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Sent time: 05/04/2020 09:15:43 AM
Subject: [EXTERNAL] NJDOH Release of Funds: Sharing this Funding Opportunity with the HealthEASE Network
Attachments: [EXTERNAL] NJDOH Release of Funds: Sharing this Funding Opportunity with the HealthEASE Network

Sender: owner-healthyagingnj@listserv.state.nj.us
On-Behalf-Of: Dennis.McGowan@dhs.nj.gov
Subject: [EXTERNAL] NJDOH Release of Funds: Sharing this Funding Opportunity with the HealthEASE Network
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From: Dennis McGowan <Dennis.McGowan@dhs.nj.gov>
Sent time: 05/04/2020 09:08:51 AM
Subject: [EXTERNAL] NJDOH Release of Funds: Sharing this Funding Opportunity with the HealthEASE Network
Attachments: NJDOH_FY21_Diabetes RFA.pdf NJDOH_FY21_HDSP RFA.pdf

Greeting Partners!

The New Jersey Department of Health – Diabetes, Heart Disease & Stroke Prevention and Control Programs are excited to announce the availability of Fiscal Year (FY) 2021 funds to identify potential organizations to adopt strategies that focus on diabetes and cardiovascular disease prevention and management.

The project period is 12 months (July 1, 2020 – June 30, 2021).

Diabetes: Approximately \$230,000 is available for awards. The anticipated award date is June 8, 2020. **Note that the Letter of Intent (LOI) is due by 3:00PM on May 8, 2020 to Tifanie Selby at tifanie.selby@doh.nj.gov.**

Heart Disease: Approximately \$459,000 is available for awards. The anticipated award date is June 8, 2020. **Note that the Letter of Intent (LOI) is due by 3:00PM on May 8, 2020 to Anne Dulcio at anne.dulcio@doh.nj.gov.**

If you have any questions, please contact Tifanie Selby at tifanie.selby@doh.nj.gov or Anne Dulcio at anne.dulcio@doh.nj.gov.

Best Regards,

Tifanie Selby, MPH

Project Officer

New Jersey Department of Health

tifanie.selby@doh.nj.gov

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**New Jersey Department of Health
 Division of Community Health Services
 Community Health and Wellness Unit
 Diabetes Prevention and Control Program**

Request for Applications

Dates to Remember	
Request for Applications Released	May 1, 2020
Letter of Intent to Apply Due	May 8, 2020
Bidder's Conference (via Webinar)	May 11, 2020
Application Due	May 26, 2020
Notification of Intent to Fund	June 8, 2020
Start Date	July 1, 2020



PLEASE READ:

1. New Jersey Department of Health funding is available for six (6) categories of projects.
2. Organizations are permitted to apply for multiple categorical projects if they meet all eligible criteria. If applying for more than one project, separate Schedules A-C must be completed for each.
3. Letters of Intent (LOI) to apply for funding are due on May 8, 2020 by 3:00 pm. Please send LOIs, via email to: Tifanie Selby, MPH
tifanie.selby@doh.nj.gov
4. Once submitted, applicants will receive an invitation for the Bidder's Conference on May 11, 2020

I. Executive Summary

The New Jersey Department of Health (NJDOH) - Diabetes Prevention and Control Program (DPCP) seeks to fund evidence-based strategies to prevent and manage type-2 diabetes in adult, high-burden populations/communities across the state, contributing to improved health outcomes. High burden populations are defined as groups that are disproportionately affected by diabetes, prediabetes, high blood pressure, or high blood cholesterol, due to socioeconomic or other characteristics, including inadequate access to care, poor quality of care or low income. The projected outcomes for these projects include:

- Increased access to and coverage of ADA-recognized/AADE-accredited diabetes self-management education and support (DSMES) programs for people with diabetes.
- Increased access to and coverage of the National Diabetes Prevention Program (DPP) lifestyle change efforts for people with prediabetes.
- Decreased proportion of people with type 2 diabetes with an A1C > 9.
- Increased number of people with prediabetes enrolled in a CDC-recognized lifestyle change program who have achieved 5-7% weight loss.

The project and budget periods are 12 months (July 1, 2020 – June 30, 2021). Approximately \$230,000 is available for awards. The anticipated award date is June 8, 2020.

Multiple awards are available for the following six (6) categorical projects (detailed descriptions can be found in Section III, Funding Opportunity Description):

- A. **Diabetes Self-Management Education Capacity Building**: **Three (3) awards are available to increase the availability of American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education and support (DSMES) programs by starting a new program at their site.**
Eligibility: Entities must demonstrate an ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$10,000 per award

- B. Diabetes Self-Management Education via Telehealth: **Three (3) awards are available** for current American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) programs to promote alternative locations for delivery of DSME using telehealth or distance learning strategies.
Eligibility: Eligible organizations must demonstrate their ability and capacity to deliver an ADA-recognized/ ADCES-accredited DSME program in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$10,000 per award
- C. Diabetes Self-Management Education for Community Pharmacists: **Three (3) awards are available** for community-based pharmacies to start a new American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) program for patients diagnosed with diabetes.
Eligibility: New Jersey community-based pharmacists/pharmacies with the ability to reach priority populations in at least one of the project target areas ((Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$10,000 each
- D. Electronic Health Records Survey*: **One (1) award is available** for one (1) healthcare organization to complete a statewide, hospital-based electronic health record (EHR) survey to assess appropriateness for identifying patients with prediabetes and capacity for referral to CDC-recognized lifestyle change programs. The selected applicant must demonstrate knowledge of, and experience with, a variety of electronic health record systems.
Eligibility: New Jersey healthcare systems or practices who have NOT previously received funding from the NJDOH Diabetes Prevention and Control Program between 2014-2019 for this type activity.
Award Amount: \$50,000
**Any applicant that applies for this award, MUST ALSO apply for the Heart Disease RFA, Letter A funding opportunity.*
- E. Diabetes Prevention Program Capacity Building: **Three (3) awards are available** for current suppliers of diabetes self-management education and supports (DSMES) programs recognized by the American Diabetes Association (ADA)– or accredited by the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)–, to start a new CDC-recognized diabetes Prevention Program (DPP).
Eligibility: New Jersey organizations currently offering ADA/ADCES DSME with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$15,000 each
- F. Expanding Diabetes Prevention Programs: **Three (3) awards are available** for current suppliers of CDC-recognized (provisional, full, etc.) diabetes prevention programs (DPP), to expand the delivery of the program to include telehealth strategies to increase access to services in underserved areas.

Eligibility: Entities must demonstrate an ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$15,000 per award

II. Overview

The New Jersey Department of Health (NJDOH) - Diabetes Prevention and Control Program's (DPCP) approach to addressing diabetes in New Jersey is driven by population-based and evidence-based strategies to increase community-clinical linkages and clinical innovations, to support the prevention and management of diabetes. The overall goal of the DPCP is to reduce the burden of diabetes on New Jersey residents by implementing community-clinical linkages and health systems interventions that increase awareness of the disease, control disease-related complications, and increase quality improvement processes in health systems, in the delivery of services to residents with diabetes.

Funding for the proposed activities are supported by the "Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke" cooperative agreement (DP18-1815) issued by the U.S. Centers for Disease Control and Prevention (CDC), which is financed in part by 2018 Prevention and Public Health Funds. This 4.75-year grant is funded jointly by CDC's Division of Diabetes Translation and Division for Heart Disease and Stroke Prevention and supports state investments in implementing and evaluating evidence-based strategies to prevent and manage cardiovascular disease (CVD) and diabetes in high-burden populations/communities, contributing to improved health outcomes.

This RFA builds upon existing statewide implementation of cross-cutting approaches to promote health and prevent and control chronic diseases and their risk factors; along with recommendations set forth in the legislatively mandated Diabetes Action Plan. Recognizing the vital public health interest in reducing and more effectively treating chronic illnesses, the NJDOH will leverage healthcare systems and community-clinical linkages to focus efforts on addressing diabetes.

RFA Purpose

The purpose of this RFA is to select organizations to implement and evaluate evidence-based strategies to prevent and manage type 2 diabetes in high-burden populations/communities within New Jersey. The NJDOH targets communities that experience the highest prevalence of diabetes and lowest access to evidence-based programs to prevent and/or self-manage the disease. In New Jersey, prevalence rate estimates for obesity and diabetes are highest in the following counties: Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem.

Background

Diabetes is the 7th leading cause of death in the U.S.; the number one cause of kidney failure, lower-limb amputations and adult-onset blindness; and a leading cause of heart disease and stroke. A large body of evidence supports the effectiveness of DSMES in improving health outcomes (A1c, systolic blood pressure), lowering medication use, and decreasing hospitalizations and other health care costs for people with diabetes. However, DSMES utilization rates are low. In a study conducted by NJDOH staff, findings suggested that efforts to promote DSME should target participation barriers among patients who live in certain counties, have less education, who are without health care coverage, were diagnosed recently, visit a diabetes provider less often, or who identify as Hispanic or non-Hispanic other race (American Indian/Alaska Native, Asian, Native Hawaiian/Pacific Islander, other).

In New Jersey, diabetes was the sixth leading cause of death in 2017. According to the NJ Behavioral Risk Factor Surveillance System, age-adjusted diabetes prevalence estimates for the adult population in New Jersey increased from 8.1% in 2011 to 9.9% in 2017. The rising prevalence of diabetes is a public health concern, as diabetes is also known to be a major risk factor for heart disease and stroke as well as the leading cause of kidney failure, non-traumatic lower limb amputations, and new cases of blindness in the United States. According to published managed care data (CMS, 2016), it is suggested that a significant percentage of adults with diabetes have poorly controlled disease and are, therefore, at risk for the aforementioned complications. More specifically, the percentage of Medicaid individual-plan managed care enrollees during 2010-2011 who had poorly controlled diabetes ($A1c > 9$), ranged from 40% to 55% (CMS, 2016).

Many of the nation's leading health-care experts recommend a combination of clinical and community-based interventions to address the growing prevalence of chronic conditions such as diabetes and prediabetes. Diabetes self-management education and support (DSMES) is the cornerstone of care for all individuals with diabetes looking to achieve successful health-related outcomes. The Community Preventive Services Task Force recommends that DSMES be implemented in community gathering places based on evidence of effectiveness in improving glycemic control for adults with type 2 diabetes.

National standards for DSMES have been designed to define quality diabetes self-management education. These standards can be implemented in diverse settings to facilitate improvement in health care outcomes. Standards are continually reviewed and edited to reflect appropriateness, relevancy, and maintain a proven scientific basis. The DSMES process incorporates the needs, goals, and life experiences of the person with diabetes. The intent is to support informed decision-making, self-care behaviors, problem-solving and active collaboration with the diabetic patient's health care team to improve clinical outcomes, health status, and quality of life.

It is also important to highlight the public health significance of prediabetes. A CDC analyses of the 2009-2010 NHANES data suggests that only 11% of those with prediabetes were aware of their condition, with awareness being comparably low across all populations and levels of health care access. CDC also reports that 11% of adults with prediabetes, who do not make lifestyle changes, will go on to develop diabetes within a three-year period. Therefore, intervening with patients who have prediabetes to decrease the incidence of diabetes is critical to preventing the onset of the disease.

CDC recommends lifestyle intervention programs for the prevention of type 2 diabetes. Based on effective research by the National Institutes of Health, the National Diabetes Prevention Program is a lifestyle intervention program that helps participants learn and adopt healthy eating and physical activity habits proven to reduce the risk of developing Type 2 diabetes. The lifestyle change program is founded on the science of the Diabetes Prevention Program research study, and several translation studies that followed, which showed that making modest behavior changes helped participants with prediabetes lose 5% to 7% of their body weight and reduce their risk of developing type 2 diabetes by 58%. The program has been shown to be cost effective and can be cost saving. The 12-month group-based program consists of 16 one-hour, weekly sessions, followed by monthly sessions led by a trained lifestyle coach who facilitates a small group of people with similar goals. The program can be delivered in person or via telehealth and distance learning.

Telehealth is defined as the use of electronic information and telecommunication technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health and health administration. Technologies include video conferencing, the

internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications. Distance Learning programs are delivered 100% by trained Lifestyle Coaches via remote classroom or telehealth (i.e., conference or Skype) where the Lifestyle Coach is present in one location and participants are calling in or videoconferencing from another location is considered Distance Learning.

Healthy People 2020

This RFA addresses the following “Healthy People 2020” Diabetes Objectives:

- Increase the proportion of persons with diagnosed diabetes who receive formal diabetes education (D-14).
- Increase the proportion of persons at high risk for diabetes with prediabetes who report increasing their levels of physical activity (D-16.1), trying to lose weight (D-16.2), and reducing the amount of fat or calories in their diet (D-16.2).

Program Outcomes

The short-term outcomes of these projects are:

- Increased access to and coverage of ADA-recognized/AADE-accredited diabetes self-management education and support (DSMES) programs of people with diabetes.
- Increased access to and coverage for the National DPP lifestyle change program for people with prediabetes.

The long-term outcomes of this project are:

- Decreased proportion of people with diabetes with an A1C > 9.
- Increased number of people with prediabetes enrolled in a CDC-recognized lifestyle change program who have achieved 5-7% weight loss.

III. Funding Opportunity Description

DPCP is seeking to partner with organizations on the following projects:

- Diabetes Self-Management Education Capacity Building: **Three (3) awards** are available to increase the availability of diabetes self-management education and support (DSMES) programs. Applicants must complete an application to become an American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) program by starting a new program at their site. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as removing copays; identify convenient alternative locations; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured.

Eligibility: Special consideration will be given to those organizations that demonstrate their ability to reach populations most affected by diabetes in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$10,000 per award

Funding Restrictions: Funds cannot be used to pay for DSMES start-up costs or participants fees/copays; pay for personnel time to provide DSMES directly to individuals; or the purchase of equipment to support the delivery of DSMES via distance learning or telehealth.

- B. Diabetes Self-Management Education via Telehealth: **Three (3) awards** are available for current American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) to promote alternative locations for delivery of DSME using telehealth or distance learning strategies. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as removing copays; identify convenient alternative locations; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured.

Eligibility: Eligible organizations must demonstrate their ability and capacity to deliver an ADA-recognized/ ADCES-accredited DSME program in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$10,000 per award

Funding Restrictions: Funds cannot be used to pay for DSMES start-up costs or participant fees/copays; pay for personnel time to provide DSMES directly to individuals; or the purchase of equipment to support the delivery of DSMES via distance learning or telehealth.

- C. Diabetes Self-Management Education for Community Pharmacists: **Three (3) awards** are available for community-based pharmacies to start a new American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) program for patients diagnosed with diabetes. Applicants must include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to: African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured.

Eligibility: New Jersey community-based pharmacists with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$10,000 each

Funding Restrictions: Funds cannot be used to pay a pharmacy or pharmacist to provide direct patient care services.

- D. Electronic Health Records Survey*: One (1) award is available for one (1) healthcare organization to complete a statewide, hospital-based electronic health record (EHR) survey to assess

appropriateness for identifying patients with prediabetes and capacity for referral to CDC-recognized lifestyle change programs. The selected applicant must demonstrate knowledge of, and experience with, a variety of electronic health record systems.

Award Amount: \$50,000

Funding Restrictions: Funds cannot be used to provide incentives for hospital participation.

**Any applicant that applies for this award, they MUST ALSO apply for the Heart Disease RFA, Letter A award.*

- E. Diabetes Prevention Program Capacity Building: **Three (3) awards** are available for current suppliers of diabetes self-management education and supports (DSMES) programs recognized by the American Diabetes Association (ADA)– or accredited by the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)–, to adopt the CDC-recognized Diabetes Prevention Program (DPP). Applicants must review the CDC DPRP Standards and Operating Procedures and complete the capacity assessment (<https://www.cdc.gov/diabetes/prevention/pdf/capacity-assessment.pdf>) and submit the findings along with their application. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as providing transportation vouchers or childcare; providing food/farmers market vouchers; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured. Applicants **MUST** apply for DPP recognition status by CDC.

Eligibility: New Jersey organizations currently offering ADA/ADCES DSME with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$15,000 each

Funding Restrictions: Funds cannot be used to enroll participants in non-CDC recognized DPP; train master trainers; build new data entry systems for the collection and monitoring of program data; incentives*

**Incentives:* limited funds can be used to support incentives but must be approved by the NJDOH Project Officer prior to purchase.

- F. Expanding the Diabetes Prevention Program: **Three (3) awards** are available for current CDC-recognized (provisional, full, etc.) diabetes prevention programs (DPP) to expand the delivery of the program to include telehealth strategies to improve access to services in underserved areas. Applicants should carefully review the CDC DPRP Standards and Operating Procedures. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as providing transportation vouchers or childcare; providing food/farmers market vouchers; cover participant enrollment fees; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos;

Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured. Applicants MUST apply for DPP recognition status by CDC.

Eligibility: New Jersey organizations currently offering ADA/ADCES DSME with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$15,000 each

Funding Restrictions: Participant materials, skype and zoom are all considered program. The sum total of these costs, together with any other program delivery costs, cannot exceed \$500/person. The cost of technologies like skype or zoom may be allocated across the number of enrolled participants (e.g., a skype license may cost \$200, which would result in a cost of \$20/person for a cohort of 10 participants.) That \$20 would be added to other delivery costs such as the coach salary and rental space to not exceed a total of \$500/person enrolled. Applicants may subcontract with a recognized online organization (e.g., a CDC-recognized DPP site could contract with a national online delivery organization like Omada and then offer participants a choice). Funds cannot be used to purchase equipment; enroll participants in non-CDC recognized DPP; train master trainers; build new data entry systems for the collection and monitoring of program data; nor to purchase incentives*

**Incentives:* Limited funds can be used to support incentives but must be approved by the NJDOH Project Officer prior to purchase.

Proof of Eligibility

Eligible applicants must be a municipal/county government, local health department, hospital, Federally Qualified Health Center (FQHC), university, or non-profit organization with 501(c)3 status located in, or currently providing services in, priority counties in New Jersey.

Memorandum of Understanding/Memorandum of Agreement (MOU/MOA) and Letters of Support (LOS) are required and will be a criterion used in evaluating the application. The MOU/MOA should describe the following elements:

- Identify senior organizational leaders within both agencies to provide leadership support and implementation oversight.
- Demonstrate a history of providing effective, culturally competent, and linguistically appropriate health-related services within your target area.

Applicants are required to submit financial documents, per each year of the grant cycle, in accordance to the NJDOH Terms and Conditions. Failure to provide required documentation by the date of application submission will result in the application being deemed non-responsive. Please attach the requested documents as a PDF file to your application through the NJDOH System for Administering Grants Electronically (SAGE):

- a. Valid Internal Revenue Services (IRS) 501(c) (3) tax exempt status.
- b. Annual Audit Report (most recent).
- c. Tax Clearance Certificate is to be submitted. The application for Tax Clearance can be obtained at <http://www.state.nj.us/treasury/taxation/busasst.shtml> (fee of \$75.00 or \$200.00).

- d. NJ Charities Registration- If your organization is registered with the NJ Charities Registration then each year a “Letter of Compliance” from the Division of Consumer Affairs must be obtained. All registered charities must renew their registration yearly. For more information contact and forms can be found at www.state.nj.us/lps/ca/charity/charfrm.htm

Funding Information

Funding in the first and future years is expressly dependent upon the availability of funds to the Department appropriated by the State Legislature from state or federal revenue or such funding sources as may be applicable. The Department shall not be held liable for any breach of any award because of the absence of available funding appropriations.

The method of payment will be cost reimbursement unless a waiver is submitted detailing the cash flow needs, and the waiver is accepted by the Department.

Availability of Funds

New Jersey State grant funds available for this initiative are contingent upon federal appropriations. Approximately \$230,000 is available for awards during the 12-month award (July 1, 2020–June 30, 2021). Funding under a grant is expressly dependent upon the availability of funds to the Department appropriated by federal revenue or such other funding sources as may be applicable. The Department shall not be held liable for any breach of this agreement because of the absence of available funding appropriations. The grant award will further be contingent upon the fiscal and programmatic completeness of your application, as well as the satisfactory fulfillment of the grant objectives.

Applicants may apply to more than one project. If applying for more than one project, separate Schedules A-C must be completed for each.

IV. Application and Submission Information

Applicants must submit a detailed project narrative, describing how the applicant plans to implement activities supporting the required objectives. DOH-DPCP will provide feedback and technical assistance to awardees to finalize work plan activities post-award. The narrative should not exceed 12 pages (single spaced, Calibri 12 point, 1-inch margins, and numbered pages). Content beyond 12 pages will not be reviewed.

The project narrative must include all the bolded headers outlined under this section. It should be succinct, self-explanatory and organized in the order outlined in this section, so that reviewers can understand the proposed project. The description should address activities to be conducted over the entire project period. Include a logic model and work plan to support your application.

If applying for more than one project, a complete and detailed project narrative must be submitted for each.

1. Project Abstract Summary (Maximum of 2 paragraphs) – The project abstract should be a self-contained, brief description of the proposed project to include the purpose and outcomes. This summary must not include any proprietary/confidential information.

2. Needs Assessment – For your target population, the applicant must describe the core information to understand the burden of diabetes in your county and how the proposed project will address diabetes and pre-diabetes.

- **Target Populations:** Applicants should ensure that data, including burden data, are used to identify strategies and/or communities within their counties that have poor environments and/or are disproportionately affected by diabetes. Disparities by race, ethnicity, gender identity, sexual orientation, geography, socioeconomic status, disability status, primary language, health literacy, and other relevant dimensions (e.g., tribal communities) should be considered. The applicant should address how they will be inclusive of specific populations that are disproportionately affected by diabetes.

3. Organizational Capacity – Applicants must describe their organizational capacity to achieve the project objectives. When applicants are describing organizational capacity, consideration should be given to:

- Minimizing duplication of effort.
- Coordinating efforts with other federally and privately funded programs within their service area to leverage resources and maximize reach and impact. The applicant should describe core project management to execute the award, including the roles and responsibilities of project staff.
- The applicant should specify who will have day-to-day responsibility for key tasks such as: leadership of the project; monitoring of the project’s on-going progress; preparation of reports; program evaluation; and communication with partners and DOH-DPCP.

The applicant should provide information about any contractual organization(s) that will have a significant role(s) in implementing program strategies and achieving project outcomes.

- The applicant should also describe how any consultants and/or partner organizations will contribute to achieving project outcomes.

The applicant must also demonstrate readiness to implement evidence-based strategies, including the ability of applicants to describe the following:

- Established partnerships with groups/organizations relevant to the RFA objectives.
- Prior experience working with health care providers to improve health outcomes (if appropriate).
- Proven ability to collect and use data to demonstrate impact.
- Experience with planning and implementing programs.

4. Project Objectives – The applicant must identify SMART objectives that address the needs of the intervention described in the funding category.

5. Methods/Strategies – The applicant must provide a clear and concise description of the project strategy or strategies the applicant intends to use to meet the required outcomes. As applicable, applicants should use and explicitly reference the CDC’s *Guide to Community Preventive Services (The Community Guide)* as a source of evidence-based program strategies whenever possible. In addition, applicants may propose additional program strategies to support the outcomes. For each project, discuss how your strategy will impact the following:

- Address social determinants of health to remove barriers to participation for high-burden populations.
- Increase access and participation in ADA-recognized/ Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited programs by people with diabetes.

- Decrease the proportion of people with diabetes with an A1C>9.
- A decrease in the proportion of New Jersey residents with diabetes with an A1C less than 9.
- Increase enrollment in CDC-recognized organizations delivering National Diabetes Prevention Program (DPP) lifestyle change programs.
- Increase the number of people with prediabetes enrolled in a CDC-recognized lifestyle change program who achieve a 5-7% weight loss.
- Increase participation in Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited programs by people with diabetes.
- Increase access to and coverage of Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited programs by people with diabetes.
- Increase the use of pharmacist patient care processes that promote medication management for people with diabetes.
- Increase access to and coverage of the DPP lifestyle change program for people with prediabetes.
- Increase community-clinical linkages that facilitate referrals and provide support to enroll and retain participants in NDPP.

6. Plan for Sustainability – The applicant must describe specific strategy/ strategies that can be utilized after the expiration of grant. Include strategies that will likely lead to continued programming and to build scope of future work.

7. Evaluation – Eligible applicants are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of this RFA. Measures of effectiveness must relate to the performance goals stated in the “Purpose” section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application. The plan must:

- Describe how evaluation findings will be used for continuous program and quality improvement.
- Describe how evaluation and performance measurement will contribute to the understanding of the advantages and challenges of working collaboratively to achieve positive diabetes health outcomes.
- Describe how efforts to increase participation in DSMES/DPP programs by people with or at risk for diabetes will be measured.
- Describe the type of evaluations to be conducted (i.e. process and/or outcome). Describe potentially available data sources.

Awardees will be required to collect and report outcome performance measures to DOH-DPCP quarterly.

8. Detailed Budget – Applicants must provide a detailed budget describing how potential funds will be allocated and expended. The budget should reflect work that will be completed during the planning phase and the development of a work plan to be executed during the implementation phase. If applying for more than one project, separate Schedules A-C must be completed for each.

V. Application Review Information

In scoring applications, eligible applications will be evaluated against the following criteria during review:

- 1. Project Abstract Summary (0 points)** – While the Abstract receives no points, it is a required element for evaluation by the RFA reviewers.
- 2. Needs Assessment (10 points)** – The extent to which the applicant has demonstrated an understanding of the burden of diabetes among its target residents, particularly the impact on disparate populations, and the challenges of and opportunities for promoting diabetes prevention and self-management programs.
- 3. Organizational Capacity (20 points)** – The extent to which the applicant has demonstrated readiness to implement strategies supporting the project objectives.
- 4. Project Objectives (30 points)** – Extent to which objectives are specific, measurable, achievable, realistic and time-bound (SMART); and the extent to which stated objectives will address the needs of disparate populations.
- 5. Methods/Strategies (15 points)** – Extent to which interventions address target populations and are reflected in proposed plan.
- 6. Plan for Sustainability (5 points)** – The extent to which the proposed plan is feasible, reasonable and achievable.
- 7. Evaluation (10 points)** – The extent to which the applicant has described how the project will be measured and reported.
- 8. Detailed Budget (10 points)** – Extent to which budget costs are specific and tied to project objectives and planned interventions as outlined in the “Project Objectives” section.

Review and Selection Process

Applications will be screened for completeness and eligibility as specified in this RFA. Only those proposals deemed to be eligible, complete and in compliance will be sent to the RFA review committee. An RFA review committee will review the proposals. Proposals will be rated on criteria, which appear in the “Review Criteria” section of this document. The DPCP reserves the right to render final decisions on the awarding of funds under this RFA.

- a. Phase I Review:** All eligible applications will be initially reviewed for completeness by the DPCP staff. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance to Phase II review. These applicants will be notified, via email, that the application did not meet eligibility requirements.
- b. Phase II Review:** An objective review panel will evaluate complete and responsive applications according to the criteria listed in the criteria section of the RFA. Each application will be reviewed and scored by two (2) reviewers. Scored applications will be ranked by the entire review panel and award recommendations will be presented to DOH-DPCP.
- c. Phase III Review:** DPCP staff will review all recommendations and will make the final decisions for awards. In addition, the following factors may affect the funding decision:

- DOH may fund out of rank order to achieve geographic and/or programmatic diversity.

Applications must include:

1. A detailed budget and work plan with timetable. The timetable should reflect the planning and implementation phases. If applying for more than one project, separate budgets must be completed for each.
2. A letter of support from the agency head on agency letterhead.
3. Resume/s for all staff listed in the budget for this grant.
4. Any required documents such as agency Travel Policy, Salary Policy, Affirmative Action Policy, Copy of Interest Bearing Account, Proof of Non-profit Status (if applicable), NJ Charities Registration (if applicable), Consultant Agreements (if applicable), Plan for Sustainability, annual Audit Report, Statement of Total Gross Revenue, Application for Tax Clearance.

VI. Other Information

Use of Funds

Upon award, the recipient shall ensure that funds are immediately accessible and used for activities described in approved work plans. Funds must be used as follows:

- No more than 75% of the total award can be allocated for salary and fringe or consultant fees for dedicated staff. As a percentage of salary, the fringe rate cannot exceed 44.3%.
- No less than 25% of the total grant award must be used for programmatic funding.

Funds may be used to support:

- In state travel only and related expenses for project staff to carry out specified duties and to attend mandatory meetings and trainings.
- Costs associated with providing DPP to participants.

Funding Restrictions:

- Recipient may not use funds for purchasing vehicles.
- Recipient may not use funds for travel outside of the State of New Jersey.
- Recipient may not use funds for research.
- Recipient may not use funds for construction.
- Recipient may not use funds for interest on loans for the acquisition and/or modernization of an existing building.
- Recipient may only expend funds for reasonable program purposes, including personnel, travel, supplies and services.
- Recipient may not use funds for tuition reimbursement.

Anticipated Announcement and Award Dates:

- Successful applicants will anticipate notice of funding on or about June 8, 2020 with a start date of July 1, 2020.
- DOH encourages inquiries concerning this announcement. For programmatic technical assistance, contact:

Tifanie Selby, MPH

Project Officer, Diabetes Prevention and Control Program

Tifanie.Selby@doh.nj.gov



**New Jersey Department of Health
 Division of Community Health Services
 Community Health and Wellness Unit
 Heart Disease & Stroke Prevention Program**

Request for Applications

Dates to Remember	
Request for Applications Released	May 1, 2020
Letter of Intent to Apply Due	May 8, 2020
Bidder's Conference (via Webinar)	May 11, 2020
Application Due	May 26, 2020
Notification of Intent to Fund	June 8, 2020
Start Date	July 1, 2020



PLEASE READ:

1. **New Jersey Department of Health funding is available for six (6) categories of projects.**
2. **Organizations are permitted to apply for multiple categorial projects if they meet all eligible criteria. If applying for more than one project, separate Schedules A-C must be completed for each.**
3. **Letters of Intent (LOI) to apply for funding are due on May 8, 2020 by 3:00 pm. Please send LOIs, via email to: Anne Dulcio, MPH**
anne.dulcio@doh.nj.gov
4. **Once submitted, applicants will receive an invitation for the Bidder’s Conference on May 11, 2020.**

I. EXECUTIVE SUMMARY

The New Jersey Department of Health- Heart Disease and Stroke Prevention Program (NJDOH- HDSPP) announces the availability of Fiscal Year (FY) 2021 funds in the amount of \$459,109 for organizations to adopt strategies that focus on cardiovascular disease prevention and management.

The project period is 12 months (July 1, 2020 – June 30, 2021). The anticipated award date is June 8, 2020. Multiple awards are available for the following six (6) projects (detailed descriptions can be found in Section III):

- A. Electronic Health Records Survey: **One (1) award** is available **at \$50,000** to complete a statewide, hospital-based electronic health record (EHR) survey to improve provider and patient health outcomes for the detection, treatment, management of undiagnosed hypertension, prediabetes, and capacity for referral to CDC-recognized lifestyle change programs. Eligibility: New Jersey healthcare systems or practices who have NOT previously received funding from the NJDOH Heart Disease & Stroke Prevention Program between 2014-2019 for this type activity. Eligible healthcare organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden Gloucester, Ocean and Essex County). **Any applicant that applies for this award, MUST ALSO apply for the Diabetes RFA, Letter D funding opportunity (Electronic Health Records Survey).*
- B. Quality Measurement of Healthcare Disparities: **One (1) award** is available **at \$65,000** to promote the adoption of evidence-based quality measurements at the provider level, using dashboards to monitor healthcare disparities and implement activities to eliminate the

identified disparities. Eligibility: New Jersey healthcare organizations with multisite adult primary care centers that have EHR capacity. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden Gloucester, Ocean and Essex counties).

