North Central Health District COVID-19 Operational Summary

February 1, 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 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.

INCIDENT COMMAND/
ADMINISTRATION/LOGISTICS
26 COVID-19 REFERRAL LINE (Dedicated)
EPIDEMIOLOGY - CORE (LEADS, Outbreaks, SME)
39 CASE INVESTIGATOR (Dedicated)
37 CONTACT TRACER (Dedicated)
3 EPIDEMIOLOGY - DATA ENTRY
30 SPOC OPERATIONS
46 VACCINE STAFF
61 VACCINE SUPPORT STAFF

## 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 1/30/2021 at 4 PM.


Age Distribution of Vaccination
$\square$ 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 very limited though the week of Feb. 1 - Feb. 7. 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 1/31/2021 at 7 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


484
Specimens Collected Between 1/24/20211/31/2021

41,072
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> $\mathbf{1 / 3 1 / 2 0 2 1}$ | Increase in <br> Specimens <br> Collected <br> Between <br> $\mathbf{1 / 2 4 / 2 0 2 1 -}$ <br> $\mathbf{1 / 3 1 / 2 0 2 1}$ | Amount of <br> Labs <br> Pending (\%) | Total <br> Positivity <br> Rate (\%) <br> $\mathbf{1 / 3 2 / 2 0 2 0 - 2 0 2 1 ~}$ | 21 Day <br> Positivity <br> Rate (\%) <br> $\mathbf{1 / 1 1 / 2 0 2 1 - ~}$ <br> $\mathbf{1 / 3 1 / 2 0 2 1}$ |
| BALDWIN | 4297 | $2 \%$ | $3 \%$ | $11 \%$ | $5 \%$ |
| BIBB | 8682 | $1 \%$ | $1 \%$ | $8 \%$ | $6 \%$ |
| CRAWFORD | 740 | $1 \%$ | $2 \%$ | $11 \%$ | $0 \%$ |
| HANCOCK | 1089 | $2 \%$ | $4 \%$ | $12 \%$ | $9 \%$ |
| HOUSTON | 13302 | $1 \%$ | $2 \%$ | $10 \%$ | $7 \%$ |
| JASPER | 783 | $0 \%$ | $0 \%$ | $9 \%$ | $13 \%$ |
| JONES | 1884 | $1 \%$ | $2 \%$ | $10 \%$ | $9 \%$ |
| MONROE | 1123 | $1 \%$ | $2 \%$ | $6 \%$ | $4 \%$ |
| PEACH | 1690 | $1 \%$ | $2 \%$ | $10 \%$ | $5 \%$ |
| PUTNAM | 2318 | $2 \%$ | $5 \%$ | $10 \%$ | $15 \%$ |
| TWIGGS | 423 | $3 \%$ | $3 \%$ | $12 \%$ | $7 \%$ |
| WASHINGTON | 2345 | $3 \%$ | $1 \%$ | $12 \%$ | $14 \%$ |
| WILKINSON | 865 | $2 \%$ | $8 \%$ | $13 \%$ | $5 \%$ |
| Out of District | 1531 | $3 \%$ | $2 \%$ | $10 \%$ | $28 \%$ |
| Total | 41072 | $1 \%$ | $2 \%$ | $10 \%$ | $3 \%$ |

## 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 1/31/2021 at 7 PM.

# CURRENT 2 WEEK PERIOD: 1/17/2021-1/24/2021 

PREVIOUS 2 WEEK PERIOD:
12/28/2021-1/10/2021

## PREVIOUS 7 DAYS:

1/25/2021-7/31/2021

## 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 1/31/2021 at 7 PM.

## SUBSTANTIAL SPREAD

| Total Number of Confirmed and |  |
| :--- | :---: |
| Presumptive Cases | 42,711 |
| Median Age (Age Range) | 42 (0-103 Years) |
| Hospitalizations | $3517(8.23 \%)$ |
| Deaths | 977 (2.29\%) |
| Deaths Median Age (Age Range) | 74 (17-100 Years) |
| Deaths that were Hospitalized | 635 (64.99\%) |

## Current 14-Day Incidence Rate

The incidence rate of COVID-19 for NCHD residents for the Current 2-Week Period was 735 per 100,000 population ( $n=3905$; population=530,945). The previous 2-week period Incidence Rate was 1164 per 100,000 population ( $\mathrm{n}=6179$ ).

|  | Total <br> Confirmed <br> Cases as of <br> $\mathbf{1 / 3 1 / 2 0 2 1}$ <br> 7PM | Total <br> Presumptive <br> Cases as of <br> $\mathbf{1 / 3 1 / 2 0 2 1}$ <br> 7PM | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{1 / 3 1 / 2 0 2 1}$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{1 / 2 4 / 2 0 2 1}$ | Percent <br> Change <br> Between <br> $\mathbf{1 / 2 4 / 2 0 2 0 - ~}$ <br> $\mathbf{1 / 3 1 / 2 0 2 1}$ | Total <br> Hospitalizations <br> (Presumptive <br> and Confirmed) | Total Deaths <br> (Presumptive <br> and <br> Confirmed) |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Baldwin | 3471 | 482 | 3953 | 3812 | $4 \%$ | 272 | 93 |
| Bibb | 11736 | 1561 | 13297 | 12854 | $3 \%$ | 1461 | 320 |
| Crawford | 463 | 102 | 565 | 536 | $5 \%$ | 56 | 12 |
| Hancock | 754 | 68 | 822 | 809 | $2 \%$ | 93 | 54 |
| Houston | 8726 | 3249 | 11975 | 11398 | $5 \%$ | 702 | 180 |
| Jasper | 568 | 600 | 1168 | 1111 | $5 \%$ | 53 | 27 |
| Jones | 1379 | 287 | 1666 | 1573 | $6 \%$ | 108 | 31 |
| Monroe | 1620 | 505 | 2125 | 2040 | $4 \%$ | 160 | 82 |
| Peach | 1587 | 576 | 2163 | 2058 | $5 \%$ | 184 | 38 |
| Putnam | 1514 | 275 | 1789 | 1708 | $5 \%$ | 123 | 39 |
| Twiggs | 464 | 110 | 574 | 561 | $2 \%$ | 85 | 27 |
| Washington | 1480 | 327 | 1807 | 1747 | $3 \%$ | 111 | 53 |
| Wilkinson | 654 | 153 | 807 | 793 | $2 \%$ | 109 | 21 |
| Total | 3446 | 8295 | 42711 | 41000 | $4 \%$ | 3517 | 977 |

## Age Distribution of Cases



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 — 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.
$38 \%$ 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 (28.52\%) $\square$ No (22.14\%) $\square$ Unknown (49.34\%)

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 $1 / 16 / 2021$. Confirmed case counts 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.

## 609

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 609 per 100,000 population ( $\mathrm{n}=273$; population=44,823). The previous 2-week Incidence Rate was 772 ( $\mathrm{n}=346$ ) per 100,000 population.

21\% decrease 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 $1 / 16 / 2021$. Confirmed case counts, as well as emergency room visits associated with COVID-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.

## 749

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 749 per 100,000 population ( $n=1146$; population=153,095). The previous 2-week Incidence Rate was 1127 ( $\mathrm{n}=1725$ ) per 100,000 population.

34\% 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 $3 \%(n=30)$ of the total cases reported during that time county-wide. During this time period, $100 \%$ ( $\mathrm{n}=30$ ) of the outbreak-related cases are associated with a congregate care setting. The other $97 \%$ 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\% ( $\mathrm{n}=802$ ) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

AREA OF CONCERN: 12\% of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome since $1 / 16 / 2021$. 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.

