

Naugatuck Valley COVID-19 Case Summary

November 29, 2020 8:00PM

www.nvhd.org/coronarviruses/COVID-19

NVHD COVID-19 Testing Data

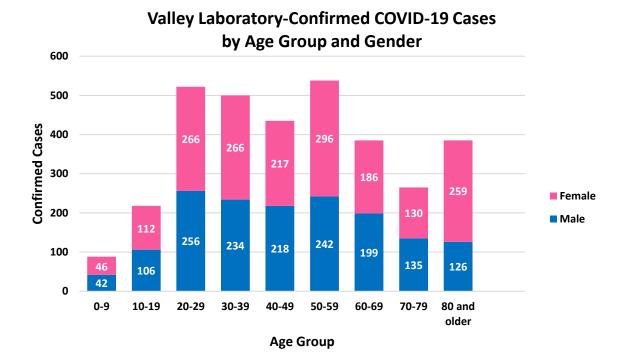
Please remember, data is preliminary and subject to change

Test results may be reported several days after the result.

Patient information may be updated after results have already been reported. Changes will be reflected in the new daily totals. Data does not include "probable" or "suspect" cases.

Table 1. Cumulative NVHD COVID-19 Laboratory-Confirmed Cases	5
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Town/City	Laboratory-Confirmed Cases	Change Since Monday 11/23	
Ansonia	546	+34	
Beacon Falls	121	+11	
Derby	332	+16	
Naugatuck	855	+68	
Seymour	458	+44	
Shelton	1,024	+41	
Total	3,336	+214	



Change since Thursday 11/19:

0-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80+	Total
+8	+18	+41	+33	+25	+32	+31	+17	+9	+214

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POSITIVE CASES: If you test positive for COVID-19 and are contacted by our public health professionals by email, phone or text asking you to fill out a questionnaire, please do so. This is our best chance to help protect our families, friends, co-workers, and broader communities. Please stay home for at least 10 days after your symptoms begin; you should be fever-free for 3 days and start to feel better before leaving your home. If you do not have any symptoms, you should stay home for 10 days after you were tested for COVID-19.

CONTACTS OF POSITIVE CASES: If you are contacted by our public health professionals by email, phone or text asking you to fill out a questionnaire as a contact of someone who has tested positive, please do so. Please also take the advice seriously and stay at home for 14 days after the date you were exposed. It is one way you can continue to do your part and help us fight COVID-19. You cannot test out of quarantine if you have had exposure to a positive case.

ContaCT is Connecticut's statewide voluntary and confidential software system for monitoring the health and wellbeing of people affected by COVID-19. ContaCT will aid Naugatuck Valley and Connecticut's efforts to rapidly scale up our contact tracing efforts and infrastructure to help combat COVID-19.

ContaCT automates some steps in the contact tracing process, while maintaining safe handling of your information. For those who choose to participate, surveys will be sent by email or text message daily to those who have tested positive for COVID-19 (also known as cases) and persons identified who were exposed and who may be at risk of developing COVID-19 (also known as contacts).

Survey messages from ContaCT will be sent from <u>SVC-Covid19@ct.gov</u>; text messages will be sent from 855-670-0299. We share this information with you to provide some reassurance these messages are legitimate. If you decide not to participate, you should expect a daily phone call to achieve similar monitoring to what the ContaCT system can provide.

https://portal.ct.gov/Coronavirus/ContaCT

www.nvhd.org/coronarviruses/COVID-19

https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/contact-tracing-infographic.html

Contact Tracing: Do your part to keep your family, friends, and community safe.

WHAT YOU CAN EXPECT TO HAPPEN DURING CONTACT TRACING IF YOU HAVE BEEN DIAGNOSED WITH COVID-19.

If you have been diagnosed

with COVID-19, a public health

worker will call you to check on

your health.

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spent time while you were sick and may have spread COVID-19 to others.

You will also be asked to **stay at home and self-isolate,** if you are not doing so already.