- C. Promoting Team Base Care to Improve High Blood Pressure Control: **Two (2) awards** are available **at \$43,554.50 each** to support engagement of non-physician team members in hypertension and cholesterol management in clinical settings. Eligibility: New Jersey healthcare systems with physician practices, hospitals and federally qualified health centers. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden Gloucester, Ocean and Essex counties).
- D. Medication Therapy Management: **Two (2) awards** are available - **(1) at \$33,000** for continuing education **and (1) at \$50,000** for implementation activities to promote the adoption of medication therapy management (MTM) between pharmacist and physicians for the purpose of managing high blood pressure, high blood cholesterol, and lifestyle modifications in adult populations. Eligibility- New Jersey organization with a pharmacy subject-matter expert (PSME) who has NOT previously received funding from the NJDOH Heart Disease and Stroke Program between 2018-2020 for this strategy. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties).
- E. Increasing Patient Self- Measured Blood Pressure Monitoring: **Five (5) awards** are available – **(1) at \$44,000** and **(4) at \$10,000 each** to facilitate the use of self-measured blood pressure monitoring (SMBP) with clinical support among adults with hypertension. Eligibility: New Jersey healthcare organizations with adult primary care populations or community organizations affiliated with a healthcare system who have NOT previously received funding from the NJDOH Heart Disease and Stroke Program between 2018-2020 for this strategy. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties).
- F. Improving Heart Disease Management for Women: **Three (3) awards** will be available **at \$30,000** each to improve health outcomes for women at risk for heart disease and stroke. Eligibility: Federal Qualified Health Center (FQHC) sites, primary care practices, regional planning collaboratives, and accountable care organizations. Eligible organizations must demonstrate reach in at least one of the following high burdened hypertensive target areas: Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties.

II. OVERVIEW

The Heart Disease and Stroke Prevention Program’s (HDSPP) goal is to reduce the burden of high blood pressure among New Jersey residents by implementing health systems interventions that increase awareness, promote reporting, and increase quality improvement processes.

In 2018, The New Jersey Department of Health was awarded a multi-year grant - “Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke” cooperative agreement (DP18-1815) issued by the U. S. Centers for Disease Control and Prevention

(CDC), to support state investments in implementing and evaluating evidence-based strategies to prevent and manage cardiovascular disease (CVD) and diabetes in high-burdened populations/communities, contributing to improved health outcomes.

This RFA builds upon existing statewide implementation of cross-cutting approaches to promote health and prevent and control chronic diseases and their risk factors. Recognizing the vital public health interest in reducing and more effectively treating chronic illnesses, the Department of Health will leverage healthcare systems and community-clinical linkages to focus efforts on addressing diabetes and cardiovascular disease simultaneously.

Program Purpose

The purpose of this grant is to promote the use of evidence-based strategies to prevent and manage cardiovascular disease in high burden populations/ communities within the state. This will be accomplished by providing funding to organizations to implement systems- level changes that contribute to improved health outcomes.

In New Jersey, prevalence rate estimates for hypertension are highest in the southern, rural counties of the state (Camden, Gloucester, Salem, Cumberland, Atlantic Cape May and Ocean) and the northern, urban county of Essex. These areas represent New Jersey's high burden populations for risk factors leading to heart disease and stroke.

Background

Heart disease is the leading cause of death, and stroke is the 5th leading cause of death, in the U.S. Cardiovascular Disease (CVD), including heart disease, stroke, and other vascular diseases, accounts for >800 000, or about 1 in 3, deaths/year, and around 1 in 5 who die from CVD are younger than 65 years. CVD is costly, with an estimated 1 in 7 health care dollars spent on CVD (about 15%). The economic burden placed on the health care system resulting from cardiovascular disease is staggering. Annual direct and overall costs resulting from CVD are estimated at \$273 billion and \$444 billion, respectively and are increasing every year. Primary risk factors such as hypertension (HTN)/high blood pressure (HBP) and diabetes are significant contributors of cardiovascular disease.

Hypertension is a primary risk factor for CVD. While control of hypertension, reflective of individual and system-level improvements, has been increasing, less than half of those with hypertension are controlled. Interventions to support patient engagement, prevention, and health system improvements need to be maximized to improve hypertension management. High blood cholesterol is another primary risk factor for CVD. Several modifiable health behaviors can lower cholesterol, including eating a healthy diet, losing weight, and being physically active. Behavior modification improvements and health systems advances are needed to reduce the need for treatment and close the gap in treatment across the population. Health system interventions may include use of team-based care and community health workers, electronic health record alignment with national guidelines, improved medication adherence, and interventions supporting better continuity of care across health care settings.

About 75 million American adults (29%) have HBP; only about half of American adults (52%) have their blood pressure under control. High blood pressure costs the nation \$46 billion each year in direct and indirect costs.

Among New Jersey residents, heart disease and stroke are the first and fifth leading causes of death respectively. In 2017, a total of 18,842 residents died from heart disease and 3,475 died from stroke.

HTN is a common chronic condition that increases the risk for heart disease and stroke. The CDC reports that reducing the average systolic blood pressure by only 12-13 mmHg could reduce deaths from cardiovascular disease by 25%. Despite this, only about half of the people with high blood pressure have the condition under control. In New Jersey, approximately 30% of adults report ever being told they had HTN.

In NJ, diabetes is the sixth leading cause of death. The number of adults who have diabetes has been increasing over time. Controlling diabetes decreases the risk for diabetes-related complications including end-stage renal disease and blindness. These data show the burden of these two chronic diseases continue to rise. Preventing and controlling HBP and diabetes require strategies that foster systems-level changes in health care systems.

Data Source: *Behavioral Risk Factor Survey 2017, Center for Health Statistics, New Jersey Department of Health*, <http://www.state.nj.us/health/chs/njbrfs/>

Healthy People 2020

This RFA addresses the following “Healthy People 2020” Cardiovascular Disease Objectives:

- HDS-2: Reduce coronary heart disease deaths.
- HDS-3: Reduce stroke deaths.
- HDS-7: Reduce the proportion of adults with high total blood cholesterol levels.
- HDS-8: Reduce the mean total blood cholesterol levels among adults.
- HDS-12: Increase the proportion of adults with hypertension whose blood pressure is under control.

Program Outcomes

The short-term outcomes of this project are:

- Increased reporting, monitoring, and tracking of clinical data for improved identification, management, and treatment of patients with high blood pressure and high blood cholesterol.
- Increased use of and adherence to evidence-based guidelines and policies related to team-based care for patients with high blood pressure and high blood cholesterol
- Increased community clinical links that support systematic referrals, self-management, and lifestyle change for patients with high blood pressure and high blood cholesterol

The long-term outcomes of this project are:

- Increased control among adults with known high blood pressure and high blood cholesterol

III. FUNDING OPPORTUNITY DESCRIPTION

HDSPP is seeking to partner with organizations on the following interventions:

A. Electronic Health Records Survey

One (1) award is available for one (1) healthcare organization to complete a statewide, hospital-based electronic health record (EHR) survey to improve provider and patient health outcomes for the detection, treatment, management of undiagnosed hypertension, prediabetes, and capacity for referral to CDC-recognized lifestyle change programs. The selected applicant must demonstrate knowledge of, and experience with, a variety of electronic health record systems. Eligibility: New Jersey healthcare

systems or practices who have NOT previously received funding from the NJDOH Heart Disease & Stroke Prevention Program between 2014-2019 for this type activity. One (1) award will be funded at \$50,000.

**Any applicant that applies for this award, MUST ALSO apply for the Diabetes RFA, Letter D award (Electronic Health Records Survey).*

B. Quality Measurement of Healthcare Disparities

One (1) healthcare organization with 3 or more sites that can demonstrate reach within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties to promote the adoption of evidence-based quality measurement at the provider level, using dashboards to monitor healthcare disparities and implement activities to eliminate the identified disparities. Successful applicants must demonstrate electronic health recording (EHR) capacity to develop quality measurement at the provider level. The projected result is to increase the number and percentage of clinics or providers that use standardized quality measures to track differences in BP control and cholesterol management in priority populations compared to the overall population. One (1) award will be funded at \$65,000.

C. Promoting Team Base Care to Improve High Blood Pressure Control

Two (2) healthcare organizations within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will support engagement of non-physician team members: nurses, nurse practitioners, pharmacists, nutritionists, physical therapists, social workers and community health workers in hypertension and cholesterol management in clinical settings. Team members within healthcare systems will assess their team base care model and identify areas to increase hypertension and cholesterol management. Team members will implement new or enhanced team base approaches to address these areas to increase blood pressure control and cholesterol management. Two (2) awards will be funded at \$43, 554.50 each.

D. Medication Therapy Management (MTM)

One (1) organization with a pharmacy subject-matter expert (PSME) will conduct a minimum of 3 trainings for pharmacists and primary care providers (a minimum of 15 participants per discipline each training) on Chronic Care Management with a MTM component within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties. This training would focus largely on MTM, both the service itself as well as logistical considerations such as billing and partnering with other providers. One hour of these six hours of training would focus specifically on the pathway for pharmacists to move towards CCM. One (1) award will be funded at \$33,000.

One (1) organization with a pharmacy subject-matter expert (PSME) will initiate a minimum of 4 MTM collaborative agreements and collect data to track specific MTM services offered and provided, impact of MTM on outcomes and satisfaction of the physician practice and pharmacy with the agreement and results for adult patients with diabetes, high blood pressure, high blood cholesterol within high burden areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties. The pharmacist and physicians will provide services such as pharmacist medication reviews, health education, health counseling using motivational interviewing, and follow-up calls at scheduled intervals. One (1) award will be funded at \$50,000.

The projected result of both projects is to increase the number and percentage of pharmacists engaged in the practice of MTM to promote medication self-management and lifestyle modification for high blood pressure and high blood cholesterol.

E. Increasing Patient Self- Measured Blood Pressure Monitoring (SMBP)

One (1) healthcare organization within a high burdened area including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will facilitate the use of SMBP with clinical support (web-based, telephone-based, or one-on-one counseling) among adults with hypertension. Organizations must use an evidence-based SMBP program and demonstrate EHR system capacity to administer web-based or telephonic support tools for patients. One (1) award will be funded at \$44,000.

Four (4) community organizations affiliated with a healthcare system within a high burdened area including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will facilitate the use of SMBP with clinical support (web-based, telephone-based, or one-on-one counseling) among adults with hypertension. Organizations must use an evidence based SMBP program (i.e. HHA-BPSM or Y-BPSM) and demonstrate EHR system capacity to administer web-based or telephonic support tools for patients. Four (4) awards will be funded at \$10,000 each.

The projected result of both projects is to increase the number and percentage of patients within healthcare systems with policies or systems to encourage SMBP with clinical support.

F. Improving Heart Disease Management for Women

Three (3) Federal Qualified Health Center (FQHC) sites with healthcare systems within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will conduct an in-depth analysis of protocols currently used for the detection and management of heart disease and identify possible gender disparities. Quality improvement activities will be implemented, monitored and tracked to improve health outcomes of women at risk for heart disease and stroke. Three (3) awards will be funded at \$30,000 each.

Proof of Eligibility

Eligible applicants must be a local health department, hospital, Federally Qualified Health Center (FQHC), university, or non-profit organization with 501(c)3 status located in, or currently providing services in, New Jersey.

Eligible applicants must also meet the following criteria:

- Applicants must provide evidence of their partnerships with healthcare providers. If formal agreements do not exist specifically for this purpose, then applicants must outline a specific plan and provide letters of support that demonstrate the agency capacity and healthcare providers' willingness to participate in this initiative.

Memorandum of Understanding/Memorandum of Agreement (MOU/MOA) and Letters of Support (LOS) are required and will be a criterion used in evaluating the application. The MOU/MOA should describe the following elements:

- Identify senior organizational leaders within both agencies to provide leadership support and implementation oversight.
- Demonstrate a history of providing effective, culturally competent, and linguistically appropriate health-related services within your target area.

Applicants are required to submit financial documents, per each year of the grant cycle, in accordance to the NJDOH Terms and Conditions. Failure to provide required documentation by the date of application submission will result in the application being deemed non-responsive. Please attach the requested documents as a PDF file to your application through the NJDOH System for Administering Grants Electronically (SAGE):

- a. Valid Internal Revenue Services (IRS) 501(c) (3) tax exempt status.
- b. Annual Audit Report (most current)
- c. Tax Clearance Certificate is to be submitted. Application for Tax Clearance can be obtained at <http://www.state.nj.us/treasury/taxation/busasst.shtml> (fee of \$75.00 or \$200.00).
- d. NJ Charities Registration- If your organization is registered with the NJ Charities Registration then each year a "Letter of Compliance" from the Division of Consumer Affairs must be obtained. All registered charities must renew their registration yearly. For more information contact and forms can be found at www.state.nj.us/lps/ca/charity/charfrm.htm

Funding Information

Funding in the first and future years is expressly dependent upon the availability of funds to the Department appropriated by the State Legislature from state or federal revenue or such funding sources as may be applicable. The Department shall not be held liable for any breach of any award because of the absence of available funding appropriations.

The method of payment will be cost reimbursement unless a waiver is submitted detailing the cash flow needs, and the waiver is accepted by the Department.

Availability of Funds

New Jersey State grant funds available for this initiative are contingent upon federal appropriations. Approximately \$459,109 is anticipated for the 12-month project period (July 1, 2020 – June 30, 2021). Funding under a grant is expressly dependent upon the availability of funds to the Department appropriated by federal revenue or such other funding sources as may be applicable. The Department shall not be held liable for any breach of this agreement because of the absence of available funding appropriations. The grant award will further be contingent upon the fiscal and programmatic completeness of your application, as well as the satisfactory fulfillment of the grant objectives.

Applicants may apply to more than one project. If applying for more than one project, separate Schedules A-C must be completed for each.

G. APPLICATION & SUBMISSION INFORMATION

This is a 12-month grant, with a project period of July 1, 2020–June 30, 2021.

Applicants must submit a detailed project narrative, describing how the applicant plans to implement activities supporting the required objectives. DOH-HDSP will provide feedback and technical assistance to awardees to finalize work plan activities post-award. The narrative should not exceed 12 pages (single spaced, Calibri 12 point, 1-inch margins, and numbered pages). Content beyond 12 pages will not be reviewed.

The project narrative must include all the bolded headers outlined under this section. It should be succinct, self-explanatory and organized in the order outlined in this section, so that reviewers can understand the proposed project. The description should address activities to be conducted over the entire project period. Include a logic model and work plan to justify your application.

If applying for more than one funding category, be sure to complete a detailed project narrative for each.

1. Project Abstract Summary (Maximum of 2 paragraphs) – The project abstract should be a self-contained, brief description of the proposed project to include the purpose and outcomes. This summary must not include any proprietary/confidential information.

2. Needs Assessment – For your target population, the applicant must describe the core information to understand the burden of cardiovascular disease in your county and how the proposed project will address high blood pressure with systems-level approaches.

- Target Populations: Applicants should ensure that data, including burden data, are used to identify strategies and/or communities within their counties that have poor environments and/or are disproportionately affected by cardiovascular disease. Disparities by race, ethnicity, gender identity, sexual orientation, geography, socioeconomic status, disability status, primary language, health literacy, and other relevant dimensions (e.g., tribal communities) should be considered.

3. Organizational Capacity – Applicants must describe their organizational capacity to achieve the project objectives. When applicants are describing organizational capacity, consideration should be given to:

- Minimizing duplication of effort.
- Coordinating efforts with other federally and privately funded programs within their county to leverage resources and maximize reach and impact. The applicant should describe core project management to execute the award, including the roles and responsibilities of project staff.
- The applicant should specify who will have day-to-day responsibility for key tasks such as: leadership of the project; monitoring of the project’s on-going progress; preparation of reports; program evaluation; and communication with partners and DOH-HDSPP.
- The applicant should provide information about any contractual organization(s) that will have a significant role(s) in implementing program strategies and achieving project outcomes.
- The applicant should also describe how any consultants and/or partners organizations will contribute to achieving project outcomes.
- The applicant must also demonstrate readiness to implement evidence-based strategies, including the ability of applicants to describe the following:
 - Established partnerships with groups/organizations relevant to the RFA objectives.
 - Prior experience working with health care providers to improve health outcomes (Categories B and C).
 - Proven ability to collect and use data to demonstrate impact.
 - Experience with planning and implementing programs.

4. Project Objectives – The applicant must identify SMART objectives that address the needs of the intervention described in the funding category.

5. Methods/Strategies – The applicant must provide a clear and concise description of the project strategy or strategies the applicant intends to use to meet the required outcomes. As applicable, applicants should use and explicitly reference *The Community Guide* as a source of evidence-based program strategies whenever possible. In addition, applicants may propose additional program strategies to support the outcomes. For each project, discuss how your strategy will impact the following:

- Increased reporting, monitoring, and tracking of clinical data for improved identification, management, and treatment of patients with high blood pressure and high blood cholesterol

- Increased use of and adherence to evidence-based guidelines and policies related to team-based care for patients with high blood pressure and high blood cholesterol
- Increased community clinical links that support systematic referrals, self-management, and lifestyle change for patients with high blood pressure and high blood cholesterol
- Increased medication adherence among patients with high blood pressure and high blood cholesterol
- Increased engagement in self-management among patients with high blood pressure and high blood cholesterol
- Increased participation in evidence-based lifestyle interventions among patients with high blood pressure and high blood cholesterol
- Increased control among adults with known high blood pressure and high blood cholesterol

6. Plan for Sustainability – The applicant must describe specific strategy/strategies that can be utilized after the expiration of grant. Include strategies that will likely lead to continued programming and to build scope of future work.

7. Evaluation – Eligible applicants are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of this RFA. Measures of effectiveness must relate to the performance goals stated in the “Purpose” section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application. The plan must:

- Describe how evaluation findings will be used for continuous program and quality improvement.
- Describe how evaluation and performance measurement will contribute to the understanding of the advantages and challenges of working collaboratively to achieve positive cardiovascular health outcomes.
- Describe the type of evaluations to be conducted (i.e. process and/or outcome). Describe potentially available data sources.

Awardees will be required to collect and report outcome performance measures to DOH-HDSPP quarterly.

8. Detailed Budget – Applicants must provide a detailed budget describing how potential funds will be allocated and expended. The budget should reflect work that will be completed during the planning phase and the development of a work plan to be executed during the implementation phase. If applying for more than one project, separate Schedules A-C must be completed for each.

H. APPLICATION REVIEW INFORMATION

In scoring applications, eligible applications will be evaluated against the following criteria during review:

1. Project Abstract Summary (0 points) – While the Abstract receives no points, it is a required element for evaluation by the RFA reviewers.

2. Needs Assessment (10 points) – The extent to which the applicant has demonstrated an understanding of (1) the burden of cardiovascular disease among its target residents, particularly the impact on disparate populations.

3. Organizational Capacity (20 points) – The extent to which the applicant has demonstrated readiness to implement strategies supporting the project objectives.

4. Project Objectives (30 points) – Extent to which objectives are specific, measurable, achievable, realistic and time-bound (SMART); and the extent to which stated objectives will address the needs disparate populations.

5. Methods/Strategies (15 points) – Extent to which interventions address target populations and are reflected in proposed plan.

6. Plan for Sustainability (5 points) – The extent to which the proposed plan is feasible, reasonable and achievable.

7. Evaluation (10 points) – The extent to which the applicant has described how the project will be measured and reported.

8. Detailed Budget (10 points) – Extent to which budget costs are specific and tied to project objectives and planned interventions as outlined in the “Project Objectives” section.

Review and Selection Process

Applications will be screened for completeness and eligibility as specified in this RFA. Only those proposals deemed to be eligible, complete and in compliance will be sent to the RFA review committee. An RFA review committee will review the proposals. Proposals will be rated on criteria, which appear in the “Review Criteria” section of this document. The HDSPP reserves the right to render final decisions on the awarding of funds under this RFA.

a. Phase I Review: All eligible applications will be initially reviewed for completeness by the DPCP staff. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance to Phase II review. These applicants will be notified, via email, that the application did not meet eligibility requirements.

b. Phase II Review: An objective review panel will evaluate complete and responsive applications according to the criteria listed in the criteria section of the RFA. Each application will be reviewed and scored by two (2) reviewers. Scored applications will be ranked by the entire review panel and award recommendations will be presented to DOH-HDSPP.

c. Phase III Review: HDSPP staff will review all recommendations and will make the final decisions for awards.

In addition, the following factors may affect the funding decision:

- DOH may fund out of rank order to achieve geographic and/or programmatic diversity.

Applications must include:

1. A detailed budget and work plan with timetable. The timetable should reflect the planning and implementation phases. If applying for more than one project, separate budgets must be completed for each.
2. A letter of support from the agency head.
3. Resume/s for all staff listed in the budget for this grant.
4. Any required documents such as agency Travel Policy, Salary Policy, Affirmative Action Policy, Copy of Interest Bearing Account, Proof of Non-profit Status (if applicable), NJ Charities Registration (if applicable), Consultant Agreements (if applicable), Plan for Sustainability, annual Audit Report, Statement of Total Gross Revenue, Application for Tax Clearance.

I. OTHER INFORMATION**Use of Funds**

Upon award, the recipient shall ensure that funds are immediately accessible and used for activities described in approved work plans. Funds must be used as follows:

- No more than 75% of the total award can be allocated for salary and fringe or consultant fees for dedicated staff. As a percentage of salary, the fringe rate cannot exceed 44.3%.
- No less than 25% of the total grant award must be used for programmatic funding.

Funds may be used to support:

- Equipment, supplies, or educational materials for promoting hypertension management (provider education, health communications, etc.).
- In state travel only and related expenses for project staff to carry out specified duties and to attend mandatory meetings and trainings.
- Costs associated with providing training for potential partners.

Funding Restrictions:

- Recipient may not use funds for purchasing vehicles.
- Recipient may not use funds for travel outside of the State of New Jersey.
- Recipient may not use funds for research.
- Recipient may not use funds for construction.
- Recipient may not use funds for interest on loans for the acquisition and/or modernization of an existing building.
- Recipient may only expend funds for reasonable program purposes, including personnel, travel, supplies and services.
- Recipient may not use funds for tuition reimbursement.

Anticipated Announcement and Award Dates:

- Successful applicants will anticipate notice of funding on or about June 8, 2020 with a start date July 1, 2020.
- DOH encourages inquiries concerning this announcement.

For programmatic technical assistance, contact:

Name: Anne Dulcio, MPH, CHES, CPH
Project Officer
Email: anne.dulcio@doh.nj.gov

From: Jason Bhulai <JBhulai@NJHA.com>
Sent time: 05/22/2020 08:29:45 AM
To: Jason Bhulai <JBhulai@NJHA.com>
Cc: EP Alert <EPAlert@njha.com>
Subject: 5-21-20 COVID-19 Resources & Information
Attachments: 5-21-20 COVID-19 Resources & Information

Sender: JBhulai@NJHA.com
Subject: 5-21-20 COVID-19 Resources & Information
Message-Id: <89f602fe31d849a58ec461dbece66f3b@njha.com>
Recipient: tjones@co.gloucester.nj.us

From: Jason Bhulai <JBhulai@NJHA.com>
Sent time: 05/22/2020 08:27:59 AM
To: Jason Bhulai <JBhulai@NJHA.com>
Cc: EP Alert <EPAAlert@njha.com>
Subject: 5-21-20 COVID-19 Resources & Information
Coronavirus Update No. 68. 5.21.20.pdf Governors Press Conference 5.21.20.pdf NIOSH Respiratory Protective Device Information (CA 2020-1028) _ NPPTL _ NIOSH _ CDC.pdf Operational Stress Management (OSM) During COVID-19 - health professionals_June 1.pdf Operational Stress Management (OSM) During COVID-19 - health professionals_May 27th.pdf

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Good Morning Southwest Healthcare Coalition Region,
Attached you will find:

- Coronavirus Update No. 68. 5.21.20
- Governors Press Conference 5.21.20
- NIOSH Respiratory Protective Device Information (CA 2020-1028) _ NPPTL _ NIOSH _ CDC
- Operational Stress Management (OSM) During COVID-19 - health professionals June 1
- Operational Stress Management (OSM) During COVID-19 - health professionals May 27th

The COVID-19 Touchpoint Call has been **CANCELLED** today, **Friday, May 22, 2020**

If you have any questions or concerns that you would like us to address, please email us at epalert@njha.com.

Thank You,

Jason A. Bhulai

Regional Coalition Manager

Emergency Management

New Jersey Hospital Association

760 Alexander Road,

Princeton, NJ 08543

Office: 609-275-4212

Cell: [REDACTED]

Email: JBhulai@NJHA.com

Emergency Hotline: 1-800-457-2262

Emergency Email: epalert@njha.com



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Coronavirus Update #68
May 21, 2020

DATE: May 21, 2020

TO: Chief Executive Officers
Regional Presidents
Head of Assisted Living
Heads of Home Health
Heads of Long Term Care
Head of PACE
Head of Pediatric Day Care
Chief Operating Officers
Chief Medical Officers
Chief Nursing Officers
Directors of Infection Control/Infection Control Practitioners
Emergency Preparedness Contacts
Heads of Human Resources
Legal Counsel
Heads of Public Relations

FROM: Cathleen Bennett, President and CEO

RE: **Coronavirus Update No. 68**

State Update: The total number of COVID-19 cases in New Jersey now stands at 151,472 after 1,304 more individuals were confirmed to have the virus in the last 24 hours. There is now a reported total of 10,843 COVID-19 fatalities, 98 more than yesterday. As of 10 p.m. yesterday, 3,208 residents are hospitalized with 896 of these individuals requiring intensive care and 700 on ventilators. An additional 286 residents have been discharged in the past 24 hours. For tests returned May 17, the positivity rate is 18 percent.

There are 19 confirmed cases of multisystem inflammatory syndrome in New Jersey in individuals ages 1-18. Of the total cases, 14 of them have tested positive for COVID-19.

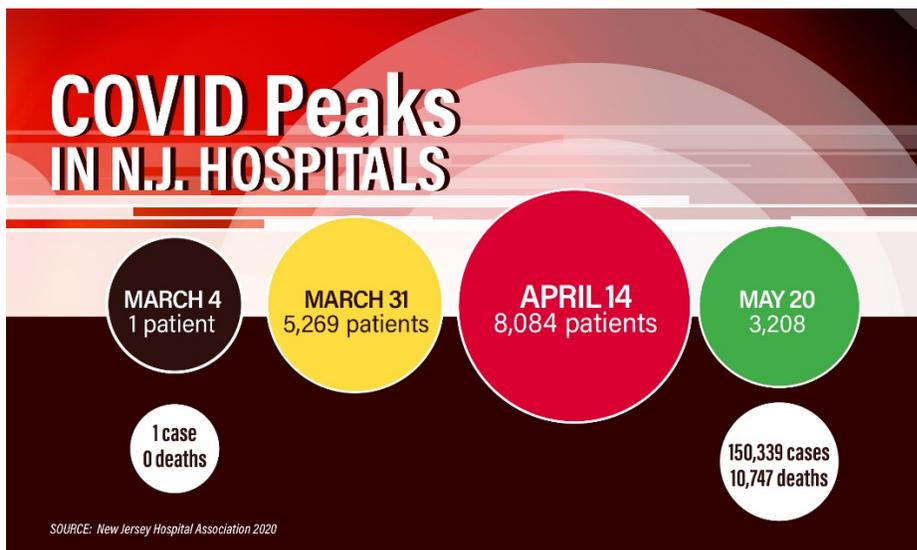
COVID-19 support from the U.S. Department of Veteran Affairs has been extended through the end of June, with an additional 40 clinical staff at long term care facilities.

The state's Recovery and Restart Commission met yesterday and is encouraging every business and nonprofit organization to fill out a short survey at www.COVID19.nj.gov.

The Rise and Fall of COVID: NJHA reviews the “rise and fall” of COVID-19 in New Jersey in a [new bulletin](#) from the Center for Health Analytics, Research and Transformation. New Jersey reported its first COVID-19 case on March 4. The rapid rise of the virus in New Jersey culminated on April 14, when the state’s hospitals experienced the following peaks:

- 8,084 patients were hospitalized with COVID-19
- 82 percent of intensive care beds were filled
- 62 percent of ventilators were in use.

These numbers represent a statewide average. However, COVID-19 activity varied significantly across regions of the state, with some facilities in northern New Jersey near 100 percent of capacity in mid-April. The bulletin includes data through May 20, when 3,208 patients were hospitalized with COVID-19. That’s a 60 percent decline from hospitals’ peak.



The report shows that one of the state’s greatest fears – that COVID cases would exceed available beds and ventilators – never materialized, thanks to hospitals’ nimbleness in expanding capacity. It also showed the importance of state and federal waivers that granted flexibility in our highly regulated field.

Other data, captured through May 20, shows:

- 150,399 N.J. residents have tested positive for the virus, which represents 1.7 percent of the state’s population. Nationally, more than 1.5 million have been infected, which represents approximately 0.45 percent of the population.
- 10,747 N.J. residents have died from COVID-19, representing 7.1 percent of the state’s total COVID cases. Across the country, more than 90,000 individuals have died, for a national death rate at just over 6 percent.

Migrant Workers: The state issued guidance today aimed at minimizing COVID-19 risk to seasonal farm workers. Officials noted that these seasonal employees may be susceptible to virus transmission because they work in close proximity with others and rely on employer-provided group transportation and housing.

[The guidance](#), developed by the departments of Health, Labor, and Agriculture, address workplace and housing safety, social distancing during work hours, transportation, sanitation and symptom screening and testing.

CARES Funding, Tranche 2: As a reminder, HHS will be auditing data submitted to Teletracking, which was used to determine allocation and distribution of Tranche 2 funding. We have fielded questions because of confusion in how HHS worded the survey and the supporting video, which appeared to provide conflicting information. This is a reminder to confirm your data for your attestation. [HHS provided a notice](#) regarding the attestation process. If you need to clarify reporting, HHS Region 2 Administrator Dennis Gonzalez has provided an HHS contact to answer any questions about the process: Samuel Imbriale, Samuel.imbriale@hhs.gov, 202-205-2843.

Stimulus Funds for Nursing Home Residents: The N.J. Long Term Care Ombudsman sent a [newsletter](#) to inform residents that they are likely entitled to a \$1,200 stimulus payment under the CARES Act. This payment does not count as income or a resource (for 12 months) and the nursing home cannot retain this money.

The IRS is currently mailing these payments to residents or directly depositing them into residents' checking or savings accounts. Facilities should educate finance and social work staff about how to best work with residents regarding the status of their funds, identifying when funds have been received and making them available to residents in a workable/efficient way. Many advocates have suggested that depositing these funds into the resident's PNA account is a workable approach, but residents have the right to decide. To help residents check the status of their payment, facilities can help them access the IRS' ["Get My Payment"](#) tool.

The [Social Security Administration](#), the [Federal Trade Commission](#) and the [National Center for Law and Elder Rights](#) have all issued guidance or alerts on this topic.