365

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 365 per 100,000 population ( $n=45$; population=12,318). The previous 2-week Incidence Rate was 690 ( $\mathrm{n}=85$ ) per 100,000 population.

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


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 $0 \%(n=0)$ 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, 7\% ( $n=42$ ) of cases reported in Crawford County have been linked to an outbreak.

## Hancock County - Substantial Spread

AREA OF CONCERN: 11\% of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome since $1 / 16 / 2021$. 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.

## 623

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 623 per 100,000 population ( $n=52$; population=8,348). The previous 2-week Incidence Rate was 1078 (n=90) per 100,000 population.

42\% 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
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


## 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 $4 \%(n=2)$ of the total cases reported during that time county-wide. During this time period, $50 \%(n=1)$ 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, 36\% ( $\mathrm{n}=296$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

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

## 828

 Current 14-Day Incidence RateThe incidence rate of COVID-19 for Houston County residents from the Current 2-Week Period was 828 per 100,000 population ( $n=1288$; population=155,469). The previous 2-week Incidence Rate was 1407 ( $\mathrm{n}=2187$ ) per 100,000 population.

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



The cases reported in Houston County for the Current 2-Week Period associated with an outbreak account for $3 \%$ ( $n=33$ ) of the total cases reported during that time county-wide. During this time period, $58 \%(\mathrm{n}=19)$ of the outbreak-related cases are associated with a congregate care setting. The other $97 \%$ 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\% ( $n=423$ ) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

AREA OF CONCERN: 12\% of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome since $1 / 16 / 2021$. 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.


## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Jasper County residents from the Current 2-Week Period was 833 per 100,000 population ( $\mathrm{n}=117$; population=14,040). The previous 2-week Incidence Rate was 1432 ( $\mathrm{n}=201$ ) per 100,000 population.

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


The cases reported in Jasper County for the Current 2-Week Period associated with an outbreak account for $3 \%(n=4)$ of the total cases reported during that time county-wide. During this time period, $75 \%$ ( $\mathrm{n}=3$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 7 \%}$ of cases reported during that timeframe in Jasper County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 6\% ( $n=74$ ) of cases reported in Jasper County have been linked to an outbreak.

## Jones County - Substantial Spread

$12 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Jones County were categorized as COVID-19 Syndrome since 1/16/2021.

The incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 542 per 100,000 ( $n=155$;
population=28,616). The previous 2-week Incidence Rate was 954 ( $\mathrm{n}=273$ ) per 100,000 population.

43\% 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


The cases reported in Jones County for the Current 2-Week Period

1\%
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 $99 \%$ 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\% ( $n=88$ ) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

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

The incidence rate of COVID-19 for Monroe County residents from the Current 2-Week Period was 767 per 100,000 population ( $\mathrm{n}=211$; population=27,520). The previous 2-week Incidence Rate was 945 ( $\mathrm{n}=260$ ) per 100,000 population.

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


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 $6 \%$ ( $\mathrm{n}=13$ ) of the total cases reported during that time county-wide. During this time period, $100 \%(n=13)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 4 \%}$ 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\% ( $n=211$ ) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

AREA OF CONCERN: 8\% of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome since $1 / 16 / 2021$. Confirmed case counts, as well as emergency room visits associated with COVID19, 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.

## 736

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 736 per 100,000 population ( $n=201$; population=27,297). The previous 2-week Incidence Rate was 1246 ( $\mathrm{n}=340$ ) per 100,000 population.

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

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 $1 \%(n=1)$ 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 $\mathbf{9 9 \%}$ 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\% ( $n=68$ ) of cases reported in Peach County have been linked to an outbreak.

## Putnam County - Substantial Spread

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

## 679

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 679 per 100,000 population (n=148; population=21,809). The previous 2-week Incidence Rate was 1055 (n=230) per 100,000 population.


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 $1 \%(n=1)$ 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, 4\% ( $n=77$ ) 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 1/16/2021.

## 537

 Current 14-Day Incidence RateThe incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 537 per 100,000 population ( $\mathrm{n}=44$; population=8,188). The previous 2-week period Incidence Rate was 1319 ( $\mathrm{n}=108$ ) per 100,000 population. residents between the Current and Previous 2-week periods.


## 2\%

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 $2 \%(n=1)$ 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 $\mathbf{9 8 \%}$ 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=40) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

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

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 800 per 100,000 population (n=163; population=20,386). The previous 2-week Incidence Rate was 1148 ( $\mathrm{n}=234$ ) per 100,000 population.

# Age Distribution of Cases in Washington County <br> $\square$ 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 $20 \%$ ( $n=33$ ) of the total cases reported during that time county-wide. During this time period, 94\% (n=31) of the outbreak-related cases are associated with a congregate care setting. The other $80 \%$ 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\% ( $\mathrm{n}=232$ ) 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 1/16/2021.

## 686

 Current 14-Day Incidence RateThe incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 686 per 100,000 population ( $n=62$; population=9,036). The previous 2-week Incidence Rate was 1107 ( $\mathrm{n}=100$ ) per 100,000 population. 38\% 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

February 7, 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 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.

INCIDENT COMMAND/
ADMINISTRATION/LOGISTICS
42 COVID-19 REFERRAL LINE (Dedicated)
6 EPIDEMIOLOGY - CORE (LEADS, Outbreaks, SME)
47 CASE INVESTIGATOR (Dedicated)
22 CONTACT TRACER (Dedicated)
3 EPIDEMIOLOGY - DATA ENTRY
30 SPOC OPERATIONS
46 VACCINE STAFF
61 VACCINE SUPPORT STAFF

## 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 $2 / 7 / 2021$ 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 very limited through the week of Feb. 7 - Feb. 14. 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.
As of 2/1/2021, Houston County SPOC is now managed by a 3rd party contract laboratory that is coordinated by the state Department of Public Health. The information from this specimen collection will not be included in this report.

The information in this portion of the report is accurate as of 2/7/2021 at 9 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.

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

| County of |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Residence | Total <br> Specimens <br> Collected by <br> 2/7/2021 | \% Increase in <br> Specimens <br> Collected <br> Between <br> $\mathbf{1 / 3 1 / 2 0 2 1 - ~}$ <br> 2/7/2021 | Amount of <br> Labs <br> Pending (\%) | Total <br> Positivity <br> Rate (\%) <br> $\mathbf{3 / 1 8 / 2 0 2 0 - 2 0 1 / ~}$ <br> $\mathbf{2 / 7 / 2 0 2 1}$ | 21 Day <br> Positivity <br> Rate (\%) <br> $\mathbf{1 / 1 8 / 2 0 2 1 - ~}$ <br> $\mathbf{2 / 7 / 2 0 2 1 ~}$ |
| BALDWIN | 4354 | $1 \%$ | $2 \%$ | $11 \%$ | $9 \%$ |
| BIBB | 8717 | $0 \%$ | $0 \%$ | $8 \%$ | $12 \%$ |
| CRAWFORD | 759 | $3 \%$ | $1 \%$ | $10 \%$ | $2 \%$ |
| HANCOCK | 1106 | $2 \%$ | $2 \%$ | $12 \%$ | $10 \%$ |
| HOUSTON | 13396 | $1 \%$ | $1 \%$ | $10 \%$ | $7 \%$ |
| JASPER | 783 | $0 \%$ | $0 \%$ | $9 \%$ | $33 \%$ |
| JONES | 1916 | $2 \%$ | $1 \%$ | $11 \%$ | $18 \%$ |
| MONROE | 1126 | $0 \%$ | $1 \%$ | $6 \%$ | $14 \%$ |
| PEACH | 1706 | $1 \%$ | $1 \%$ | $10 \%$ | $1 \%$ |
| PUTNAM | 2359 | $2 \%$ | $4 \%$ | $11 \%$ | $19 \%$ |
| TWIGGS | 431 | $2 \%$ | $0 \%$ | $13 \%$ | $24 \%$ |
| WASHINGTON | 2385 | $2 \%$ | $0 \%$ | $12 \%$ | $17 \%$ |
| WILKINSON | 870 | $1 \%$ | $3 \%$ | $12 \%$ | $2 \%$ |
| Out of District | 1507 | $1 \%$ | $1 \%$ | $10 \%$ | $15 \%$ |
| Total | 41415 | $1 \%$ | $1 \%$ | $10 \%$ | $7 \%$ |