They will ask you who

with and where you

you've been in contact

Self-isolation means **staying at home in a specific room away from other people and pets,** and **using a separate bathroom, if possible.**

Self-isolation helps slow the spread of COVID-19 and can keep your family, friends, and community safe.

Continue to monitor your health. **If your symptoms worsen or become severe, you should seek medical care.** Severe symptoms include trouble breathing, persistent pain or pressure in the chest, confusion, inability to wake or stay awake, or bluish lips or face.

cdc.gov/COVID19

U.S. Department of Health and Human Services Centers for Disease Control and Prevention

CS317837-

Any information you share with public health workers

is CONFIDENTIAL.

This means that your personal and medical

information will be

kept private.

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If you need support

or assistance while

self-isolating, the health

department or a local community organization may be able to provide assistance.

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CONTACT TRACING: WHAT TO EXPECT IF YOU MAY HAVE BEEN EXPOSED TO SOMEONE WITH COVID-19 1 If you have been in close contact with someone who has COVID-19, Any information you share with public a public health worker will call you to health work inform you that you may have been CONFIDENTIAL. exposed to COVID-19. This means that your personal and medical information will be kept private. 2 You should stay at home and Self-quarantine means self-quarantine for 14 days, staying home, monitoring starting from the last day you your health, and maintaining were possibly exposed to social distancing (at least 6 COVID-19. feet) from others at all times. 3 The public health worker can provide information about COVID-19 testing in your area. If you need support or assistance with self-quarantine, your health department or community organizations may be able to provide assistance. 4 You should take your temperature twice a day, watch for fever and other symptoms of COVID-19, and notify your health department if you develop symptoms. 5 If you become ill during the 14 days of self-quarantine, you should notify the health department and seek medical care if your symptoms worsen or become severe. Emergency warning signs include trouble breathing, persistent pain or pressure in the chest, confusion, inability to wake or stay awake, or bluish lips or face. We can all work together to help slow the spread of COVID-19. Do your part to keep your family and your community safe: CS317837-4 Answer the call to slow the spread.

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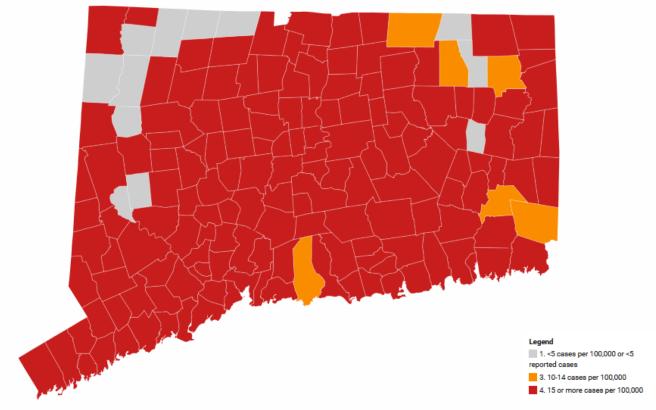
Statewide COVID-19 Data

https://portal.ct.gov/Coronavirus/COVID-19-Data-Tracker

*It is possible that the State and local health department data may not match due to timing of reporting, address verification, system updates, and other reasons. *

Reporting Period 11/8/20 - 11/21/20

Average Daily Rate of COVID-19 Cases Among Persons Living in Community Settings per 100,000 Population By Town



This map shows the average daily rate of new cases of COVID-19 by town during the past two weeks. Only cases among persons living in community settings are included in this map; the map does not include cases among people who reside in nursing home, assisted living, or correctional facilities. Source: CT DPH - Get the data - Created with Datawrapper

"Starting on 10/15/2020, the metrics will be calculated using a 14-day average. We are learning more about COVID-19 all the time, including the best ways to measure COVID-19 activity in our communities. CT DPH made the decision to shift to 14-day rates because these are more stable, particularly at the town level, as compared to 7-day rates."

- SDE Indicators Website

As a reminder, all data reported is preliminary and subject to change. Test results may be reported several days after the result. Patient information may be updated after results have already been reported. Changes will be reflected in the new daily totals.