NJHA Resources and Support: As a reminder, NJHA's Emergency Preparedness team is available 24/7 to assist providers at 800-457-2262 or epalert@njha.com. In addition, the state's hotline number is 800-962-1253. Official guidance and other resources are available online from:

- CDC <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- NJDOH <https://www.nj.gov/health/cd/topics/ncov.shtml>
- NJHA <http://www.njha.com/coronavirus>



Highlights from the Governor's Daily COVID-19 Briefing on May 21, 2020

Panel

- Governor Murphy
- Commissioner Judith Persichilli
- Dr. Christina Tan
- Col. Pat Callahan
- Commissioner Robert Asaro-Angelo

Summary Points:

- New Positive COVID-19 cases: 1,304
- Statewide Total Positive COVID-19 Cases: 151,472
- The Spot Positivity rate is 18% (as of May 17)
- Total COVID-19 Related Deaths: 10,843
 - White: 53.5%
 - Black: 18.5%
 - Hispanic 19.4%
 - Asian 5.5%
 - Other 3.4%
- 3,208 residents are hospitalized (tested positive and PUIs). 896 of which is requiring intensive care. 700 individuals are on ventilators (as of 10 pm last night)
- 286 residents were discharged in the last 24 hours (as of 10 pm last night)
- Field medical station reports 46 patients.
- LTCs:
 - 28,876 cumulative positive cases
 - 4,502 cumulative lab-confirmed deaths (Only lab confirmed deaths will be reported)
- There are 19 cases today of Multi-system inflammatory syndrome in children. No deaths reported. The ages range from 1 to 18 years old. 14 children out of the 15 have tested positive for COVID-19. 6 children are still hospitalized.

- Trends Since Peak and Over Last Two Weeks:

	Since peak	Since May 6 th
New Hospitalization	-78%	-50%
Patients in Hospital	-59%	-35%
Patients in ICU	-53%	-38%
Patients on Ventilators	-55%	-35%

- The U.S. Department of Veterans Affairs assistance has been extended through the end of June. The Department will provide additional 40 clinical staff at long-term care facilities.
- The Governor is encouraging every business and non-profit organization to fill out a short survey. Survey is available at COVID19.nj.gov
- Visit 2020Census.gov to make sure you are counted. NJ self-response is at 61.7%.
- Since March 15, 1.1 million people in New Jersey filed for unemployment.
 - 757,700 jobs were lost over in April. April unemployment rate was 15.3%.
 - 3.4 billion in benefits has reached NJ workers.
- The pandemic emergency unemployment compensation benefit has been extended through December 2020.

NIOSH Respiratory Protective Device Information

Updated May 18, 2020

Subject: Information regarding damaged or degraded head straps on previously stockpiled NIOSH-approved filtering facepiece respirators

NIOSH CA 2020-1028
Revised May 2020

NIOSH is aware that many different NIOSH-approved filtering facepiece respirator (FFR) models were stockpiled for prolonged times and are now distributed for use during the COVID-19 response. These FFRs are made using different materials (e.g., filtering media and strap material), which may age or degrade over time and become damaged. Generally, FFRs are not designed for long-term storage, and many models may have shelf lives designated by the NIOSH approval holder. The shelf life information is generally found on the packaging or the approval holder's website.

Recently, NIOSH received multiple inquiries concerning the identification and replacement of damaged straps on large caches of NIOSH-approved N95 FFRs that have since passed their designated shelf life. Users should perform a visual inspection of each respirator prior to donning per the user instructions. Additional questions and concerns related to the condition of the respirator should be directed to the approval holder.

Modifications to NIOSH-approved respirators should not be made as part of conventional operations. In accordance with the NIOSH regulation, [42 CFR Part 84, Approval of Respiratory Protective Devices](#), any changes that modify the design (e.g., replacing damaged straps), as approved by NIOSH, voids the NIOSH approval. In this case, adding new straps may affect the fit or filtration performance of the respirator with potential to negatively impact the respiratory protection provided to the user.

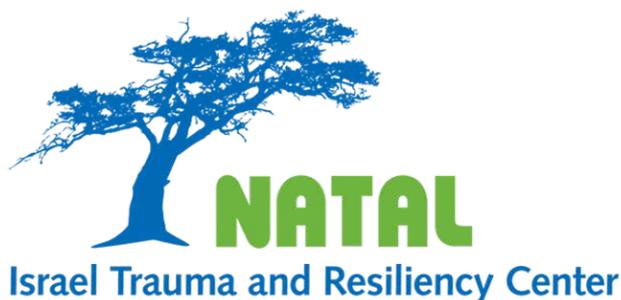
Only as a contingency or crisis capacity strategy option when no respirators are left other than those with damaged straps, consideration can be given to replacing the damaged straps and using these modified "respirators" as facemasks (i.e., NOT as a NIOSH-approved N95 FFR). The [CDC crisis capacity recommendations](#) for prioritizing the use of respirators vs. facemasks by activity type should be followed.

Supplemental Information

CDC NIOSH posted guidance on [Stockpiled N95 Respirators](#) on March 6, 2020. As of March 28th 2020, the [FDA's emergency use authorization \(EUA\)](#) allows the use of NIOSH-approved FFR models in healthcare settings that have since passed the manufacturer's recommended shelf-life; however, if the product exhibits signs of damage, it should be discarded. The [FDA Emergency Use Authorizations website](#) should be checked for the most up-to-date information.

Users can find information about stockpiled FFRs tested in NIOSH's research study on [NIOSH's website](#). Each FFR tested was visually inspected, where damage was [observed](#) for a number of straps for two particular models. All tested units with a designated shelf life were past the shelf life identified.

[Information regarding damaged or degraded head straps on previously stockpiled NIOSH-approved filtering facepiece respirators](#) [PDF – 142 KB]



Operational Stress Management (OSM) During COVID-19

Live Webinar and Q&A for New Jersey Health Professionals
Monday, June 1, 2020
10:00 – 11:00 AM

with the Jersey City/Newark Urban Areas Security Initiative's OSM
Hospital/EMS Trainers and Experts from NATAL: Israel Trauma & Resiliency
Center



*Working on the frontlines of the COVID-19 pandemic, how do we leverage
our coping mechanisms?*

How do we fulfill our responsibilities as health professionals?

*How do we preserve resources, avoid burn-out and empower ourselves in
the face of adversity?*

In this continually evolving crisis, there is no blueprint of what lays ahead. Instead, there is the burden concerning the unknown, uncertainty and confusion.

Guided by experts in the field of trauma and resilience, and led by members of the New Jersey health community, this session will emphasize the need for self-care and will provide tools to help avoid burnout during these unprecedented times.

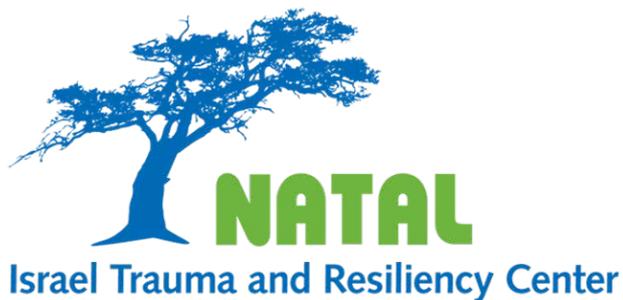
Topics will include:

- Managing the transition from work to home
- Coping with anxious community members
- Dealing with quarantine and its fatigue
- Tools for recharging after a tough shift
- Setting limits
- The power of rituals

Date: Monday, June 1, 2020, at 10:00 AM

- This webinar is specially designed for health professionals in the State of New Jersey
- Participants can join via Zoom or phone:

- **Zoom Meeting ID:** [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]



Operational Stress Management (OSM) During COVID-19

Live Webinar and Q&A for New Jersey Health Professionals
Wednesday, May 27, 2020
3:00-4:00PM

with the Jersey City/Newark Urban Areas Security Initiative's OSM
Hospital/EMS Trainers and Experts from NATAL: Israel Trauma & Resiliency
Center



*Working on the frontlines of the COVID-19 pandemic, how do we leverage
our coping mechanisms?*

How do we fulfill our responsibilities as health professionals?

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In this continually evolving crisis, there is no blueprint of what lays ahead. Instead, there is the burden concerning the unknown, uncertainty and confusion.

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Topics will include:

- Managing the transition from work to home
- Coping with anxious community members
- Dealing with quarantine and its fatigue
- Tools for recharging after a tough shift
- Setting limits
- The power of rituals

Date: Wednesday, May 27, 2020, at 3:00PM

- This webinar is specially designed for health professionals in the State of New Jersey
- Participants can join via Zoom or phone:

- **Zoom Meeting ID:** [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]

From: Jones, Tammy
Sent time: 05/05/2020 11:40:02 AM
To: Jean Calderon <jcalderon@chcinj.org>
Subject: Accepted: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing
Attachments: Accepted: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

Sender: tjones@co.gloucester.nj.us
Subject: Accepted: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing
Message-Id: <5cf2aa152a1f4ed7b3b7b9d88879927a@co.gloucester.nj.us>
To: jcalderon@chcinj.org

From: Jones, Tammy
Sent time: 05/05/2020 11:40:02 AM
To: Jean Calderon <jcalderon@chcinj.org>
Subject: Accepted: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

4A966D5720D3924D881F2D7E68C5ACCB@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/18/2020 09:36:40 AM
To: Bruner, Chad; O'Brien, Shannon
Subject: Check

We are also reaching out to the State to see what info they will be putting out regarding migrant farm testing...
And release of results...
Just so they don't send it back to us---

76EC7EE7B0C4554BA7646FE3478D6CA7@co.gloucester.nj.us.msg

From: John Donnadio <jdonnadio@njac.org>
Sent time: 05/11/2020 11:01:58 AM
Subject: Civil Service Commission
Attachments: Civil Service Commission

Sender: jdonnadio@njac.org
Subject: Civil Service Commission
Message-Id:
Recipient: TJones@co.gloucester.nj.us

From: John Donnadio <jdonnadio@njac.org>
Sent time: 05/11/2020 11:01:46 AM
Subject: Civil Service Commission
Attachments: CSC Rule Relaxations COVID-19 050620.pdf S 2350 Furlough Amends SBA .pdf

Good morning. I hope all is well and that you had a terrific Mother's Day. Thank you to Hunterdon County Personnel Director Grace Kelly for sharing the recently adopted temporary rule modifications concerning the time frames for filing certain administrative appeals by the Civil Service Commission. Please also find, the most recent version of S-2350, (*Sweeney D-3/Pou D-35*), which would enhance certain benefits and leave for employees under certain circumstances. This legislation will likely pass both houses this week, but it's unclear at this time if Governor Murphy plans to sign it into law. In brief, the bill would guarantee furloughed employees that their future pension benefits would not be reduced and that they would continue to accrue seniority. It would allow public and private sector employers to launch furlough programs in compliance with the New Jersey law now for approval retroactively. Finally, also note that on Tuesday, the Senate Budget and Appropriation Committee will consider S-2477 (*Sweeny D-3/O'Scanlon R-13*), which would permit State and local government employees in Civil Service to be transferred under certain circumstances. Although we have not reviewed the bill as of this writing as it's still being drafted, the measure will likely authorize employees to help process unemployment claims with the Department of Labor. We'll make sure to provide you with a draft as soon as it becomes available, and please do not hesitate to contact us in the meantime with any questions or concerns.

John G. Donnadio, Esq.

Executive Director

New Jersey Association of Counties

Government Finance Officers Association of New Jersey

150 West State Street

Trenton, New Jersey 08608

Telephone (609) 394-3467

www.njac.org

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EXECUTIVE ORDER NO. 103 NOTICES

CIVIL SERVICE

CIVIL SERVICE COMMISSION

Notice of Rule Waiver/Modification/Suspension Pursuant to Executive Order No. 103

(2020)

COVID-19 State of Emergency

Time Frames for Filing Certain Administrative Appeals

N.J.A.C. 4A:2-1.1, 2.5, 2.6, and 5.2; 4A:3-3.9; 4A:4-5.2, 6.4, and 6.5; 4A:6-2.5, 2.6, 2.7, and 2.8; and 4A:7-3.2

Authorized: April 9, 2020, by the Civil Service Commission, Deirdré L. Webster Cobb, Chairperson.

Authority: N.J.S.A. App.A:9-45 and App. A:9-47; and Executive Order No. 103 (2020).

Effective Date: April 9, 2020.

Expiration Date: Upon the Termination of the Emergency Declaration Made Pursuant to Executive Order No. 103 (2020).

This is an emergency adoption of temporary rule relaxations and modifications of the regulatory provisions concerning the time frames for filing certain administrative appeals (N.J.A.C. 4A:2-1.1(b), N.J.A.C. 4A:2-5.2(a), N.J.A.C. 4A:3-3.9(e), N.J.A.C. 4A:4-6.5(e)), the departmental hearing process (N.J.A.C. 4A:2-2.5(c) and N.J.A.C. 4A:2-2.6(d)), position classification review requests (N.J.A.C. 4A:3-3.9 et seq), working test period extensions (N.J.A.C.

4A:4-5.2(e), competitive examination review time (N.J.A.C.4A:4-6.4(a) and (b), inclement weather or emergency conditions (N.J.A.C. 4A:6-2.5), flexitime programs (N.J.A.C. 4A:6-2.6), alternative workweek procedures (N.J.A.C. 4A:6-2.7), adjusted hours of operations (N.J.A.C. 4A:6-2.8), and timeframes for completing investigations of State Policy Against Discrimination in the Workplace (State Policy) (N.J.A.C. 4A:7-3.2(l)). Section 6 of EO 103, issued in response to the COVID-19 pandemic, authorizes agency heads to waive/suspend/modify any existing rule, where the enforcement of the rule would be detrimental to the public welfare during the emergency, notwithstanding the provisions of the Administrative Procedure Act or any law to the contrary. Pursuant to that authority, and with the approval of the Governor and in consultation with the State Director of Emergency Management and the Commissioner of the Department of Health, the Civil Service Commission is relaxing or modifying its rules as follows:

The timeframe for filing appeals and supporting documentation of *non-disciplinary matters* pursuant to *N.J.A.C. 4A:2-1.1(b)*, *N.J.A.C. 4A:2-5.2(a)*, *N.J.A.C. 4A:3-3.9(e)*, and *N.J.A.C. 4A:4-6.5(e)* is established by regulation, not statute, and therefore, is not jurisdictional. Individuals who desire to file appeals of administrative matters pursuant to these regulations such as, among other things, examination eligibility, challenges to examination questions or test mode, list removals, bypasses, reassignments, position review actions, administrative actions, State Policy determinations, and layoff rights determinations, must file these challenges within 20 days of receiving notice. However, in light of the COVID-19 emergency, some individuals desiring to file appeals pursuant to these regulations may not be able to do so within the regulatorily required 20-day period. As the time frame for filing these types of appeals is not required by statute, the

Commission is modifying the rule so that the timeframe for filing such appeals be 60 days, which may be extended for good cause, from the action being appealed.

N.J.A.C. 4A:2-2.5(c) and *N.J.A.C. 4A:2-2.6(d)* concern the timeframes in which departmental disciplinary hearings must be requested and heard by a hearing officer and the issuance of a determination after the departmental hearing. As many appointing authorities both in State and local government service may be on significantly reduced staffing levels due to the COVID-19 emergency, hearings and determinations for employees charged with disciplinary action may not be able to be rendered within the required regulatory time frame. Therefore, the Commission is modifying the rule so that the timeframe in which an employee charged may request a departmental level hearing, the timeframe in which an appointing authority should conduct the departmental hearing, and the timeframe that the hearing officer is required to issue a recommendation regarding the charges, be relaxed to permit these actions to occur after their respective regulatory time frames, for good cause, from the request for a hearing and from the conclusion of the hearing.

N.J.A.C. 4A:3-3.9 et. seq. governs the position review process in both State and local service. These regulations require appointing authorities and this agency to provide certain information as part of the position review process to this agency within certain timeframes. As many appointing authorities both in State and local government services may be on significantly reduced staffing levels due to the COVID-19 emergency, the processing of these requests and issuance of a final recommendation of position classification within the required timeframes may not be feasible. Accordingly, the Commission is modifying the rule so that the timeframes required

of the position classification review process be relaxed to permit such actions to occur after the required regulatory time frames, if good cause is shown, from the initiation of the classification review.

N.J.A.C. 4A:4-5.2(e) requires that an individual serving in a working test period have the time they are on an approved leave of absence extend to the completion of the working test period by the time equal to that leave or voluntary furlough. Since many appointing authorities both in State and local government services may be on significantly reduced staffing levels due to the COVID-19 emergency, individuals serving in their working test period or their supervisor may not be able to report to work to permit a fair evaluation of the employee's performance. As such, the Commission is modifying the rule so that the provisions of *N.J.A.C. 4A:4-5.2(e)* be relaxed to permit the extension of the completion of the working test period by the time equal to that period of time an employee or supervisor may be out of work due to the COVID-19 emergency.

N.J.A.C. 4A:4-6.4(a) and (b) provide timeframes for an individual who has taken an assembled competitive examination to review the test materials and scoring keys. Because the employees of many appointing authorities both in State and local government services may have been exposed to COVID-19, and due to any potential reduced staffing level of this agency, individuals may not be able to schedule review of their examination materials in the regulatory timeframes. Therefore, the Commission is modifying the rule so that the provisions regarding timeframes for an individual who has competed in an assembled examination to review their testing materials be relaxed to permit such actions to occur after the required regulatory time

frames, if good cause is shown, after participating in the test, but prior to issuance of an eligible list.

N.J.A.C. 4A:6-2.5 (inclement weather or emergency conditions), *N.J.A.C. 4A:6-2.6* (flexitime programs), *N.J.A.C. 4A:6-2.7* (alternative workweek procedures), and *N.J.A.C. 4A:6-2.8* (adjusted hours of operations) concern options an appointing authority may implement to create flexible working hours for employees or hours of operations for the appointing authority. Given the need for State appointing authorities to ensure the consistent delivery of crucial public services and the potential reduced staffing levels as a result of the COVID-19 emergency, appointing authorities and employees may need to adjust work schedules and hours of operations. Therefore, the Commission is modifying the rule so that these regulatory provisions be relaxed to ensure that appointing authorities are provided with maximum ability to swiftly adjust their human resource assets to ensure the consistent delivery of public services.

N.J.A.C. 4A:7-3.2(l) specifies the timeframe in which an investigation of a complaint of a violation of the State Policy is to be completed. As staffing levels may be reduced as a result of the COVID-19 emergency, State appointing authorities may not be able to complete their investigations within the required timeframe. Therefore, the Commission is modifying the rule so that the provisions of *N.J.A.C. 4A:7-3.2(l)* be relaxed so that investigations initiated during the period of EO 103 may be completed after the required regulatory time frame if good cause is shown, provided that the complainant be notified if the investigation will take longer than the maximum time permitted under the rules.

CSC Rule Relaxations COVID-19 050620.pdf

Full text of the modified rule text follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

CHAPTER 2

APPEALS, DISCIPLINE, AND SEPARATIONS

SUBCHAPTER 1. APPEALS

4A:2-1.1 Filing of appeals

(a) (No change.)

(b) Unless a different time period is stated, an appeal must be filed within [20 days] **60 days, which may be extended for good cause**, after either the appellant has notice or should reasonably have known of the decision, situation, or action being appealed.

(c)-(e) (No change.)

SUBCHAPTER 2. MAJOR DISCIPLINE

4A:2-2.5 Opportunity for hearing before the appointing authority

(a)-(b) (No change.)

(c) The employee may request a departmental hearing within five days, **which may be extended for good cause**, of receipt of the Preliminary Notice. If no request is made within this time or such additional time as agreed to by the appointing authority or as provided in a negotiated agreement, the departmental hearing may be considered to have been waived and the appointing authority may issue a Final Notice of Disciplinary Action.

(d) A departmental hearing, if requested, shall be held within 30 days, **which may be extended for good cause**, of the Preliminary Notice of Disciplinary Action unless waived by the employee

or a later date as agreed to by the parties. See N.J.A.C. 4A:2-2.13 for hearings regarding removal appeals by certain law enforcement officers and firefighters.

(e) (No change.)

4A:2-2.6 Hearings before the appointing authority

(a)-(c) (No change.)

(d) Within 20 days, **which may be extended for good cause**, of the hearing, or such additional time as agreed to by the parties, the appointing authority shall make a decision on the charges and furnish the employee either by personal service or certified mail with a Final Notice of Disciplinary Action. See N.J.A.C. 4A:2-2.13 for the issuance of a Final Notice in removal appeals by certain law enforcement officers and firefighters.

SUBCHAPTER 5. EMPLOYEE PROTECTION AGAINST REPRISALS OR POLITICAL COERCION

4A:2-5.2 Appeals

(a) An employee may appeal a reprisal or political coercion action to the Civil Service Commission within [20] **60** days, **which may be extended for good cause**, of the action or the date on which the employee should reasonably have known of its occurrence.

(b)-(e) (No change.)

CHAPTER 3

CLASSIFICATION, SERVICES, AND COMPENSATION

SUBCHAPTER 3. CLASSIFICATION

4A:3-3.9 Position review request and appeal procedure

(a)-(b) (No change.)

(c) In State service, a classification petition by an employee or union representative shall be made in writing. The petition shall include a position classification questionnaire completed by the petitioner, and shall specify the title that the petitioner believes is appropriate to the duties performed by the employee and explain how the duties at issue are more appropriate to the requested title than to the title in which the employee is currently serving.

1.-2. (No change.)

3. The supervisor and program manager/division director shall complete their portions of the questionnaire and provide their signatures on the form in accordance with (c)1 and 2 above within 15 days, **which may be extended for good cause**, of the employee's submission of the petition to the immediate supervisor. By no later than the end of this period, the program manager/division director shall submit to the agency representative the completed questionnaire, along with the petitioner's most recent PAR form (see N.J.A.C. 4A:6-5).

4. (No change.)

5. A representative of the Civil Service Commission shall review the petition filed pursuant to (c)4 above, request additional information, if needed, order a desk audit, where warranted, and issue a written decision letter. The decision letter shall be issued within 180 days, **which may be extended for good cause**, of receipt of the petition and all completed documentation as required by the representative of the Civil Service Commission, and shall:

i.-ii. (No change.)

(d) In local service, a petition from an employee, union representative, or appointing authority shall be submitted, in writing, to the appropriate representative of the Civil Service Commission.

The petition must identify the specific duties that do not conform to the specification for the title and, if the petitioner proposes a different title for the position, an explanation of how that existing title more accurately describes the duties of the position than the current or proposed title. If requested by a representative of the Commission, the petition shall also include a completed position classification questionnaire and an organizational chart. If the petitioner's supervisor has not signed the questionnaire within 15 working days, **which may be extended for good cause**, of receipt of the questionnaire from the petitioner, the petitioner may forward the questionnaire to the appropriate representative of the Commission without the supervisor's signature but with a notation of the date of presentation to the supervisor.

1. A representative of the Civil Service Commission shall review the petition, request additional information if needed, order a desk audit where warranted, and issue a written decision letter. The decision letter shall be issued within 180 days, **which may be extended for good cause**, of receipt of the petition and of all completed documentation as required by the Commission representative, and shall include a summary of the duties of the position, findings of fact, conclusions, a notice to the employee or authorized employee representative of appeal rights to the Civil Service Commission, and a determination that:

i.-iii. (No change.)

(e) Appeals from the decision of the Commission representative to the Civil Service Commission pursuant to (c) 4 and 5 or (d) above may be made by an employee, authorized employee representative, or local appointing authority. The appeal shall be submitted in writing within [20 days] **60 days, which may be extended for good cause**, of receipt of the decision letter and include copies of all materials submitted, the determination received from the lower level, statements as to which portions of the determination are being disputed, and the basis for appeal.

Information and/or arguments that were not presented at the prior level of appeal shall not be considered. When new information and/or arguments are presented, the appeal may be remanded to the prior level.

1.-4. (No change.)

(f) (No change.)

CHAPTER 4

SELECTION AND APPOINTMENT

SUBCHAPTER 5. WORKING TEST PERIOD

4A:4-5.2 Duration

(a)-(d) (No change.)

(e) An approved leave of absence, including a furlough extension leave or a voluntary furlough shall extend the completion of the working test period for a period of time equal to that leave or voluntary furlough **or the period of time the employee is out of work due to the COVID-19 emergency.**

SUBCHAPTER 6. EXAMINATION AND SELECTION DISQUALIFICATION AND APPEALS

4A:4-6.4 Review of examination items, scoring, and administration

(a) No later than five business days, **which may be extended for good cause**, after the examination has been held, candidates for multiple choice examinations may contact appropriate Civil Service Commission staff by telephone to make an appointment to review the keyed test booklet.

1. Within five business days, **which may be extended for good cause**, after the date of review, in the case of candidates who have reviewed the keyed test booklet, or five business days from the date the multiple choice examination has been held, in the case of all other candidates, candidates may file an appeal in writing against the keyed response for a given item, or with respect to the job-relatedness or appropriateness of test content. The appeal shall specify the question(s) being challenged.

2. Candidates for multiple choice examinations may review their examination papers and the scoring key 20 days, **which may be extended for good cause**, after the notice date of the examination results. However, such candidates may file appeals during this 20-day period only with respect to the scoring of their test papers.

(b) No later than five business days, **which may be extended for good cause**, after the examination has been held, candidates for tests other than multiple choice may contact Commission staff by telephone to make an appointment to review the test. These candidates may file an appeal in writing of examination items and scoring within 20 days, **which may be extended for good cause**, after the candidate's date of review. Candidates for tests other than multiple choice who do not request a review of their examination papers may file an appeal of examination items and scoring within [20 days] **60 days, which may be extended for good cause**, of the notice date of examination results.

(c)-(f) (No change.)

4A:4-6.5 Medical and/or psychological disqualification appeals

(a)-(d) (No change.)

(e) The appellant may submit to the Civil Service Commission a report from a New Jersey licensed physician, psychologist, or psychiatrist of his or her own choosing, which must be submitted within 90 calendar days, **which may be extended for good cause**, of the filing of his or her appeal to the Civil Service Commission. The appellant shall furnish the appointing authority with copies of all submissions to the Civil Service Commission. See (f) below for report requirements.

(f)-(h) (No change.)

CHAPTER 6

LEAVES, HOURS OF WORK, AND EMPLOYEE DEVELOPMENT

SUBCHAPTER 2. HOURS OF WORK

4A:6-2.5 Inclement weather or emergency conditions: State service

(a)-(b) (No change.)

(c) Each State department and agency shall [annually] review its criteria for the designation of essential attendance employees **on an on-going basis during the COVID-19 emergency** and, based on these criteria, update its roster of such employees. Employees so designated shall be notified [no later than October 31 of each year] **as necessary during the duration of the COVID-19 emergency** of this designation and shall at that time be provided with a copy of the department or agency's Essential Employee Attendance Plan. The Plan shall include the responsibilities, requirements, and expectations of such employees in the event that a period of inclement weather or other adverse situation requires the curtailment of State operations or services.

1. (No change.)

(d) (No change.)

4A:6-2.6 Flexitime programs: State service

(a)-(c) (No change.)

(d) Establishment, modification, or termination of a flexitime program shall [not] become effective [without the approval of the] **upon approval of the Department head and filing with the Chairperson or designee.** [Requests for these actions shall be submitted at least 30 days in advance of the proposed effective date to the Civil Service Commission and] **Plans** shall include:

1.-9. (No change.)

(e)-(h) (No change.)

4A:6-2.7 Alternative workweek programs: State service

(a)-(d) (No change.)

(e) Appointing authorities shall develop[, subject to approval by the Chairperson or designee,] appropriate sick, vacation, and administrative leave schedules for employees participating in an alternative workweek program.

(f) (No change.)

(g) Establishment, modification, or termination of an alternative workweek program shall [not] become effective [without the approval of the Chairperson or designee. Requests for these actions must be submitted at least 30 days in advance of the proposed effective date to the Civil Service Commission and shall include the same items listed in N.J.A.C. 4A:6-2.6(d)] **with the approval of the Department head.**

(h)-(k) (No change.)

4A:6-2.8 Adjusted hours of operation: State service

(a)-(b) (No change.)

(c) [Except for emergency situations of limited duration, adjustments] **Adjustments** in hours of daily or shift operation shall not become effective without the approval of the [Chairperson or designee. Requests for these actions should be submitted at least 30 days in advance of the proposed effective date to the Civil Service Commission] **Department head** and shall include:

1.-6. (No change.)

(d) (No change.)

CHAPTER 7

EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION

SUBCHAPTER 3. POLICY PROHIBITING DISCRIMINATION IN THE WORKPLACE;

COMPLAINT PROCEDURES, AND APPEALS

4A:7-3.2 Model procedures for internal complaints alleging discrimination in the workplace

Each State department, commission, State college or university, agency, and authority (hereafter referred to in this section as “State agency”) is responsible for implementing this model procedure, completing it to reflect the structure of the organization, and filing a copy of the completed procedure with the Division of EEO/AA.

“(a)-(k) (No change.)

(l) The (State agency head or designee) will issue a final letter of determination to both the complainant(s) and the person(s) against whom the complaint was filed, setting forth the results of the investigation and the right of appeal to the Civil Service Commission as set forth in subsections (m) and (n) below. To the extent possible, the privacy of all parties involved in the process shall

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be maintained in the final letter of determination. The Division of EEO/AA shall be furnished with a copy of the final letter of determination.

1. (No change.)

2. The investigation of a complaint shall be completed and a final letter of determination shall be issued no later than 120 days after the initial intake of the complaint referred to in (h) above is completed.

3. The time for completion of the investigation and issuance of the final letter of determination may be extended by the State agency head for up to 60 additional days, **which may be extended for good cause**, in cases involving exceptional circumstances. The State agency head shall provide the Division of EEO/AA and all parties with written notice of any extension and shall include in the notice an explanation of the exceptional circumstances supporting the extension.

(m)-(p) (No change.)

[First Reprint]

SENATE, No. 2350

STATE OF NEW JERSEY
219th LEGISLATURE

INTRODUCED MAY 4, 2020

Sponsored by:

Senator STEPHEN M. SWEENEY

District 3 (Cumberland, Gloucester and Salem)

Senator NELLIE POU

District 35 (Bergen and Passaic)

SYNOPSIS

Concerns benefits provided to workers.

CURRENT VERSION OF TEXT

As reported by the Senate Budget and Appropriations Committee on May 7, 2020, with amendments.



1 AN ACT concerning certain benefits ¹**[and leave]**¹ provided to
2 workers, and amending and supplementing various parts of the
3 statutory law.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. N.J.S.11A:8-1 is amended to read as follows:

9 11A:8-1. a. A permanent employee may be laid off for
10 economy, efficiency or other related reason. A permanent
11 employee shall receive 45 days' written notice, unless in State
12 government a greater time period is ordered by the commission,
13 which shall be served personally or by certified mail, of impending
14 layoff or demotion and the reasons therefor. The requirements of
15 this section to provide 45 days' written notice of a layoff shall not
16 apply to employees who have their weekly hours of work reduced
17 and receive shared time unemployment benefits under a shared
18 work program approved pursuant to the provisions of
19 P.L.2011.c.154 (C.43:21-20.3 et seq.). The notice shall expire 120
20 days after service unless extended by the commission for good
21 cause. At the same time the notice is served, the appointing
22 authority shall provide the commission with a list of the names and
23 permanent titles of all employees receiving the notice. The Civil
24 Service Commission shall adopt rules to implement employee
25 layoff rights consistent with the provisions of this section. The
26 commission shall consult with the advisory board representing labor
27 organizations prior to such recommendations.

