

# ARHS Novel Coronavirus (COVID-19) Situation Report #30

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August 21, 2020 PLEASE SEE ADDITIONS/ UPDATES IN RED

Please note, we are shifting the format of these situation reports slightly and will be reviewing our update schedule, sending more frequently as needed based on this rapidly evolving situation.

Please monitor the ARHS Website at [www.arhs-nc.org](http://www.arhs-nc.org) or <http://www.arhs-nc.org/information/COVID-19/> .

If anyone needs to be added to our contact list, please contact Cheryl Leigh at [cheryl.leigh@arhs-nc.org](mailto:cheryl.leigh@arhs-nc.org)

## Background

2019 Novel Coronavirus (the WHO has now named this COVID-19, you may still see it referred to as 2019-nCoV) is a virus (more specifically, a [coronavirus](#)) identified as the cause of an outbreak of respiratory illness first detected in Wuhan, China. Early on, many of the patients in the outbreak in Wuhan, China reportedly had some link to a large seafood and animal market, suggesting animal-to-person spread.

Human coronaviruses are common throughout the world. Seven different coronaviruses, that scientists know of, can infect people and make them sick. Some human coronaviruses were identified many years ago and some have been identified recently. Human coronaviruses commonly cause mild to moderate illness in people worldwide. Two newer human coronaviruses, MERS-CoV and SARS-CoV, have been known to frequently cause severe illness.

**This is a rapidly evolving situation. The most up to date information and guidance can be found at**

- <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- <https://www.ncdhhs.gov/coronavirus>

## Timeline & Current Situation

- An outbreak of pneumonia of unknown etiology in Wuhan City was initially reported to the World Health Organization (WHO) on December 31, 2019.
- U.S. WHO announced a Public Health Emergency of International Concern on January 30.
- The U.S. Department of Health and Human Services declared a public health emergency on January 31, 2020.
- The first NC Confirmed Positive Case was identified on 3/3/2020.
  - First ARHS case identified on 3/19/20

- See case count section below
- The Governor of North Carolina declared a state of emergency on 3/10/2020.
  - The primary reason for the state of emergency is to allow flexibility in the response effort and to better prepare and move resources as needed.
  - The State EOC activated on 3/10/2020 to allow for greater coordination amongst NC State Partners.
- The WHO has announced on 3/11/2020 that this outbreak has reached pandemic proportions.
- The Governor of North Carolina implemented the following executive orders:
  - EO 117 – 3/14/20 – Closes K-12 Public School Statewide, limits mass gathers to 100 people (however, NCDHHS recommends no mass gatherings of more than 50 (3/16))
  - EO 118 – 3/17/20 – Closes restaurants and bars for dine-in service, makes unemployment benefits more widely available
  - EO 119 – 3/21/20 – Waives restrictions on child care and elder care, provides DMV flexibilities.
  - EO 120 – 3/23/20 – Closes K-12 public school statewide through May 15, bans mass gatherings over 50 people, closes some businesses.
  - EO 121 – 3/27/20 – Effective 3/30/20 – Stay At Home Order and bans gatherings of more than 10 people.
  - EO 122 – 3/30/20 – Help schools and local government’s access state surplus property to help bridge gaps during the response to COVID-19.
  - EO 124 – 3/31/20 – Prohibits utilities - including electric, gas, water and wastewater services - from disconnecting people who are unable to pay during this pandemic and prohibits them from collecting fees, penalties or interest for late payment. The order applies for the next 60 days and gives residential customers at least six months to pay outstanding bills.
  - EO 130 – 4/8/20 – Provides more access to health care beds, expands the pool of health care workers and orders essential childcare services for workers responding to the crisis.
  - EO 131 – 4/9/20 – Addresses three issues: requires retail stores that are still operating to implement new social distancing policies to make shopping safer for customers and employees; makes earlier COVID-19 guidelines mandatory for nursing facilities, and recommends other long-term care facilities to do the same; speeds up the process to get benefits to people out of work. Effective 4/13/20.
  - EO 134 – 4/20/20 – Allows furloughed employees to be eligible for unemployment benefits.
  - EO 135 – 4/23/20 - Extends until May 8, North Carolina’s Stay At Home (Executive Order 121) as well as other orders regarding the closures of restaurants for dine-in service, bars and other close-contact businesses. <https://governor.nc.gov/news/governor-extends-stay-home-order-through-may-8-plans-three-phase-lifting-restrictions-based>
  - EO 138 – 5/5/20 - Effective 5 p.m. May 8, 2020, eases some restrictions on travel, business operations and mass gatherings
  - EO 139 – 5/12/20 – Provides additional regulatory flexibility to help ensure capacity in the state’s health care system and improve its ability to effectively respond to the COVID-19 pandemic.