## 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 2/7/2021 at 9 PM.

# CURRENT 2 WEEK PERIOD: 1/18/2021-1/31/2021 

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 2/7/2021 at 9 PM.

## SUBSTANTIAL SPREAD

| Total Number of Confirmed and Presumptive <br> Cases | 43,748 |
| :--- | :---: |
| Median Age (Age Range) | 41 (0-107 Years) |
| Hospitalizations | 3659 (8.36\%) |
| Deaths | $1018(2.33 \%)$ |
| Deaths Median Age (Age Range) | 74 (17-102 Years) |
| Deaths that were Hospitalized | 664 (65.23\%) |

## 615

## Current 14-Day Incidence Rate

The incidence rate of COVID-19 for NCHD residents for the Current 2-Week Period was 615 per 100,000 population ( $n=3267$; population=530,945). The previous 2-week period Incidence Rate was 993 per 100,000 population ( $\mathrm{n}=5274$ ).

| County | Total <br> Confirmed <br> Cases as of <br> $\mathbf{2 / 7 / 2 0 2 1}$ <br> 9PM | Total <br> Presumptive <br> Cases as of <br> $\mathbf{2 / 7 / 2 0 2 1}$ <br> 9PM | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{2 / 7 / 2 0 2 1}$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{1 / 3 1 / 2 0 2 1 ~}$ | Percent <br> Change <br> Between <br> $\mathbf{1 / 3 1 / 2 0 2 0 - ~}$ <br> $\mathbf{2 / 7 / 2 0 2 1}$ | Total <br> Hospitalizations <br> (Presumptive <br> and Confirmed) | Total Deaths <br> (Presumptive <br> and <br> Confirmed) |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Baldwin | 3557 | 519 | 4076 | 3953 | $3 \%$ | 288 | 94 |
| Bibb | 12019 | 1682 | 13701 | 13297 | $3 \%$ | 1531 | 338 |
| Crawford | 475 | 108 | 583 | 565 | $3 \%$ | 58 | 13 |
| Hancock | 765 | 70 | 835 | 822 | $2 \%$ | 92 | 54 |
| Houston | 8591 | 3501 | 12092 | 11975 | $1 \%$ | 716 | 185 |
| Jasper | 581 | 620 | 1201 | 1168 | $3 \%$ | 55 | 27 |
| Jones | 1427 | 315 | 1742 | 1666 | $5 \%$ | 128 | 33 |
| Monroe | 1668 | 516 | 2184 | 2125 | $3 \%$ | 168 | 83 |
| Peach | 1601 | 607 | 2208 | 2163 | $2 \%$ | 190 | 41 |
| Putnam | 1568 | 300 | 1868 | 1789 | $4 \%$ | 125 | 43 |
| Twiggs | 473 | 111 | 584 | 574 | $2 \%$ | 87 | 28 |
| Washington | 1506 | 347 | 1853 | 1807 | $3 \%$ | 112 | 58 |
| Wilkinson | 665 | 156 | 821 | 807 | $2 \%$ | 109 | 21 |
| Total | 34896 | 8852 | 43748 | 42711 | $2 \%$ | 3659 | 1018 |

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



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



Date
Hospitalizations Over Time



- HOSP - 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.
$36 \%$ 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 (28.68\%) $\square$ No (22.24\%) $\square$ Unknown (49.08\%)

Gender Distribution of Cases


Race Distribution of Deaths


Underlying Health Conditions (Deaths)



## Baldwin County - Substantial Spread

9\% of Emergency Department Visits captured in syndromic surveillance for residents of Baldwin County were categorized as COVID-19 Syndrome since 1/23/2021.

602
Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 602 per 100,000 population ( $n=270$; population=44,823). The previous 2-week Incidence Rate was 696 ( $\mathrm{n}=312$ ) per 100,000 population.
$13 \%$ decrease in newly Confirmed COVID-19 Cases amongst Baldwin County residents between the Current and Previous 2-week periods.


## 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 1/23/2021. Incidence Rate

The incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 596 per 100,000 population (n=913; population=153,095). The previous 2-week Incidence Rate was 1041 ( $\mathrm{n}=1594$ ) per 100,000 population.

43\% decrease 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 $1 \%(n=5)$ 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 $\mathbf{9 9 \%}$ 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, 6\% (n=802) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

AREA OF CONCERN: 9\% of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome since $1 / 23 / 2021$. 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.


Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 422 per 100,000 population ( $\mathrm{n}=52$; population=12,318). The previous 2-week Incidence Rate was 528 ( $\mathrm{n}=65$ ) per 100,000 population.

20\% decrease 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 $0 \%(n=0)$ 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, 7\% ( $\mathrm{n}=42$ ) of cases reported in Crawford County have been linked to an outbreak.

## Hancock County - Substantial Spread

AREA OF CONCERN: 7\% of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome since $1 / 23 / 2021$. 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.

## 287

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 287 per 100,000 population ( $\mathrm{n}=24$; population=8,348). The previous 2-week Incidence Rate was 958 ( $\mathrm{n}=80$ ) per 100,000 population.

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


## 9\%

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 $9 \%(n=2)$ 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 $\mathbf{9 1 \%}$ 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, 36\% ( $\mathrm{n}=298$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

9\% of Emergency Department Visits captured in syndromic surveillance for residents of Houston County were categorized as COVID-19 Syndrome since 1/23/2021.

The incidence rate of COVID-19 for Houston County residents from the Current 2-Week Period was 689 per 100,000 population ( $n=1071$; population=155,469). The previous 2-week Incidence Rate was 1095 ( $\mathrm{n}=1703$ ) per 100,000 population. 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 $2 \%(n=20)$ of the total cases reported during that time county-wide. During this time period, $15 \%(\mathrm{n}=3)$ 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, $4 \%$ ( $n=427$ ) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

$12 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome since 1/23/2021.

613
Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jasper County residents from the Current 2-Week Period was 613 per 100,000 population ( $n=86$; population=14,040). The previous 2-week Incidence Rate was 1282 ( $\mathrm{n}=180$ ) per 100,000 population.

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


The cases reported in Jasper 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, $0 \%(\mathrm{n}=0)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ 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\% ( $n=74$ ) 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 $1 / 23 / 2021$. 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.


## Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 580 per 100,000 ( $\mathrm{n}=166$; population=28,616). The previous 2-week Incidence Rate was 706 ( $\mathrm{n}=202$ ) per 100,000 population.