28 b. Permanent employees in the service of the State or a
29 political subdivision shall be laid off in inverse order of seniority.
30 As used in this subsection, "seniority" means the length of
31 continuous permanent service in the jurisdiction, regardless of title
32 held during the period of service, except that for police and
33 firefighting titles, "seniority" means the length of continuous
34 permanent service only in the current permanent title and any other
35 title that has lateral or demotional rights to the current permanent
36 title. Seniority for all titles shall be based on the total length of
37 calendar years, months and days in continuous permanent service
38 regardless of the length of the employee's work week, work year or
39 part-time status.

40 c. For purposes of State service, a "layoff unit" means a
41 department or autonomous agency and includes all programs
42 administered by that department or agency. For purposes of
43 political subdivision service, the "layoff unit" means a department
44 in a county or municipality, an entire autonomous agency, or an

EXPLANATION – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SBA committee amendments adopted May 7, 2020.

1 entire school district, except that the commission may establish
2 broader layoff units.

3 d. For purposes of State service, "job location" means a county.
4 The commission shall assign a job location to every facility and
5 office within a State department or autonomous agency. For
6 purposes of local service, "job location" means the entire political
7 subdivision and includes any facility operated by the political
8 subdivision outside its geographic borders.

9 e. For purposes of determining lateral title rights in State and
10 political subdivision service, title comparability shall be determined
11 by the commission based upon whether the: (1) titles have
12 substantially similar duties and responsibilities; (2) education and
13 experience requirements for the titles are identical or similar; (3)
14 employees in an affected title, with minimal training and
15 orientation, could perform the duties of the designated title by
16 virtue of having qualified for the affected title; and (4) special
17 skills, licenses, certifications or registration requirements for the
18 designated title are similar and do not exceed those which are
19 mandatory for the affected title. Demotional title rights shall be
20 determined by the commission based upon the same criteria, except
21 that the demotional title shall have lower but substantially similar
22 duties and responsibilities as the affected title.

23 f. In State service, a permanent employee in a position affected
24 by a layoff action shall be provided with applicable lateral and
25 demotional title rights first, at the employee's option, within the
26 municipality in which the facility or office is located and then to the
27 job locations selected by the employee within the department or
28 autonomous agency. The employee shall select individual job
29 locations in preferential order from the list of all job locations and
30 shall indicate job locations at which the employee will accept lateral
31 and demotional title rights. In local service, a permanent employee
32 in a position affected by a layoff action shall be provided lateral and
33 demotional title rights within the layoff unit.

34 g. Following the employee's selection of job location
35 preferences, lateral and demotional title rights shall be provided in
36 the following order:

37 (1) a vacant position that the appointing authority has previously
38 indicated it is willing to fill;

39 (2) a position held by a provisional employee who does not have
40 permanent status in another title, and if there are multiple
41 employees at a job location, the specific position shall be
42 determined by the appointing authority;

43 (3) a position held by a provisional employee who has
44 permanent status in another title, and if there are multiple
45 provisional employees at a job location, the specific position shall
46 be determined based on level of the permanent title held and
47 seniority;

48 (4) the position held by the employee serving in a working test
49 period with the least seniority;

1 (5) in State service, and in local jurisdictions having a
2 performance evaluation program approved by the commission, the
3 position held by the permanent employee whose performance rating
4 within the most recent 12 months in the employee's permanent title
5 was significantly below standards or an equivalent rating;

6 (6) in State service, and in local jurisdictions having a
7 performance evaluation program approved by the commission, the
8 position held by the permanent employee whose performance rating
9 within the most recent 12 months in the employee's permanent title
10 was marginally below standards or an equivalent rating; and

11 (7) the position held by the permanent employee with the least
12 seniority.

13 h. A permanent employee shall be granted special
14 reemployment rights based on the employee's permanent title at the
15 time of the layoff action and the employee shall be certified for
16 reappointment after the layoff action to the same, lateral and lower
17 related titles. Special reemployment rights shall be determined by
18 the commission in the same manner as lateral and demotional
19 rights.

20 i. Notwithstanding the provisions above, at no time shall any
21 person on a military leave of absence for active service in the
22 Armed Forces of the United States or for active service in the
23 organized militia in time of war or emergency be laid off.

24 For the purposes of this section, "organized militia" means the
25 Army and Air National Guard of New Jersey or any other state, and
26 "active service" includes National Guard active service ordered by a
27 Governor of a state.

28 (cf: P.L.2019, c.286, s.3)

29
30 2. Section 9 of P.L.1996, c.138 (C.18A:7F-9) is amended to read
31 as follows:

32 9. a. In order to receive any State aid pursuant to P.L.2007, c.260
33 (C.18A:7F-43 et al.), a school district, charter school, renaissance
34 school project, county vocational school district, or county special
35 services school district shall comply with the rules and standards for
36 the equalization of opportunity which have been or may hereafter be
37 prescribed by law or formulated by the commissioner pursuant to law,
38 including those implementing P.L.1996, c.138 (C.18A:7F-1 et al.) and
39 P.L.2007, c.260 (C.18A:7F-43 et al.) or related to the core curriculum
40 content standards required by P.L.2007, c.260 (C.18A:7F-43 et al.),
41 and shall further comply with any directive issued by the
42 commissioner pursuant to section 6 of P.L.1996, c.138 (C.18A:7F-6).
43 The commissioner is hereby authorized to withhold all or part of a
44 district's State aid for failure to comply with any rule, standard or
45 directive. No State aid shall be paid to any district which has not
46 provided public school facilities for at least 180 days during the
47 preceding school year, but the commissioner, for good cause shown,
48 may remit the penalty.

1 b. Notwithstanding the provisions of subsection a. of this section
2 to the contrary, in the event that a school district is required to close
3 the schools of the district for more than three consecutive school days
4 due to a declared state of emergency, declared public health
5 emergency, or a directive by the appropriate health agency or officer to
6 institute a public health-related closure, the commissioner shall allow
7 the district to apply to the 180-day requirement established pursuant to
8 subsection a. of this section, one or more days of virtual or remote
9 instruction provided to students on the day or days the schools of the
10 district were closed if the program of virtual or remote instruction
11 meets such criteria as may be established by the commissioner. A
12 district that wants to use a program of virtual or remote instruction to
13 meet the 180-day requirement in accordance with this subsection shall,
14 with board of education approval, submit its proposed program of
15 virtual or remote instruction to the commissioner within 30 days of the
16 effective date of P.L.2020, c.27 and annually thereafter, provided
17 however that if the school district is unable to complete and submit its
18 proposed program within the 30-day period and the district is required
19 to close its schools for a declared state of emergency, declared public
20 health emergency, or a directive by the appropriate health agency or
21 officer to institute a public health-related closure, the commissioner
22 may retroactively approve the program.

23 A day of virtual or remote instruction, if instituted under a program
24 approved by the commissioner, shall be considered the equivalent of a
25 full day of school attendance for the purposes of meeting State and
26 local graduation requirements, the awarding of course credit, and such
27 other matters as determined by the commissioner.

28 If a program of virtual or remote instruction is implemented for the
29 general education students the same educational opportunities shall be
30 provided to students with disabilities. Special education and related
31 services, including speech language services, counseling services,
32 physical therapy, occupational therapy, and behavioral services, may
33 be delivered to students with disabilities through the use of electronic
34 communication or a virtual or online platform and as required by the
35 student's Individualized Education Program (IEP), to the greatest
36 extent practicable.

37 c. In the event that the State or local health department
38 determines that it is advisable to close or mandates closure of the
39 schools of a school district due to a declared state of emergency,
40 declared public health emergency, or a directive by the appropriate
41 health agency or officer to institute a public health-related closure, the
42 superintendent of schools shall have the authority to implement the
43 school district's program of virtual or remote instruction. The
44 superintendent shall consult with the board of education prior to such
45 decision if practicable. The superintendent shall ensure that students,
46 parents, staff, and the board of education or boards of education are
47 informed promptly of the superintendent's decision.

1 d. The commissioner shall define virtual and remote instruction
2 and establish guidance for its use. The guidance shall provide school
3 districts with information on:

4 (1) providing instruction to students who may not have access to a
5 computer or to sufficient broadband, or to any technology required for
6 virtual or remote instruction;

7 (2) the required length of a virtual or remote instruction day;

8 (3) the impact of virtual or remote instruction on the school lunch
9 and school breakfast programs;

10 (4) the impact of virtual or remote instruction on the schedule for
11 administering State assessments; and

12 (5) such other topics as the commissioner deems necessary.

13 e. (1) Nothing in subsection b., c., or d. of this section shall be
14 construed to limit, supersede or preempt the rights, privileges,
15 compensation, remedies, and procedures afforded to public school
16 employees or a collective bargaining unit under federal or State law or
17 any provision of a collective bargaining agreement entered into by the
18 school district. In the event of the closure of the schools of a school
19 district due to a declared state of emergency, declared public health
20 emergency, or a directive by the appropriate health agency or officer to
21 institute a public health-related closure for a period longer than three
22 consecutive school days, public school employees covered by a
23 collective negotiations agreement shall be entitled to compensation,
24 benefits, and emoluments as provided in the collective negotiations
25 agreement as if the school facilities remained open for any purpose
26 and for any time lost as a result of school closures or use of virtual or
27 remote instruction, except that additional compensation, benefits, and
28 emoluments may be negotiated for additional work performed.

29 (2) In the event of the closure of the schools of a school district
30 due to a declared state of emergency, declared public health
31 emergency, or a directive by the appropriate health agency or officer to
32 institute a public health-related closure for a period longer than three
33 consecutive school days, public school employees who are not covered
34 by a collective negotiations agreement shall be entitled to any benefits,
35 compensation, and emoluments to which they otherwise would be
36 entitled as if they had performed the work for such benefits,
37 compensation, and emoluments as if the school facilities remained
38 open for any purpose and for any time lost as a result of school
39 closures or use of virtual or remote instruction.

40 (3) If the schools of a school district are subject to a health-related
41 closure for a period longer than three consecutive school days, which
42 is the result of a declared state of emergency, declared public health
43 emergency, or a directive by the appropriate health agency or officer,
44 then the school district shall continue to make payments of benefits,
45 compensation, and emoluments pursuant to the terms of a contract
46 with a contracted service provider in effect on the date of the closure
47 as if the services for such benefits, compensation, and emoluments had
48 been provided, and as if the school facilities had remained open.
49 Payments received by a contracted service provider pursuant to this

1 paragraph shall be used to meet the payroll and fixed costs obligations
2 of the contracted service provider¹, and employees of the contracted
3 service provider shall be paid as if the school facilities had remained
4 open and in full operation¹. ¹Upon request of the school district, the
5 contracted service provider shall certify, and provide any supporting
6 documentation to a school district as may be necessary to verify, that
7 payments received have been used solely to meet the payroll and fixed
8 costs of the contracted service provider. Any portion of those
9 payments not used to meet the payroll and fixed costs shall be returned
10 to the school district.¹ A school district shall make all reasonable
11 efforts to renegotiate a contract in good faith subject to this paragraph
12 and may direct contracted service providers, who are a party to a
13 contract and receive payments from the school district under this
14 paragraph, to provide services on behalf of the school district which
15 may reasonably be provided and are within the general expertise or
16 service provision of the original contract. Negotiations shall not
17 include indirect costs such as fuel or tolls. As a condition of
18 negotiations, a contracted service provider shall reveal to the school
19 district whether the entity has insurance coverage for business
20 interruption covering work stoppages. A school district shall not be
21 liable for the payment of benefits, compensation, and emoluments
22 pursuant to the terms of a contract with a contracted service provider
23 under this paragraph for services which otherwise would not have been
24 provided had the school facilities remained open. Nothing in this
25 paragraph shall be construed to require a school district to make
26 payments to a party in material breach of a contract with a contracted
27 service provider if the breach was not due to a closure resulting from a
28 declared state of emergency, declared public health emergency, or a
29 directive by the appropriate health agency or officer.

30 (4) If the schools of a school district are subject to a health-related
31 closure for a period longer than three consecutive school days, which
32 is the result of a declared state of emergency, declared public health
33 emergency, or a directive by the appropriate health agency or officer,
34 the school district shall be obligated to make payments for benefits,
35 compensation, and emoluments and all payments required pursuant to
36 P.L.1968, c.243 (C.18A:6-51 et seq.), to an educational services
37 commission, county special services school district, and a jointure
38 commission, and under any shared services agreement and cooperative
39 contract entered into with any other public entity. An educational
40 services commission, county special services school district, and
41 jointure commission shall continue to make payments of benefits,
42 compensation, and emoluments pursuant to the terms of a contract
43 with a contracted service provider or a shared services agreement in
44 effect on the date of the closure as if the services for such benefits,
45 compensation, and emoluments had been provided, and as if the school
46 facilities had remained open. Payments received by a contracted
47 service provider or public entity pursuant to this paragraph shall be
48 used to meet the payroll and fixed costs obligations of the contracted

1 service provider or public entity¹, and employees of the contracted
2 service provider or public entity shall be paid as if the school facilities
3 had remained open and in full operation¹. ¹Upon request of the school
4 district, the educational services commission, county special services
5 school district, and a jointure commission shall certify, and provide
6 any supporting documentation to a school district as may be necessary
7 to verify, that payments received have been used solely to meet the
8 payroll and fixed costs of the contracted service provider or public
9 entity. Any portion of those payments not used to meet the payroll and
10 fixed costs shall be returned to the school district.¹ An educational
11 services commission, county special services school district, jointure
12 commission or any lead school district under a shared services
13 agreement or cooperative contract, shall make all reasonable efforts to
14 renegotiate a contract in good faith subject to this paragraph and may
15 direct contracted service providers or public entities, who are a party to
16 a contract and receive payments under this paragraph, to provide
17 services which may reasonably be provided and are within the general
18 expertise or service provision of the original contract. Negotiations
19 shall not include indirect costs such as fuel or tolls. As a condition of
20 negotiations, a contracted service provider or public entity shall reveal
21 whether the entity has insurance coverage for business interruption
22 covering work stoppages.

23 (5) The provisions ¹of paragraphs (1) through (4)¹ of this
24 subsection e. shall not apply to any employee whose weekly hours of
25 work are reduced, and to whom unemployment benefits are provided,
26 pursuant to a shared work program approved pursuant to the
27 provisions of P.L.2011, c.154 (C.43:21-20.3 et seq.). ¹A contracted
28 service provider, educational services commission, county special
29 services school district, or jointure commission shall notify any
30 school district with which it has entered into a contract to provide
31 services of its intent to reduce the hours of work of its employees
32 pursuant to a shared work program approved pursuant to the
33 provisions of P.L.2011, c.154 (C.43:21-20.3 et seq.).
34 Notwithstanding the provisions of paragraph (3) of this subsection e.,
35 if a contracted service provider reduces the amount that it pays to its
36 employees providing services to a school district, and that reduction is
37 the result of a reduction of workhours of the those employees made
38 pursuant to a shared work program approved pursuant to the
39 provisions of P.L.2011, c.154 (C.43:21-20.3 et seq.), then the amount
40 paid by the public school district to the contracted service provider
41 shall be reduced by the same amount. Notwithstanding the provisions
42 of paragraph (4) of this subsection e., if an educational services
43 commission, county special services school district, or jointure
44 commission reduces the amount that it pays to its employees providing
45 services to a school district, and that reduction is the result of a
46 reduction of workhours of the those employees made pursuant to a
47 shared work program approved pursuant to the provisions of P.L.2011,
48 c.154 (C.43:21-20.3 et seq.), then the amount paid by the public school

1 district to the educational services commission, county special services
2 school district, or jointure commission shall be reduced by the same
3 amount.¹

4 f. For purposes of subsections b., c., d., and e. of this section,
5 “school district” shall include a charter school and a renaissance
6 school project.
7 (cf: P.L.2020, c.27, s.1)

8
9 ¹【3. Section 3 of P.L.1989, c.261 (C.34:11B-3) is amended to
10 read as follows:

11 3. As used in this act:

12 a. "Child" means a biological, adopted, foster child, or resource
13 family child, stepchild, legal ward, or child of a parent, including a
14 child who becomes the child of a parent pursuant to a valid written
15 agreement between the parent and a gestational carrier.

16 b. "Director" means the Director of the Division on Civil
17 Rights.

18 c. "Division" means the Division on Civil Rights in the
19 Department of Law and Public Safety.

20 d. "Employ" means to suffer or permit to work for
21 compensation, and includes ongoing, contractual relationships in
22 which the employer retains substantial direct or indirect control
23 over the employee's employment opportunities or terms and
24 conditions of employment.

25 e. "Employee" means a person who is employed for at least 12
26 months by an employer, with respect to whom benefits are sought
27 under this act, for not less than 1,000 base hours during the
28 immediately preceding 12-month period. Any time, up to a
29 maximum of 90 calendar days, during which a person is laid off or
30 furloughed by an employer due to that employer curtailing
31 operations because of a state of emergency declared after October
32 22, 2012, shall be regarded as time in which the person is employed
33 for the purpose of determining eligibility for leave time under this
34 act. In making the determination, the base hours per week during
35 the layoff or furlough shall be deemed to be the same as the average
36 number of hours worked per week during the rest of the 12-month
37 period.

38 f. "Employer" means a person or corporation, partnership,
39 individual proprietorship, joint venture, firm or company or other
40 similar legal entity which engages the services of an employee and
41 which:

42 (1) (Deleted by amendment, P.L.2019, c.37);

43 (2) (Deleted by amendment, P.L.2019, c.37);

44 (3) 【With respect to the period of time from the 1,095th day
45 following the effective date of P.L.1989, c.261 (C.34:11B-1 et seq.)
46 through June 30, 2019, employs 50 or more employees for each
47 working day during each of 20 or more calendar workweeks in the
48 then current or immediately preceding calendar year; and】 (Deleted

1 by amendment, P.L. _____, c. _____) (pending before the Legislature as
2 this bill)

3 (4) With respect to any period of time **【on or after】** from June
4 30, 2019 until the effective date of P.L. _____ c. _____ (pending before the
5 Legislature as this bill), employs 30 or more employees for each
6 working day during each of 20 or more calendar workweeks in the
7 then current or immediately preceding calendar year; and

8 (5) With respect to any period of time after the effective date of
9 P.L. _____ c. _____ (pending before the Legislature as this bill), employs
10 one or more employees for each working day during each of 20 or
11 more calendar workweeks in the then current or immediately
12 preceding calendar year.

13 "Employer" includes the State, any political subdivision thereof,
14 and all public offices, agencies, boards or bodies.

15 g. "Employment benefits" means all benefits and policies
16 provided or made available to employees by an employer, and
17 includes group life insurance, health insurance, disability insurance,
18 sick leave, annual leave, pensions, or other similar benefits.

19 h. "Parent" means a person who is the biological parent,
20 adoptive parent, foster parent, resource family parent, step-parent,
21 parent-in-law or legal guardian, having a "parent-child relationship"
22 with a child as defined by law, or having sole or joint legal or
23 physical custody, care, guardianship, or visitation with a child, or
24 who became the parent of the child pursuant to a valid written
25 agreement between the parent and a gestational carrier.

26 i. "Family leave" means leave from employment so that the
27 employee may provide care made necessary by reason of:

28 (1) the birth of a child of the employee, including a child born
29 pursuant to a valid written agreement between the employee and a
30 gestational carrier;

31 (2) the placement of a child into foster care with the employee
32 or in connection with adoption of such child by the employee;

33 (3) the serious health condition of a family member of the
34 employee; or.

35 (4) in the event of a state of emergency declared by the
36 Governor, or when indicated to be needed by the Commissioner of
37 Health or other public health authority, an epidemic of a
38 communicable disease, a known or suspected exposure to the
39 communicable disease, or efforts to prevent spread of a
40 communicable disease, which:

41 (a) requires in-home care or treatment of a child due to the
42 closure of the school or place of care of the child of the employee,
43 by order of a public official due to the epidemic or other public
44 health emergency;

45 (b) prompts the issuance by a public health authority of a
46 determination, including by mandatory quarantine, requiring or
47 imposing responsive or prophylactic measures as a result of illness
48 caused by an epidemic of a communicable disease or known or
49 suspected exposure to the communicable disease because the

1 presence in the community of a family member in need of care by
2 the employee, would jeopardize the health of others; or

3 (c) results in the recommendation of a health care provider or
4 public health authority, that a family member in need of care by the
5 employee voluntarily undergo self-quarantine as a result of
6 suspected exposure to a communicable disease because the presence
7 in the community of that family member in need of care by the
8 employee, would jeopardize the health of others.

9 j. "Family member" means a child, parent, parent-in-law,
10 sibling, grandparent, grandchild, spouse, domestic partner, or one
11 partner in a civil union couple, or any other individual related by
12 blood to the employee, and any other individual that the employee
13 shows to have a close association with the employee which is the
14 equivalent of a family relationship.

15 k. "Reduced leave schedule" means leave scheduled for fewer
16 than an employee's usual number of hours worked per workweek
17 but not for fewer than an employee's usual number of hours worked
18 per workday, unless agreed to by the employee and the employer.

19 l. "Serious health condition" means an illness, injury,
20 impairment, or physical or mental condition which requires:

21 (1) inpatient care in a hospital, hospice, or residential medical
22 care facility; or

23 (2) continuing medical treatment or continuing supervision by a
24 health care provider.

25 m. "State of emergency" means a natural or man-made disaster
26 or emergency for which a state of emergency has been declared by
27 the President of the United States or the Governor, or for which a
28 state of emergency has been declared by a municipal emergency
29 management coordinator.

30 n. "Health care provider" means a duly licensed health care
31 provider or other health care provider deemed appropriate by the
32 director.

33 (cf: P.L.2020, c.23, s.1)]¹

34

35 ¹[4.] 3.¹ R.S.43:21-3 is amended to read as follows:

36 43:21-3. Benefits.

37 (a) Payment of benefits.

38 All benefits shall be promptly paid from the fund in accordance
39 with such regulations as may be prescribed hereunder.

40 (b) Weekly benefits for unemployment.

41 (1) With respect to an individual's benefit year commencing on or
42 after July 1, 1961 and before June 1, 2020¹, and after the time that
43 federal financing of unemployment benefits in this State, pursuant to
44 the "Coronavirus Aid, Relief, and Economic Security Act," Pub. Law
45 116-136, ceases¹, such individual, if eligible and unemployed (as
46 defined in subsection (m) of R.S.43:21-19), shall be paid an amount
47 (except as to final payment) equal to his weekly benefit rate less any
48 remuneration, other than remuneration from self-employment paid to

1 an individual who is receiving a self-employment assistance
2 allowance, paid or payable to him for such week in excess of 20% of
3 his weekly benefit rate (fractional part of a dollar omitted) or \$5.00,
4 whichever is the greater; provided that such amount shall be computed
5 to the next lower multiple of \$1.00 if not already a multiple thereof.

6 (2) With respect to an individual's benefit year commencing on or
7 after June 1, 2020 'until the time that federal financing of
8 unemployment benefits in this State, pursuant to the "Coronavirus Aid,
9 Relief, and Economic Security Act," Pub. Law 116-136 ceases¹, such
10 individual, if eligible and unemployed (as defined in subsection (m) of
11 R.S.43:21-19), shall be paid an amount (except as to final payment)
12 equal to his weekly benefit rate less any remuneration, other than
13 remuneration from self-employment paid to an individual who is
14 receiving a self-employment assistance allowance, paid or payable to
15 him for such week in excess of 40% of his weekly benefit rate
16 (fractional part of a dollar omitted) or \$5.00, whichever is the greater;
17 provided that such amount shall be computed to the next lower
18 multiple of \$1.00 if not already a multiple thereof.

19 (c) Weekly benefit rate.

20 (1) With respect to an individual whose benefit year commences
21 after September 30, 1984, his weekly benefit rate under each
22 determination shall be 60% of his average weekly wage, subject to a
23 maximum of 56 2/3 % of the Statewide average weekly remuneration
24 paid to workers by employers subject to this chapter (R.S.43:21-1 et
25 seq.), as determined and promulgated by the Commissioner of Labor
26 and Workforce Development; provided, however, that such
27 individual's weekly benefit rate shall be computed to the next lower
28 multiple of \$1.00 if not already a multiple thereof.

29 (2) Dependency benefits.

30 (A) With respect to an individual whose benefit year commences
31 after September 30, 1984, the individual's weekly benefit rate as
32 determined in paragraph (1) of this subsection (c) will be increased by
33 7% for the first dependent and 4% each for the next two dependents
34 (up to a maximum of three dependents), computed to the next lower
35 multiple of \$1.00 if not already a multiple thereof, except that the
36 maximum weekly benefit rate payable for an individual claiming
37 dependency benefits shall not exceed the maximum amount
38 determined under paragraph (1) of this subsection (c).

39 (B) For the purposes of this paragraph (2), a dependent is defined
40 as an individual's unemployed spouse or an unemployed unmarried
41 child (including a stepchild or a legally adopted child) under the age of
42 19 or an unemployed unmarried child, who is attending an educational
43 institution as defined in subsection (y) of R.S.43:21-19 on a full-time
44 basis and is under the age of 22. If an individual's spouse is employed
45 during the week the individual files an initial claim for benefits, this
46 paragraph (2) shall not apply. If both spouses establish a claim for
47 benefits in accordance with the provisions of this chapter (R.S.43:21-1
48 et seq.), only one shall be entitled to dependency benefits as provided
49 in this paragraph (2).

1 (C) Any determination establishing dependency benefits under this
2 paragraph (2) shall remain fixed for the duration of the individual's
3 benefit year and shall not be increased or decreased unless it is
4 determined by the division that the individual wrongfully claimed
5 dependency benefits as a result of false or fraudulent representation.

6 (D) Notwithstanding the provisions of any other law, the division
7 shall use every available administrative means to insure that
8 dependency benefits are paid only to individuals who meet the
9 requirements of this paragraph (2). These administrative actions may
10 include, but shall not be limited to, the following:

11 (i) All married individuals claiming dependents under this
12 paragraph (2) shall be required to provide the social security number
13 of the individual's spouse. If the individual indicates that the spouse is
14 unemployed, the division shall match the social security number of the
15 spouse against available wage records to determine whether earnings
16 were reported on the last quarterly earnings report filed by employers
17 under R.S.43:21-14. If earnings were reported, the division shall
18 contact in writing the last employer to determine whether the spouse is
19 currently employed.

20 (ii) Where a child is claimed as a dependent by an individual under
21 this paragraph (2), the individual shall be required to provide to the
22 division the most recent federal income tax return filed by the
23 individual to assist the division in verifying the claim.

24 (3) For the purposes of this subsection (c), the "Statewide average
25 weekly remuneration paid to workers by employers" shall be
26 computed and determined by the Commissioner of Labor and
27 Workforce Development on or before September 1 of each year on the
28 basis of one-fifty-second of the total remuneration reported for the
29 preceding calendar year by employers subject to this chapter, divided
30 by the average of the number of workers reported by such employers,
31 and shall be effective as to benefit determinations in the calendar year
32 following such computation and determination.

33 (d) Maximum total benefits.

34 (1) (A) (Deleted by amendment, P.L.2003, c.107).

35 (B) (i) With respect to an individual for whom benefits shall be
36 payable for benefit years commencing on or after July 1, 1986, and
37 before July 1, 2003 as provided in this section, the individual shall be
38 entitled to receive a total amount of benefits equal to three-quarters of
39 the individual's base weeks with all employers in the base year
40 multiplied by the individual's weekly benefit rate; but the amount of
41 benefits thus resulting under that determination shall be adjusted to the
42 next lower multiple of \$1.00 if not already a multiple thereof. With
43 respect to an individual for whom benefits shall be payable for benefit
44 years commencing on or after July 1, 2003 as provided in this section,
45 the individual shall be entitled to receive a total amount of benefits
46 equal to the number of the individual's base weeks with all employers
47 in the base year multiplied by the individual's weekly benefit rate; but
48 the amount of benefits thus resulting under that determination shall be

1 adjusted to the next lower multiple of \$1.00 if not already a multiple
2 thereof.

3 (ii) Except as provided pursuant to paragraph (1) of subsection (c)
4 of R.S.43:21-7, benefits paid to an individual for benefit years
5 commencing on or after July 1, 1986 shall be charged against the
6 accounts of the individual's base year employers in the following
7 manner:

8 Each week of benefits paid to an eligible individual shall be
9 charged against each base year employer's account in the same
10 proportion that the wages paid by each employer to the individual
11 during the base year bear to the wages paid by all employers to that
12 individual during the base year.

13 (iii) (Deleted by amendment, P.L.1997, c.255.)

14 (2) No such individual shall be entitled to receive benefits under
15 this chapter (R.S.43:21-1 et seq.) in excess of 26 times his weekly
16 benefit rate in any benefit year under either of subsections (c) and (f)
17 of R.S. 43:21-4. In the event that any individual qualifies for benefits
18 under both of said subsections during any benefit year, the maximum
19 total amount of benefits payable under said subsections combined to
20 such individual during the benefit year shall be one and one-half times
21 the maximum amount of benefits payable under one of said
22 subsections.

23 (3) (Deleted by amendment, P.L.1984, c.24.)

24 (cf: P.L.2004, c.45, s.1)

25

26 ¹**[5.]** 4.¹ R.S.43:21-4 is amended to read as follows:

27 43:21-4. Benefit eligibility conditions. An unemployed
28 individual shall be eligible to receive benefits with respect to any week
29 eligible only if:

30 (a) The individual has filed a claim at an unemployment insurance
31 claims office and thereafter continues to report at an employment
32 service office or unemployment insurance claims office, as directed by
33 the division in accordance with such regulations as the division may
34 prescribe, except that the division may, by regulation, waive or alter
35 either or both of the requirements of this subsection as to individuals
36 attached to regular jobs, and as to such other types of cases or
37 situations with respect to which the division finds that compliance with
38 such requirements would be oppressive, or would be inconsistent with
39 the purpose of this act; provided that no such regulation shall conflict
40 with subsection (a) of R.S.43:21-3.

41 (b) The individual has made a claim for benefits in accordance
42 with the provisions of subsection (a) of R.S.43:21-6.

43 (c) (1) The individual is able to work, and is available for work,
44 and has demonstrated to be actively seeking work, except as
45 hereinafter provided in this subsection or in subsection (f) of this
46 section.

47 (2) The director may modify the requirement of actively seeking
48 work if such modification of this requirement is warranted by
49 economic conditions.

1 (3) No individual, who is otherwise eligible, shall be deemed
2 ineligible, or unavailable for work, because the individual is on
3 vacation, without pay, during said week, if said vacation is not the
4 result of the individual's own action as distinguished from any
5 collective action of a collective bargaining agent or other action
6 beyond the individual's control.

7 (4) (A) Subject to such limitations and conditions as the division
8 may prescribe, an individual, who is otherwise eligible, shall not be
9 deemed unavailable for work or ineligible because the individual is
10 attending a training program approved for the individual by the
11 division to enhance the individual's employment opportunities or
12 because the individual failed or refused to accept work while attending
13 such program.