- EO 141 – 5/20/20 - Lifts the statewide Stay at Home Order and moves the state to a Safer At Home recommendation. <https://www.nc.gov/covid-19/staying-ahead-curve/phase-2-faqs> and <https://files.nc.gov/governor/documents/files/EO141-Phase-2.pdf>
- EO 143 - 6/4/20 - Addresses disparities in communities of color that historically have had less access to health care, housing, economic opportunity and more. <https://files.nc.gov/governor/documents/files/EO143-Addressing-the-Disproportionate-Impact-of-COVID-19-on-Communities-of-Color.pdf>
- EO 144 – 6/5/20 - Extends certain health and human services provisions in previous executive orders <https://files.nc.gov/governor/documents/files/EO144-DHHS-Extend-EO130.pdf>
- EO 147 - 6/24/20 - Extends Executive Order 141's Safer At Home restrictions and requires people, with some exceptions, to wear face coverings in public when social distancing is not possible. <https://files.nc.gov/governor/documents/files/EO-147-FAQ.pdf>
  - On 7/16/20 expanded through August 7<sup>th</sup>
  - On 8/5/20 expanded through Sept 11<sup>th</sup>
- EO 153 – 7/28/20 – Restricts late-night service of alcoholic beverages <https://www.nc.gov/covid-19/staying-ahead-curve/alcohol-sales-service-faqs>
- EO 156 – 8/12/20 - Extends proof-of-immunization and health assessment documentation deadlines for students enrolled in public, private or religious educational institutions, including child care facilities, K-12 schools, colleges and universities. <https://files.nc.gov/covid/documents/covid-executive-orders/executive-order-no-156.pdf>
- The NC Department of Health and Human Services is asking people to remember these three things as we stay strong and continue to flatten the curve and slow the spread of COVID-19.
  - If you leave home, practice your Ws: Wear, Wait, Wash
    - Wear a cloth face covering if you will be with other people
    - Wait 6 feet apart. Avoid close contact.
    - Wash your hands often with soap and water for at least 20 seconds or use hand sanitizer.
  - <https://www.ncdhhs.gov/divisions/public-health/covid19/materials-and-resources/know-your-ws-wear-wait-wash>
- The Governor announced the Student Response Corps initiative <https://governor.nc.gov/news/nc-college-students-help-local-governments-nonprofits-covid-19-response>
- North Carolina schools will open in the fall for both in-person and remote learning (<https://governor.nc.gov/news/north-carolina-k-12-public-schools-require-key-safety-measures-allow-person-instruction> ) with key safety precautions to protect the health of students, teachers, staff and families. Read the summary: <http://www.nc.gov/covid-19/staying-ahead-curve/person-learning-public-schools>
  - StrongSchoolsNC Public Health Guidance <https://covid19.ncdhhs.gov/guidance#schools>
  - School Children and COVID-19 <https://covid19.ncdhhs.gov/information/individuals-families-and-communities/school-children-and-covid-19>

## Case Counts

Web-reported data and local investigation data as of 8/21/20 at 3:00 pm

	Lab Confirmed Case Count	Active (Lab Confirmed)	Recovered (Lab Confirmed)	Deaths	Additional Info/ Outbreaks
United States (pm update)	5,551,793	---	---	173,490	<a href="https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html">https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html</a>
Virginia (9am update)	110,860	---	---	2,436	9,071 hospitalizations <a href="http://www.vdh.virginia.gov/coronavirus/">http://www.vdh.virginia.gov/coronavirus/</a>
North Carolina (noon update)	151,912	---	---	2,494	1,015 hospitalizations <a href="https://www.ncdhhs.gov/covid-19-case-count-nc">https://www.ncdhhs.gov/covid-19-case-count-nc</a>
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Bertie	347	44	298	5	Bertie Correctional (2 <sup>nd</sup> ), Three Rivers LTCF (2 <sup>nd</sup> ), Brian Center
Camden	83	25	56	2	
Chowan	174	21	151	2	
Currituck	88	12	76	0	
Gates	67	15	50	2	
Hertford	437	70	354	13	Rivers Correctional (2 <sup>nd</sup> ), Creekside LTCF
Pasquotank	483	66	394	23	
Perquimans	98	15	81	2	
ARHS – Region Total	1777	268	1406	48	

Please note – ARHS will not be reporting Persons Under Investigation (PUI) or tests completed for the region. These are not standardized reporting systems so any representation would be inaccurate, therefore we will only report confirmed positive lab results.