18\% 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



## 0\%

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 $0 \%(\mathrm{n}=0)$ 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 $\mathbf{1 0 0 \%}$ 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\% ( $n=88$ ) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

AREA OF CONCERN: 3\% of Emergency Department Visits captured in syndromic surveillance for residents of Monroe County were categorized as COVID-19 Syndrome since $1 / 23 / 2021$. 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.

The incidence rate of COVID-19 for Monroe County residents from the Current 2-Week Period was 574 per 100,000 population ( $n=158$; population=27,520). The previous 2-week Incidence Rate was 934 ( $\mathrm{n}=257$ ) per 100,000 population.
$39 \%$ decrease in newly Confirmed COVID-19 Cases amongst Monroe County residents between the Current and Previous 2-week periods.


## 0\%

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 $0 \%(\mathrm{n}=0)$ 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 $\mathbf{1 0 0 \%}$ 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=211) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

7\% of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome since 1/23.

## 722

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 722 per 100,000 population ( $n=197$; population=27,297). The previous 2-week Incidence Rate was 982 ( $\mathrm{n}=268$ ) per 100,000 population. residents between the Current and Previous 2-week periods.

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 $\mathbf{9 9 \%}$ 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, $3 \%(\mathrm{n}=77$ ) of cases reported in Peach County have been linked to an outbreak.

## Putnam County - Substantial Spread

AREA OF CONCERN: 2\% of Emergency Department Visits captured in syndromic surveillance for residents of Putnam County were categorized as COVID-19 Syndrome since $1 / 23 / 2021$. Confirmed case counts, as well as emergency room visits associated with COVID19, 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.

## 610

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 610 per 100,000 population ( $n=133$; population=21,809). The previous 2-week Incidence Rate was 1023 ( $\mathrm{n}=223$ ) per 100,000 population.

40\% 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

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 Putnam County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 4\% ( $n=75$ ) of cases reported in Putnam County have been linked to an outbreak.

## Twiggs County - Substantial Spread

0\% of Emergency Department Visits captured in syndromic surveillance for residents of Twiggs County were categorized as COVID-19 Syndrome since 1/23/2021.

## 318

 Incidence RateThe incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 318 per 100,000 population ( $n=26$; population=8,188). The previous 2-week period Incidence Rate was 879 ( $\mathrm{n}=72$ ) per 100,000 population.

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


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 $0 \%(n=0)$ 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 $\mathbf{1 0 0 \%}$ 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\% ( $n=40$ ) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

AREA OF CONCERN: 5\% of Emergency Department Visits captured in syndromic surveillance for residents of Washington County were categorized as COVID-19 Syndrome since $1 / 23 / 2021$. Confirmed case counts, as well as emergency room visits associated with COVID-19, 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.

## 638

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 638 per 100,000 population ( $\mathrm{n}=130$; population=20,386). The previous 2-week Incidence Rate was 1128 ( $\mathrm{n}=230$ ) per 100,000 population.


## 6\%

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 $6 \%(n=8)$ of the total cases reported during that time county-wide. During this time period, $75 \%(\mathrm{n}=6)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 4 \%}$ 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\% ( $\mathrm{n}=234$ ) of cases reported in Washington County have been linked to an outbreak.

## Wilkinson County - Substantial Spread

AREA OF CONCERN: 15\% of Emergency Department Visits captured in syndromic surveillance for residents of Wilkinson County were categorized as COVID-19 Syndrome since $1 / 23 / 2021$. Confirmed case counts, as well as emergency room visits associated with COVID-19, 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.


## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 454 per 100,000 population ( $\mathrm{n}=41$; population=9,036). The previous 2-week Incidence Rate was 974 ( $\mathrm{n}=88$ ) per 100,000 population.

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


The cases reported in Wilkinson County for the Current 2-Week Period

## 0\%

Current 2-week
Period Outbreak Related Cases associated with an outbreak account for $0 \%(\mathrm{n}=0)$ 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 $\mathbf{1 0 0 \%}$ 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\% ( $n=57$ ) of cases reported in Wilkinson County have been linked to an outbreak.

North Central Health District COVID-19 Operational Summary

February 15, 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 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.

17 INCIDENT COMMAND/ ADMINISTRATION/LOGISTICS<br>42<br>COVID-19 REFERRAL LINE (Dedicated)<br>6 EPIDEMIOLOGY - CORE (LEADS, Outbreaks, SME)<br>47 CASE INVESTIGATOR (Dedicated)<br>22 CONTACT TRACER (Dedicated)<br>3 EPIDEMIOLOGY - data entry<br>30 SPOC OPERATIONS<br>46 vaccine staff<br>61<br>VACCINE SUPPORT STAFF

## 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 2/13/2021 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 very limited through the week of Feb. 15 - Feb. 21. 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.
As of 2/1/2021, Houston County SPOC is now managed by a 3rd party contract laboratory that is coordinated by the state Department of Public Health. The information from this specimen collection will not be included in this report.

The information in this portion of the report is accurate as of 2/14/2021 at 7 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.
Number of Specimens Collected by Residency


556
Specimens Collected Between 2/7/20212/14/2021

41,917

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> $\mathbf{2 / 1 4 / 2 0 2 1}$ | \% Increase in <br> Specimens <br> Collected <br> Between <br> $\mathbf{2 / 7 / 2 0 2 1 -}$ <br> $\mathbf{2 / 1 4 / 2 0 2 1}$ | Amount of <br> Labs <br> Pending (\%) | Total <br> Positivity <br> Rate (\%) <br> $\mathbf{2 / 1 8 / 2 0 2 0 - 2 0 2 1 ~}$ | 21 Day <br> Positivity <br> Rate (\%) <br> $\mathbf{1 / 2 5 / 2 0 2 1 - ~}$ <br> $\mathbf{2 / 1 4 / 2 0 2 1}$ |
| BALDWIN | 4413 | $1 \%$ | $1 \%$ | $11 \%$ | $8 \%$ |
| BIBB | 8819 | $1 \%$ | $0 \%$ | $8 \%$ | $8 \%$ |
| CRAWFORD | 771 | $2 \%$ | $0 \%$ | $10 \%$ | $7 \%$ |
| HANCOCK | 1121 | $1 \%$ | $1 \%$ | $12 \%$ | $10 \%$ |
| HOUSTON | 13548 | $1 \%$ | $0 \%$ | $10 \%$ | $14 \%$ |
| JASPER | 820 | $5 \%$ | $0 \%$ | $9 \%$ | $25 \%$ |
| JONES | 1941 | $1 \%$ | $0 \%$ | $11 \%$ | $20 \%$ |
| MONROE | 1145 | $2 \%$ | $0 \%$ | $6 \%$ | $13 \%$ |
| PEACH | 1725 | $1 \%$ | $0 \%$ | $10 \%$ | $10 \%$ |
| PUTNAM | 2405 | $2 \%$ | $1 \%$ | $10 \%$ | $9 \%$ |
| TWIGGS | 449 | $4 \%$ | $0 \%$ | $13 \%$ | $24 \%$ |
| WASHINGTON | 2440 | $2 \%$ | $0 \%$ | $12 \%$ | $11 \%$ |
| WILKINSON | 882 | $1 \%$ | $0 \%$ | $12 \%$ | $0 \%$ |
| Out of District | 1492 | $0 \%$ | $0 \%$ | $10 \%$ | $7 \%$ |
| Total | 41971 | $1 \%$ | $0 \%$ | $10 \%$ | $12 \%$ |

## 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 2/14/2021 at 7 PM.

## CURRENT 2 WEEK PERIOD: 1/25/2021-2/7/2021

PREVIOUS 2 WEEK PERIOD: 1/17/2021-1/24/2021

## PREVIOUS 7 DAYS:

 2/8/2021-2/14/2021
## 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 2/14/2021 at 7 PM.

