $0 \%$ | $8 \%$ | $7 \%$ |
| CRAWFORD | 730 | $1 \%$ | $0 \%$ | $11 \%$ | $2 \%$ |
| HANCOCK | 1071 | $2 \%$ | $3 \%$ | $12 \%$ | $10 \%$ |
| HOUSTON | 13205 | $1 \%$ | $0 \%$ | $10 \%$ | $10 \%$ |
| JASPER | 780 | $1 \%$ | $0 \%$ | $9 \%$ | $25 \%$ |
| JONES | 1863 | $1 \%$ | $1 \%$ | $10 \%$ | $21 \%$ |
| MONROE | 1115 | $2 \%$ | $0 \%$ | $6 \%$ | $7 \%$ |
| PEACH | 1676 | $0 \%$ | $0 \%$ | $10 \%$ | $6 \%$ |
| PUTNAM | 2270 | $2 \%$ | $4 \%$ | $10 \%$ | $27 \%$ |
| TWIGGS | 412 | $0 \%$ | $0 \%$ | $13 \%$ | $8 \%$ |
| WASHINGTON | 2285 | $0 \%$ | $0 \%$ | $12 \%$ | $16 \%$ |
| WILKINSON | 848 | $1 \%$ | $0 \%$ | $13 \%$ | $8 \%$ |
| Out of District | 1489 | $1 \%$ | $0 \%$ | $10 \%$ | $17 \%$ |
| Total | 40588 | $1 \%$ | $1 \%$ | $10 \%$ | $11 \%$ |

## Epidemiology - Data Definitions

The information in the rest of the report is a breakdown by Presumptive and Confirmed Cases by each county within NCHD.

Confirmed Cases are those tested using a Molecular Test (i.e. PCR) since 3/1/2020.
Presumptive Cases are those tested using an Antigen Test since 3/1/2020
Due to the reporting, interview, and data analysis processes, there may be delays in reporting cases as an outbreak. The Epidemiology Program is working closely with all partners to ensure data accuracy.

An outbreak is considered closed if it has been 2 incubation periods since the last symptom onset date. Not all cases within an outbreak are counted within the county the outbreak occurs (i.e. staff of a facility may live in another county).

14-Day incidence rate indicates newly reported confirmed COVID-19 cases among county residents per 100,000 residents during the 14- day period indicated, using 2018 U.S. Census data to derive county population. Rates cannot be accurately calculated for Counties with $<5$ cases.

Transmission Levels are based on the incidence rate and defined as:

- Substantial Spread: greater than 101 cases per 100,000 county residents
- Moderate Spread: 51-100 cases per 100,000 county residents
- Minimal Spread: >11-50 cases per 100,000 county residents
- Low Spread: > 0-10 cases per 100,000 county residents
- Insufficient Data: A rate is not calculated for less than 5 cases reported. These counties may likely have low levels of transmission but may be affected by other factors such as levels of COVID-19 testing.

Counties of Interest are identified by counties that have within the most current week (most recent 7 days) to the previous week [ $>5 \%$ increase in COVID syndrome/ILI syndrome (if $>2$ visits) AND $>5 \%$ increase in cases (if $>2$ cases)] OR [>25\% change in cases AND >10 cases during most recent week].

Syndromic surveillance (SS) provides a method for timely detection of potential clusters or outbreaks of specified diseases/events. SS data include emergency department (ED) visits based on the patient's chief complaint upon admission and/or discharge diagnosis. SS data used within this report is based on county of residence NOT facility.

- Covid-19 Syndrome includes: Chief complaint text for "coronavirus", "covid", "c-19", or "ncov". Selected discharge diagnosis codes (ICD or Snomed) relevant to COVID-19; including confirmed COVID-19, suspected/probable COVID-19, unspecified coronavirus infection, exposure to COVID-19, or severe acute respiratory syndrome.
- ILI Syndrome includes: Chief complaint text for fever, influenza, RSV, viral infection, viral pneumonia, cough (if fever), or sore throat (if fever).
- Note: Covid-19 Syndrome excludes select visits related to Covid-19 testing or exposure with no mention of symptoms. Criteria for syndromes are subject to change as additional information is received.

The information is accurate as of 1/24/2021 at 3 PM.