**In addition, please note, due to testing guidance, case counts DO NOT represent true disease burden.**

Resolved outbreaks:

- Three Rivers LTCF (First Outbreak resolved, a new outbreak has started)
- Pasquotank Correctional
- Rivers Correctional (First Outbreak resolved, a new outbreak has started)
- Bertie Correctional (First Outbreak resolved, a new outbreak has started)
- Elizabeth City Health and Rehab
- Ahoskie House
- Ahoskie Assisted Living

ARHS also provides a weekly surveillance report each Friday with trends and demographics. (See attached PDF).

Case Count Info can be found here:

- NC: <https://www.ncdhhs.gov/covid-19-case-count-nc>
- US: <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>
- Very helpful site from CDC that looks at US Cases and Deaths by State, and you can toggle b/t total cases and cases in last 7 days to see where the “hot spots” are: <https://www.cdc.gov/covid-data-tracker/index.html#cases>

- Worldwide: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>
- GIS Map from Johns Hopkins: <https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>
- New GIS Map from Johns Hopkins focusing on US and allowing deeper dive into state and county specific data including demographics: <https://coronavirus.jhu.edu/us-map>
- New Comparison Graphics from Johns Hopkins: <http://91-divoc.com/pages/covid-visualization/>

### **Modeling Information/ Sites:**

Modeling Site: <https://covid19.healthdata.org/united-states-of-america>

Modeling Educational Overview: <https://www.mwcog.org/public-safety-and-homeland-security/program-areas/covid-19-predictive-modeling/>

### **Signs and Symptoms:**

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness.

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19.

We continue to learn more about asymptomatic spread as individuals may shed virus 1 to 3 days prior to symptom onset, and present with extremely mild or no symptoms at all.

### **Case Investigation/ Testing:**

Testing is being expanded through private labs such as Lab Corp and Quest. In this situation, we encourage providers to follow the case definition and utilize their clinical expertise to determine if testing is needed. The state has expanded testing this week since we are beginning to see capacity increase through commercial labs. The state is asking providers to consider testing for any patient in

whom COVID-19 is suspected or high risk individuals. We will be notified upon any positive results as this is a reportable condition.

- Physicians should make decisions to test based on local epidemiology and clinical presentation.
- Prior authorization is not required in this situation, but IF testing is done, they should be considered a Person Under Investigation and MUST BE ISOLATED by the provider and given ISOLATION guidance.

For any NC State Public Health Lab tests, testing MUST be authorized through local health department staff in conjunction with and approval from NCDPH and CDC, and based on symptoms and High Risk categories.

Most healthy individuals will be able to recover at home without needing medical care. We want to make sure that those needing medical care can get it – and we need our community’s help in making sure that can happen by taking this seriously.

If an individual receives a positive test result or suspects COVID-19, they are to remain isolated until the individual can answer yes to all three of these questions:

1. Has it been at least **10** days since you first had symptoms? (Please note this timeframe has been changed from 7 to 10)
2. Have you been without fever for 24 hours without any medicine for fever?
3. Are your other symptoms improved?

Clinical Guidance was provided to clinicians on 5/20/20, 6/9/20, 7/6/20 encouraging expanded testing criteria. <https://files.nc.gov/covid/documents/guidance/healthcare/COVID-19-Provider-Guidance-Final.pdf>

Previously, ARHS only had access to State Lab test kits and the guidance for use is more restrictive than commercial laboratories. ARHS has acquired LabCorp collections kits to allow for expanded testing through ARHS Health Departments. This will be offered to patients in our primary case clinics and based COVID testing needs. We do encourage all individuals to call their primary care provider first, however we are available to all and can assess each situation. **Individuals can call the Local Health Dept. or 338-WELL for information. PLEASE NOTE THE TIME CHANGE DUE TO EXTREME TEMPERATURES!**

<p>Pasquotank County Health Department 252-338-4400</p> <p>Testing available: Thursday 8:30-10am</p>	<p>Perquimans County Health Department 252-426-2100</p> <p>Testing available: Tuesday 8:30-10am</p>	<p>Camden County Health Department 252-338-4460</p> <p>Testing available: Thursday 8:30-10am</p>	<p>Chowan County Health Department 252-482-6003</p> <p>Testing available: Monday 8:30-10am</p>
<p>Currituck County Health Department 252-232-2271</p> <p>Testing available: Wednesday 8:30-10am</p>	<p>Bertie County Health Department 252-794-5322</p> <p>Testing available: Wednesday 8:30-10am</p>	<p>Gates County Health Department 252-357-1380</p> <p>Testing available: Monday 8:30-10am</p>	<p>Hertford County Health Department 252-862-4054</p> <p>Testing available: Tuesday 8:30-10am</p>

SAMC is working to offer testing in Pasquotank (2), Perquimans, Camden and Currituck in July and August. ARHS and other community partners will be working with them on these events. More to come.