## SUBSTANTIAL SPREAD

| Total Number of Confirmed and |  |
| :--- | :---: |
| Presumptive Cases | 45,117 |
| Median Age (Age Range) | 41 (0-107 Years) |
| Hospitalizations | $3787(8.39 \%)$ |
| Deaths | $1064(2.36 \%)$ |
| Deaths Median Age (Age Range) | $74(17-102$ Years) |
| Deaths that were Hospitalized | $697(65.51 \%)$ |

482

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for NCHD residents for the Current 2-Week Period was 482 per 100,000 population ( $\mathbf{n}=2576$; population=530,945). The previous 2-week period Incidence Rate was 776 per 100,000 population ( $\mathrm{n}=4146$ ).

|  | Total <br> Confirmed <br> Cases as of <br> $\mathbf{2 / 1 4 / 2 0 2 1}$ <br> 7PM | Total <br> Presumptive <br> Cases as of <br> $\mathbf{2 / 1 4 / 2 0 2 1}$ <br> 7PM | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{2 / 1 4 / 2 0 2 1}$ | Total <br> Presumptive <br> and <br> Confirmed <br> Cases <br> $\mathbf{2 / 7 / 2 0 2 1}$ | Percent <br> Change <br> Between <br> $\mathbf{2 / 7 / 2 0 2 0 -}$ <br> $\mathbf{2 / 1 4 / 2 0 2 1}$ | Total <br> Hospitalizations <br> (Presumptive <br> and Confirmed) | Total Deaths <br> (Presumptive <br> and <br> Confirmed) |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Baldwin | 3626 | 526 | 4152 | 4076 | $2 \%$ | 293 | 98 |
| Bibb | 12283 | 1725 | 14008 | 13701 | $2 \%$ | 1578 | 348 |
| Crawford | 487 | 110 | 597 | 583 | $2 \%$ | 59 | 13 |
| Hancock | 780 | 72 | 852 | 835 | $2 \%$ | 95 | 55 |
| Houston | 9036 | 3622 | 12658 | 12092 | $5 \%$ | 745 | 194 |
| Jasper | 604 | 635 | 1239 | 1201 | $3 \%$ | 58 | 28 |
| Jones | 1474 | 328 | 1802 | 1742 | $3 \%$ | 134 | 38 |
| Monroe | 1710 | 532 | 2242 | 2184 | $3 \%$ | 174 | 86 |
| Peach | 1670 | 630 | 2300 | 2208 | $4 \%$ | 203 | 43 |
| Putnam | 1624 | 308 | 1932 | 1868 | $3 \%$ | 133 | 46 |
| Twiggs | 482 | 116 | 598 | 584 | $2 \%$ | 88 | 32 |
| Washington | 1547 | 350 | 1897 | 1853 | $2 \%$ | 116 | 62 |
| Wilkinson | 682 | 158 | 840 | 821 | $2 \%$ | 111 | 21 |
| Total | 36005 | 9112 | 45117 | 43748 | $3 \%$ | 3787 | 1064 |

Age Distribution of Cases
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 for the Last 60 Days By Day of Report to NCHD



Date
Hospitalizations Over Time


— 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.
$36 \%$ 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 (28.92\%) $\square$ No (22.55\%) $\square$ Unknown (48.53\%)

Gender Distribution of Cases


Race Distribution of Deaths


Underlying Health Conditions (Deaths)


## Baldwin County - Substantial Spread

Since 1/30/2021, 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Baldwin County were categorized as COVID-19 Syndrome. $12 \%$ of COVID-19 PCR tests were positive during the 14-day period (1/30-2/12/2021).

The incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 492 per 100,000 population ( $n=221$; population=44,823). The previous 2-week Incidence Rate was 648 ( $\mathrm{n}=291$ ) per 100,000 population.

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


The cases reported in Baldwin County for the Current 2-week

1\%
Current 2-week
Period Outbreak Related Cases
period associated with an outbreak account for $1 \%(n=3)$ 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 $\mathbf{9 9 \%}$ 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\% ( $\mathrm{n}=528$ ) of cases reported in Baldwin County have been linked to an outbreak.

## Bibb County - Substantial Spread

Since 1/30/2021, 7\% of Emergency Department Visits captured in syndromic surveillance for residents of Bibb County were categorized as COVID-19 Syndrome. 13\% of COVID-19 PCR tests were positive during the 14 -day period ( $1 / 30-2 / 12 / 2021$ ).

## 473

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 473 per 100,000 population ( $\mathrm{n}=725$; population=153,095). The previous 2-week Incidence Rate was 806 ( $\mathrm{n}=1235$ ) per 100,000 population.
$41 \%$ decrease 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 $1 \%(n=7)$ of the total cases reported during that time county-wide. During this time period, $71 \%(n=5)$ 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, 6\% ( $\mathrm{n}=820$ ) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

Since $1 / 30 / 2021,8 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome. 10\% of COVID-19 PCR tests were positive during the 14-day period (1/30-2/12/2021).

## 314

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 314 per 100,000 population ( $n=39$; population=12,318). The previous 2-week Incidence Rate was 395 ( $\mathrm{n}=49$ ) per 100,000 population.

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

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


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

3\%
Current 2-week Period Outbreak Related Cases

Period associated with an outbreak account for $3 \%(n=1)$ 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 $\mathbf{9 7 \%}$ 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, 9\% (n=56) of cases reported in Crawford County have been linked to an outbreak.

## Hancock County - Substantial Spread

AREA OF CONCERN: Since $1 / 30 / 2021,10 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome. 17\% of COVID-19 PCR tests were positive during the 14 -day period (1/30$2 / 12 / 2021$ ). 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.

The incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 284 per 100,000 population ( $\mathrm{n}=24$; population=8,348). The previous 2-week Incidence Rate was 591 ( $\mathrm{n}=50$ ) per 100,000 population.

52\% 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
$\square$ Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period


## 9\%

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 $9 \%(\mathrm{n}=2)$ 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 $\mathbf{9 1 \%}$ 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, 35\% ( $\mathrm{n}=298$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

Since 1/30/2021, $9 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Houston County were categorized as COVID-19 Syndrome. 13\% of COVID-19 PCR tests were positive during the 14-day period (1/30-2/12/2021).

The incidence rate of COVID-19 for Houston County residents from the Current 2-Week Period was 515 per 100,000 population ( $n=813$; population=155,469). The previous 2-week Incidence Rate was 858 ( $\mathrm{n}=1355$ ) per 100,000 population.

40\% 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
$\square$ 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 $1 \%(n=9)$ of the total cases reported during that time county-wide. During this time period, $22 \%(n=2)$ 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, $4 \%$ ( $\mathrm{n}=448$ ) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

AREA OF CONCERN: Since 1/30/2021, $9 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome. $12 \%$ of COVID-19 PCR tests were positive during the 14 -day period ( $1 / 30-2 / 12 / 2021$ ). 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.

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Jasper County residents from the Current 2-Week Period was 492 per 100,000 population ( $\mathrm{n}=70$; population=14,040). The previous 2-week Incidence Rate was 823 ( $\mathrm{n}=117$ ) per 100,000 population.