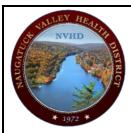
NVHD receives data and confirmation reports from the following sources: CT Department of Public Health, Hospitals, Healthcare Providers, Laboratories, and the Office of the Chief Medical Examiner. Sometimes, the local health department receives reports or verifies address corrections before the State DPH and vice versa and therefore the numbers reported by NVHD may differ from the daily report on the State of CT website.



www.nvhd.org/coronarviruses/COVID-19

CONNECTICUT DEPARTMENT OF PUBLIC HEALTH TOWN-LEVEL COVID RESPONSE FRAMEWORK

	Yellow 5-9 cases per 100k per day	Orange 10-14 cases per 100k per day	<u>Red</u> 15+ cases per 100k per day
DPH Response	Outreach to Local Health Department	ENCOURAGE TESTING FOR Weekly calls with Local Officials	ASYMPTOMATIC RESIDENTS Issue Public Health Alert
(A) Individuals	Masks, distancing, extra precautions for high risk	Avoid larger events, limit time with non-family members	Limit trips outside home, avoid gatherings with non- family members
© e e e e e e e e e e e e e e e e e e e	Scale up public awareness, social media	Scale back public events	Cancel public events and limit community gathering points; Reverse 9-1-1
Organized Group Activities	Move activities outdoors where possible	Limit group sizes; Postpone indoor activities where mask wearing or social distancing cannot be maintained	Postpone all indoor activities; Postpone outdoor activities where mask wearing or social distancing cannot be maintained
Pre K-12 Schools	Re-Enforce and monitor safety measures with staff, students and families	Maximize spacing, mask wearing, ventilation and hygiene to support in-person learning	In collaboration with Local Health Department and Superintendent, consider more distance learning above 25
0			
Ъ.	REMIND STAFF TO ASSESS THE	IR SYMPTOMS DAILY AND NOT REPO	INT TO WORK IF THET ARE ILL



www.nvhd.org/coronarviruses/COVID-19

State Department of Education School Learning Model Indicators, including primary and secondary metrics, are updated weekly on Thursday's and can be accessed at <u>https://data.ct.gov/stories/s/CT-School-Reopening/ddy2-ijgu/</u>.

Local school districts have their own reopen plans and metrics to watch in addition to the SDE Learning Model Indicators.



If you are a parent/guardian of a school-aged child in the Valley, please be sure to pay attention to important messages and updates from school administrators like Superintendents.



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Facility Related Data

Point Prevalence Surveys (PPS)

Local health departments and districts were made aware of the State of Connecticut's goal to test all Connecticut nursing home residents through a process called point prevalence survey testing (PPS). A PPS involves testing broadly to determine the COVID-19 status of all residents in a facility on the same day. The following information from the CT Department of Public Health (DPH) Interim PPS Guidance dated May 11, 2020 will explain the purpose of conducting a PPS.

Cohorting physically separates residents potentially capable of transmitting SARS-CoV-2 from those potentially naïve to it. Knowing the COVID-19 status (positive or negative) of all residents within a facility at a given point in time can help inform a cohorting strategy. CDC recommends testing in facilities when results will lead to specific infection control interventions such as cohorting.

DPH recommends cohorting residents into 3 separate areas.

- 1. "Positive": residents confirmed to have COVID-19 due to a positive PCR test
- 2. "Negative": asymptomatic residents with no known exposures who test negative for COVID-19
- 3. "Exposed": roommates of COVID-positive residents undergoing a 14-day quarantine or symptomatic residents with high clinical suspicion of COVID-19 awaiting test results

DPH's Healthcare Associated Infections and Antimicrobial Resistance (HAI-AR) staff are prioritizing working with the nursing home facilities to assess readiness to conduct the PPS, eventually the goal is to conduct PPS at assisted living facilities too. Once readiness is established, the Connecticut National Guard will schedule a time to drop off kits at the facility. Facilities are expected to complete the PPS within 72 hours after receipt of the kits. The testing is done by commercial laboratories and results are typically available within 24 hours after the specimen is collected. As soon as the PPS test results are received, cohorting of the facility residents must be done. DPH is following up with each facility as results are received.