14 (B) For the purpose of this paragraph (4), any training program
15 shall be regarded as approved by the division for the individual if the
16 program and the individual meet the following requirements:

17 (i) The training is for a labor demand occupation and is likely to
18 enhance the individual's marketable skills and earning power, except
19 that the training may be for an occupation other than a labor demand
20 occupation if the individual is receiving short-time benefits pursuant to
21 the provisions of P.L.2011, c.154 (C.43:21-20.3 et al.) and the training
22 is necessary to prevent a likely loss of jobs;

23 (ii) The training is provided by a competent and reliable private or
24 public entity approved by the Commissioner of Labor and Workforce
25 Development pursuant to the provisions of section 8 of the "1992 New
26 Jersey Employment and Workforce Development Act," P.L.1992, c.43
27 (C.34:15D-8);

28 (iii) The individual can reasonably be expected to complete the
29 program, either during or after the period of benefits;

30 (iv) The training does not include on the job training or other
31 training under which the individual is paid by an employer for work
32 performed by the individual during the time that the individual
33 receives benefits; and

34 (v) The individual enrolls in vocational training, remedial
35 education or a combination of both on a full-time basis, except that the
36 training or education may be on a part-time basis if the individual is
37 receiving short-time benefits pursuant to the provisions of P.L.2011,
38 c.154 (C.43:21-20.3 et al.).

39 (C) If the requirements of subparagraph (B) of this paragraph (4)
40 are met, the division shall not withhold approval of the training
41 program for the individual for any of the following reasons:

42 (i) The training includes remedial basic skills education necessary
43 for the individual to successfully complete the vocational component
44 of the training;

45 (ii) The training is provided in connection with a program under
46 which the individual may obtain a college degree, including a post-
47 graduate degree;

48 (iii) The length of the training period under the program; or

1 (iv) The lack of a prior guarantee of employment upon completion
2 of the training.

3 (D) For the purpose of this paragraph (4), "labor demand
4 occupation" means an occupation for which there is or is likely to be
5 an excess of demand over supply for adequately trained workers,
6 including, but not limited to, an occupation designated as a labor
7 demand occupation by the Center for Occupational Employment
8 Information pursuant to the provisions of subsection d. of section 27 of
9 P.L.2005, c.354 (C.34:1A-86).

10 (5) An unemployed individual, who is otherwise eligible, shall not
11 be deemed unavailable for work or ineligible solely by reason of the
12 individual's attendance before a court in response to a summons for
13 service on a jury.

14 (6) An unemployed individual, who is otherwise eligible, shall not
15 be deemed unavailable for work or ineligible solely by reason of the
16 individual's attendance at the funeral of an immediate family member,
17 provided that the duration of the attendance does not extend beyond a
18 two-day period.

19 For purposes of this paragraph, "immediate family member"
20 includes any of the following individuals: father, mother, mother-in-
21 law, father-in-law, grandmother, grandfather, grandchild, spouse,
22 child, child placed by the Division of Youth and Family Services in
23 the Department of Children and Families, sister or brother of the
24 unemployed individual and any relatives of the unemployed individual
25 residing in the unemployed individual's household.

26 (7) No individual, who is otherwise eligible, shall be deemed
27 ineligible or unavailable for work with respect to any week because,
28 during that week, the individual fails or refuses to accept work while
29 the individual is participating on a full-time basis in self-employment
30 assistance activities authorized by the division, whether or not the
31 individual is receiving a self-employment allowance during that week.

32 (8) Any individual who is determined to be likely to exhaust
33 regular benefits and need reemployment services based on information
34 obtained by the worker profiling system shall not be eligible to receive
35 benefits if the individual fails to participate in available reemployment
36 services to which the individual is referred by the division or in similar
37 services, unless the division determines that:

38 (A) The individual has completed the reemployment services; or

39 (B) There is justifiable cause for the failure to participate, which
40 shall include participation in employment and training, self-
41 employment assistance activities or other activities authorized by the
42 division to assist reemployment or enhance the marketable skills and
43 earning power of the individual and which shall include any other
44 circumstance indicated pursuant to this section in which an individual
45 is not required to be available for and actively seeking work to receive
46 benefits.

47 (9) An unemployed individual, who is otherwise eligible, shall not
48 be deemed unavailable for work or ineligible solely by reason of the

1 individual's work as a board worker for a county board of elections on
2 an election day.

3 (10) An individual who is employed by a shared work employer
4 and is otherwise eligible for benefits shall not be deemed ineligible for
5 short-time benefits because the individual is unavailable for work with
6 employers other than the shared work employer, so long as:

7 (A) The individual is able to work and is available to work the
8 individual's normal full-time hours for the shared work employer; or

9 (B) The individual is attending a training program which is in
10 compliance with the provisions of paragraph (4) of subsection (c) of
11 this section and the agreements and certifications required pursuant to
12 the provisions of section 2 of P.L.2011, c.154 (C.43:21-20.4).

13 (d) With respect to any benefit year commencing before January 1,
14 2002, the individual has been totally or partially unemployed for a
15 waiting period of one week in the benefit year which includes that
16 week. When benefits become payable with respect to the third
17 consecutive week next following the waiting period, the individual
18 shall be eligible to receive benefits as appropriate with respect to the
19 waiting period. No week shall be counted as a week of unemployment
20 for the purposes of this subsection:

21 (1) If benefits have been paid, or are payable with respect thereto;
22 provided that the requirements of this paragraph shall be waived with
23 respect to any benefits paid or payable for a waiting period as provided
24 in this subsection;

25 (2) If it has constituted a waiting period week under the
26 "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et
27 al.);

28 (3) Unless the individual fulfills the requirements of subsections
29 (a) and (c) of this section;

30 (4) If with respect thereto, claimant was disqualified for benefits in
31 accordance with the provisions of subsection (d) of R.S.43:21-5.

32 The waiting period provided by this subsection shall not apply to
33 benefit years commencing on or after January 1, 2002. An individual
34 whose total benefit amount was reduced by the application of the
35 waiting period to a claim which occurred on or after January 1, 2002
36 and before the effective date of P.L.2002, c.13, shall be permitted to
37 file a claim for the additional benefits attributable to the waiting period
38 in the form and manner prescribed by the division, but not later than
39 the 180th day following the effective date of P.L.2002, c.13 unless the
40 division determines that there is good cause for a later filing.

41 (e) (1) (Deleted by amendment, P.L.2001, c.17).

42 (2) (Deleted by amendment, P.L.2008, c.17).

43 (3) (Deleted by amendment, P.L.2008, c.17).

44 (4) With respect to benefit years commencing on or after January
45 7, 2001 and before June 1 2020, except as otherwise provided in
46 paragraph (5) of this subsection, the individual has, during his base
47 year as defined in subsection (c) of R.S.43:21-19:

48 (A) Established at least 20 base weeks as defined in paragraphs (2)
49 and (3) of subsection (t) of R.S.43:21-19; or

1 (B) If the individual has not met the requirements of subparagraph
2 (A) of this paragraph (4), earned remuneration not less than an amount
3 1,000 times the minimum wage in effect pursuant to section 5 of
4 P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year
5 preceding the calendar year in which the benefit year commences,
6 which amount shall be adjusted to the next higher multiple of \$100 if
7 not already a multiple thereof.

8 (5) With respect to benefit years commencing on or after January
9 7, 2001 and before June 1, 2020¹, and after the time that federal
10 financing of unemployment benefits in this State, pursuant to the
11 “Coronavirus Aid, Relief, and Economic Security Act,” Pub. Law 116-
12 136, ceases¹, notwithstanding the provisions of paragraph (4) of this
13 subsection, an unemployed individual claiming benefits on the basis of
14 service performed in the production and harvesting of agricultural
15 crops shall, subject to the limitations of subsection (i) of R.S.43:21-19,
16 be eligible to receive benefits if during his base year, as defined in
17 subsection (c) of R.S.43:21-19, the individual:

18 (A) Has established at least 20 base weeks as defined in paragraphs
19 (2) and (3) of subsection (t) of R.S.43:21-19; or

20 (B) Has earned remuneration not less than an amount 1,000 times
21 the minimum wage in effect pursuant to section 5 of P.L.1966, c.113
22 (C.34:11-56a4) on October 1 of the calendar year preceding the
23 calendar year in which the benefit year commences, which amount
24 shall be adjusted to the next higher multiple of \$100 if not already a
25 multiple thereof; or

26 (C) Has performed at least 770 hours of service in the production
27 and harvesting of agricultural crops.

28 (6) With respect to benefit years commencing on or after June 1,
29 2020¹, until the time that federal financing of unemployment benefits
30 in this State, pursuant to the “Coronavirus Aid, Relief, and Economic
31 Security Act,” Pub. Law 116-136 ceases¹, the individual, during his
32 base year as defined in subsection (c) of R.S.43:21-19:

33 (A) Has established at least 20 base weeks as defined in
34 ¹[paragraphs (2) and (3)] paragraph (4)¹ of subsection (t) of
35 R.S.43:21-19; or

36 (B) Has, if the individual has not met the requirements of
37 subparagraph (A) of this paragraph (6), earned remuneration not less
38 than an amount 500 times the minimum wage in effect pursuant to
39 section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the
40 calendar year preceding the calendar year in which the benefit year
41 commences, which amount shall be adjusted to the next higher
42 multiple of \$100 if not already a multiple thereof; or

43 (C) Has, if the individual has not met the requirements of
44 subparagraph (A) or subparagraph (B) of this paragraph (6), performed
45 at least 770 hours of service in the production and harvesting of
46 agricultural crops, subject to the limitations of subparagraph (I) of
47 paragraph (1) of subsection (i) of R.S.43:21-19.

1 (7) The individual applying for benefits in any successive benefit
2 year has earned at least six times his previous weekly benefit amount
3 and has had four weeks of employment since the beginning of the
4 immediately preceding benefit year. This provision shall be in
5 addition to the earnings requirements specified in paragraph [(4) or]
6 (5) or (6) of this subsection, as applicable.

7 (f) (1) The individual has suffered any accident or sickness not
8 compensable under the workers' compensation law, R.S.34:15-1 et
9 seq. and resulting in the individual's total disability to perform any
10 work for remuneration, and would be eligible to receive benefits under
11 this chapter (R.S.43:21-1 et seq.) (without regard to the maximum
12 amount of benefits payable during any benefit year) except for the
13 inability to work and has furnished notice and proof of claim to the
14 division, in accordance with its rules and regulations, and payment is
15 not precluded by the provisions of R.S.43:21-3(d); provided, however,
16 that benefits paid under this subsection (f) shall be computed on the
17 basis of only those base year wages earned by the claimant as a
18 "covered individual," as defined in subsection (b) of section 3 of
19 P.L.1948, c.110 (C.43:21-27); provided further that no benefits shall
20 be payable under this subsection to any individual:

21 (A) For any period during which such individual is not under the
22 care of a legally licensed physician, dentist, optometrist, podiatrist,
23 practicing psychologist, advanced practice nurse, or chiropractor, who,
24 when requested by the division, shall certify within the scope of the
25 practitioner's practice, the disability of the individual, the probable
26 duration thereof, and, where applicable, the medical facts within the
27 practitioner's knowledge;

28 (B) (Deleted by amendment, P.L.1980, c.90.)

29 (C) For any period of disability due to willfully or intentionally
30 self-inflicted injury, or to injuries sustained in the perpetration by the
31 individual of a crime of the first, second or third degree;

32 (D) For any week with respect to which or a part of which the
33 individual has received or is seeking benefits under any unemployment
34 compensation or disability benefits law of any other state or of the
35 United States; provided that if the appropriate agency of such other
36 state or the United States finally determines that the individual is not
37 entitled to such benefits, this disqualification shall not apply;

38 (E) For any week with respect to which or part of which the
39 individual has received or is seeking disability benefits under the
40 "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-
41 25 et al.);

42 (F) For any period of disability commencing while such individual
43 is a "covered individual," as defined in subsection (b) of section 3 of
44 the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-
45 27).

46 (2) The individual is taking family temporary disability leave to
47 provide care for a family member with a serious health condition or to
48 be with a child during the first 12 months after the child's birth or
49 placement of the child for adoption or as a foster child with the

1 individual, and the individual would be eligible to receive benefits
2 under R.S.43:21-1 et seq. (without regard to the maximum amount of
3 benefits payable during any benefit year) except for the individual's
4 unavailability for work while taking the family temporary disability
5 leave, and the individual has furnished notice and proof of claim to the
6 division, in accordance with its rules and regulations, and payment is
7 not precluded by the provisions of R.S.43:21-3(d) provided, however,
8 that benefits paid under this subsection (f) shall be computed on the
9 basis of only those base year wages earned by the claimant as a
10 "covered individual," as defined in subsection (b) of section 3 of
11 P.L.1948, c.110 (C.43:21-27); provided further that no benefits shall
12 be payable under this subsection to any individual:

13 (A) For any week with respect to which or a part of which the
14 individual has received or is seeking benefits under any unemployment
15 compensation or disability benefits law of any other state or of the
16 United States; provided that if the appropriate agency of such other
17 state or the United States finally determines that the individual is not
18 entitled to such benefits, this disqualification shall not apply;

19 (B) For any week with respect to which or part of which the
20 individual has received or is seeking disability benefits for a disability
21 of the individual under the "Temporary Disability Benefits Law,"
22 P.L.1948, c.110 (C.43:21-25 et al.);

23 (C) For any period of family temporary disability leave
24 commencing while the individual is a "covered individual," as defined
25 in subsection (b) of section 3 of the "Temporary Disability Benefits
26 Law," P.L.1948, c.110 (C.43:21-27); or

27 (D) For any period of family temporary disability leave for a
28 serious health condition of a family member of the claimant during
29 which the family member is not receiving inpatient care in a hospital,
30 hospice, or residential medical care facility and is not subject to
31 continuing medical treatment or continuing supervision by a health
32 care provider, who, when requested by the division, shall certify
33 within the scope of the provider's practice, the serious health condition
34 of the family member, the probable duration thereof, and, where
35 applicable, the medical facts within the provider's knowledge.

36 (3) Benefit payments under this subsection (f) shall be charged to
37 and paid from the State disability benefits fund established by the
38 "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-
39 25 et al.), and shall not be charged to any employer account in
40 computing any employer's experience rate for contributions payable
41 under this chapter.

42 (g) Benefits based on service in employment defined in
43 subparagraphs (B) and (C) of R.S.43:21-19 (i)(1) shall be payable in
44 the same amount and on the terms and subject to the same conditions
45 as benefits payable on the basis of other service subject to the
46 "unemployment compensation law"; except that, notwithstanding any
47 other provisions of the "unemployment compensation law":

48 (1) With respect to service performed after December 31, 1977, in
49 an instructional, research, or principal administrative capacity for an

1 educational institution, benefits shall not be paid based on such
2 services for any week of unemployment commencing during the
3 period between two successive academic years, or during a similar
4 period between two regular terms, whether or not successive, or during
5 a period of paid sabbatical leave provided for in the individual's
6 contract, to any individual if such individual performs such services in
7 the first of such academic years (or terms) and if there is a contract or
8 a reasonable assurance that such individual will perform services in
9 any such capacity for any educational institution in the second of such
10 academic years or terms;

11 (2) With respect to weeks of unemployment beginning after
12 September 3, 1982, on the basis of service performed in any other
13 capacity for an educational institution, benefits shall not be paid on the
14 basis of such services to any individual for any week which
15 commences during a period between two successive academic years or
16 terms if such individual performs such services in the first of such
17 academic years or terms and there is a reasonable assurance that such
18 individual will perform such services in the second of such academic
19 years or terms, except that if benefits are denied to any individual
20 under this paragraph (2) and the individual was not offered an
21 opportunity to perform these services for the educational institution for
22 the second of any academic years or terms, the individual shall be
23 entitled to a retroactive payment of benefits for each week for which
24 the individual filed a timely claim for benefits and for which benefits
25 were denied solely by reason of this clause;

26 (3) With respect to those services described in paragraphs (1) and
27 (2) above, benefits shall not be paid on the basis of such services to
28 any individual for any week which commences during an established
29 and customary vacation period or holiday recess if such individual
30 performs such services in the period immediately before such vacation
31 period or holiday recess, and there is a reasonable assurance that such
32 individual will perform such services in the period immediately
33 following such period or holiday recess;

34 (4) With respect to any services described in paragraphs (1) and
35 (2) above, benefits shall not be paid as specified in paragraphs (1), (2),
36 and (3) above to any individual who performed those services in an
37 educational institution while in the employ of an educational service
38 agency, and for this purpose the term "educational service agency"
39 means a governmental agency or governmental entity which is
40 established and operated exclusively for the purpose of providing
41 those services to one or more educational institutions.

42 (5) With respect to services performed after the effective date of
43 P.L. , c. (pending before the legislature as this bill), as used in this
44 subsection:

45 "Established and customary vacation period or holiday recess"
46 includes those breaks scheduled during fall, winter, and spring
47 recesses when those vacation periods occur within a term or semester.
48 "Established and customary vacation period or holiday recess" does
49 not include the summer term or semester, unless, based on objective

1 criteria including enrollment and staffing, the summer is not in fact a
2 part of the academic year for a particular institution.

3 “Reasonable assurance” means a written, verbal, or implied
4 agreement that the employee will perform services in the same
5 capacity during the ensuing academic year or term as in the first
6 academic year or term. A person shall not be deemed to be performing
7 services “in the same capacity” unless those services are rendered
8 under the same terms or conditions of employment in the ensuing year
9 as in the first academic year or term.

10 An individual who is tenured or holds tenure track status is
11 considered to have reasonable assurance, unless advised otherwise.
12 For the purposes of this subsection, tenure track status means a
13 probationary faculty employee having an opportunity to be reviewed
14 for tenure.

15 A person is presumed not to have reasonable assurance under an
16 offer that is conditioned on enrollment, funding, program changes, or
17 other circumstances under the control of the employer. It is the
18 employer's burden to provide sufficient documentation to overcome
19 this presumption. Reasonable assurance shall be determined on a
20 case-by-case basis considering the totality of circumstances rather than
21 on the existence of any one factor. For an individual to be regarded as
22 having reasonable assurance of employment, the totality of
23 circumstances must show that it is highly probable that there is a job
24 available for the employee in the following academic year or term. If
25 any contingencies in the employment offer are within the employer's
26 control, the claimant shall not be regarded as having a reasonable
27 assurance of employment. Contingencies within the employer's
28 control include, but are not limited to, enrollment, funding, including
29 appropriations and the allocation of funding, program changes, final
30 course offering, and facility availability.

31 (h) Benefits shall not be paid to any individual on the basis of any
32 services, substantially all of which consist of participating in sports or
33 athletic events or training or preparing to so participate, for any week
34 which commences during the period between two successive sports
35 seasons (or similar periods) if such individual performed such services
36 in the first of such seasons (or similar periods) and there is a
37 reasonable assurance that such individual will perform such services in
38 the later of such seasons (or similar periods).

39 (i) (1) Benefits shall not be paid on the basis of services
40 performed by an alien unless such alien is an individual who was
41 lawfully admitted for permanent residence at the time the services
42 were performed and was lawfully present for the purpose of
43 performing the services or otherwise was permanently residing in the
44 United States under color of law at the time the services were
45 performed (including an alien who is lawfully present in the United
46 States as a result of the application of the provisions of section
47 212(d)(5) (8 U.S.C. s.1182 (d)(5)) of the Immigration and Nationality
48 Act (8 U.S.C. s.1101 et seq.)); provided that any modifications of the
49 provisions of section 3304(a)(14) of the Federal Unemployment Tax

1 Act (26 U.S.C. s. 3304 (a) (14)) **【as provided by Pub.L.94-566】**,
2 which specify other conditions or other effective dates than stated
3 herein for the denial of benefits based on services performed by aliens
4 and which modifications are required to be implemented under State
5 law as a condition for full tax credit against the tax imposed by the
6 Federal Unemployment Tax Act, shall be deemed applicable under the
7 provisions of this section.

8 (2) Any data or information required of individuals applying for
9 benefits to determine whether benefits are not payable to them because
10 of their alien status shall be uniformly required from all applicants for
11 benefits.

12 (3) In the case of an individual whose application for benefits
13 would otherwise be approved, no determination that benefits to such
14 individual are not payable because of alien status shall be made except
15 upon a preponderance of the evidence.

16 (j) Notwithstanding any other provision of this chapter, the
17 director may, to the extent that it may be deemed efficient and
18 economical, provide for consolidated administration by one or more
19 representatives or deputies of claims made pursuant to subsection (f)
20 of this section with those made pursuant to Article III (State plan) of
21 the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-
22 25 et al.).

23 (cf: P.L.2019, c.37, s.5)

24

25 **1【6.】 5.1** R.S.43:21-6 is amended to read as follows:

26 43:21-6. (a) Filing. (1) Claims for benefits shall be made in
27 accordance with such regulations as the Director of the Division of
28 Unemployment and Temporary Disability Insurance of the
29 Department of Labor and Workforce Development of the State of
30 New Jersey may approve. Each employer shall post and maintain
31 on his premises printed notices of his subject status, of such design,
32 in such numbers and at such places as the director of the division
33 may determine to be necessary to give notice thereof to persons in
34 the employer's service. Each employer shall give to each individual
35 at the time he becomes unemployed, for any reason, whether the
36 unemployment is permanent or temporary, or, if the employer
37 provides the individual an advanced notification of a layoff, at the
38 time of that notification, a printed copy of benefit instructions. The
39 benefit instructions given to the individual shall include, but not be
40 limited to, the following information: (A) the date upon which the
41 individual becomes unemployed, and, in the case that the
42 unemployment is temporary, to the extent possible, the date upon
43 which the individual is expected to be recalled to work; and (B) that
44 the individual may lose some or all of the benefits to which he is
45 entitled if he fails to file a claim in a timely manner. Both the
46 aforesaid notices and instructions, including information detailing
47 the time sensitivity of filing a claim, shall be supplied by the
48 division to employers without cost to them. Nothing in this section

1 shall be construed so as to require an employer to re-hire an
2 individual formerly in the employer's service.

3 (2) Any claimant may choose to certify, cancel or close his
4 claim for unemployment insurance benefits at any time, 24 hours a
5 day and seven days a week, via the Internet on a website developed
6 by the division; however, any claim that is certified, cancelled or
7 closed after 7:00 PM will not be processed by the division until the
8 next scheduled posting date.

9 (3) If an employer provides advanced notification of a layoff
10 pursuant to paragraph (1) of this subsection a., the notified
11 individual may file for benefits at the time of the notification, and
12 the division, upon finding that the claim is valid, shall pay the
13 benefit upon the commencement of the period of unemployment.

14 (b) (1) Procedure for making initial determinations with respect
15 to benefit years commencing on or after January 1, 1953.

16 A representative or representatives designated by the director of
17 the division and hereafter referred to as a "deputy" shall promptly
18 examine the claim, and shall notify the most recent employing unit
19 and, successively as necessary, each employer in inverse
20 chronological order during the base year. Such notification shall
21 require said employing unit and employer to furnish such
22 information to the deputy as may be necessary to determine the
23 claimant's eligibility and his benefit rights with respect to the
24 employer in question.

25 In his discretion, the director may appoint special deputies to
26 make initial or subsequent determinations under subsection (f) of
27 R.S.43:21-4 and subsection (d) of R.S.43:21-5.

28 If any employer or employing unit fails to respond to the request
29 for information within 10 days after the mailing, or communicating
30 by electronic means, of such request, the deputy shall rely entirely
31 on information from other sources, including an affidavit to the best
32 of the knowledge and belief of the claimant with respect to his
33 wages and time worked. Except in the event of fraud, if it is
34 determined that any information in such affidavit is erroneous, no
35 penalty shall be imposed on the claimant.

36 The deputy shall make an initial determination contingent upon
37 the receipt of all necessary information and notify the claimant no
38 later than three weeks from the date on which the division received
39 the claim for benefits. If an initial determination cannot be made
40 due to the lack of documentation, notification will be sent to the
41 claimant providing a status of the claim. The division will then
42 have an additional two weeks to obtain the missing information in
43 order to make the initial determination and advise the claimant
44 accordingly. The initial determination shall show the weekly benefit
45 amount payable, the maximum duration of benefits with respect to
46 the employer to whom the determination relates, and the ratio of
47 benefits chargeable to the employer's account for benefit years
48 commencing on or after July 1, 1986, and also shall show whether
49 the claimant is ineligible or disqualified for benefits under the

1 initial determination. The employer whose account may be charged
2 for benefits payable pursuant to said determination shall be
3 promptly notified thereof.

4 Whenever an initial determination is based upon information
5 other than that supplied by an employer because such employer
6 failed to respond to the deputy's request for information, such initial
7 determination and any subsequent determination thereunder shall be
8 incontestable by the noncomplying employer, as to any charges to
9 his employer's account because of benefits paid prior to the close of
10 the calendar week following the receipt of his reply. Such initial
11 determination shall be altered if necessary upon receipt of
12 information from the employer, and any benefits paid or payable
13 with respect to weeks occurring subsequent to the close of the
14 calendar week following the receipt of the employer's reply shall be
15 paid in accordance with such altered initial determination.

16 The deputy shall issue a separate initial benefit determination
17 with respect to each of the claimant's base year employers, starting
18 with the most recent employer and continuing as necessary in the
19 inverse chronological order of the claimant's last date of
20 employment with each such employer. If an appeal is taken from
21 an initial determination, as hereinafter provided, by any employer
22 other than the first chargeable base year employer or for benefit
23 years commencing on or after July 1, 1986, that employer from
24 whom the individual was most recently separated, then such appeal
25 shall be limited in scope to include only one or more of the
26 following matters:

27 (A) The correctness of the benefit payments authorized to be
28 made under the determination;

29 (B) Fraud in connection with the claim pursuant to which the
30 initial determination is issued;

31 (C) The refusal of suitable work offered by the chargeable
32 employer filing the appeal;

33 (D) Gross misconduct as provided in subsection (b) of
34 R.S.43:21-5.

35 The amount of benefits payable under an initial determination
36 may be reduced or canceled if necessary to avoid payment of
37 benefits for a number of weeks in excess of the maximum specified
38 in subsection (d) of R.S.43:21-3.

39 Unless the claimant or any interested party, within seven
40 calendar days after delivery of notification of an initial
41 determination or within 10 calendar days after such notification was
42 mailed to his or their last-known address and addresses, files an
43 appeal from such decision, such decision shall be final and benefits
44 shall be paid or denied in accordance therewith, except for such
45 determinations as may be altered in benefit amounts or duration as
46 provided in this paragraph. Benefits payable for periods pending an
47 appeal and not in dispute shall be paid as such benefits accrue;
48 provided that insofar as any such appeal is or may be an appeal
49 from a determination to the effect that the claimant is disqualified

1 under the provisions of R.S.43:21-5 or any amendments thereof or
2 supplements thereto, benefits pending determination of the appeal
3 shall be withheld only for the period of disqualification as provided
4 for in said section, and notwithstanding such appeal, the benefits
5 otherwise provided by this act shall be paid for the period
6 subsequent to such period of disqualification; and provided, also,
7 that if there are two determinations of entitlement, benefits for the
8 period covered by such determinations shall be paid regardless of
9 any appeal which may thereafter be taken, but no employer's
10 account shall be charged with benefits so paid, if the decision is
11 finally reversed.

12 (2) Procedure for making initial determinations in certain cases
13 of concurrent employment, with respect to benefit years
14 commencing on or after January 1, 1953 and prior to benefit years
15 commencing on or after July 1, 1986.

16 Notwithstanding any other provisions of this Title, if an
17 individual shows to the satisfaction of the deputy that there were at
18 least 13 weeks in his base period in each of which he earned wages
19 from two or more employers totaling \$30.00 or more but in each of
20 which there was no single employer from whom he earned as much
21 as \$100.00, then such individual's claim shall be determined in
22 accordance with the special provisions of this paragraph. In such
23 case, the deputy shall determine the individual's eligibility for
24 benefits, his average weekly wage, weekly benefit rate and
25 maximum total benefits as if all his base year employers were a
26 single employer. Such determination shall apportion the liability
27 for benefit charges thereunder to the individual's several base year
28 employers so that each employer's maximum liability for charges
29 thereunder bears approximately the same relation to the maximum
30 total benefits allowed as the wages earned by the individual from
31 each employer during the base year bears to his total wages earned
32 from all employers during the base year. Such initial determination
33 shall also specify the individual's last date of employment within
34 the base year with respect to each base year employer, and such
35 employers shall be charged for benefits paid under said initial
36 determination in the inverse chronological order of such last date of
37 employment.

38 (3) Procedure for making subsequent determinations with
39 respect to benefit years commencing on or after January 1, 1953.
40 The deputy shall make determinations with respect to claims for
41 benefits thereafter in the course of the benefit year, in accordance
42 with any initial determination allowing benefits, and under which
43 benefits have not been exhausted, and each notification of a benefit
44 payment shall be a notification of an affirmative subsequent
45 determination. The allowance of benefits by the deputy on any such
46 determination, or the denial of benefits by the deputy on any such
47 determination, shall be appealable in the same manner and under
48 the same limitations as is provided in the case of initial
49 determinations.

1 (c) Appeals. Unless such appeal is withdrawn, an appeal
2 tribunal, after affording the parties reasonable opportunity for fair
3 hearing, shall affirm or modify the findings of fact and the
4 determination. The parties shall be duly notified of such tribunal's
5 decision, together with its reasons therefor, which shall be deemed
6 to be the final decision of the board of review, unless further appeal
7 is initiated pursuant to subsection (e) of this section within 10 days
8 after the date of notification or mailing of the decision for any
9 decision made on or before December 1, 2010, or within 20 days
10 after the date of notification or mailing of such decision for any
11 decision made after December 1, 2010.

12 (d) Appeal tribunals. To hear and decide disputed benefit
13 claims, including appeals from determinations with respect to
14 demands for refunds of benefits under subsection (d) of R.S.43:21-
15 16, the director with the approval of the Commissioner of Labor and
16 Workforce Development shall establish impartial appeal tribunals
17 consisting of a salaried body of examiners under the supervision of
18 a Chief Appeals Examiner, all of whom shall be appointed pursuant
19 to the provisions of Title 11A of the New Jersey Statutes, Civil
20 Service and other applicable statutes.

21 (e) Board of review. The board of review may on its own
22 motion affirm, modify, or set aside any decision of an appeal
23 tribunal on the basis of the evidence previously submitted in such
24 case, or direct the taking of additional evidence, or may permit any
25 of the parties to such decision to initiate further appeals before it.
26 The board of review shall permit such further appeal by any of the
27 parties interested in a decision of an appeal tribunal which is not
28 unanimous and from any determination which has been overruled or
29 modified by any appeal tribunal. The board of review may remove
30 to itself or transfer to another appeal tribunal the proceedings on
31 any claim pending before an appeal tribunal. Any proceedings so
32 removed to the board of review shall be heard by a quorum thereof
33 in accordance with the requirements of subsection (c) of this
34 section. The board of review shall promptly notify the interested
35 parties of its findings and decision.

36 (f) Procedure. The manner in which disputed benefit claims,
37 and appeals from determinations with respect to (1) claims for
38 benefits and (2) demands for refunds of benefits under subsection
39 (d) of R.S.43:21-16 shall be presented, the reports thereon required
40 from the claimant and from employers, and the conduct of hearings
41 and appeals shall be in accordance with rules prescribed by the
42 board of review for determining the rights of the parties, whether or
43 not such rules conform to common law or statutory rules of
44 evidence and other technical rules of procedure. A full and
45 complete record shall be kept of all proceedings in connection with
46 a disputed claim. All testimony at any hearing upon a disputed
47 claim shall be recorded, but need not be transcribed unless the
48 disputed claim is further appealed.

1 (g) Witness fees. Witnesses subpoenaed pursuant to this section
2 shall be allowed fees at a rate fixed by the director. Such fees and
3 all expenses of proceedings involving disputed claims shall be
4 deemed a part of the expense of administering this chapter
5 (R.S.43:21-1 et seq.).