# CURRENT 2 WEEK PERIOD: 1/4/2021-1/17/2021 

PREVIOUS 2 WEEK PERIOD:

## Epidemiology - Overview

NCHD's Epidemiology Program is responsible for investigating every reported case of laboratory-confirmed COVID-19. The following information describes the activities of the epidemiology program and provides a description of the current situation with the district.
NCHD Epidemiology only reports Confirmed* and Presumptive* cases that reside within the 13 counties that make up the district. Although serology (i.e. antibody tests) are reportable, they do not meet the CDC case definition for a confirmed or presumptive case, therefore number of serology tests are not included in this report.
Any reductions in numbers are a result of data error corrections (i.e. duplication, incorrect case classification, residency, etc). Data corrections are made as soon as they are found and data accuracy is checked daily by NCHD epidemiology staff. The information in this portion of the report is accurate as of 1/24/2021 at 3 PM.

## SUBSTANTIAL SPREAD

| Total Number of Confirmed and |  |
| :--- | :---: |
| Presumptive Cases | 41,000 |
| Median Age (Age Range) | 42 (0-103 Years) |
| Hospitalizations | $3309(8.07 \%)$ |
| Deaths | 917 (2.24\%) |
| Deaths Median Age (Age Range) | 74 (24-100 Years) |
| Deaths that were Hospitalized | 599 (65.32\%) |

950

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for NCHD residents for the Current 2-Week Period was 950 per 100,000 population ( $n=5042$; population=530,945). The previous 2-week period Incidence Rate was 1108 per 100,000 population ( $\mathrm{n}=5881$ ).

| County | Total Confirmed Cases as of 1/24/2021 3PM | Total Presumptive Cases as of 1/24/2021 3PM | Total Presumptive and Confirmed Cases 1/24/2021 | Total Presumptive and Confirmed Cases 1/17/2021 | Percent Change Between 1/17/20201/24/2021 | Total Hospitalizations (Presumptive and Confirmed) | Total Deaths (Presumptive and Confirmed) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Baldwin | 3342 | 470 | 3812 | 3676 | 4\% | 257 | 87 |
| Bibb | 11398 | 1456 | 12854 | 12144 | 6\% | 1378 | 302 |
| Crawford | 440 | 96 | 536 | 509 | 5\% | 52 | 10 |
| Hancock | 742 | 67 | 809 | 776 | 4\% | 89 | 52 |
| Houston | 8344 | 3054 | 11398 | 10648 | 7\% | 671 | 172 |
| Jasper | 542 | 569 | 1111 | 1058 | 5\% | 46 | 23 |
| Jones | 1319 | 254 | 1573 | 1485 | 6\% | 92 | 25 |
| Monroe | 1552 | 488 | 2040 | 1925 | 6\% | 147 | 78 |
| Peach | 1520 | 538 | 2058 | 1932 | 7\% | 173 | 36 |
| Putnam | 1450 | 258 | 1708 | 1624 | 5\% | 112 | 39 |
| Twiggs | 455 | 106 | 561 | 537 | 4\% | 81 | 26 |
| Washington | 1427 | 320 | 1747 | 1670 | 5\% | 109 | 46 |
| Wilkinson | 644 | 149 | 793 | 762 | 4\% | 102 | 21 |
| Total | 33175 | 7825 | 41000 | 38746 | 6\% | 3309 | 917 |

Age Distribution of Cases
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


All data is based on patient county of residence when known.
${ }^{*}$ Confirmed Cases are those tested using a Molecular Tests (i.e. PCR) since 3/1/2020.
*Presumptive Cases are those tested using an Antigen Test since 3/1/2020



The date indicated for the newly confirmed COVID-19 cases is based on the combination of dates based on: 1)date of symptom onset; 2) if the date is invalid or missing, the first positive collection date is used and 3) if both of those dates are invalid or missing, the date the case is reported is used.

* 14-day window - Confirmed cases over the last 14 days may not be accounted for due to illnesses yet to be reported or test results may still be pending.

Note - Data during the reporting period may be incomplete due to the lag in time between when the case was tested and/or reported and submitted to the Georgia DPH for reporting purposes. This delay can vary depending on the testing facility and/or jurisdiction.