Cases that are identified in a PPS will be included in the total number of cases per jurisdiction and testing results will be available in the CT electronic disease surveillance system, CTEDSS. This means that the number of cases and number of tests in each jurisdiction could increase dramatically when a PPS is completed. Testing during a PPS is different than the symptom-based testing that has been occurring to date. An increase in cases associated with a PPS does not indicate a sudden increase in transmission.

Please be advised that facilities are also required to report cases daily into an online portal. This portal is the source of the data used in the weekly nursing home and assisted living facility report that is put out by the State of CT. NVHD does not receive or use data directly from this portal. NVHD obtains the data once it is migrated into CTEDSS. Therefore, there may be times when the nursing home report distributed by the state may have significant discrepancies from the local NVHD facility report. When NVHD gains access to the data after it is entered into CTEDSS by our colleagues at DPH, NVHD will reflect the update in that day's report.





www.nvhd.org/coronarviruses/COVID-19

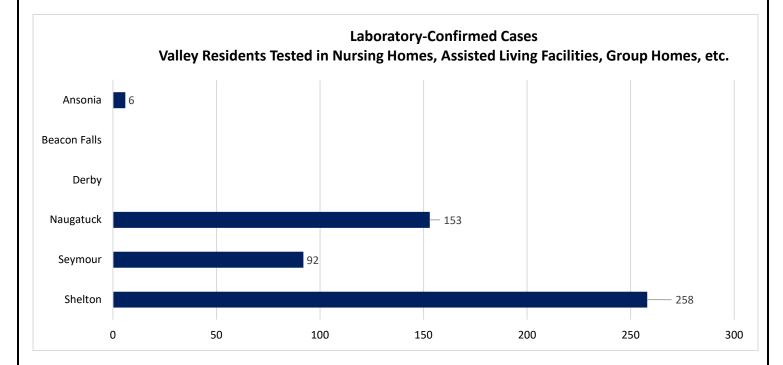
509 (~15%) of the 3,336 confirmed cases among Valley residents, are individuals who resided in a nursing home, assisted living facility, group home, or other similar setting at the time of testing.

193 (~38%) of the 509 individuals have died due to COVID-19 complications. Please see pages 10-11 for additional information and data related to COVID-19 associated deaths.

Please remember, data is preliminary and subject to change

Test results may be reported several days after the result.

Patient information may be updated after results have already been reported. Changes will be reflected in the new daily totals. Data sources include: The Dr. Katherine A. Kelley State Public Health Laboratory, Hospitals, and Commercial Laboratories.



The above graph includes both living and deceased. The graph includes facility residents who may currently be inpatient at area hospital(s).

Please be advised that some towns have multiple facilities reporting COVID-19 cases. Cases are reported by the individuals permanent address, not the town of the facility in which they may be receiving treatment or recovering. This data is subject to change since some individuals may end up leaving a facility to recover at their homes or may become permanent residents of a facility.

When an individual or worker tests positive for COVID-19 within an assisted living facility and/or nursing home, the investigation is led by the State Department of Public Health (DPH) and the State Facility Licensing and Investigation Section (FLIS). The NVHD remains in communication with the facilities as well as our state agency partners during the investigation.





www.nvhd.org/coronarviruses/COVID-19

NVHD COVID-19 Associated Deaths

Several Valley residents passed away recently due to COVID-19 complications. NVHD does not have any additional information regarding their conditions, other than they were diagnosed with COVID-19 around the time of death. They included a 90-year-old female and an 83-year-old male who both resided in a long-term care facility in Seymour as well as a 73-year-old male Ansonia resident. Our thoughts and prayers are with their families.

For public health surveillance, laboratory-confirmed COVID-19 associated deaths are defined as patients who tested positive for COVID-19 around the time of death; this is not a determination of the cause of death. The health district does not have further details including whether there may have been underlying health issues or other contributing factors.