6 (h) Court review. Any decision of the board of review shall
7 become final as to any party upon the mailing of a copy thereof to
8 such party or to his attorney, or upon the mailing of a copy thereof
9 to such party at his last-known address. The Division of
10 Unemployment and Temporary Disability Insurance and any party
11 to a proceeding before the board of review may secure judicial
12 review of the final decision of the board of review. Any party not
13 joining in the appeal shall be made a defendant; the board of review
14 shall be deemed to be a party to any judicial action involving the
15 review of, or appeal from, any of its decisions, and may be
16 represented in any such judicial action by any qualified attorney,
17 who may be a regular salaried employee of the board of review or
18 has been designated by it for that purpose, or, at the board of
19 review's request, by the Attorney General.

20 (i) Failure to give notice. The failure of any public officer or
21 employee at any time heretofore or hereafter to give notice of
22 determination or decision required in subsections (b), (c) and (e) of
23 this section, as originally passed or amended, shall not relieve any
24 employer's account of any charge by reason of any benefits paid,
25 unless and until that employer can show to the satisfaction of the
26 director of the division that the said benefits, in whole or in part,
27 would not have been charged or chargeable to his account had such
28 notice been given. Any determination hereunder by the director
29 shall be subject to court review.

30 (j) With respect to benefit payments made on or after October
31 22, 2013, an employer's account shall not be relieved of charges
32 related to a benefit payment that was made erroneously from the
33 division if it is determined that:

34 (1) The erroneous benefit payment was made because the
35 employer, or an agent of the employer, failed to respond in a timely
36 or adequate manner to a request from the division for information
37 related to the claim for benefits; and

38 (2) The employer, or an agent of the employer, has established a
39 pattern of failing to respond in a timely or adequate manner to
40 requests from the division for information related to claims for
41 benefits.

42 Determinations of the division prohibiting the relief of charges
43 pursuant to this subsection shall be subject to appeal in the same
44 manner as other determinations of the division related to the
45 charging of employer accounts.

46 For purposes of subsection (j) of this section:

47 "Erroneous benefit payment" means a benefit payment that,
48 except for the failure by the employer, or an agent of the employer,
49 to respond in a timely or adequate manner to a request from the

1 division for information with respect to the claim for benefits,
2 would not have been made; and

3 "Pattern of failing" means repeated documented failure on the
4 part of the employer, or an agent of the employer, to respond to
5 requests from the division to the employer or employer's agent for
6 information related to a claim for benefits, except that an employer,
7 or an agent of an employer, shall not be determined to have engaged
8 in a "pattern of failing" if the number of failures to respond to
9 requests from the division for information related to claims for
10 benefits during the previous 365 calendar days is less than three, or
11 if the number of failures is less than two percent of the number of
12 requests from the division, whichever is greater.

13 (k) The Department of Labor and Workforce Development shall
14 establish and maintain a procedure by which personnel access rights
15 to the department's primary system for unemployment claims
16 receipt and processing are comprehensively reviewed every
17 calendar quarter. The procedure shall include an evaluation of
18 access needs to the primary unemployment claims receipt and
19 processing system for all department personnel and the adjustment,
20 addition, or deletion of access rights for department personnel based
21 on the quarterly review.

22 (cf: P.L.2017, c.163, s.1)

23

24 **1[7.] 6.**¹ R.S.43:21-19 is amended to read as follows:

25 43:21-19. Definitions. As used in this chapter (R.S.43:21-
26 1 et seq.), unless the context clearly requires otherwise:

27 (a) (1) "Annual payroll" means the total amount of wages paid
28 during a calendar year (regardless of when earned) by an employer for
29 employment.

30 (2) "Average annual payroll" means the average of the annual
31 payrolls of any employer for the last three or five preceding calendar
32 years, whichever average is higher, except that any year or years
33 throughout which an employer has had no "annual payroll" because of
34 military service shall be deleted from the reckoning; the "average
35 annual payroll" in such case is to be determined on the basis of the
36 prior three or five calendar years in each of which the employer had an
37 "annual payroll" in the operation of his business, if the employer
38 resumes his business within 12 months after separation, discharge or
39 release from such service, under conditions other than dishonorable,
40 and makes application to have his "average annual payroll" determined
41 on the basis of such deletion within 12 months after he resumes his
42 business; provided, however, that "average annual payroll" solely for
43 the purposes of paragraph (3) of subsection (e) of R.S.43:21-7 means
44 the average of the annual payrolls of any employer on which he paid
45 contributions to the State disability benefits fund for the last three or
46 five preceding calendar years, whichever average is higher; provided
47 further that only those wages be included on which employer
48 contributions have been paid on or before January 31 (or the next
49 succeeding day if such January 31 is a Saturday or Sunday)

1 immediately preceding the beginning of the 12-month period for
2 which the employer's contribution rate is computed.

3 (b) "Benefits" means the money payments payable to an
4 individual, as provided in this chapter (R.S.43:21-1 et seq.), with
5 respect to his unemployment.

6 (c) (1) "Base year" with respect to benefit years commencing on
7 or after July 1, 1986, shall mean the first four of the last five
8 completed calendar quarters immediately preceding an individual's
9 benefit year.

10 With respect to a benefit year commencing on or after July 1,
11 1995, if an individual does not have sufficient qualifying weeks or
12 wages in his base year to qualify for benefits, the individual shall have
13 the option of designating that his base year shall be the "alternative
14 base year," which means the last four completed calendar quarters
15 immediately preceding the individual's benefit year; except that, with
16 respect to a benefit year commencing on or after October 1, 1995, if
17 the individual also does not have sufficient qualifying weeks or wages
18 in the last four completed calendar quarters immediately preceding his
19 benefit year to qualify for benefits, "alternative base year" means the
20 last three completed calendar quarters immediately preceding his
21 benefit year and, of the calendar quarter in which the benefit year
22 commences, the portion of the quarter which occurs before the
23 commencing of the benefit year.

24 The division shall inform the individual of his options under this
25 section as amended by P.L.1995, c.234. If information regarding
26 weeks and wages for the calendar quarter or quarters immediately
27 preceding the benefit year is not available to the division from the
28 regular quarterly reports of wage information and the division is not
29 able to obtain the information using other means pursuant to State or
30 federal law, the division may base the determination of eligibility for
31 benefits on the affidavit of an individual with respect to weeks and
32 wages for that calendar quarter. The individual shall furnish payroll
33 documentation, if available, in support of the affidavit. A
34 determination of benefits based on an alternative base year shall be
35 adjusted when the quarterly report of wage information from the
36 employer is received if that information causes a change in the
37 determination.

38 (2) With respect to a benefit year commencing on or after June 1,
39 1990 for an individual who immediately preceding the benefit year
40 was subject to a disability compensable under the provisions of the
41 "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et
42 seq.), "base year" shall mean the first four of the last five completed
43 calendar quarters immediately preceding the individual's period of
44 disability, if the employment held by the individual immediately
45 preceding the period of disability is no longer available at the
46 conclusion of that period and the individual files a valid claim for
47 unemployment benefits after the conclusion of that period. For the
48 purposes of this paragraph, "period of disability" means the period
49 defined as a period of disability by section 3 of the "Temporary

1 Disability Benefits Law," P.L.1948, c.110 (C.43:21-27). An
2 individual who files a claim under the provisions of this paragraph (2)
3 shall not be regarded as having left work voluntarily for the purposes
4 of subsection (a) of R.S.43:21-5.

5 (3) With respect to a benefit year commencing on or after June 1,
6 1990 for an individual who immediately preceding the benefit year
7 was subject to a disability compensable under the provisions of the
8 workers' compensation law (chapter 15 of Title 34 of the Revised
9 Statutes), "base year" shall mean the first four of the last five
10 completed calendar quarters immediately preceding the individual's
11 period of disability, if the period of disability was not longer than two
12 years, if the employment held by the individual immediately preceding
13 the period of disability is no longer available at the conclusion of that
14 period and if the individual files a valid claim for unemployment
15 benefits after the conclusion of that period. For the purposes of this
16 paragraph, "period of disability" means the period from the time at
17 which the individual becomes unable to work because of the
18 compensable disability until the time that the individual becomes able
19 to resume work and continue work on a permanent basis. An
20 individual who files a claim under the provisions of this paragraph (3)
21 shall not be regarded as having left work voluntarily for the purposes
22 of subsection (a) of R.S.43:21-5.

23 (d) "Benefit year" with respect to any individual means the 364
24 consecutive calendar days beginning with the day on, or as of, which
25 he first files a valid claim for benefits, and thereafter beginning with
26 the day on, or as of, which the individual next files a valid claim for
27 benefits after the termination of his last preceding benefit year. Any
28 claim for benefits made in accordance with subsection (a) of
29 R.S.43:21-6 shall be deemed to be a "valid claim" for the purpose of
30 this subsection if (1) he is unemployed for the week in which, or as of
31 which, he files a claim for benefits; and (2) he has fulfilled the
32 conditions imposed by subsection (e) of R.S.43:21-4.

33 (e) (1) "Division" means the Division of Unemployment and
34 Temporary Disability Insurance of the Department of Labor and
35 Workforce Development, and any transaction or exercise of authority
36 by the director of the division thereunder, or under this chapter
37 (R.S.43:21-1 et seq.), shall be deemed to be performed by the division.

38 (2) "Controller" means the Office of the Assistant Commissioner
39 for Finance and Controller of the Department of Labor and Workforce
40 Development, established by the 1982 Reorganization Plan of the
41 Department of Labor.

42 (f) "Contributions" means the money payments to the State
43 Unemployment Compensation Fund, required by R.S.43:21-7.
44 "Payments in lieu of contributions" means the money payments to the
45 State Unemployment Compensation Fund by employers electing or
46 required to make payments in lieu of contributions, as provided in
47 section 3 or section 4 of P.L.1971, c.346 (C.43:21-7.2 or 43:21-7.3).

48 (g) "Employing unit" means the State or any of its
49 instrumentalities or any political subdivision thereof or any of its

1 instrumentalities or any instrumentality of more than one of the
2 foregoing or any instrumentality of any of the foregoing and one or
3 more other states or political subdivisions or any individual or type of
4 organization, any partnership, association, trust, estate, joint-stock
5 company, insurance company or corporation, whether domestic or
6 foreign, or the receiver, trustee in bankruptcy, trustee or successor
7 thereof, or the legal representative of a deceased person, which has or
8 subsequent to January 1, 1936, had in its employ one or more
9 individuals performing services for it within this State. All individuals
10 performing services within this State for any employing unit which
11 maintains two or more separate establishments within this State shall
12 be deemed to be employed by a single employing unit for all the
13 purposes of this chapter (R.S.43:21-1 et seq.). Each individual
14 employed to perform or to assist in performing the work of any agent
15 or employee of an employing unit shall be deemed to be employed by
16 such employing unit for all the purposes of this chapter (R.S.43:21-1 et
17 seq.), whether such individual was hired or paid directly by such
18 employing unit or by such agent or employee; provided the employing
19 unit had actual or constructive knowledge of the work.

20 (h) "Employer" means:

21 (1) Any employing unit which in either the current or the
22 preceding calendar year paid remuneration for employment in the
23 amount of \$1,000.00 or more;

24 (2) Any employing unit (whether or not an employing unit at the
25 time of acquisition) which acquired the organization, trade or business,
26 or substantially all the assets thereof, of another which, at the time of
27 such acquisition, was an employer subject to this chapter (R.S.43:21-1
28 et seq.);

29 (3) Any employing unit which acquired the organization, trade or
30 business, or substantially all the assets thereof, of another employing
31 unit and which, if treated as a single unit with such other employing
32 unit, would be an employer under paragraph (1) of this subsection;

33 (4) Any employing unit which together with one or more other
34 employing units is owned or controlled (by legally enforceable means
35 or otherwise), directly or indirectly by the same interests, or which
36 owns or controls one or more other employing units (by legally
37 enforceable means or otherwise), and which, if treated as a single unit
38 with such other employing unit or interest, would be an employer
39 under paragraph (1) of this subsection;

40 (5) Any employing unit for which service in employment as
41 defined in R.S.43:21-19 (i) (1) (B) (i) is performed after December 31,
42 1971; and as defined in R.S.43:21-19 (i) (1) (B) (ii) is performed after
43 December 31, 1977;

44 (6) Any employing unit for which service in employment as
45 defined in R.S.43:21-19 (i) (1) ~~[(c)]~~ (C) is performed after December
46 31, 1971 and which in either the current or the preceding calendar year
47 paid remuneration for employment in the amount of \$1,000.00 or
48 more;

1 (7) Any employing unit not an employer by reason of any other
2 paragraph of this subsection (h) for which, within either the current or
3 preceding calendar year, service is or was performed with respect to
4 which such employing unit is liable for any federal tax against which
5 credit may be taken for contributions required to be paid into a state
6 unemployment fund; or which, as a condition for approval of the
7 "unemployment compensation law" for full tax credit against the tax
8 imposed by the Federal Unemployment Tax Act, is required pursuant
9 to such act to be an employer under this chapter (R.S.43:21-1 et seq.);

10 (8) (Deleted by amendment; P.L.1977, c.307.)

11 (9) (Deleted by amendment; P.L.1977, c.307.)

12 (10) (Deleted by amendment; P.L.1977, c.307.)

13 (11) Any employing unit subject to the provisions of the Federal
14 Unemployment Tax Act within either the current or the preceding
15 calendar year, except for employment hereinafter excluded under
16 paragraph (7) of subsection (i) of this section;

17 (12) Any employing unit for which agricultural labor in
18 employment as defined in R.S.43:21-19 (i) (1) (I) is performed after
19 December 31, 1977;

20 (13) Any employing unit for which domestic service in
21 employment as defined in R.S.43:21-19 (i) (1) (J) is performed after
22 December 31, 1977;

23 (14) Any employing unit which having become an employer
24 under the "unemployment compensation law" (R.S.43:21-1 et seq.),
25 has not under R.S.43:21-8 ceased to be an employer; or for the
26 effective period of its election pursuant to R.S.43:21-8, any other
27 employing unit which has elected to become fully subject to this
28 chapter (R.S.43:21-1 et seq.).

29 (i) (1) "Employment" means:

30 (A) Any service performed prior to January 1, 1972, which was
31 employment as defined in the "unemployment compensation law"
32 (R.S.43:21-1 et seq.) prior to such date, and, subject to the other
33 provisions of this subsection, service performed on or after January 1,
34 1972, including service in interstate commerce, performed for
35 remuneration or under any contract of hire, written or oral, express or
36 implied.

37 (B)(i) Service performed after December 31, 1971 by an
38 individual in the employ of this State or any of its instrumentalities or
39 in the employ of this State and one or more other states or their
40 instrumentalities for a hospital or institution of higher education
41 located in this State, if such service is not excluded from
42 "employment" under paragraph (D) below.

43 (ii) Service performed after December 31, 1977, in the employ of
44 this State or any of its instrumentalities or any political subdivision
45 thereof or any of its instrumentalities or any instrumentality of more
46 than one of the foregoing or any instrumentality of the foregoing and
47 one or more other states or political subdivisions, if such service is not
48 excluded from "employment" under paragraph (D) below.

1 (C) Service performed after December 31, 1971 by an individual in
2 the employ of a religious, charitable, educational, or other
3 organization, which is excluded from "employment" as defined in the
4 Federal Unemployment Tax Act, solely by reason of section 3306
5 (c)(8) of that act, if such service is not excluded from "employment"
6 under paragraph (D) below.

7 (D) For the purposes of paragraphs (B) and (C), the term
8 "employment" does not apply to services performed

9 (i) In the employ of (I) a church or convention or association of
10 churches, or (II) an organization, or school which is operated primarily
11 for religious purposes and which is operated, supervised, controlled or
12 principally supported by a church or convention or association of
13 churches;

14 (ii) By a duly ordained, commissioned, or licensed minister of a
15 church in the exercise of his ministry or by a member of a religious
16 order in the exercise of duties required by such order;

17 (iii) Prior to January 1, 1978, in the employ of a school which is
18 not an institution of higher education, and after December 31, 1977, in
19 the employ of a governmental entity referred to in R.S.43:21-19 (i) (1)
20 (B), if such service is performed by an individual in the exercise of
21 duties

22 (aa) as an elected official;

23 (bb) as a member of a legislative body, or a member of the
24 judiciary, of a state or political subdivision;

25 (cc) as a member of the State National Guard or Air National
26 Guard;

27 (dd) as an employee serving on a temporary basis in case of fire,
28 storm, snow, earthquake, flood or similar emergency;

29 (ee) in a position which, under or pursuant to the laws of this
30 State, is designated as a major nontenured policy making or advisory
31 position, or a policy making or advisory position, the performance of
32 the duties of which ordinarily does not require more than eight hours
33 per week; or

34 (iv) By an individual receiving rehabilitation or remunerative
35 work in a facility conducted for the purpose of carrying out a program
36 of rehabilitation of individuals whose earning capacity is impaired by
37 age or physical or mental deficiency or injury or providing
38 remunerative work for individuals who because of their impaired
39 physical or mental capacity cannot be readily absorbed in the
40 competitive labor market;

41 (v) By an individual receiving work-relief or work-training as part
42 of an unemployment work-relief or work-training program assisted in
43 whole or in part by any federal agency or an agency of a state or
44 political subdivision thereof; or

45 (vi) Prior to January 1, 1978, for a hospital in a State prison or
46 other State correctional institution by an inmate of the prison or
47 correctional institution and after December 31, 1977, by an inmate of a
48 custodial or penal institution.

1 (E) The term "employment" shall include the services of an
2 individual who is a citizen of the United States, performed outside the
3 United States after December 31, 1971 (except in Canada and in the
4 case of the Virgin Islands, after December 31, 1971) and prior to
5 January 1 of the year following the year in which the U.S. Secretary of
6 Labor approves the unemployment compensation law of the Virgin
7 Islands, under section 3304 (a) of the Internal Revenue Code of 1986
8 (26 U.S.C. s.3304 (a)) in the employ of an American employer (other
9 than the service which is deemed employment under the provisions of
10 R.S.43:21-19 (i) (2) or (5) or the parallel provisions of another state's
11 unemployment compensation law), if

12 (i) The American employer's principal place of business in the
13 United States is located in this State; or

14 (ii) The American employer has no place of business in the United
15 States, but (I) the American employer is an individual who is a
16 resident of this State; or (II) the American employer is a corporation
17 which is organized under the laws of this State; or (III) the American
18 employer is a partnership or trust and the number of partners or
19 trustees who are residents of this State is greater than the number who
20 are residents of another state; or

21 (iii) None of the criteria of divisions (i) and (ii) of this
22 subparagraph (E) is met but the American employer has elected to
23 become an employer subject to the "unemployment compensation law"
24 (R.S.43:21-1 et seq.) in this State, or the American employer having
25 failed to elect to become an employer in any state, the individual has
26 filed a claim for benefits, based on such service, under the law of this
27 State;

28 (iv) An "American employer," for the purposes of this
29 subparagraph (E), means (I) an individual who is a resident of the
30 United States; or (II) a partnership, if two-thirds or more of the
31 partners are residents of the United States; or (III) a trust, if all the
32 trustees are residents of the United States; or (IV) a corporation
33 organized under the laws of the United States or of any state.

34 (F) Notwithstanding R.S.43:21-19 (i) (2), all service performed
35 after January 1, 1972 by an officer or member of the crew of an
36 American vessel or American aircraft on or in connection with such
37 vessel or aircraft, if the operating office from which the operations of
38 such vessel or aircraft operating within, or within and without, the
39 United States are ordinarily and regularly supervised, managed,
40 directed, and controlled, is within this State.

41 (G) Notwithstanding any other provision of this subsection, service
42 in this State with respect to which the taxes required to be paid under
43 any federal law imposing a tax against which credit may be taken for
44 contributions required to be paid into a state unemployment fund or
45 which as a condition for full tax credit against the tax imposed by the
46 Federal Unemployment Tax Act is required to be covered under the
47 "unemployment compensation law" (R.S.43:21-1 et seq.).

48 (H) The term "United States" when used in a geographical sense in
49 subsection R.S.43:21-19 (i) includes the states, the District of

1 Columbia, the Commonwealth of Puerto Rico and, effective on the day
2 after the day on which the U.S. Secretary of Labor approves for the
3 first time under section 3304 (a) of the Internal Revenue Code of 1986
4 (26 U.S.C. s.3304 (a)) an unemployment compensation law submitted
5 to the Secretary by the Virgin Islands for such approval, the Virgin
6 Islands.

7 (I) (i) Service performed after December 31, 1977 in agricultural
8 labor in a calendar year for an entity which is an employer as defined
9 in the "unemployment compensation law," (R.S.43:21-1 et seq.) as of
10 January 1 of such year; or for an employing unit which

11 (aa) during any calendar quarter in either the current or the
12 preceding calendar year paid remuneration in cash of \$20,000.00 or
13 more for individuals employed in agricultural labor, or

14 (bb) for some portion of a day in each of 20 different calendar
15 weeks, whether or not such weeks were consecutive, in either the
16 current or the preceding calendar year, employed in agricultural labor
17 10 or more individuals, regardless of whether they were employed at
18 the same moment in time.

19 (ii) for the purposes of this subsection any individual who is a
20 member of a crew furnished by a crew leader to perform service in
21 agricultural labor for any other entity shall be treated as an employee
22 of such crew leader

23 (aa) if such crew leader holds a certification of registration under
24 the Migrant and Seasonal Agricultural Worker Protection Act,
25 **[Pub.L.97-470]** (29 U.S.C. s.1801 et seq.), or P.L.1971, c.192
26 (C.34:8A-7 et seq.); or substantially all the members of such crew
27 operate or maintain tractors, mechanized harvesting or cropdusting
28 equipment, or any other mechanized equipment, which is provided by
29 such crew leader; and

30 (bb) if such individual is not an employee of such other person for
31 whom services were performed.

32 (iii) For the purposes of subparagraph (I) (i) in the case of any
33 individual who is furnished by a crew leader to perform service in
34 agricultural labor or any other entity and who is not treated as an
35 employee of such crew leader under (I) (ii)

36 (aa) such other entity and not the crew leader shall be treated as
37 the employer of such individual; and

38 (bb) such other entity shall be treated as having paid cash
39 remuneration to such individual in an amount equal to the amount of
40 cash remuneration paid to such individual by the crew leader (either on
41 his own behalf or on behalf of such other entity) for the service in
42 agricultural labor performed for such other entity.

43 (iv) For the purpose of subparagraph (I)(ii), the term "crew leader"
44 means an individual who

45 (aa) furnishes individuals to perform service in agricultural labor
46 for any other entity;

47 (bb) pays (either on his own behalf or on behalf of such other
48 entity) the individuals so furnished by him for the service in
49 agricultural labor performed by them; and

1 (cc) has not entered into a written agreement with such other entity
2 under which such individual is designated as an employee of such
3 other entity.

4 (J) Domestic service after December 31, 1977 performed in the
5 private home of an employing unit which paid cash remuneration of
6 \$1,000.00 or more to one or more individuals for such domestic
7 service in any calendar quarter in the current or preceding calendar
8 year.

9 (2) The term "employment" shall include an individual's entire
10 service performed within or both within and without this State if:

11 (A) The service is localized in this State; or

12 (B) The service is not localized in any state but some of the service
13 is performed in this State, and (i) the base of operations, or, if there is
14 no base of operations, then the place from which such service is
15 directed or controlled, is in this State; or (ii) the base of operations or
16 place from which such service is directed or controlled is not in any
17 state in which some part of the service is performed, but the
18 individual's residence is in this State.

19 (3) Services performed within this State but not covered under
20 paragraph (2) of this subsection shall be deemed to be employment
21 subject to this chapter (R.S.43:21-1 et seq.) if contributions are not
22 required and paid with respect to such services under an
23 unemployment compensation law of any other state or of the federal
24 government.

25 (4) Services not covered under paragraph (2) of this subsection and
26 performed entirely without this State, with respect to no part of which
27 contributions are required and paid under an unemployment
28 compensation law of any other state or of the federal government, shall
29 be deemed to be employment subject to this chapter (R.S.43:21-1 et
30 seq.) if the individual performing such services is a resident of this
31 State and the employing unit for whom such services are performed
32 files with the division an election that the entire service of such
33 individual shall be deemed to be employment subject to this chapter
34 (R.S.43:21-1 et seq.).

35 (5) Service shall be deemed to be localized within a state if:

36 (A) The service is performed entirely within such state; or

37 (B) The service is performed both within and without such state,
38 but the service performed without such state is incidental to the
39 individual's service within the state; for example, is temporary or
40 transitory in nature or consists of isolated transactions.

41 (6) Services performed by an individual for remuneration shall be
42 deemed to be employment subject to this chapter (R.S.43:21-
43 1 et seq.) unless and until it is shown to the satisfaction of the division
44 that:

45 (A) Such individual has been and will continue to be free from
46 control or direction over the performance of such service, both under
47 his contract of service and in fact; and

48 (B) Such service is either outside the usual course of the business
49 for which such service is performed, or that such service is performed

1 outside of all the places of business of the enterprise for which such
2 service is performed; and

3 (C) Such individual is customarily engaged in an independently
4 established trade, occupation, profession or business.

5 (7) Provided that such services are also exempt under the Federal
6 Unemployment Tax Act, as amended, or that contributions with
7 respect to such services are not required to be paid into a state
8 unemployment fund as a condition for a tax offset credit against the
9 tax imposed by the Federal Unemployment Tax Act, as amended, the
10 term "employment" shall not include:

11 (A) Agricultural labor performed prior to January 1, 1978; and after
12 December 31, 1977, only if performed in a calendar year for an entity
13 which is not an employer as defined in the "unemployment
14 compensation law," (R.S.43:21-1 et seq.) as of January 1 of such
15 calendar year; or unless performed for an employing unit which

16 (i) during a calendar quarter in either the current or the preceding
17 calendar year paid remuneration in cash of \$20,000.00 or more to
18 individuals employed in agricultural labor, or

19 (ii) for some portion of a day in each of 20 different calendar
20 weeks, whether or not such weeks were consecutive, in either the
21 current or the preceding calendar year, employed in agricultural labor
22 10 or more individuals, regardless of whether they were employed at
23 the same moment in time;

24 (B) Domestic service in a private home performed prior to January
25 1, 1978; and after December 31, 1977, unless performed in the private
26 home of an employing unit which paid cash remuneration of \$1,000.00
27 or more to one or more individuals for such domestic service in any
28 calendar quarter in the current or preceding calendar year;

29 (C) Service performed by an individual in the employ of his son,
30 daughter or spouse, and service performed by a child under the age of
31 18 in the employ of his father or mother;

32 (D) Service performed prior to January 1, 1978, in the employ of
33 this State or of any political subdivision thereof or of any
34 instrumentality of this State or its political subdivisions, except as
35 provided in R.S.43:21-19 (i) (1) (B) above, and service in the employ
36 of the South Jersey Port Corporation or its successors;

37 (E) Service performed in the employ of any other state or its
38 political subdivisions or of an instrumentality of any other state or
39 states or their political subdivisions to the extent that such
40 instrumentality is with respect to such service exempt under the
41 Constitution of the United States from the tax imposed under the
42 Federal Unemployment Tax Act, as amended, except as provided in
43 R.S.43:21-19 (i) (1) (B) above;

44 (F) Service performed in the employ of the United States
45 Government or of any instrumentality of the United States exempt
46 under the Constitution of the United States from the contributions
47 imposed by the "unemployment compensation law," except that to the
48 extent that the Congress of the United States shall permit states to
49 require any instrumentalities of the United States to make payments

1 into an unemployment fund under a state unemployment compensation
2 law, all of the provisions of this act shall be applicable to such
3 instrumentalities, and to service performed for such instrumentalities,
4 in the same manner, to the same extent and on the same terms as to all
5 other employers, employing units, individuals and services; provided
6 that if this State shall not be certified for any year by the Secretary of
7 Labor of the United States under section 3304 of the federal Internal
8 Revenue Code of 1986 (26 U.S.C. s.3304), the payments required of
9 such instrumentalities with respect to such year shall be refunded by
10 the division from the fund in the same manner and within the same
11 period as is provided in R.S.43:21-14 (f) with respect to contributions
12 erroneously paid to or collected by the division;

13 (G) Services performed in the employ of fraternal beneficiary
14 societies, orders, or associations operating under the lodge system or
15 for the exclusive benefit of the members of a fraternity itself operating
16 under the lodge system and providing for the payment of life, sick,
17 accident, or other benefits to the members of such society, order, or
18 association, or their dependents;

19 (H) Services performed as a member of the board of directors, a
20 board of trustees, a board of managers, or a committee of any bank,
21 building and loan, or savings and loan association, incorporated or
22 organized under the laws of this State or of the United States, where
23 such services do not constitute the principal employment of the
24 individual;

25 (I) Service with respect to which unemployment insurance is
26 payable under an unemployment insurance program established by an
27 Act of Congress;

28 (J) Service performed by agents of mutual fund brokers or dealers
29 in the sale of mutual funds or other securities, by agents of insurance
30 companies, exclusive of industrial insurance agents or by agents of
31 investment companies, if the compensation to such agents for such
32 services is wholly on a commission basis;

33 (K) Services performed by real estate salesmen or brokers who are
34 compensated wholly on a commission basis;

35 (L) Services performed in the employ of any veterans' organization
36 chartered by Act of Congress or of any auxiliary thereof, no part of the
37 net earnings of which organization, or auxiliary thereof, inures to the
38 benefit of any private shareholder or individual;

39 (M) Service performed for or in behalf of the owner or
40 operator of any theater, ballroom, amusement hall or other place of
41 entertainment, not in excess of 10 weeks in any calendar year for the
42 same owner or operator, by any leader or musician of a band or
43 orchestra, commonly called a "name band," entertainer, vaudeville
44 artist, actor, actress, singer or other entertainer;

45 (N) Services performed after January 1, 1973 by an individual for a
46 labor union organization, known and recognized as a union local, as a
47 member of a committee or committees reimbursed by the union local
48 for time lost from regular employment, or as a part-time officer of a

1 union local and the remuneration for such services is less than
2 \$1,000.00 in a calendar year;

3 (O) Services performed in the sale or distribution of merchandise
4 by home-to-home salespersons or in-the-home demonstrators whose
5 remuneration consists wholly of commissions or commissions and
6 bonuses;

7 (P) Service performed in the employ of a foreign government,
8 including service as a consular, nondiplomatic representative, or other
9 officer or employee;

10 (Q) Service performed in the employ of an instrumentality wholly
11 owned by a foreign government if (i) the service is of a character
12 similar to that performed in foreign countries by employees of the
13 United States Government or of an instrumentality thereof, and (ii) the
14 division finds that the United States Secretary of State has certified to
15 the United States Secretary of the Treasury that the foreign
16 government, with respect to whose instrumentality exemption is
17 claimed, grants an equivalent exemption with respect to similar
18 services performed in the foreign country by employees of the United
19 States Government and of instrumentalities thereof;

20 (R) Service in the employ of an international organization entitled
21 to enjoy the privileges, exemptions and immunities under the
22 International Organizations Immunities Act (22 U.S.C. s.288 et seq.);

23 (S) Service covered by an election duly approved by an agency
24 charged with the administration of any other state or federal
25 unemployment compensation or employment security law, in
26 accordance with an arrangement pursuant to R.S.43:21-21 during the
27 effective period of such election;

28 (T) Service performed in the employ of a school, college, or
29 university if such service is performed (i) by a student enrolled at such
30 school, college, or university on a full-time basis in an educational
31 program or completing such educational program leading to a degree
32 at any of the severally recognized levels, or (ii) by the spouse of such a
33 student, if such spouse is advised at the time such spouse commences
34 to perform such service that (I) the employment of such spouse to
35 perform such service is provided under a program to provide financial
36 assistance to such student by such school, college, or university, and
37 (II) such employment will not be covered by any program of
38 unemployment insurance;

39 (U) Service performed by an individual who is enrolled at a
40 nonprofit or public educational institution which normally maintains a
41 regular faculty and curriculum and normally has a regularly organized
42 body of students in attendance at the place where its educational
43 activities are carried on, as a student in a full-time program, taken for
44 credit at such institution, which combines academic instruction with
45 work experience, if such service is an integral part of such program,
46 and such institution has so certified to the employer, except that this
47 subparagraph shall not apply to service performed in a program
48 established for or on behalf of an employer or group of employers;

1 (V) Service performed in the employ of a hospital, if such service
2 is performed by a patient of the hospital; service performed as a
3 student nurse in the employ of a hospital or a nurses' training school by
4 an individual who is enrolled and regularly attending classes in a
5 nurses' training school approved under the laws of this State;

6 (W) Services performed after the effective date of this amendatory
7 act by agents of mutual benefit associations if the compensation to
8 such agents for such services is wholly on a commission basis;

9 (X) Services performed by operators of motor vehicles weighing
10 18,000 pounds or more, licensed for commercial use and used for the
11 highway movement of motor freight, who own their equipment or who
12 lease or finance the purchase of their equipment through an entity
13 which is not owned or controlled directly or indirectly by the entity for
14 which the services were performed and who were compensated by
15 receiving a percentage of the gross revenue generated by the
16 transportation move or by a schedule of payment based on the distance
17 and weight of the transportation move;

18 (Y) (Deleted by amendment, P.L.2009, c.211.)