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


## 0\%

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 $0 \%(n=0)$ 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 $\mathbf{1 0 0 \%}$ 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\% ( $n=74$ ) of cases reported in Jasper County have been linked to an outbreak.

## Jones County - Substantial Spread

AREA OF CONCERN: Since $1 / 30 / 2021,14 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Jones County were categorized as COVID-19 Syndrome. $14 \%$ of COVID-19 PCR tests were positive during the 14 -day period ( $1 / 30-2 / 12 / 2021$ ). 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.

## 487

Current 14-Day Incidence Rate

> The incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 487 per 100,000 ( $\mathbf{n}=140$; population=28,616). The previous 2-week Incidence Rate was 602 ( $\mathrm{n}=173$ ) per 100,000 population.

19\% 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


## 0\%

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 $0 \%(\mathrm{n}=0)$ 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 $\mathbf{1 0 0 \%}$ 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\% ( $n=94$ ) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

AREA OF CONCERN: Since 1/30/2021, 3\% of Emergency Department Visits captured in syndromic surveillance for residents of Monroe County were categorized as COVID-19 Syndrome. 15\% of COVID-19 PCR tests were positive during the 14 -day period ( $1 / 30-2 / 12 / 2021$ ). 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.


Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Monroe County residents from the Current 2-Week Period was 442 per 100,000 population ( $\mathrm{n}=122$; population=27,520). The previous 2-week Incidence Rate was 794 ( $\mathrm{n}=219$ ) per 100,000 population.

44\% 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 $1 \%(\mathrm{n}=1)$ of the total cases reported during that time county-wide. During this time period, $0 \%(n=0)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ 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\% ( $n=215$ ) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

Since 1/30/2021, 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome. 14\% of COVID-19 PCR tests were positive during the 14-day period (1/30-2/12/2021).

530

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 530 per 100,000 population ( $\mathrm{n}=146$; population=27,297). The previous 2-week Incidence Rate was 777 ( $\mathrm{n}=214$ ) per 100,000 population.
$32 \%$ decrease in newly Confirmed COVID-19 Cases amongst Peach County residents between the Current and Previous 2-week periods.

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 $1 \%(n=1)$ 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 $99 \%$ 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\% ( $n=79$ ) of cases reported in Peach County have been linked to an outbreak.

## Putnam County - Substantial Spread

AREA OF CONCERN: Since $1 / 30 / 2021,4 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Putnam County were categorized as COVID-19 Syndrome. 14\% of COVID-19 PCR tests were positive during the 14 -day period (1/30$2 / 12 / 2021$ ). 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.

## 597

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 597 per 100,000 population ( $n=132$; population=21,809). The previous 2-week Incidence Rate was 714 ( $\mathrm{n}=158$ ) per 100,000 population.

16\% 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 




## 2\%

Current 2-week Period Outbreak Related Cases

The cases reported in Putnam County from the Current 2-Week Period associated with an outbreak account for $2 \%(\mathrm{n}=2)$ 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 $\mathbf{9 8 \%}$ 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, $4 \%(n=80)$ of cases reported in Putnam County have been linked to an outbreak.

## Twiggs County - Substantial Spread

Since $1 / 30 / 2021,13 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Twiggs County were categorized as COVID-19 Syndrome. 11\% of COVID-19 PCR tests were positive during the 14-day period (1/30-2/12/2021).

## 246

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 246 per 100,000 population ( $\mathrm{n}=20$; population=8,188). The previous 2-week period Incidence Rate was 530 ( $\mathrm{n}=43$ ) per 100,000 population.

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


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 $0 \%(n=0)$ 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 $\mathbf{1 0 0 \%}$ 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\% ( $n=40$ ) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

AREA OF CONCERN: Since $1 / 30 / 2021,4 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Washington County were categorized as COVID-19 Syndrome. 15\% of COVID-19 PCR tests were positive during the 14-day period (1/302/12/2021). Confirmed case counts, as well as emergency room visits associated with COVID19 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.

## 471

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 471 per 100,000 population ( $n=96$; population=20,386). The previous 2-week Incidence Rate was 854 ( $\mathrm{n}=174$ ) per 100,000 population.

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


## 4\%

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 $4 \%(n=4)$ 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 $\mathbf{9 6 \%}$ 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, 13\% ( $\mathrm{n}=239$ ) of cases reported in Washington County have been linked to an outbreak.

## Wilkinson County - Substantial Spread

Since 1/30/2021, 13\% of Emergency Department Visits captured in syndromic surveillance for residents of Wilkinson County were categorized as COVID-19 Syndrome. 7\% of COVID-19 PCR tests were positive during the 14 -day period (1/30-2/12/2021).

## 313

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 313 per 100,000 population ( $\mathrm{n}=28$; population=9,036). The previous 2-week Incidence Rate was 759 ( $\mathrm{n}=68$ ) per 100,000 population.

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


The cases reported in Wilkinson County for the Current 2-Week Period

## 0\%

Current 2-week
Period Outbreak Related Cases associated with an outbreak account for $0 \%(\mathrm{n}=0)$ 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 $\mathbf{1 0 0 \%}$ 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\% ( $n=57$ ) of cases reported in Wilkinson County have been linked to an outbreak.

North Central Health District COVID-19 Operational Summary

February 22, 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 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.

17 INCIDENT COMMAND/ ADMINISTRATION/LOGISTICS<br>42<br>COVID-19 REFERRAL LINE (Dedicated)<br>6<br>EPIDEMIOLOGY - CORE (LEADS, Outbreaks, SME)<br>47<br>CASE INVESTIGATOR (Dedicated)<br>22<br>CONTACT TRACER (Dedicated)<br>3<br>EPIDEMIOLOGY - DATA ENTRY<br>30<br>SPOC OPERATIONS<br>46<br>vaccine staff<br>61<br>VACCINE SUPPORT STAFF

## 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 2/20/2021 at 4 PM.


Age Distribution of Vaccination
$\square$ 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 unavailable through the week of Feb. 22-27 at this time due to delays in vaccine delivery.
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.
As of 2/1/2021, Houston County SPOC is now managed by a 3rd party contract laboratory that is coordinated by the state Department of Public Health. The information from this specimen collection will not be included in this report.

The information in this portion of the report is accurate as of 2/21/2021 at 4 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.
Number of Specimens Collected by Residency


42,162
Total Specimens Collected
3.2 minutes is the average time spent per patient for specimen collection.

| County of Residence | Total Specimens Collected by 2/21/2021 | \% Increase in <br> Specimens <br> Collected <br> Between $\begin{aligned} & 2 / 14 / 2021- \\ & 2 / 21 / 2021 \end{aligned}$ | Amount of Labs Pending (\%) | Total Positivity Rate (\%) 3/18/20202/21/2021 | $\begin{gathered} 21 \text { Day } \\ \text { Positivity } \\ \text { Rate (\%) } \\ \text { 2/1/2021- } \\ 2 / 21 / 2021 \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| BALDWIN | 4475 | 1.4\% | 1.1\% | 11\% | 6\% |
| BIBB | 8846 | 0.3\% | 0.0\% | 8\% | 10\% |
| CRAWFORD | 777 | 0.8\% | 0.0\% | 10\% | 7\% |
| HANCOCK | 1132 | 1.0\% | 0.5\% | 12\% | 11\% |
| HOUSTON | 13550 | 0.0\% | 0.0\% | 10\% | 34\% |
| JASPER | 821 | 0.1\% | 0.0\% | 9\% | 21\% |
| JONES | 1950 | 0.5\% | 0.4\% | 11\% | 19\% |
| MONROE | 1151 | 0.5\% | 0.0\% | 6\% | 15\% |
| PEACH | 1733 | 0.5\% | 0.0\% | 10\% | 17\% |
| PUTNAM | 2425 | 0.8\% | 0.7\% | 10\% | 11\% |
| TWIGGS | 454 | 1.1\% | 0.0\% | 13\% | 19\% |
| WASHINGTON | 2448 | 0.3\% | 0.1\% | 12\% | 7\% |
| WILKINSON | 904 | 2.5\% | 0.2\% | 12\% | 4\% |
| Out of District | 1496 | 0.3\% | 0.4\% | 11\% | 100\% |
| Total | 42162 | 0.5\% | 0.2\% | 10\% | 16\% |