On April 10, 2020, the State Department of Public Health started to include COVID-19 deaths that are not laboratory-confirmed in daily reporting. NVHD now reports on COVID-19 associated deaths including both a) persons who tested positive for COVID-19 around the time of death (laboratory-confirmed) and b) persons who were not tested for COVID-19 whose death certificate lists COVID-19 disease as a cause of death or as a significant condition contributing to deaths (probable) in Table 2.

NVHD has linked free mental health and wellness resources for individuals, families, and first responders who may be experiencing heightened anxiety, stress, and other emotions during this pandemic on the webpage www.nvhd.org/coping.

Please remember, data is preliminary and subject to change

Death notices may be reported several days after the individual died.

Patient information may be updated after results have already been reported. Changes will be reflected in the new daily totals. Data sources include: CT Department of Public Health, Office of the Chief Medical Examiner, Hospitals, Long-Term Care & Assisted Living Facilities

Town/City	Laboratory-Confirmed COVID-19 Associated Deaths (*included in the Table 1)	Probable COVID-19 Associated Deaths		
Ansonia	9	2		
Beacon Falls				
Derby	6			
Naugatuck	39	5		
Seymour	52	7		
Shelton	114	25		
Total	220*	39		
	Combined Total: 259			

Table 2. NVHD COVID-19 Associated Deaths





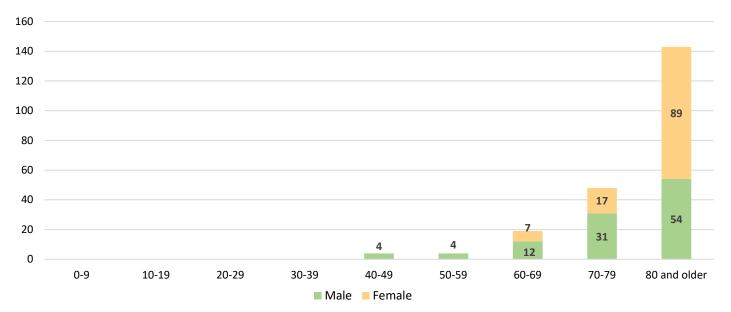
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Laboratory-Confirmed COVID-19 Associated Deaths Among Valley Residents by Age and Gender







www.nvhd.org/coronarviruses/COVID-19

Travel Information

CT Travel Advisory Updates and Frequently Asked Questions: <u>ct.gov/coronavirus/travel</u>

Executive Order No. 91 (10/27/20): Amendments to mandatory self-quarantine for travelers from states with high COVID-19 levels.

Pursuant to Executive Order 9C (9/16/20): Anyone traveling into Connecticut from a state with a positive case rate higher than 10 per 100,000 residents, or higher than a 10% test positivity rate over a 7-day rolling average, or from a country for which the <u>Centers for</u> <u>Disease Control and Prevention (CDC) has issued a Level 3 Travel Health Notice</u>, are directed to self-quarantine for a 14-day period from the time of last contact within the identified state or country.

Anyone entering from one of the identified states must fill out a travel health form upon arrival. Travelers can fill out the form online at cr.gov/travelform.