## Number of Positive Confirmed and Presumptive COVID-19 Cases By Day of Report to NCHD



Number of Positive Confirmed and Presumptive COVID-19 Cases for the Last 60 Days By Day of Report to NCHD



Hospitalizations Over Time


## Deaths Over Time



Hospitalizations and Death By Date of Occurrence
— Hospitalizations — Deaths


Date
Hospitalizations and Death By Date of Occurrence Past 60 Days
— Hospitalizations — Deaths

$72 \%$ of Hospitalized Cases have been reported as being discharged. 6\% of Cases have been identified as Healthcare Workers. $39 \%$ of Deaths are associated with a congregate setting outbreak.

7\% of Cases are associated with a congregate setting outbreak.

Race Distribution of Cases



Underlying Health Conditions


Yes (28.43\%) $\square$ No (22.12\%) $\square$ Unknown (49.45\%)

Gender Distribution of Cases


Race Distribution of Deaths


Underlying Health Conditions (Deaths)



## Baldwin County - Substantial Spread

AREA OF CONCERN: 15\% of Emergency Department Visits captured in syndromic surveillance for residents of Baldwin County were categorized as COVID-19 Syndrome since 1/9/2021. Confirmed case counts, as well as emergency room visits associated with COVID-19, have increased amongst Baldwin County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 683

## Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 683 per 100,000 population ( $n=306$; population=44,823). The previous 2-week Incidence Rate was 774 ( $\mathrm{n}=347$ ) per 100,000 population.
$12 \%$ decrease in newly Confirmed COVID-19 Cases amongst Baldwin County residents between the Current and Previous 2-week periods.


## 2\%

Current 2-week Period Outbreak Related Cases

The cases reported in Baldwin County for the Current 2-week period associated with an outbreak account for $2 \%(n=6)$ of the total cases reported during that time county-wide. During this time period, $83 \%$ ( $\mathrm{n}=5$ ) of the outbreak-related cases are associated with a congregate care setting. The other $98 \%$ of cases reported during that timeframe in Baldwin County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 13\% ( $\mathrm{n}=511$ ) of cases reported in Baldwin County have been linked to an outbreak.

## Bibb County - Substantial Spread

$9 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Bibb County were categorized as COVID-19 Syndrome since 1/9/2021.

## 995

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 995 per 100,000 population ( $n=1524 ;$ population=153,095). The previous 2-week Incidence Rate was 1010 ( $\mathrm{n}=1546$ ) per 100,000 population.
$1 \%$ decrease in newly Confirmed COVID-19 Cases amongst Bibb County residents between the Current and Previous 2 -week periods.


## 3\%

Current 2-week Period Outbreak Related Cases

The cases reported in Bibb County for the Current 2-Week Period associated with an outbreak account for $3 \% ~(n=47)$ of the total cases reported during that time county-wide. During this time period, $91 \%$ ( $\mathrm{n}=463$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 7 \%}$ of cases reported during that timeframe in Bibb County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 6\% ( $\mathrm{n}=799$ ) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

0\% of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome since 1/9/2021.

The incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 487 per 100,000 population ( $n=60$; population=12,318). The previous 2-week Incidence Rate was 698 (n=86) per 100,000 population.

30\% decrease in newly Confirmed COVID-19 Cases amongst Crawford County residents between the Current and Previous 2-week periods.


The cases reported in Crawford County for the Current 2-Week

0\%
Current 2-week Period Outbreak
Related Cases

Period associated with an outbreak account for $0 \%(n=0)$ of the total cases reported during that time county-wide. $\mathbf{1 0 0 \%}$ of cases reported during that timeframe in Crawford County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 8\% ( $\mathrm{n}=42$ ) of cases reported in Crawford County have been linked to an outbreak.

## Hancock County - Substantial Spread

16\% of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome since 1/9/2021.

## 898

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 898 per 100,000 population ( $n=75$; population=8,348). The previous 2-week Incidence Rate was 1318 ( $\mathrm{n}=110$ ) per 100,000 population.
$32 \%$ decrease in newly Confirmed COVID-19 Cases amongst Hancock County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Hancock County



## 4\%

Current 2-week Period Outbreak Related Cases

The cases reported in Hancock County for the Current 2-Week Period associated with an outbreak account for $4 \%(n=3)$ of the total cases reported during that time county-wide. During this time period, $67 \%(n=2)$ of the outbreak-related cases are associated with a congregate care setting. The other $96 \%$ of cases reported during that timeframe in Hancock County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 37\% ( $\mathrm{n}=296$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

12\% of Emergency Department Visits captured in syndromic surveillance for residents of Houston County were categorized as COVID-19 Syndrome since 1/9/2021.