## 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 2/21/2021 at 4 PM.

# CURRENT 2 WEEK PERIOD: 2/1/2021-2/14/2021 

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 2/21/2021 at 4 PM.

| SUBSTANTIAL SPREAD |  |  |  |  | Current 14-Day Incidence Rate |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Total Number of Confirmed and Presumptive Cases |  |  | 46,09 |  |  |  |  |
| Median Age (Age Range) |  |  | 41 (0-107 | Years) T | The incidence rate of COVID-19 for NCH for the Current 2-Week Period was 341 |  |  |
| Hospitalizations |  |  | 3892 (8. | 44\%) | for the Current 2-Week Period was 341 population ( $n=1823$; population=530 |  |  |
| Deaths |  |  | 1109 (2. | 41\%) p |  |  |  |
| Deaths Median Age (A | ( ${ }^{\text {a }}$ Range) |  | 74 (17-102 | 2 Years) |  |  |  |
| Deaths that were Hospitalized |  |  | 731 (65.92\%) |  |  |  |  |
|  |  |  | Total | Total |  |  |  |
| County | Total Confirmed Cases as of 2/21/2021 4PM | Total <br> Presumptive Cases as of 2/21/2021 4PM | Presumptive and Confirmed Cases 2/21/2021 |  | Percent <br> Change <br> Between $\begin{gathered} 2 / 14 / 2020- \\ 2 / 21 / 2021 \end{gathered}$ | Total <br> Hospitalizations (Presumptive and Confirmed) | Total Deaths (Presumptive and Confirmed) |
| Baldwin | 3657 | 548 | 4205 | 4152 | 1\% | 301 | 105 |
| Bibb | 12480 | 1977 | 14457 | 14008 | 3\% | 1633 | 361 |
| Crawford | 492 | 117 | 609 | 597 | 2\% | 61 | 16 |
| Hancock | 787 | 74 | 861 | 852 | 1\% | 99 | 54 |
| Houston | 8930 | 3890 | 12820 | 12658 | 1\% | 749 | 202 |
| Jasper | 619 | 643 | 1262 | 1239 | 2\% | 63 | 30 |
| Jones | 1500 | 365 | 1865 | 1802 | 3\% | 141 | 39 |
| Monroe | 1733 | 584 | 2317 | 2242 | 3\% | 179 | 87 |
| Peach | 1698 | 683 | 2381 | 2300 | 4\% | 203 | 47 |
| Putnam | 1635 | 316 | 1951 | 1932 | 1\% | 139 | 46 |
| Twiggs | 485 | 124 | 609 | 598 | 2\% | 92 | 35 |
| Washington | 1547 | 355 | 1902 | 1897 | 0\% | 118 | 65 |
| Wilkinson | 689 | 171 | 860 | 840 | 2\% | 114 | 22 |
| Total | 36252 | 9847 | 46099 | 45117 | 2\% | 3892 | 1109 |

## Age Distribution of Cases



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. 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


## Deaths Over Time


— Hospitalizations — Deaths


Date
Hospitalizations and Death By Date of Occurrence Past 60 Days


72\% of Hospitalized Cases have been reported as being discharged. 6\% of Cases have been identified as Healthcare Workers.
$35 \%$ of Deaths are associated with a congregate setting outbreak.
7\% of Cases are associated with a congregate setting outbreak.

Race Distribution of Cases

$\square$ Asian (1\%) $\quad$ Black (37.6\%) $\square$ Other (5.5\%)
$\square$ White (38.4\%) $\square$ Unknown (17.5\%)

Underlying Health Conditions


Yes (28.94\%) $\square$ No (22.62\%) $\square$ Unknown (48.44\%)

Gender Distribution of Cases

Race Distribution of Deaths


Underlying Health Conditions (Deaths)



## Baldwin County - Substantial Spread

Since 2/6/2021, 4\% of Emergency Department Visits captured in syndromic surveillance for residents of Baldwin County were categorized as COVID-19 Syndrome. 10.4\% of COVID-19 PCR tests were positive during the 14-day period ( $2 / 6-2 / 19 / 2021$ ).

The incidence rate of COVID-19 for Baldwin County residents from the Current 2-Week Period was 325 per 100,000 population ( $n=146$; population=44,823). The previous 2-week Incidence Rate was 630 ( $\mathrm{n}=283$ ) per 100,000 population.

48\% 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 $2 \%(n=3)$ 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 $98 \%$ 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\% ( $\mathrm{n}=531$ ) of cases reported in Baldwin County have been linked to an outbreak.

## Bibb County - Substantial Spread

Since 2/6/2021, 7\% of Emergency Department Visits captured in syndromic surveillance for residents of Bibb County were categorized as COVID-19 Syndrome. 10.1\% of COVID-19 PCR tests were positive during the 14-day period ( $2 / 6-2 / 19 / 2021$ ).

The incidence rate of COVID-19 for Bibb County residents from the Current 2-Week Period was 349 per 100,000 population ( $n=535$; population=153,095). The previous 2-week Incidence Rate was 646 ( $\mathrm{n}=989$ ) per 100,000 population.

46\% decrease 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 $1 \%(n=7)$ of the total cases reported during that time county-wide. During this time period, $14 \%(n=1)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{9 9 \%}$ of cases reported during that timeframe in Bibb County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, 5\% ( $\mathrm{n}=792$ ) of cases reported in Bibb County have been linked to an outbreak.

## Crawford County - Substantial Spread

Since $2 / 6 / 2021,10 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Crawford County were categorized as COVID-19 Syndrome. 8.1\% of COVID-19 PCR tests were positive during the 14-day period (2/6-2/19/2021).

137 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Crawford County residents from the Current 2-week period was 137 per 100,000 population ( $\mathrm{n}=17$; population=12,318). The previous 2-week Incidence Rate was 443 ( $\mathrm{n}=55$ ) per 100,000 population.

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


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 $12 \%$ ( $n=2$ ) of the total cases reported during that time county-wide. During this time period, $50 \%$ ( $n=1$ ) of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{8 8 \%}$ 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, 11\% ( $n=66$ ) of cases reported in Crawford County have been linked to an outbreak.

## Hancock County - Substantial Spread

Since 2/6/2021, 13\% of Emergency Department Visits captured in syndromic surveillance for residents of Hancock County were categorized as COVID-19 Syndrome. 9.7\% of COVID-19 PCR tests were positive during the 14-day period (2/6-2/19/2021).

## 307

 Current 14-Day Incidence RateThe incidence rate of COVID-19 for Hancock County residents from the Current 2-week period was 307 per 100,000 population ( $n=26$; population=8,348). The previous 2-week Incidence Rate was 307 ( $\mathrm{n}=26$ ) per 100,000 population.