19 (Z) Services performed, using facilities provided by a travel agent,
20 by a person, commonly known as an outside travel agent, who acts as
21 an independent contractor, is paid on a commission basis, sets his own
22 work schedule and receives no benefits, sick leave, vacation or other
23 leave from the travel agent owning the facilities.

24 (8) If one-half or more of the services in any pay period performed
25 by an individual for an employing unit constitutes employment, all the
26 services of such individual shall be deemed to be employment; but if
27 more than one-half of the service in any pay period performed by an
28 individual for an employing unit does not constitute employment, then
29 none of the service of such individual shall be deemed to be
30 employment. As used in this paragraph, the term "pay period" means
31 a period of not more than 31 consecutive days for which a payment for
32 service is ordinarily made by an employing unit to individuals in its
33 employ.

34 (9) Services performed by the owner of a limousine franchise
35 (franchisee) shall not be deemed to be employment subject to the
36 "unemployment compensation law," R.S.43:21-1 et seq., with regard
37 to the franchisor if:

38 (A) The limousine franchisee is incorporated;

39 (B) The franchisee is subject to regulation by the Interstate
40 Commerce Commission;

41 (C) The limousine franchise exists pursuant to a written franchise
42 arrangement between the franchisee and the franchisor as defined by
43 section 3 of P.L.1971, c.356 (C.56:10-3); and

44 (D) The franchisee registers with the Department of Labor and
45 Workforce Development and receives an employer registration
46 number.

47 (10) Services performed by a legal transcriber, or certified court
48 reporter certified pursuant to P.L.1940, c.175 (C.45:15B-1 et seq.),
49 shall not be deemed to be employment subject to the "unemployment

1 compensation law," R.S.43:21-1 et seq., if those services are provided
2 to a third party by the transcriber or reporter who is referred to the
3 third party pursuant to an agreement with another legal transcriber or
4 legal transcription service, or certified court reporter or court reporting
5 service, on a freelance basis, compensation for which is based upon a
6 fee per transcript page, flat attendance fee, or other flat minimum fee,
7 or combination thereof, set forth in the agreement.

8 For purposes of this paragraph (10): "legal transcription service"
9 and "legal transcribing" mean making use, by audio, video or voice
10 recording, of a verbatim record of court proceedings, depositions,
11 other judicial proceedings, meetings of boards, agencies, corporations,
12 or other bodies or groups, and causing that record to be printed in
13 readable form or produced on a computer screen in readable form; and
14 "legal transcriber" means a person who engages in "legal transcribing."

15 (j) "Employment office" means a free public employment office,
16 or branch thereof operated by this State or maintained as a part of a
17 State-controlled system of public employment offices.

18 (k) (Deleted by amendment, P.L.1984, c.24.)

19 (l) "State" includes, in addition to the states of the United States of
20 America, the District of Columbia, the Virgin Islands and Puerto Rico.

21 (m) "Unemployment."

22 (1) An individual shall be deemed "unemployed" for any week
23 during which:

24 (A) The individual is not engaged in full-time work and with
25 respect to which his remuneration is less than his weekly benefit rate,
26 including any week during which he is on vacation without pay;
27 provided such vacation is not the result of the individual's voluntary
28 action, except that for benefit years commencing on or after July 1,
29 1984, an officer of a corporation, or a person who has more than a 5%
30 equitable or debt interest in the corporation, whose claim for benefits
31 is based on wages with that corporation shall not be deemed to be
32 unemployed in any week during the individual's term of office or
33 ownership in the corporation; or

34 (B) The individual is eligible for and receiving a self-employment
35 assistance allowance pursuant to the requirements of P.L.1995, c.394
36 (C.43:21-67 et al.).

37 (2) The term "remuneration" with respect to any individual for
38 benefit years commencing on or after July 1, 1961, and as used in this
39 subsection, shall include only that part of the same which in any week
40 exceeds 20% of his weekly benefit rate (fractional parts of a dollar
41 omitted) or \$5.00, whichever is the larger, and shall not include any
42 moneys paid to an individual by a county board of elections for work
43 as a board worker on an election day.

44 (3) An individual's week of unemployment shall be deemed to
45 commence only after the individual has filed a claim at an
46 unemployment insurance claims office, except as the division may by
47 regulation otherwise prescribe.

48 (n) "Unemployment compensation administration fund" means the
49 unemployment compensation administration fund established by this

1 chapter (R.S.43:21-1 et seq.), from which administrative expenses
2 under this chapter (R.S.43:21-1 et seq.) shall be paid.

3 (o) "Wages" means remuneration paid by employers for
4 employment. If a worker receives gratuities regularly in the course of
5 his employment from other than his employer, his "wages" shall also
6 include the gratuities so received, if reported in writing to his employer
7 in accordance with regulations of the division, and if not so reported,
8 his "wages" shall be determined in accordance with the minimum
9 wage rates prescribed under any labor law or regulation of this State or
10 of the United States, or the amount of remuneration actually received
11 by the employee from his employer, whichever is the higher.

12 (p) "Remuneration" means all compensation for personal services,
13 including commission and bonuses and the cash value of all
14 compensation in any medium other than cash.

15 (q) "Week" means for benefit years commencing on or after
16 October 1, 1984, the calendar week ending at midnight Saturday, or as
17 the division may by regulation prescribe.

18 (r) "Calendar quarter" means the period of three consecutive
19 calendar months ending March 31, June 30, September 30, or
20 December 31.

21 (s) "Investment company" means any company as defined in
22 subsection a. of section 1 of P.L.1938, c.322 (C.17:16A-1).

23 (t) (1) (Deleted by amendment, P.L.2001, c.17).

24 (2) ["Base week," commencing on or after January 1, 1996 and
25 before January 1, 2001, means:

26 (A) Any calendar week during which the individual earned in
27 employment from an employer remuneration not less than an amount
28 which is 20% of the Statewide average weekly remuneration defined
29 in subsection (c) of R.S.43:21-3 which amount shall be adjusted to the
30 next higher multiple of \$1.00 if not already a multiple thereof, except
31 that if in any calendar week an individual subject to this subparagraph
32 (A) is in employment with more than one employer, the individual
33 may in that calendar week establish a base week with respect to each
34 of the employers from whom the individual earns remuneration equal
35 to not less than the amount defined in this subparagraph (A) during
36 that week; or

37 (B) If the individual does not establish in his base year 20 or more
38 base weeks as defined in subparagraph (A) of this paragraph (2), any
39 calendar week of an individual's base year during which the individual
40 earned in employment from an employer remuneration not less than an
41 amount 20 times the minimum wage in effect pursuant to section 5 of
42 P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year
43 preceding the calendar year in which the benefit year commences,
44 which amount shall be adjusted to the next higher multiple of \$1.00 if
45 not already a multiple thereof, except that if in any calendar week an
46 individual subject to this subparagraph (B) is in employment with
47 more than one employer, the individual may in that calendar week
48 establish a base week with respect to each of the employers from
49 whom the individual earns remuneration not less than the amount

1 defined in this subparagraph (B) during that week.】 (Deleted by
2 amendment, P.L. , c.)(pending before the Legislature as this bill)

3 (3) "Base week," commencing on or after January 1, 2001 and
4 before January 1, 2020¹, and after the time that federal financing of
5 unemployment benefits in this State, pursuant to the "Coronavirus Aid,
6 Relief, and Economic Security Act," Pub. Law 116-136, ceases¹,
7 means any calendar week during which the individual earned in
8 employment from an employer remuneration not less than an amount
9 20 times the minimum wage in effect pursuant to section 5 of
10 P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year
11 preceding the calendar year in which the benefit year commences,
12 which amount shall be adjusted to the next higher multiple of \$1.00 if
13 not already a multiple thereof, except that if in any calendar week an
14 individual subject to this paragraph (3) is in employment with more
15 than one employer, the individual may in that calendar week establish
16 a base week with respect to each of the employers from whom the
17 individual earns remuneration equal to not less than the amount
18 defined in this paragraph (3) during that week.

19 (4) "Base week," commencing on or after January 1, 2020 ¹until
20 the time that federal financing of unemployment benefits in this State,
21 pursuant to the "Coronavirus Aid, Relief, and Economic Security Act,"
22 Pub. Law 116-136 ceases¹, means any calendar week during which the
23 individual earned in employment from an employer remuneration not
24 less than an amount 10 times the minimum wage in effect pursuant to
25 section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the
26 calendar year preceding the calendar year in which the benefit year
27 commences, which amount shall be adjusted to the next higher
28 multiple of \$1.00 if not already a multiple thereof, except that if in any
29 calendar week an individual subject to this paragraph (4) is in
30 employment with more than one employer, the individual may in that
31 calendar week establish a base week with respect to each of the
32 employers from whom the individual earns remuneration equal to not
33 less than the amount defined in this paragraph (4) during that week.

34 (u) "Average weekly wage" means the amount derived by dividing
35 an individual's total wages received during his base year base weeks
36 (as defined in subsection (t) of this section) from that most recent base
37 year employer with whom he has established at least 20 base weeks,
38 by the number of base weeks in which such wages were earned. In the
39 event that such claimant had no employer in his base year with whom
40 he had established at least 20 base weeks, then such individual's
41 average weekly wage shall be computed as if all of his base week
42 wages were received from one employer and as if all his base weeks of
43 employment had been performed in the employ of one employer.

44 For the purpose of computing the average weekly wage, the
45 monetary alternative in subparagraph (B) of paragraph **[(2)] (4)** of
46 subsection (e) of R.S.43:21-4 shall only apply in those instances where
47 the individual did not have at least 20 base weeks in the base year. For
48 benefit years commencing on or after July 1, 1986, "average weekly

1 wage" means the amount derived by dividing an individual's total base
2 year wages by the number of base weeks worked by the individual
3 during the base year; provided that for the purpose of computing the
4 average weekly wage, the maximum number of base weeks used in the
5 divisor shall be 52.

6 (v) "Initial determination" means, subject to the provisions of
7 R.S.43:21-6(b)(2) and (3), a determination of benefit rights as
8 measured by an eligible individual's base year employment with a
9 single employer covering all periods of employment with that
10 employer during the base year.

11 (w) "Last date of employment" means the last calendar day in the
12 base year of an individual on which he performed services in
13 employment for a given employer.

14 (x) "Most recent base year employer" means that employer with
15 whom the individual most recently, in point of time, performed service
16 in employment in the base year.

17 (y) (1) "Educational institution" means any public or other
18 nonprofit institution (including an institution of higher education):

19 (A) In which participants, trainees, or students are offered an
20 organized course of study or training designed to transfer to them
21 knowledge, skills, information, doctrines, attitudes or abilities from, by
22 or under the guidance of an instructor or teacher;

23 (B) Which is approved, licensed or issued a permit to operate as a
24 school by the State Department of Education or other government
25 agency that is authorized within the State to approve, license or issue a
26 permit for the operation of a school; and

27 (C) Which offers courses of study or training which may be
28 academic, technical, trade, or preparation for gainful employment in a
29 recognized occupation.

30 (2) "Institution of higher education" means an educational
31 institution which:

32 (A) Admits as regular students only individuals having a certificate
33 of graduation from a high school, or the recognized equivalent of such
34 a certificate;

35 (B) Is legally authorized in this State to provide a program of
36 education beyond high school;

37 (C) Provides an educational program for which it awards a
38 bachelor's or higher degree, or provides a program which is acceptable
39 for full credit toward such a degree, a program of post-graduate or
40 post-doctoral studies, or a program of training to prepare students for
41 gainful employment in a recognized occupation; and

42 (D) Is a public or other nonprofit institution.

43 Notwithstanding any of the foregoing provisions of this subsection,
44 all colleges and universities in this State are institutions of higher
45 education for purposes of this section.

46 (z) "Hospital" means an institution which has been licensed,
47 certified or approved under the law of this State as a hospital.

48 (cf: P.L.2017, c.230, s.1)

1 ¹~~8.1~~ 7.1 (New section) Sections ¹~~8~~ 7¹ through ¹~~11~~ 10¹ of
2 this act shall be known and may be cited as the “Employee Job-
3 Sharing Furlough Protection Act.”
4

5 ¹~~9.1~~ 8.1 (New section) To facilitate the providing of the
6 maximum possible benefits for employees and savings for
7 employers in the State from the federal financing of unemployment
8 benefits provided in connection with short-time compensation
9 programs pursuant to section 2108 of the “Coronavirus Aid, Relief,
10 and Economic Security Act,” Pub. Law 116-136 and from federal
11 financing of emergency increases in unemployment benefits under
12 section 2104 of that act, the division shall, during the period from
13 the effective date of this act until December 31, 2020, undertake the
14 following actions:

15 a. Make available to all employers who may be eligible to
16 participate in a shared work program pursuant to P.L.2011, c.154
17 (C.43:21-20.3 et seq.) for which full federal funding of short-time
18 unemployment benefits is available pursuant to section 2108 of the
19 “Coronavirus Aid, Relief, and Economic Security Act,” Pub. Law
20 116-136, a guidance document which explains:

21 (1) what the employer is required to do to establish, pursuant to
22 P.L.2011, c.154 (C.43:21-20.3 et seq.), shared work programs
23 eligible for the federal funding, including providing certification to
24 the division that any union representing employees in collective
25 bargaining has entered into a written agreement regarding the terms
26 of the program and certification that the employer will continue
27 providing any current health insurance and pension coverage, paid
28 time off and other benefits in the manner required by P.L.2011,
29 c.154 (C.43:21-20.3 et seq.);

30 (2) procedures for an employer to make an application for
31 approval of a shared work program, including an explanation of
32 how the employer may make preliminary calculations of benefits to
33 be paid to participating employees to expedite the commencement
34 of the payment of the benefits in the shortest possible time;

35 b. Provide any eligible employer with any assistance requested
36 by the employer in making an application;

37 c. Permit an application for approval of a shared work program
38 to be submitted to, and approved by, the division in advance of the
39 date on which reduced hours of employment are to commence to
40 permit payment of benefits under the program immediately upon
41 that commencement, or, as an alternative, permit the payment of
42 benefits under a shared work program to commence immediately
43 upon the date of an application by an eligible employer for approval
44 of the program, and pay, for any period of shared work under the
45 program, amounts of benefits which are based on determinations
46 made by the division or based on preliminary determinations made
47 by the employer pursuant to paragraph (2) of subsection a. of this
48 section, which the division shall review and, if appropriate, revise,
49 and shall subsequently pay any underpayment in benefits, or collect

1 from subsequent benefits any overpayment in benefits, including
2 the collecting of an amount equal to all benefits paid, if the
3 application is rejected, without penalty to the employees and, if the
4 division finds that the employer made a good faith effort to follow
5 the division's guidance, impose no penalty on the employer for the
6 overpayment;

7 d. Permit employers who have fully laid off employees to
8 resume employing those employees on a partial basis in a manner
9 consistent with the requirements of P.L.2011, c.154 (C.43:21-20.3
10 et seq.), and establish a shared work program to make short-time
11 benefits available to those employees;

12 e. Permit, upon the approval of a shared work program, of the
13 payment of benefits retroactively back to the time that shared work
14 commenced in a manner consistent with the requirements of
15 P.L.2011, c.154 (C.43:21-20.3 et seq.);

16 f. Contact each employer which is a non-profit organization
17 subject to the provisions of section 3 of P.L.1971, c.346 (C.43:21-
18 7.2) or a governmental entity or instrumentality subject to the
19 provisions of section 4 of P.L.1971, c.346 (C.43:21-7.3) to provide
20 that employer, in addition to the guidance document indicated in
21 subsection a. of this section, information regarding the potential
22 reduction in the expenses of that employer from participating in a
23 shared work program pursuant to P.L.2011, c.154 (C.43:21-20.3 et
24 seq.) for which full federal funding of short-time unemployment
25 benefits is available pursuant to section 2108 of the "Coronavirus
26 Aid, Relief, and Economic Security Act," Pub. Law 116-136.

27

28 ¹**[10.] 9.**¹ (New section) A public employee enrolled in a State-
29 administered retirement system or fund, and the employer of that
30 employee, shall be required to make contributions to the system or
31 fund during the period that the employee is on a furlough pursuant to
32 section ¹**[9] 8**¹ of this act, P.L. , c. (C.) (pending before the
33 Legislature as this bill) and P.L.2011, c.154 (C.43:21-20.3 et seq.).
34 The contributions shall be based on the base salary or compensation,
35 as defined by the retirement system or fund, that would have been paid
36 to the employee if the employee had not been on furlough. The
37 employee's service credit as a member of the system or fund shall
38 include the period of furlough. For all purposes under the retirement
39 system or fund, the period of furlough and the base salary or
40 compensation upon which contribution were made during the period of
41 furlough shall be recognized by the retirement system or fund. The
42 seniority rights and health benefits coverage of an employee who
43 participates in this furlough program shall continue and shall not be
44 adversely affected by participation. The employer shall enter into a
45 written agreement with any collective bargaining agent representing
46 the employees regarding the terms of the program, including terms
47 regarding attendance in training programs while receiving short-time
48 benefits, and provide certification, and the copy, of the agreement to
49 the division as required by P.L.2011, c.154 (C.43:21-20.3 et seq.). This

1 section shall not be construed to conflict with any applicable
2 provisions of federal law.

3
4 **11.10.**¹ (New section) a. The division shall, not later than
5 March 31, 2021, issue, make public on the website of the
6 Department of Labor and Workforce Development, and submit to
7 the Governor and Legislature, pursuant to section 2 of P.L.1991,
8 c.164 (C.52:14-19.1), a report on all shared work programs
9 approved during calendar year 2020 pursuant to P.L.2011, c.154
10 (C.43:21-20.3 et seq.) and the impact of federal financing of those
11 programs pursuant to section 2108 of the “Coronavirus Aid, Relief,
12 and Economic Security Act,” Pub. Law 116-136 and of federal
13 financing pursuant to section 2104 of that act of emergency
14 increases in unemployment benefits for participants in approved
15 shared work programs.

16 b. The report shall provide separately for governmental
17 employers, for-profit private employers, and nonprofit employers,
18 during calendar year 2020:

19 (1) The total number of participating employers and employees,
20 the total amount of unemployment benefits paid to participants, the
21 portion of those benefits that was pandemic unemployment
22 compensation, the total wage compensation that was paid to
23 participants during participation in the program, and the share, if
24 any, of the benefit costs not paid or reimbursed by the federal
25 government;

26 (2) The minimum, maximum, and average duration of programs,
27 the average weekly benefit, and the average weekly wage paid
28 during participation in the program;

29 (3) The number of participating employers who provided, and
30 the total number of employees who received, health insurance
31 coverage, and the total number of participating employers who
32 provided, and the total number of employees who received, pension
33 coverage;

34 (4) The number of participating employers who entered into
35 agreements with collective bargaining agents regarding the terms of
36 the program, and the total number of employees covered by those
37 agreements;

38 (5) The total reduction in payroll costs due to reduced hours of
39 paid employment by participants;

40 (6) In the case of governmental employers and, separately,
41 nonprofit employers, the portion of the participating employers that
42 elected to make payments in lieu of contributions pursuant to
43 section 3 of P.L.1971, c.346 (C.43:21-7.2) or section 4 of P.L.1971,
44 c.346 (C.43:21-7.3), the portion of participating employees who
45 were employed by those employers, the portion of benefits that
46 were paid by those employers, and the total reduction in cost to
47 those employers due to federal financing of short-time
48 compensation.

1 c. The report shall provide an estimate of the total cost of
2 unemployment benefits to the unemployment compensation fund if
3 employers who used federally-funded, approved shared work
4 programs to partially lay off employees had instead reduced work
5 hours by the same amount, by fully laying off a smaller number of
6 employees, and the effect that would have had on employer
7 contribution rates.

8 d. The report shall provide, for each calendar year from 2012
9 through 2019, the total number of employers and employees
10 participating in approved shared work programs and the total
11 amount of unemployment benefits paid to participating employees.
12

13 ¹[12. Section 2 of P.L.1948, c.110 (C.43:21-26) is amended to
14 read as follows:

15 2. Purpose. This act shall be liberally construed as remedial
16 legislation enacted upon the following declarations of public policy
17 and legislative findings of fact:

18 The public policy of this State, already established, is to protect
19 employees against the suffering and hardship generally caused by
20 involuntary unemployment. But the "unemployment compensation
21 law" provides benefit payments to replace wage loss caused by
22 involuntary unemployment only so long as an individual is "able to
23 work, and is available for work," and fails to provide any protection
24 against wage loss suffered because of inability to perform the duties
25 of a job interrupted by nonoccupational illness, injury, or other
26 disability of the individual or of members of the individual's family.
27 Nor is there any other comprehensive and systematic provision for
28 the protection of working people against loss of earnings due to a
29 nonoccupational sickness, accident, or other disability.

30 The prevalence and incidence of nonoccupational sickness,
31 accident, and other disability among employed people is greatest
32 among the lower income groups, who either cannot or will not
33 voluntarily provide out of their own resources against the hazard of
34 an earnings loss caused by nonoccupational sickness, accident, or
35 other disability. Disabling sickness or accident occurs throughout
36 the working population at one time or another, and approximately
37 fifteen per centum (15%) of the number of people at work may be
38 expected to suffer disabling illness of more than one week each
39 year.

40 It was found, prior to the enactment of the "Temporary Disability
41 Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.), that then
42 existing voluntary plans for the payment of cash sickness benefits
43 covered less than one-half of the number of working people of this
44 State who were covered by the "unemployment compensation law,"
45 and that even that degree of voluntary protection afforded uneven,
46 unequal and sometimes uncertain protection among the various
47 voluntary benefit programs.

48 While the enactment of that law has provided stable protection
49 for New Jersey's disabled workers, very few workers are protected

1 from income losses caused by the need to take time off from work
2 to care for family members who are incapable of self-care,
3 including newborn and newly-adopted children. The growing
4 portion of middle-income families in which all adult family
5 members work, largely due to economic necessity, points to the
6 desperate need for replacement income when a working family
7 member must take time to care for family members who are unable
8 to take care of themselves. Moreover, the United States is the only
9 industrialized nation in the world which does not have a mandatory
10 workplace-based program for such income support. It is therefore
11 desirable and necessary to fill the gap in existing provisions for
12 protection against the loss of earnings caused by involuntary
13 unemployment, by extending such protection to meet the hazard of
14 earnings loss due to inability to work caused by nonoccupational
15 sickness, accidents, or other disabilities of workers and members of
16 their families. Developing systems that help families adapt to the
17 competing interests of work and home not only benefits workers,
18 but also benefits employers by reducing employee turnover and
19 increasing worker productivity.

20 The foregoing facts and considerations require that there be a
21 uniform minimum program providing in a systematic manner for
22 the payment of reasonable benefits to replace partially such
23 earnings loss and to meet the continuing need for benefits where an
24 individual becomes disabled during unemployment or needs to care
25 for family members incapable of self-care. In order to maintain
26 consumer purchasing power, relieve the serious menace to health,
27 morals and welfare of the people caused by insecurity and the loss
28 of earnings, to reduce the necessity for public relief of needy
29 persons, to increase workplace productivity and alleviate the
30 enormous and growing stress on working families of balancing the
31 demands of work and family needs, and in the interest of the health,
32 welfare and security of the people of this State, such a system,
33 enacted under the police power, is hereby established, requiring the
34 payment of reasonable cash benefits to eligible individuals who are
35 subject to accident or illness which is not compensable under the
36 worker's compensation law or who need to care for family members
37 incapable of self-care.

38 **【**While the Legislature recognizes the pressing need for benefits
39 for workers taking leave to care for family members incapable of
40 self-care, it also finds that the need of workers for leave during their
41 own disability continues to be especially acute, as a disabled worker
42 has less discretion about taking time off from work than a worker
43 caring for a family member. Notwithstanding any interpretation of
44 law which may be construed as providing a worker with rights to
45 take action against an employer who fails or refuses to restore the
46 worker to employment after the worker's own disability, the
47 Legislature does not intend that the policy established by P.L.2008,
48 c.17 (C.43:21-39.1 et al.) of providing benefits for workers during
49 periods of family temporary disability leave to care for family

1 members incapable of self-care be construed as granting any worker
2 an entitlement to be restored by the employer to employment held
3 by the worker prior to taking family temporary disability leave or
4 any right to take action, in tort, or for breach of an implied
5 provision of the employment agreement, or under common law,
6 against an employer who fails or refuses to restore the worker to
7 employment after the family temporary disability leave, and the
8 Legislature does not intend that the policy of providing benefits
9 during family temporary disability leave be construed as increasing,
10 reducing or otherwise modifying any entitlement of a worker to
11 return to employment or right of the worker to take action under the
12 provisions of the "Family Leave Act," P.L.1989, c.261 (C.34:11B-1
13 et seq.).**】**

14 Since the enactment of the "Temporary Disability Benefits Law,"
15 P.L.1948, c.110 (C.43:21-25 et al.), the State government-operated
16 State temporary disability benefits plan, or "State plan," has proven
17 to be highly efficient and cost effective in providing temporary
18 disability benefits to New Jersey workers. The State plan
19 guarantees the availability of coverage for all employers, regardless
20 of experience, with low overhead costs and a rapid processing of
21 claims and appeals by knowledgeable, impartial public employees.
22 Consequently, the percentage of all employers using the State plan
23 increased from 64% in 1952 to 98% in 2006, while the percentage
24 of employees covered by the State plan increased from 28% to 83%.
25 A publicly-operated, nonprofit State plan is therefore indispensable
26 to achieving the goals of the "Temporary Disability Benefits Law,"
27 P.L.1948, c.110 (C.43:21-25 et al.).
28 (cf: P.L.2019, c.37, s.7)**】¹**

29
30 **¹【13.** Section 10 of P.L.2008, c.17 (C.43:21-39.1) is amended to
31 read as follows:

32 10. a. Family temporary disability leave shall be compensable
33 subject to the limitations of P.L.2008, c.17 (C.43:21-39.1 et al.) for
34 any period of family temporary disability leave taken by a covered
35 individual which commences after June 30, 2009.

36 b. An individual shall not simultaneously receive disability
37 benefits for family temporary disability leave and any other
38 disability benefits pursuant to P.L.1948, c.110 (C.43:21-25 et al.) or
39 any unemployment compensation, or any paid sick leave, vacation
40 time or other leave at full pay from the employer of the individual.

41 c. The employer of an individual may, notwithstanding any
42 other provision of law, including the provisions of N.J.S.18A:30-1
43 et seq., permit the individual, during a period of family temporary
44 disability leave, to use any paid sick leave, vacation time or other
45 leave at full pay made available by the employer before the
46 individual uses disability benefits for family temporary disability
47 leave pursuant to P.L.2008, c.17 (C.43:21-39.1 et al.). Nothing in
48 P.L.2008, c.17 (C.43:21-39.1 et al.) shall be construed as nullifying
49 any provision of an existing collective bargaining agreement or

1 employer policy, or preventing any new provision of a collective
2 bargaining agreement or employer policy, which provides
3 employees more generous leave or gives employees greater rights to
4 select which kind of leave is used or select the order in which the
5 different kinds of leave are used. Nothing in P.L.2008, c.17
6 (C.43:21-39.1 et al.) shall be construed as preventing an employer
7 from providing more generous benefits than are provided under
8 P.L.2008, c.17 (C.43:21-39.1 et al.) or providing benefits which
9 supplement the benefits provided under P.L.2008, c.17 (C.43:21-
10 39.1 et al.) for some or all of the employer's employees.

11 d. An individual who is entitled to leave under the provisions
12 of the "Family Leave Act," P.L.1989, c.261 (C.34:11B-1 et seq.) or
13 the federal "Family and Medical Leave Act of 1993," Pub.L.103-3
14 (29 U.S.C. s.2601 et seq.), shall take any benefits provided for
15 family temporary disability leave pursuant to P.L.2008, c.17
16 (C.43:21-39.1 et al.) concurrently with leave taken pursuant to the
17 "Family Leave Act," P.L.1989, c.261 (C.34:11B-1 et seq.) or the
18 federal "Family and Medical Leave Act of 1993," Pub.L.103-3 (29
19 U.S.C. s.2601 et seq.). [Nothing in P.L.2008, c.17 (C.43:21-39.1 et
20 al.) shall be construed to grant an employee any entitlement to be
21 restored by the employer to employment held by the employee prior
22 to taking family temporary disability leave or any right to take
23 action against an employer who refuses to restore the employee to
24 employment after the leave. Nothing in P.L.2008, c.17 (C.43:21-
25 39.1 et al.) shall be construed to increase, reduce or otherwise
26 modify any entitlement of an employee to return to employment or
27 right of the employee to take action under the provisions of the
28 "Family Leave Act," P.L.1989, c.261 (C.34:11B-1 et seq.). If an
29 employee receives benefits for family temporary disability leave
30 pursuant to P.L.2008, c.17 (C.43:21-39.1 et al.) with respect to
31 employment with an employer who is not an employer as defined in
32 the "Family Leave Act," P.L.1989, c.261 (C.34:11B-1 et seq.) and
33 that employer fails or refuses to restore the employee to
34 employment after the period of family temporary disability leave,
35 that failure or refusal shall not be a wrongful discharge in violation
36 of a clear mandate of public policy, and the employee shall not have
37 a cause of action against that employer, in tort, or for breach of an
38 implied provision of the employment agreement, or under common
39 law, for that failure or refusal.]

40 e. An employee taking family temporary disability leave or an
41 employer from whom the employee is taking the leave shall have
42 the same right to appeal a determination of a benefit for the family
43 temporary disability leave made under P.L.2008, c.17 (C.43:21-39.1
44 et al.) as an employee or employer has to appeal a determination of
45 a benefit for the disability of the employee under the "Temporary
46 Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.), and
47 any regulations adopted pursuant to the "Temporary Disability
48 Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.).