- Dates:
  - July 22, St Stephen's, Elizabeth City, 4-6 pm (100 tests completed in just over an hour)
  - July 28, Corolla Chapel, 8 to 10 am
  - July 31, 110 Capital Trace, EC, 8-10 am
  - ~~August 4~~, Camden, New Sawyer's Creek Missionary Baptist Church, 4-6 pm  
**RESCHEDULED FOR AUGUST 24th**
  - August 6, Melton Grove Baptist Church, Winfall, 8-10 am

## Prevention & Treatment:

There is currently no vaccine to prevent COVID-19 infection. The best way to prevent infection is to avoid being exposed to this virus. However, as a reminder, CDC always recommends everyday preventive actions to help prevent the spread of respiratory viruses, including:

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Follow CDC's recommendations for using a facemask.
  - Facemasks should be used by people who show symptoms of COVID-19 to help prevent the spread of the disease to others. The use of facemasks is also crucial for health workers and people who are taking care of someone in close settings (at home or in a health care facility).
- CDC is offering guidance on Cloth Face Coverings: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html> Cloth face coverings are more widely promoted in situations where social distancing may be difficult, but are not a replacement for other precautions and measures. See also 3W campaign.
- Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.
  - If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.

There is no specific antiviral treatment recommended for COVID-19 infection. People infected with COVID-19 should receive supportive care to help relieve symptoms. For severe cases, treatment should include care to support vital organ functions.

## Key Links and Resources:

- NCDPH
  - Guidance: <https://www.ncdhhs.gov/divisions/public-health/coronavirus-disease-2019-covid-19-response-north-carolina>
  - Healthcare Guidance: <https://epi.dph.ncdhhs.gov/cd/coronavirus/providers.html>

- Lab Guidance: <https://slph.ncpublichealth.com/bioterrorism/2019-ncov.asp>
- All COVID-19 Guidance; all sectors: <https://www.ncdhhs.gov/divisions/public-health/covid19/covid-19-guidance>
- CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
  - Guidance for Healthcare providers: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>



## ARHS Contact Information:

### ARHS COVID Call Line – 252-338-WELL

### ARHS Department Contacts

**\*\*FOR PUBLIC USE\*\***

<b>Department</b>	<b>Phone</b>	<b>Address</b>
Pasquotank Health Department (Supervisor Amy Rosenberger/ Donata Brown)	252-338-4400	711 Roanoke Ave, Elizabeth City
Perquimans Health Department (Supervisor Laura Harkins)	252-426-2100	103 ARPDC St., Hertford
Camden Health Department (Supervisor Sherry East)	252-338-4460	160 US 158, BLDG B, Camden
Chowan Health Department (Supervisor Amber Woodell)	252-482-6003	202 Hicks St., Edenton
Currituck Health Department (Supervisor Nicole Hines)	252-232-2271	2795 Caratoke Highway, Currituck
Bertie Health Department (Supervisor Sara Davidson)	252-794-5322	102 Rhodes Ave., Windsor
Gates Health Department (Supervisor Karen Riddick)	252-357-1380	29 Medical Center Rd., Gates
Hertford Health Department (Supervisor Valerie Pearce)	252-862-4054	828 S. Academy St., Ahoskie

### ARHS Management/ Leadership Contacts

**\*\*FOR OFFICIAL USE ONLY\*\***

<b>Name</b>	<b>Position/ Title</b>	<b>Email</b>	<b>Office Phone</b>	<b>Cell Phone</b>
Battle Betts	Health Director	<a href="mailto:bbetts@arhs-nc.org">bbetts@arhs-nc.org</a>	252-338-4404	252-506-6193
Amy Underhill	PIO/ Health Ed Director	<a href="mailto:aunderhill@arhs-nc.org">aunderhill@arhs-nc.org</a>	252-338-4448	252-398-2680
Nancy Nash	Nursing Director	<a href="mailto:nnash@arhs-nc.org">nnash@arhs-nc.org</a>	252-338-4411	252-339-9491
Sandra Ferebee	Clinic Supervisor	<a href="mailto:sandra.ferebee@arhs-nc.org">sandra.ferebee@arhs-nc.org</a>	252-338-4412	252-312-9981
Anita LaFon	Clinic Supervisor	<a href="mailto:alafon@arhs-nc.org">alafon@arhs-nc.org</a>	252-338-4435	252-325-0242
Ashley Stoop	Dir. Policy, Planning, Preparedness	<a href="mailto:astoop@arhs-nc.org">astoop@arhs-nc.org</a>	252-337-6716	252-312-4952