0\%
0\% change 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


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 $0 \%(\mathrm{n}=0)$ 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. $\mathbf{1 0 0 \%}$ 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, 35\% ( $\mathrm{n}=299$ ) of cases reported in Hancock County have been linked to an outbreak.

## Houston County - Substantial Spread

Since 2/6/2021, 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Houston County were categorized as COVID-19 Syndrome. 9.7\% of COVID-19 PCR tests were positive during the 14-day period (2/6-2/19/2021).

## 347

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Houston County residents from the Current 2-Week Period was 347 per 100,000 population ( $\mathrm{n}=548$; population=155,469). The previous 2-week Incidence Rate was 712 ( $\mathrm{n}=1124$ ) per 100,000 population. 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 $2 \%$ ( $n=10$ ) of the total cases reported during that time county-wide. During this time period, $40 \%(n=4)$ of the outbreak-related cases are associated with a congregate care setting. The other $98 \%$ 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, 3\% (n=448) of cases reported in Houston County have been linked to an outbreak.

## Jasper County - Substantial Spread

Since 2/6/2021, 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Jasper County were categorized as COVID-19 Syndrome. 14.3\% of COVID-19 PCR tests were positive during the 14-day period (2/6-2/19/2021).

The incidence rate of COVID-19 for Jasper County residents from the Current 2-Week Period was 464 per 100,000 population ( $n=66$; population=14,040). The previous 2-week Incidence Rate was 654 ( $\mathrm{n}=93$ ) per 100,000 population.


## 0\%

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 $0 \%(n=0)$ 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. 100\% 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\% ( $n=76$ ) of cases reported in Jasper County have been linked to an outbreak.

## Jones County - Substantial Spread

AREA OF CONCERN: Since 2/6/2021, 14\% of Emergency Department Visits captured in syndromic surveillance for residents of Jones County were categorized as COVID-19 Syndrome. $11.2 \%$ of COVID-19 PCR tests were positive during the 14 -day period (2/6-2/19/2021). Confirmed case counts, as well as emergency room visits associated with 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.

## 317

 Current 14-DayIncidence Rate

> The incidence rate of COVID-19 for Jones County residents from the Current 2-Week Period was 317 per 100,000 (n=91; population=28,616). The previous 2-week Incidence Rate was 644 ( $\mathrm{n}=185$ ) per 100,000 population.
$51 \%$ 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


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 $1 \%(n=1)$ 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 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=102) of cases reported in Jones County have been linked to an outbreak.

## Monroe County - Substantial Spread

Since 2/6/2021, 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Monroe County were categorized as COVID-19 Syndrome. 11.9\% of COVID-19 PCR tests were positive during the 14-day period (2/6-2/19/2021).

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

 Current 2-Week Period was 359 per 100,000 population ( $n=99$; population=27,520). The previous 2-week Incidence Rate was 624 ( $\mathrm{n}=172$ ) per 100,000 population.42\% decrease in newly Confirmed COVID-19 Cases amongst Monroe County residents between the Current and Previous 2-week periods.


2\%
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 $2 \%(n=2)$ 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 Monroe County have not been attributed to a single area of concern and represent community level spread within the county. Since March 2020, $9 \%$ ( $n=214$ ) of cases reported in Monroe County have been linked to an outbreak.

## Peach County - Substantial Spread

Since 2/6/2021, 6\% of Emergency Department Visits captured in syndromic surveillance for residents of Peach County were categorized as COVID-19 Syndrome. 13.7\% of COVID-19 PCR tests were positive during the 14-day period (2/6-2/19/2021).

## 367

## Current 14-Day

 Incidence RateThe incidence rate of COVID-19 for Peach County residents from the Current 2-Week Period was 367 per 100,000 population ( $n=101$; population=27,297). The previous 2-week Incidence Rate was 770 ( $\mathrm{n}=212$ ) per 100,000 population.
$52 \%$ decrease in newly Confirmed COVID-19 Cases amongst Peach County residents between the Current and Previous 2-week periods.

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 $1 \%(n=1)$ 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 $99 \%$ 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\% ( $n=79$ ) of cases reported in Peach County have been linked to an outbreak.

## Putnam County - Substantial Spread

Since 2/6/2021, 4\% of Emergency Department Visits captured in syndromic surveillance for residents of Putnam County were categorized as COVID-19 Syndrome. 10\% of COVID-19 PCR tests were positive during the 14-day period (2/6-2/19/2021).

## 411

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Putnam County residents from the Current 2-week Period was 411 per 100,000 population ( $n=91$; population=21,809). The previous 2-week Incidence Rate was 665 ( $\mathrm{n}=147$ ) per 100,000 population.

Age Distribution of Cases in Putnam County



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

## 3\%

Current 2-week Period Outbreak Related Cases associated with an outbreak account for $3 \%(n=3)$ 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 $97 \%$ 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\% ( $n=81$ ) of cases reported in Putnam County have been linked to an outbreak.

## Twiggs County - Substantial Spread

Since 2/6/2021, 7\% of Emergency Department Visits captured in syndromic surveillance for residents of Twiggs County were categorized as COVID-19 Syndrome. 7.4\% of COVID-19 PCR tests were positive during the 14-day period (2-6-2/19/2021).

## 246

Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Twiggs County residents from the Current 2-Week Period was 246 per 100,000 population ( $\mathrm{n}=20$;
population=8,188). The previous 2-week period Incidence Rate was 333 ( $\mathrm{n}=27$ ) per 100,000 population.
$26 \%$ decrease 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
Total $\square$ Previous 2-Week Period $\square$ Current 2-Week Period
 Period Outbreak Related Cases

The cases reported in Twiggs County from the Current 2-Week Period associated with an outbreak account for $0 \%(n=0)$ 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. 100\% 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\% ( $n=40$ ) of cases reported in Twiggs County have been linked to an outbreak.

## Washington County - Substantial Spread

Since 2/6/2021, 3\% of Emergency Department Visits captured in syndromic surveillance for residents of Washington County were categorized as COVID-19 Syndrome. 7.8\% of COVID-19 PCR tests were positive during the 14-day period (2-6-2/19/2021).

290 Current 14-Day Incidence Rate

The incidence rate of COVID-19 for Washington County residents from the Current 2-week Period was 290 per 100,000 population ( $n=59$; population=20,386). The previous 2-week Incidence Rate was 682 ( $\mathrm{n}=139$ ) per 100,000 population.

58\% decrease 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 $5 \%(n=3)$ 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 $\mathbf{9 5 \%}$ 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\% ( $\mathrm{n}=242$ ) of cases reported in Washington County have been linked to an outbreak.

## Wilkinson County - Substantial Spread

AREA OF CONCERN: Since 2/6/2021, $11 \%$ of Emergency Department Visits captured in syndromic surveillance for residents of Wilkinson County were categorized as COVID-19 Syndrome. 8.2\% of COVID-19 PCR tests were positive during the 14-day period (2/62/19/2021). Confirmed case counts, as well as emergency room visits associated with 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.

## 268

 Current 14-Day Incidence RateThe incidence rate of COVID-19 for Wilkinson County residents from the Current 2-Week Period was 268 per 100,000 population ( $\mathrm{n}=28$; population=9,036). The previous 2-week Incidence Rate was 458 ( $\mathrm{n}=41$ ) per 100,000 population.


41\% decrease 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. During this time period, $0 \%(\mathrm{n}=0)$ of the outbreak-related cases are associated with a congregate care setting. The other $\mathbf{1 0 0 \%}$ 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=57) of cases reported in Wilkinson County have been linked to an outbreak.