Updated 11/24/20

- 1. Alabama
- 2. Alaska
- 26. Nevada 27. New Hampshire

31. Ohio

29. North Carolina

30. North Dakota

32. Oklahoma

34. Pennsylvania

35. South Carolina

36. South Dakota

37. Tennessee

40. Vermont

41. Virginia

38. Texas

39. Utah

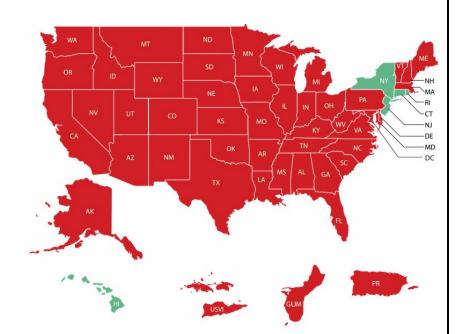
33. Oregon

- 28. New Mexico
- Arizona
 Arkansas
- 5. California
- 6. Colorado
- Colorado
 Delaware
 - . Delaware
- 8. Florida
- 9. Georgia
- 10. Idaho
- 11. Illinois
- 12. Indiana
- 13. Iowa
- 14. Kansas
- 15. Kentucky
- 16. Louisiana
- 17. Maine
- 18. Maryland
- 19. Massachusetts
- 20. Michigan
- 21. Minnesota
- 22. Mississippi
- 23. Missouri
- 24. Montana
- 25. Nebraska
- 42. Washington 43. West Virginia 44. Wisconsin
 - 45. Wyoming
 - , ,
 - 46. Guam
 - 47. Puerto Rico
 - 48. U.S. Virgin Islands

The list of countries for which the CDC has issued a Level 3 Travel Health Notice is fluid and travelers should check such list on their date of travel. **CDC Travel Updates**: <u>https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html</u>

CDC Considerations for Travel During the COVID-19 Pandemic: https://www.cdc.gov/coronavirus/2019- ncov/travelers/travel-during-covid19.html







www.nvhd.org/coronarviruses/COVID-19

Reopen Information & Sector Rules

Sector Rules are in addition to relevant public health code requirements.

All businesses subject to these guidelines are required to self-certify with the State of Connecticut prior to reopening. If you already self-certified your business during Phase 1 or 2, your business will NOT need to certify again during Phase 3. <u>https://business.ct.gov/recovery</u>.

As of Friday, November 6, 2020, Governor Lamont has rolled back the entire state to "Phase 2.1"

Please read <u>Executive Order 9K</u> for the complete language.

Please visit the CT Department of Economic and Community Development (DECD) website for the current sector rules and event gathering limits.

https://portal.ct.gov/DECD/Content/Coronavirus-Business-Recovery/Sector-Rules-and-Certification-for-Reopen



If business owners have additional questions after reviewing the DECD guidelines, please contact NVHD during business hours, Monday – Friday 8:30AM-4:00PM, by calling 203-881-3255. If you have witnessed a business violating the Sector Rules that is not a public health facility, please fill out the complaint form on the State of CT website https://appengine.egov.com/apps/ct/COVID-19/Reopen-CT-Business-Complaint-Form

www.nvhd.org/coronarviruses/COVID-19

Phase Comparisons

Industry	Phase 2	Phase 3	Phase 2.1 - Effective 11/6/20
Restaurants	Up to 50% capacity indoors with 6 ft spacing and/or non-porous barriers	Up to 75% capacity indoors with 6 ft spacing and/or non- porous barriers	Up to 50% capacity indoors with 6 ft spacing and/or non- porous barriers Max of 8 people/table
Personal Services	Up to 50% capacity indoors with 6 ft spacing and/or non-porous barriers	Up to 75% capacity indoors with 6 ft spacing and/or non- porous barriers	See Phase 3 rules
Libraries	Up to 50% capacity indoors	Up to 75% capacity indoors	See Phase 3 rules
Outdoor Event Venues (e.g. Amphitheaters, Race Tracks) Indoor Performing Arts Theaters	Up to 25% with social distancing and masks required Closed	Up to 50% with social distancing and masks required Up to 50% capacity with 6 ft spacing between	Up to 25% with social distancing and masks required Up to 50% capacity with 6 ft spacing between
Indoor Recreation	Up to 50% with social distancing and masks required	parties Up to 50% with social distancing and masks required	parties, capped at 100 people Up to 50% with social distancing and masks required, movie theaters and similar entertainment venues capped at 100 people
Private, Social and Recreational Gathering Sizes – Commercial Venue	Indoor – Cap of 25 people Outdoor – Cap of 100 people	Indoor – Up to 50% capacity, capped at 100 people Outdoor – Cap of 150 people	Indoor – Cap of 25 people Outdoor – Cap of 50 people
Private, Social and Recreational Gathering Sizes – Private Residences	Indoor Cap of 25 people Outdoor - Cap of 100 people	Indoor – Cap of 25 people Outdoor – Cap of 150 people	Indoor – Cap of 10 people Outdoor – Cap of 10 people
Graduations	Indoor – Not allowed Outdoor – One time exemption capped at 150 people with masks and social distancing required	Indoor - Up to 50% capacity, capped at 200 with masks and social distancing required Outdoor - Up to 50% capacity or 6 ft spacing, no capacity limit with masks and social distancing required	Indoor – Up to 50% capacity, capped at 100 with masks and social distancing required Outdoor – See Phase 3 rules
Religious Gatherings	Indoor – Up to 25% capacity capped at 100 people Outdoor – Capped at 150 people	Indoor – Up to 50% capacity, capped at 200 with masks and social distancing required Outdoor – Up to 50% capacity or 6 ft spacing, no capacity limit with masks and social distancing required	Indoor – Up to 50% capacity, capped at 100 with masks and social distancing required Outdoor – See Phase 3 rules