## 1066

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Houston County residents from the Current 2-Week Period was 1066 per 100,000 population ( $n=1658$; population=155,469). The previous 2-week Incidence Rate was 1354 ( $\mathrm{n}=2105$ ) per 100,000 population.
$21 \%$ decrease in newly Confirmed COVID-19 Cases amongst Houston County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Houston County



## 2\%

Current 2-week Period Outbreak Related Cases

The cases reported in Houston County for the Current 2-Week Period associated with an outbreak account for $2 \%(n=26)$ of the total cases reported during that time county-wide. During this time period, $65 \%$ ( $\mathrm{n}=17$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 8 \%}$ of cases reported during that timeframe in Houston County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% ( $\mathrm{n}=402$ ) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

AREA OF CONCERN: 11\% of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome since 1/9/2021. Confirmed case counts, as well as emergency room visits associated with ILI Syndromes, have increased amongst Jasper County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jasper County residents from the Current 2-Week Period was 1225 per 100,000 population ( $\mathrm{n}=172$; population=14,040). The previous 2-week Incidence Rate was 1125 ( $\mathrm{n}=158$ ) per 100,000 population.

9\% increase in newly Confirmed COVID-19 Cases amongst Jasper County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Jasper County


5\%
Current 2-week Period Outbreak Related Cases

The cases reported in Jasper County for the Current 2-Week Period associated with an outbreak account for $5 \%(n=8)$ of the total cases reported during that time county-wide. During this time period, $88 \%$ ( $n=7$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 5 \%}$ of cases reported during that timeframe in Jasper County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 6\% ( $n=72$ ) of cases reported in Jasper County have been linked to an outbreak.

## Jones County - Substantial Spread

AREA OF CONCERN: 11\% of Emergency Department Visits captured in syndromic surveillance for residents of Jones County were categorized as COVID-19 Syndrome since 1/9/2021. Confirmed case counts, as well as emergency room visits associated with COVID-19 and ILI Syndromes, have increased amongst Jones County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 640

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 640 per 100,000 ( $n=183$; population=28,616). The previous 2-week Incidence Rate was 978 ( $\mathrm{n}=280$ ) per 100,000 population.

35\% decrease in newly Confirmed COVID-19 Cases amongst Jones County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Jones County


## 3\%

Current 2-week Period Outbreak Related Cases

The cases reported in Jones County for the Current 2-Week Period associated with an outbreak account for $3 \%(n=6)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=6)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 7 \%}$ of cases reported during that timeframe in Jones County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 5\% ( $n=84$ ) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

9\% of Emergency Department Visits captured in syndromic surveillance for residents of Monroe County were categorized as COVID-19 Syndrome since 1/9/2021.

The incidence rate of COVID-19 for Monroe County residents from the Current 2-Week Period was 883per 100,000 population ( $n=243$; population=27,520). The previous 2-week Incidence Rate was 1097 ( $\mathrm{n}=302$ ) per 100,000 population.

20\% decrease in newly Confirmed COVID-19 Cases amongst Monroe County residents between the Current and Previous 2-week periods.


The cases reported in Monroe County from the Current 2-Week Period

Current 2-week Period Outbreak Related Cases associated with an outbreak account for $9 \%$ ( $n=21$ ) of the total cases reported during that time county-wide. During this time period, $100 \%$ ( $\mathrm{n}=21$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 1 \%}$ of cases reported during that timeframe in Monroe County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 10\% ( $n=210$ ) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

10\% of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome since 1/9/2021.

The incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 945 per 100,000 population ( $\mathrm{n}=258$; population=27,297). The previous 2-week Incidence Rate was 1158 ( $\mathrm{n}=316$ ) per 100,000 population. 18\% decrease in newly Confirmed COVID-19 Cases amongst Peach County residents between the Current and Previous 2-week periods.