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Team Sports on Pause – 11/23/2020 through 1/19/2021

* Pause affects <u>all</u> sporting activities except for Collegiate and Professional. Teams that view themselves as professional must obtain approval from DECD. *

* Masks now required in Gyms and Fitness Centers, no exceptions *

"Team" is defined as a group of more than 4 people jointly engaged in an organized or recreational athletic activity on a court, field, etc.

What is prohibited during Team Sports on Pause:

- Participation in High Risk Sports (other than conditioning/non-contact drills)
- All Team scrimmages, competitions, camps, clinics and tournaments (including all interscholastic, "pick-up" games, and other informal athletic activities)
- Participation in any out-of-state Team practices (including conditioning), competitions, camps, clinics and tournaments by CT residents
- Participation in competitions, camps, clinics, tournaments in CT by out-of-state Teams
- Teams are not able to break up into smaller groups to practice or compete (e.g. a 20 person team practicing or competing in groups of 4 or less at the same time and location is not allowed)

What is allowed during Team Sports on Pause:

- Outdoor Recreation activities
- Individual and small group training (4 people or fewer)
- Individual and small group Moderate and Low Risk Sports (4 people or fewer)
- Gyms (masks now required, no exceptions, minimum 6 foot spacing and other Sector Rule Safeguards)

Risk Categorizations with Associated Sports, National Federation of State High School Associations, Sports Medicine Advisory Committee, May 2020

	HIGHER	RISK					
the second s	stained contact between parti r that respiratory particles will		int protective barriers, and high n participants.				
Wrestling 11-on-11 Football Boys Lacrosse Competitive Ch							
Martial Arts	Rugby	Boxing	Competitive Dance Teams				
	MODERAT	TE RISK					
likelihood of respiratory p	e, sustained contact, but with j particle transmission between ports that use equipment that	participants OR intermi	ittent close contact OR group				
Basketball	Soccer	7-on-7 football	Rowing/Crew (with two or				
Volleyball	Water polo	Girls lacrosse	more rowers in shell)				
Baseball	Gymnastics	Pole vault	Tennis (doubles)				
Softball	Ice hockey	High jump	Racquet sports (squash,				
Swimming relays	Field hockey	Long jump	pickleball, racquetball)				
	LOWER	RISK					
Sports that can be done	with social distancing or indivi clean the equipment betw						
Individual running events	Running/Cross Country	Weightlifting	Rowing/Crew (single sculling				
Throwing events (javelin,	(staggered starts)	Alpine skiing/	Tennis (singles)				
shot put, discus)	Individual swimming	snowboarding	Fencing				
	Golf	Sideline cheer					

- Group Fitness Classes & Dance Studios, Yoga, Martial Arts Instruction, etc.
 - Reduced to 25% capacity (from 50%)
 - Masks now required, no exceptions
 - Subject to minimum 6 foot spacing and other Sector Rule Safeguards
- School Gym Classes (No Team sports subject to Pause to be played)
- Professional teams that obtain DECD approval and Sanctioned Interscholastic College Sports (Recreational/Club sports on college campuses are subject to Team Sports on Pause rules)



www.nvhd.org/coronarviruses/COVID-19

Face Coverings

NVHD continues to urge residents to please stay home as much as possible and please continue to practice physical, social distancing by keeping at least 6 feet between you and others if you must go out for essential errands. To minimize the amount of people who can potentially be exposed, designate one person per household as the person who will do the grocery shopping or other essential errands. If you must go out in public, please wear a cloth face covering.

Please review <u>Acting Governor Bysiewicz's Executive Order No. 7NNN</u> for updates related to masks and face coverings.

Per <u>Governor Lamont's Executive Order No. 7BB</u>, "effective at 8:00PM on Monday, April 20, 2020, any person in a public place in Connecticut who is unable to or does not maintain a safe social distance of approximately six feet from every other person shall cover their mouth and nose with a mask or cloth face-covering.

In addition, individuals shall use a mask or cloth face covering when using the services of any taxi, car, livery, ride-sharing or similar service or means of mass public transit, or while within any semi-enclosed transit stop or waiting area. The Commissioner of Economic and Community Development shall issue updated versions to the <u>Safe Workplace rules</u> issued pursuant to Executive Order No. 7V, Section 1 and the <u>Safe Stores rules</u> issued pursuant to Executive Order No. 7S, Section 1, which updated versions shall set forth additional requirements for face coverings within those settings. Nothing in this order shall require the use of a mask or cloth face covering by anyone for whom doing so would be contrary to his or her health or safety because of a medical condition, a child in a child care setting, anyone under the age of 2 years, or an older child if the parent, guardian or person responsible for the child is unable to place the mask safely on the child's face. If a person declines to wear a mask or face covering because of a medical condition as described above, such person shall not be required to produce medical documentation verifying the stated condition. This order shall supersede and preempt any current or future municipal order."

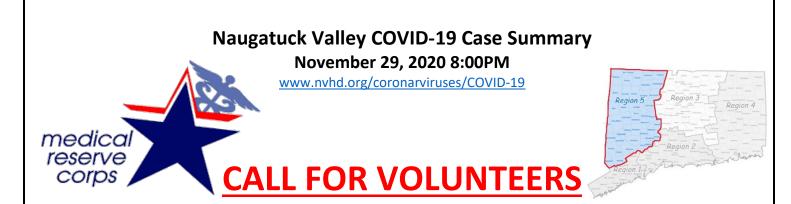
Per <u>Governor Lamont's Executive Order No. 9B</u>, "any person, while in a public place or in any location where and for whom wearing a mask or face covering is required by Executive Order 7NNN or any DECD Sector Rules...who fails to wear a mask or cloth-face covering shall be guilty of a violation and fined one hundred dollars." Please see the executive order for fines for large gatherings violating the size restrictions and persons who attend those gatherings.

To view all of the Emergency Executive Orders signed by the Governor, please visit <u>https://bit.ly/2XK7E7e</u> or <u>http://www.nvhd.org/coronaviruses/covid-19/</u>.

For more information about making or using cloth face coverings to help slow the spread of COVID-19, please visit <u>https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html</u>.







The Medical Reserve Corps needs your help to support missions in the Valley and across CT Region 5 in response to COVID-19.

The MRC is a national network of local volunteers who have both **medical and non-medical** backgrounds. Volunteers in the State of Connecticut must be 18 years or older. Just-in-time training and personal protective equipment are supplied to volunteers free of cost. The specific role that you will play and the activities in which you will participate will depend upon your background, interests, and skills, as well as the needs of the NVMRC unit and the Region 5 communities.

All MRC volunteers are sworn in during an Oath Ceremony conducted by an Emergency Management Director or Director of Health. By taking this bi-annual oath, volunteers are provided liability protection under Title 28 of the CT General Statutes while training or activated with the MRC. Oath



ceremonies are currently hosted by Naugatuck Valley virtually through videoconferencing. You will be invited via email once you are registered with the NVMRC or regional strike team.

Naugatuck Valley and local health departments all over CT Region 5 are currently recruiting medical and non-medical volunteers to assist with COVID-19 vaccine clinics. SIGN UP ONLINE AT <u>https://ctresponds.ct.gov/</u>