## Putnam County - Substantial Spread

AREA OF CONCERN: 7\% of Emergency Department Visits captured in syndromic surveillance for residents of Putnam County were categorized as COVID-19 Syndrome since 1/9/2021. Confirmed case counts, as well as emergency room visits associated with COVID19 and ILI Syndromes, have increased amongst Putnam County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

## 844

## Current 14-Day

 Incidence Rate
#### Abstract

The incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 844 per 100,000 population ( $n=184$; population=21,809). The previous 2-week Incidence Rate was 986 ( $\mathrm{n}=215$ ) per 100,000 population.


14\% decrease in newly Confirmed COVID-19 Cases amongst Putnam County residents between the Current and Previous 2-week periods.

Age Distribution of Cases in Putnam County


The cases reported in Putnam County from the Current 2-Week Period

1\%
Current 2-week Period Outbreak Related Cases associated with an outbreak account for $1 \%(n=2)$ of the total cases reported during that time county-wide. During this time period, $100 \%(n=2)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ of cases reported during that timeframe in Putnam County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% ( $n=76$ ) of cases reported in Putnam County have been linked to an outbreak.

## Twiggs County - Substantial Spread

AREA OF CONCERN: 15\% of Emergency Department Visits captured in syndromic surveillance for residents of Twiggs County were categorized as COVID-19 Syndrome since 1/9/2021. Confirmed case counts, as well as emergency room visits associated with COVID19 , have increased amongst Twiggs County residents. The increase in cases cannot be attributed solely to congregate setting outbreaks. Due to this we are watching the situation closely and working with our partners to ensure that precautions amongst residents are encouraged.

879
Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 879 per 100,000 population ( $\mathrm{n}=72$; population=8,188). The previous 2-week period Incidence Rate was 1404 $(\mathrm{n}=115)$ per 100,000 population.
$37 \%$ decrease in newly Confirmed COVID-19 Cases amongst Twiggs County residents between the Current and Previous 2-week periods.


## 3\%

Current 2-week
Period Outbreak
Related Cases

The cases reported in Twiggs County from the Current 2-Week
Period associated with an outbreak account for $3 \%(n=2)$ of the total cases reported during that time county-wide. During this time period, $100 \%$ ( $\mathrm{n}=2$ ) of the outbreak-related cases are associated with a congregate care setting. The other $97 \%$ of cases reported during that timeframe in Twiggs County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 7\% (n=39) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

9\% of Emergency Department Visits captured in syndromic surveillance for residents of Washington County were categorized as COVID-19 Syndrome since 1/9/2021.

1099 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 1099 per 100,000 population ( $n=224$; population=20,386). The previous 2-week Incidence Rate was 903 ( $\mathrm{n}=184$ ) per 100,000 population.
$22 \%$ increase in newly Confirmed COVID-19 Cases amongst Washington County residents between the Current and Previous 2-week periods.


The cases reported in Washington County for the Current 2-week Period associated with an outbreak account for $13 \%$ ( $n=29$ ) of the total cases reported during that time county-wide. During this time period, $93 \%$ ( $\mathrm{n}=27$ ) of the outbreak-related cases are associated with a congregate care setting. The other $87 \%$ of cases reported during that timeframe in Washington County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, $13 \%$ ( $\mathrm{n}=229$ ) of cases reported in Washington County have been linked to an outbreak.

## Wilkinson County - Substantial Spread

10\% of Emergency Department Visits captured in syndromic surveillance for residents of Wilkinson County were categorized as COVID-19 Syndrome since 1/9/2021.

The incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 919 per 100,000 population ( $n=83$; population=9,036). The previous 2-week Incidence Rate was 1295 ( $\mathrm{n}=117$ ) per 100,000 population.

29\% decrease in newly Confirmed COVID-19 Cases amongst Wilkinson County residents between the Current and Previous 2-week periods.


## 3\%

## Current 2-week

Period Outbreak Related Cases

The cases reported in Wilkinson County for the Current 2-Week Period associated with an outbreak account for $3 \%(n=3)$ of the total cases reported during that time county-wide. During this time period, $100 \%(\mathrm{n}=3)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 7 \%}$ of cases reported during that timeframe in Wilkinson County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 7\% ( $n=55$ ) of cases reported in Wilkinson County have been linked to an outbreak.