1 f. In the event of a period of family temporary disability leave
2 of any individual covered under the State plan, the employer shall,
3 not later than the ninth day of the period of family temporary
4 disability leave, or not later than the ninth day after the employee
5 notifies the employer of an anticipated period of family temporary
6 disability leave pursuant to subsection h. of this section, whichever
7 comes first, including any time in which the employer provides sick
8 leave, vacation or other fully paid leave, issue to the individual and
9 to the division printed notices on division forms containing the
10 name, address and Social Security number of the individual, such
11 wage information as the division may require to determine the
12 individual's eligibility for benefits, including any sick pay, vacation
13 or other fully paid time off provided by the employer during the
14 period of family temporary disability leave, and the name, address,
15 and division identity number of the employer. Not later than 30
16 days after the commencement of the period of family temporary
17 disability leave for which the notice is furnished by the employer,
18 the individual shall furnish to the division a notice and claim for
19 family temporary disability leave benefits. Upon the submission of
20 the notices by the employer and the individual, and the
21 commencement of the compensable portion of the family temporary
22 disability leave pursuant to P.L.2008, c.17 (C.43:21-39.1 et al.), the
23 division may issue benefit payments. In the case of family
24 temporary disability leave taken to care for a family member with a
25 serious health condition, the benefits may be paid for periods not
26 exceeding three weeks pending the receipt of the certification
27 required pursuant to subsection b. of section 11 of P.L.2008, c.17
28 (C.43:21-39.2). Failure to furnish notice and certification in the
29 manner above provided shall not invalidate or reduce any claim if it
30 shall be shown to the satisfaction of the division not to have been
31 reasonably possible to furnish the notice and certification and that
32 the notice and certification was furnished as soon as reasonably
33 possible.

34 g. Each covered employer shall conspicuously post
35 notification, in a place or places accessible to all employees in each
36 of the employer's workplaces, in a form issued by regulation
37 promulgated by the commissioner, of each covered employee's
38 rights regarding benefits payable pursuant to this section. The
39 employer shall also provide each employee of the employer with a
40 written copy of the notification: (1) not later than 30 days after the
41 form of the notification is issued by regulation; (2) at the time of the
42 employee's hiring, if the employee is hired after the issuance; (3)
43 whenever the employee notifies the employer that the employee is
44 taking time off for circumstances under which the employee is
45 eligible for benefits pursuant to this section; and (4) at any time,
46 upon the first request of the employee.

47 h. With respect to any period of family temporary disability
48 leave commencing on or after October 4, 2019 if an individual
49 knows in advance when the period will commence, the individual

1 may notify the employer of the anticipated period of family
2 temporary disability leave and submit to the division a claim for
3 benefits for that period, which shall include a statement of when the
4 period will commence and any certification required pursuant to
5 subsection b. of section 11 of P.L.2008, c.17 (C.43:21-39.2), prior
6 to, but not more than 60 days prior to, the date that the period will
7 commence. The division shall process that claim immediately and,
8 upon finding that the claim is valid, shall pay the benefit upon the
9 commencement of the period of family temporary disability leave,
10 except that if the division receives the claim less than 30 days
11 before the commencement of the period, the division shall make the
12 payment not more than 30 days after the receipt of the claim. The
13 periods of family temporary disability leave to which the provisions
14 of this subsection apply shall include, but not be limited to, any of
15 the following if the commencement date of the leave is known in
16 advance: periods of leave for care of a child of the individual after
17 adoption, the placement of a child into foster care, or childbirth,
18 including childbirth under a valid agreement between the individual
19 and a gestational carrier; periods of leave for scheduled medical
20 procedures, treatments, or appointments for a family member of the
21 individual; and periods of leave for scheduled ongoing care of a
22 family member of the individual. If the individual did not establish
23 enough base weeks or have enough total earnings during the base
24 year preceding the week the individual submits the claim, the
25 division shall notify the individual that the individual may file the
26 claim again upon or after the commencement of the period of
27 family temporary disability leave and the division shall then
28 reconsider the individual's eligibility for benefits based on the base
29 year preceding the week in which the period of family temporary
30 disability leave commences.

31 (cf: P.L.2019, c.37, s.13)]¹

32
33 ¹[14. Section 24 of P.L.2019, c.37 (C.43:21-55.2) is amended to
34 read as follows:

35 24. a. An employer shall not discharge, harass, threaten, or
36 otherwise discriminate or retaliate against an employee with respect
37 to the compensation, terms, conditions, or privileges of employment
38 on the basis that the employee requested or took any temporary
39 disability benefits pursuant to P.L.1948, c.110 (C.43:21-25 et al.),
40 or family temporary disability leave benefits pursuant to P.L.2008,
41 c.17 (C.43:21-39.1 et al.), including retaliation by refusing to
42 **[restore]** reinstate the employee to employment following a period
43 of leave[, except that, pursuant to section 2 of P.L.1948, c.110
44 (C.43:21-26), nothing in this section or any other section of
45 P.L.1948, c.110 (C.43:21-25 et al.) or P.L.2008, c.17 (C.43:21-39.1
46 et al.) shall be construed as increasing, reducing or otherwise
47 modifying any entitlement provided to a worker by the provisions
48 of the "Family Leave Act," P.L.1989, c.261 (C.34:11B-1 et seq.) to

1 be restored to employment by the employer after a period of family
 2 temporary disability leave] in the position held when the leave
 3 commenced or an equivalent position of like seniority, status,
 4 employment benefits, pay and other terms and conditions of
 5 employment, except that if, during period of leave, the employer
 6 reduces the number of employees and that reduction would have
 7 caused the employee to have been laid off if the employee had not
 8 been on leave, the employee shall not be entitled to reinstatement,
 9 but only if the employer notifies the employee of the employee's
 10 right to file a claim for unemployment benefits after the leave
 11 period ends as provided by paragraph (2) of subsection (c) of
 12 R.S.43:21-19.

13 b. Upon a violation of subsection a. of this section, an
 14 employee or former employee may, as an alternative to any action
 15 that the employee is permitted to take for the violation pursuant to
 16 the provisions of P.L.1948, c.110 (C.43:21-25 et al.), P.L.2008, c.17
 17 (C.43:21-39.1 et al.), or the "Family Leave Act," P.L.1989, c.261
 18 (C.34:11B-1 et seq.), institute a civil action in the Superior Court
 19 for relief]. All] in which all remedies available in common law
 20 tort actions shall be available to a prevailing plaintiff. The court
 21 may also order any or all of the following relief:

22 (1) an assessment of a civil fine of not less than \$1,000 and not
 23 more than \$2,000 for the first violation of any of the provisions of
 24 this section and not more than \$5,000 for each subsequent violation;

25 (2) an injunction to restrain the continued violation of any of the
 26 provisions of this section;

27 (3) reinstatement of the employee to the same position or to a
 28 position equivalent to that which the employee held prior to
 29 unlawful discharge or retaliatory action;

30 (4) reinstatement of full fringe benefits and seniority rights;

31 (5) compensation for any lost wages, benefits and other
 32 remuneration; and

33 (6) payment of reasonable costs and attorney's fees.

34 (cf: P.L.2019, c.37, s.24).]¹

35
 36 ¹[15.] 11.¹ This act shall take effect immediately¹], provided
 37 that:

38 a. in the case of any employer who becomes subject to the
 39 provisions of P.L.1989, c.261 (C.34:11B-1 et seq.) because of the
 40 provisions of paragraph (5) of subsection f. of section 3 of P.L.1989,
 41 c.261 (C.34:11B-3), the provisions of P.L.1989, c.261 (C.34:11B-1 et
 42 seq.) shall apply to the employer only with respect to periods of family
 43 leave which take place, in full or in part, after the effective date of this
 44 act; and

45 b. in the case of any employer who becomes subject to the
 46 provisions of section 24 of P.L.2019, c.37 (C.43:21-55.2) because of
 47 the changes made in that section by P.L. , c. (C.)(pending
 48 before the Legislature as this bill) the provisions of section 24 of

S2350 [1R] SWEENEY, POU

56

- 1 P.L.2019, c.37 (C.43:21-55.2) shall apply to the employer only with
- 2 respect to periods of disability for family temporary disability leave
- 3 which take place, in full or in part, after the effective date of this act¹.

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/01/2020 08:06:59 AM
To: Jones, Tammy
Subject: CompleteCare
Attachments: CompleteCare

Sender: mspinelli@chcinj.org
Subject: CompleteCare
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/01/2020 08:06:56 AM
To: Jones, Tammy
Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

We are going to bring going out and visiting the migrant camps to provide testing information along with educational material . Could you share with me the health department testing info so I can pass it on .

Hope I you are doing well during this difficult time. Thank you for everything!

Thank you ,
Meghan

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553D307925C2534982E0B51A459A34B3@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/01/2020 08:10:40 AM
To: Ruiz, Annmarie; Jankauskas, Dittymae
Subject: CompleteCare
Attachments: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: CompleteCare
Message-Id:
To: aruiz@co.gloucester.nj.us
To: djankauskas@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/01/2020 08:10:39 AM
To: Ruiz, Annmarie; Jankauskas, Dittymae
Subject: CompleteCare

FYI -

Thoughts...?

-----Original Message-----

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]
Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy
Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

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Thank you ,
Meghan

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D191656DEA6CE243AC04C5ADF50C451D@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/01/2020 03:05:04 PM
To: Meghan Spinelli <mspinelli@chcinj.org>
Cc: Spence, Daniele
Subject: CompleteCare

Hi Meghan:

I am in receipt of your correspondence below and do thank you for reaching out to us at the Gloucester County Department of Health.

At this time, this Department is not aware of any farm experiencing a number of positive Covid-19 cases.

We additionally reached out to our point of contact at Rutgers Cooperative Extension to see if their office has received any reports from farmers of any workers having illness at this time.

That office also indicated that none have been reported thus far.

If we learn anything more and further support or assistance is needed, we will certainly reach out; as we truly appreciate you reaching out to provided added education and assistance!

Wishing you well –

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 - 4130

-----Original Message-----

From: Meghan Spinelli [<mailto:mspinelli@chcinj.org>]

Sent: Friday, May 1, 2020 8:07 AM

To: Jones, Tammy [tjones@co.gloucester.nj.us]

Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

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Meghan

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From: Jones, Tammy
Sent time: 05/06/2020 09:51:32 AM
To: Doyle, Kathleen (Katie)
Subject: CompleteCare
Attachments: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: CompleteCare
Message-Id: <8e62d8aeb1ec4cedb622315ff45c0cb6@co.gloucester.nj.us>
To: kdoyle@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/06/2020 09:51:32 AM
To: Doyle, Kathleen (Katie)
Subject: CompleteCare

Katie:

The individual from Complete Care that set things up today
Was Meghan Spinelli....
mspinelli@chcinj.org

From: Meghan Spinelli [<mailto:mspinelli@chcinj.org>]
Sent: Monday, May 4, 2020 2:37 PM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: RE: CompleteCare

Hello,

I wanted to inform you that we would like to start providing Covid testing on the migrant camps early next week. Could we setup a call with your Department? I feel it would be best to keep you in the loop with the CompleteCare plans.

Thank you,
Meghan

From: Jones, Tammy [<mailto:tjones@co.gloucester.nj.us>]
Sent: Friday, May 01, 2020 3:05 PM
To: Meghan Spinelli
Cc: Spence, Daniele
Subject: CompleteCare

Hi Meghan:

I am in receipt of your correspondence below and do thank you for reaching out to us at the Gloucester County Department of Health.

At this time, this Department is not aware of any farm experiencing a number of positive Covid-19 cases. We additionally reached out to our point of contact at Rutgers Cooperative Extension to see if their office has received any reports from farmers of any workers having illness at this time. That office also indicated that none have been reported thus far.

If we learn anything more and further support or assistance is needed, we will certainly reach out; as we truly appreciate you reaching out to provided added education and assistance!

Wishing you well –

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 - 4130

-----Original Message-----

From: Meghan Spinelli [<mailto:mspinelli@chcinj.org>]
Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

We are going to bring going out and visiting the migrant camps to provide testing information along with educational material . Could you share with me the health department testing info so I can pass it on .

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Thank you ,
Meghan

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From: Jones, Tammy
Sent time: 05/18/2020 10:28:03 AM
To: Meghan Spinelli <mspinelli@chcinj.org>
Subject: CompleteCare
Attachments: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: CompleteCare
Message-Id:
To: mspinelli@chcinj.org

From: Jones, Tammy
Sent time: 05/18/2020 10:28:02 AM
To: Meghan Spinelli <mspinelli@chcinj.org>
Subject: CompleteCare

Hi Meghan:

Annamarie Ruiz, our Health Officer here in Gloucester County has been trying to reach you-
If you are able, please contact us @ (856) 218 – 4136.

This in follow-up to your inquiry regarding the Covid-19 re-testing of migrant farm workers-
We would also like to speak with you in follow-up to the testing that has taken place at one
of our Gloucester County Farms.

Thanks,

Tammy

Tamarisk L Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

296B214D211F374B9335B0A4BAA7A125@co.gloucester.nj.us.msg

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/06/2020 02:18:55 PM
To: Bianco, Thomas A.; Jones, Tammy
Subject: Concerns about the health of migrant workers in Gloucester County and region
Attachments: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyanp@ihn.org
Subject: Concerns about the health of migrant workers in Gloucester County and region
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/06/2020 02:18:53 PM
To: Bianco, Thomas A.; Jones, Tammy
Subject: Concerns about the health of migrant workers in Gloucester County and region

Tammy – greetings. Tom Bianco and I were discussing an unrelated issue and I mentioned that one our newest concerns is the health of migrant workers community in the greater South Jersey region. While we continue to conduct surge planning, which is based on “community spread,” one of the greatest unknowns is how the migrant community will be impacted. This is especially timely as we understand that the growing season and migrant influx is now in play and will continue for the next couple of months. To this extent, I would be interested in learning about any plans or considerations by of the County in addressing this issue. If helpful, I would be happy to set up a call to discuss this issue further. I appreciate your thoughts - Peter

Peter A. Kaprielyan

Vice President, Government and External Relations

Inspira Health

Corporate Office Mullica Hill

165 Bridgeton Pike | Mullica Hill, NJ 08062

Office: (856) 641-6602 | Fax: (856) 575-5178

Mobile: [REDACTED]



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7C07E9F901751341A08477604EF7AD09@co.gloucester.nj.us.msg

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/06/2020 02:18:55 PM
To: Bianco, Thomas A.; Jones, Tammy
Subject: Concerns about the health of migrant workers in Gloucester County and region
Attachments: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyanp@ihn.org

Subject: Concerns about the health of migrant workers in Gloucester County and region

Message-Id:

Recipient: tbianco@co.gloucester.nj.us

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/06/2020 02:18:53 PM
To: Bianco, Thomas A.; Jones, Tammy
Subject: Concerns about the health of migrant workers in Gloucester County and region

Tammy – greetings. Tom Bianco and I were discussing an unrelated issue and I mentioned that one our newest concerns is the health of migrant workers community in the greater South Jersey region. While we continue to conduct surge planning, which is based on “community spread,” one of the greatest unknowns is how the migrant community will be impacted. This is especially timely as we understand that the growing season and migrant influx is now in play and will continue for the next couple of months. To this extent, I would be interested in learning about any plans or considerations by of the County in addressing this issue. If helpful, I would be happy to set up a call to discuss this issue further. I appreciate your thoughts - Peter

Peter A. Kaprielyan

Vice President, Government and External Relations

Inspira Health

Corporate Office Mullica Hill

165 Bridgeton Pike | Mullica Hill, NJ 08062

Office: (856) 641-6602 | Fax: (856) 575-5178

Mobile: [REDACTED]



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2D65E6AD0AC4A84BBF76E97AD9D9F5BC@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/12/2020 11:41:06 AM
To: Bruner, Chad
Cc: Gangloff, Michele
Subject: Elected Officials Call

[REDACTED]

Announcing today that testing will increase and with the environment in place at present, will look to open the state in a responsible way

Have their eye on Rutgers test kits (Saliva)

Currently doing 10,000 tests/day.... Hoping to increase these numbers through expansion of testing....

As supplies are received will get them out

Migrant Farm Workers and how they'll be testing them will be very similar to LTC, Prisons, vulnerable populations like homeless shelters, DDD centers, etc.

testing will take place similarly.

Plan work for how they'll be handling is forthcoming -

They'll be speaking with Farm Owners later this week and then discuss further with

Local health departments and county admin by end of week.

Contact tracing will also be discussed by Governor today –

State is hiring staff to handle this component....

(Will be interesting whether they are taking it over; or just lending support to those who are behind).

A problem we've already seen in GC is many migrant workers are not legal citizens.

None of our programs cover them....so although we have a location / hotel to place, that owner

will want payment (Approx \$105/day). We were clear about this with the State. We are also

paying attention to that AC regional field hospital and whether migrant workers can be placed there...

or, remain in place, on the farms they are working – farmers would need to be

able to separate and isolate symptomatic on site.

A separate call will be set up with experts to answer questions anyone might have.

Plan forthcoming for everyone to review...then a call will be set up to discuss

198 new deaths / 9,508 total deaths statewide

898 new positive cases/ 140,743 total

Gloucester

7 new / 90 total deaths

20 new / 1,710 total cases

From: Cerny, Lisa A.
Sent time: 05/14/2020 04:35:59 PM
To: Jones, Tammy; Jankauskas, Dittymae
Subject: Emailing: Act to halt COVID-19 among N.J. farmworkers Editorial - nj.com
Attachments: Emailing: Act to halt COVID-19 among N.J. farmworkers Editorial - nj.com

Sender: lcerny@co.gloucester.nj.us
Subject: Emailing: Act to halt COVID-19 among N.J. farmworkers Editorial - nj.com
Message-Id:
To: tjones@co.gloucester.nj.us
To: djankauskas@co.gloucester.nj.us

From: Cerny, Lisa A.
Sent time: 05/14/2020 04:35:59 PM
To: Jones, Tammy; Jankauskas, Dittymae
Subject: Emailing: Act to halt COVID-19 among N.J. farmworkers Editorial - nj.com

FYI
[Skip to Article](#)

We can be so much stronger together. Learn more

1 Opinion

Act to halt COVID-19 among N.J. farmworkers | Editorial

Today 7:38 AM

By [South Jersey Times Editorial Board](#)

Could the next “long-term care facilities” in New Jersey’s coronavirus epidemic be seasonal workers at Garden State farms?

According to a report from NJ Spotlight’s Ian Shearn, [some 59 migrant workers at an Upper Pittsgrove Township farm were recently infected with COVID-19](#), in a Salem County municipality that reportedly had seen just five positive tests by May 1.

In the report, Mayor Jack Cimprich acknowledged the outbreak, saying that he had thought only 20 to 25 workers of 80 to 100 farmworkers there had contracted the virus, but adding that he “wouldn’t be surprised, in fact, if it hasn’t spread to the whole group.”

Regardless of the count, this is the next red flag, one that carries special implications for South Jersey and for [state agriculture](#).

Whatever improvements have been made to migrant workers’ living quarters and sanitation in recent years, these laborers tend to live close together in dormitory buildings — the same kind of conditions that have aided the spread in nursing homes, correctional facilities and special-needs residences.

But, those other places have medical staff, administrators, and easy access to testing sources, even if actual test kits have been scarce. In migrants’ quarters, the only organizational structure consists of crew leaders. Even the farmers who employ these vital workers may have little direct knowledge of what’s happening when they’re not visible in the fields.

Neither the state Department of Health nor the mayor would identify in the NJ Spotlight story the farm with the outbreak, but this is obviously a concern for a whole region, with peak harvest season for several crops including blueberries coming soon.

[A mobile testing program reportedly began Monday in Gloucester and Salem counties](#), and is expected to move later to Atlantic County. There is important role to play for groups such as the Southern Jersey Family Medical Center, which is coordinating the testing, and the immigrant advocacy group CATA, which can overcome language barriers with workers who

mainly come from Central or South America.

Let's get it done, without the delays that hastened the spread in the state's nursing homes. You'd have to think the deaths of residents would be fewer if Gov. Phil Murphy and his administration had accelerated testing programs sooner, and had brought in the National Guard as reinforcements for ill staff members earlier, [something that did not occur until this past weekend](#).

Don't forget. Farmworkers and their families go into towns where they live or nearby, and buy supplies in supermarkets and big-box stores. The dynamics sound similarly scary to what has happened in [dozens of small Midwestern towns with meatpacking plants](#). They can become "hot spots" for infecting an entire community.

Obviously, vegetables and fruits have a short window to be harvested and packed, and it would be bad to have more interruptions to our fresh food supply right now. But, no farmer or crew leader who suspects an outbreak should be foolish enough to allow workers to go out and pick crops or load boxes in packing houses, especially if they are showing symptoms. It's more important to have a plan to test and isolate anyone who might be infected.

It's good that there has been [no credible evidence that COVID-19 is spread via our food supply](#), since we all want our "Jersey Fresh" tomatoes, corn and peaches. They are among the few tasty farm-to-table pleasures that we can enjoy at home while restaurants remain closed. The cost of such culinary bliss, however, cannot be further community progression of a lethal disease.

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From: Bianco, Thomas A.
Sent time: 05/14/2020 09:33:13 AM
To: McNulty, Dennis P.
Cc: Jones, Tammy; Casella, Michelle
Subject: Farm workers infected
Attachments: Farm workers infected

Sender: tbianco@co.gloucester.nj.us
Subject: Farm workers infected
Message-Id: <533fb46e79744cb6ae4b00bbb8101392@co.gloucester.nj.us>
To: dmcnulty@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us
Cc: minfante@co.gloucester.nj.us

From: Bianco, Thomas A.
Sent time: 05/14/2020 09:33:13 AM
To: McNulty, Dennis P.
Cc: Jones, Tammy; Casella, Michelle
Subject: Farm workers infected

More Than Half of a South Jersey Farm's Workers Infected With COVID-19, DOH Reports

<https://www.njspotlight.com/2020/05/more-than-half-of-a-south-jersey-farms-workers-infected-with-covid-19-doh-reports/>
<https://www.nj.com/opinion/2020/05/act-to-halt-covid-19-among-nj-farmworkers-editorial.html>

Thomas Bianco
Director Gloucester County
Department of Economic Development
856-384-6930 office
[REDACTED] cell
tbianco@co.gloucester.nj.us

E694BCE9615462468F54D4E907B1C555@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/16/2020 08:44:19 PM
To: Bruner, Chad
Subject: Farm

Hi Chad-

Letting you know Ditty thinks about 5 migrant farm workers on a South Harrison farm have tested positive.

Will keep you posted as we learn more-

Thanks!

Tammy

635F9473D9322D489597A8104A0A8F04@co.gloucester.nj.us.msg

From: Knight, Margaret <margaret.knight@bassett.org>
Sent time: 06/03/2020 12:25:34 PM
To: Jones, Tammy
Subject: field investigation request-produce farm
Attachments: field investigation request-produce farm

Sender: margaret.knight@bassett.org
Subject: field investigation request-produce farm
Message-Id: <1cef21285c441143a6d4920f1d3cdac55bec8b@exmb13a.bassett.org>
Recipient: tjones@co.gloucester.nj.us

From: Knight, Margaret <margaret.knight@bassett.org>
Sent time: 06/03/2020 12:24:17 PM
To: Jones, Tammy
Subject: field investigation request-produce farm

Dear Ms. Jones,

I am inquiring from the Northeast Center for Occupational Health and Safety about the COVID-19 outbreak at the produce farm in Gloucester County. We developed a model, predicating the spread of COVID-19 in farmworker housing, and a copy of the field investigation would be extremely helpful.

Thank you for your help,

Margaret Knight

Bassett Healthcare Network

Northeast Center for Occupational Health and Safety (NEC)

607-437-8348

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154BA58AB7565143AB136F97189280A1@co.gloucester.nj.us.msg

From: Ruiz, Annmarie
Sent time: 05/22/2020 10:19:59 AM
To: Jones, Tammy; Jankauskas, Dittymae; Ruiz, Annmarie
Subject: FW: Calls regarding Migrant and Seasonal Farmworkers Testing Initiative and Guidance
Attachments: FW: Calls regarding Migrant and Seasonal Farmworkers Testing Initiative and Guidance

Sender: aruiz@co.gloucester.nj.us
Subject: FW: Calls regarding Migrant and Seasonal Farmworkers Testing Initiative and Guidance
Message-Id:
To: tjones@co.gloucester.nj.us
To: djankauskas@co.gloucester.nj.us
To: aruiz@co.gloucester.nj.us

From: Ruiz, Annmarie
Sent time: 05/22/2020 10:19:59 AM
To: Jones, Tammy; Jankauskas, Dittymae; Ruiz, Annmarie
Subject: FW: Calls regarding Migrant and Seasonal Farmworkers Testing Initiative and Guidance

Calls at 1:30 and 4 today

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: "Weller, Jamie"
Date: 5/22/20 9:45 AM (GMT-05:00)
To: "Weller, Jamie"
Subject: Calls regarding Migrant and Seasonal Farmworkers Testing Initiative and Guidance

Good morning:

I have a couple of updates regarding the release of the **Interim Coronavirus Disease 2019 (COVID-19) Guidance for Migrant and Seasonal Farmworkers, Their Employers, and Housing Providers**, which can be found at this link:

https://nj.gov/health/cd/documents/topics/NCOV/COVID_MigrantFarmWorkerGuidance_5.20.2020.pdf

TODAY (5/22), there will be two opportunities to hear more about the guidance.

1. Health Officers who serve counties with large concentrations of farms that employ migrant and seasonal farmworkers have been invited to listen in on a stakeholder call with community/activist organizations at **1:30 pm**. This call is being hosted by the NJ Department of Labor, with NJDOH Commissioner of Health, Judith Persichilli, giving an overview of the guidance.

Participant Call in Information

Phone Number: [REDACTED]

Access Code: [REDACTED]

Shereen and I will not be able to attend for the duration call due to scheduling conflicts. **Therefore, we ask if you have any questions during this call, please send them to me via email. I will be sure to address.** Despite the fact this call is for community/activist organizations and OLPH's scheduling conflicts, we still wanted to extend the opportunity for you to listen in to hear what information is being shared with community stakeholders in your area.

2. Health Officers are also invited to join a call with the NJ DOH team who worked on the MSFW guidance and FQHC partners at **4:00 pm**. Our team felt it would be helpful to bring together FQHCs and LHDs, key partners in serving this vulnerable population.

Participant Call in Information

Call Number: [REDACTED]

Access Code: [REDACTED]

During this call, we will review the guidance, take questions from FQHCs/Health Officers, and discuss some of the roles/responsibilities with this initiative, as well as areas where communication and collaboration would be helpful. Some of the things that have been shared with OLPH by Health Officers regarding areas where coordination would be helpful include FQHCs sharing testing schedules with LHDs in advance, the FQHC entering as much information into the lab requisition to help link cases to the farm, and FQHCs sharing a BASIC line list of tested individuals (of course, considering case investigation would be the responsibility of the LHD). If there is anything you'd like to add prior to the call, please reach out to me, and I will be sure to include it in the discussion. We are also in the process of creating a document to reflect these considerations in the spirit of FQHC-LHD coordination.

3. We are also planning to set up calls by County with Health Officers and County Administrators to offer a more individualized opportunity to ask questions regarding this guidance and initiative. More information to come next week.

Again, thank you for your patience as this interagency document was created.

Thank you!

Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

9FCC254A62B13C4EB5732332D02303D8@co.gloucester.nj.us.msg

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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9FCC254A62B13C4EB5732332D02303D8@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/01/2020 09:16:11 AM
To: Casella, Michelle
Subject: FW: CompleteCare
Attachments: FW: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: FW: CompleteCare
Message-Id:
To: minfante@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/01/2020 09:16:10 AM
To: Casella, Michelle
Subject: FW: CompleteCare

Hi Michelle:

Hoping you don't mind my reaching out to bother you?!

Health received the below e-mail.

Are you aware of any farms reporting concerns of Covid-19 positive cases, with their migrant workers?

We are not showing any specific farm.

Or, are there any farm communities that need additional support/information which Meghan and Complete Care are willing to offer?

Just double-checking with you before reaching back out to Meghan in follow-up (below).

Thanks!

Tammy

-----Original Message-----

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]
Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy
Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

We are going to bring going out and visiting the migrant camps to provide testing information along with educational material . Could you share with me the health department testing info so I can pass it on .

Hope I you are doing well during this difficult time. Thank you for everything!

Thank you ,
Meghan

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9CB6127AE510ED48915784E012EDAA41@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/18/2020 10:28:13 AM
To: Ruiz, Annmarie
Subject: FW: CompleteCare
Attachments: FW: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: FW: CompleteCare
Message-Id: <30b141bd8b9a46268554a2b9e90f1d9a@co.gloucester.nj.us>
To: aruiz@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/18/2020 10:28:13 AM
To: Ruiz, Annmarie
Subject: FW: CompleteCare

FYI

From: Jones, Tammy
Sent: Monday, May 18, 2020 10:28 AM
To: 'Meghan Spinelli'
Subject: CompleteCare

Hi Meghan:

Annmarie Ruiz, our Health Officer here in Gloucester County has been trying to reach you- If you are able, please contact us @ (856) 218 – 4136.

This in follow-up to your inquiry regarding the Covid-19 re-testing of migrant farm workers- We would also like to speak with you in follow-up to the testing that has taken place at one of our Gloucester County Farms.

Thanks,

Tammy

Tamarisk L Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

D9F4BE2D4BAED646AAE9895AB78D7BB9@co.gloucester.nj.us.msg

From: Bianco, Thomas A.
Sent time: 05/14/2020 09:37:00 AM
To: Shirey, Michelle
Cc: McNulty, Dennis P.; Jones, Tammy
Subject: FW: Farm workers infected
Attachments: FW: Farm workers infected

Sender: tbianco@co.gloucester.nj.us
Subject: FW: Farm workers infected
Message-Id:
To: mshirey@co.gloucester.nj.us
Cc: dmcnulty@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us

From: Bianco, Thomas A.
Sent time: 05/14/2020 09:37:00 AM
To: Shirey, Michelle
Cc: McNulty, Dennis P.; Jones, Tammy
Subject: FW: Farm workers infected

5/14/20

Michelle

Did anybody from the state that works in the GCAJC with this population ever call you?

Tom

From: Bianco, Thomas A.
Sent: Thursday, May 14, 2020 9:33 AM
To: McNulty, Dennis P.
Cc: Jones, Tammy ; Casella, Michelle
Subject: Farm workers infected

More Than Half of a South Jersey Farm's Workers Infected With COVID-19, DOH Reports

<https://www.njspotlight.com/2020/05/more-than-half-of-a-south-jersey-farms-workers-infected-with-covid-19-doh-reports/>

<https://www.nj.com/opinion/2020/05/act-to-halt-covid-19-among-nj-farmworkers-editorial.html>

Thomas Bianco
Director Gloucester County
Department of Economic Development
856-384-6930 office
[REDACTED] cell
tbianco@co.gloucester.nj.us

C08377272D37F643920EF576F5612B08@co.gloucester.nj.us.msg

From: Jankauskas, Dittymae
Sent time: 05/11/2020 12:12:51 PM
To: Jones, Tammy; Ruiz, Annmarie
Subject: FW: Field Hospital
Attachments: FW: Field Hospital

Sender: djankauskas@co.gloucester.nj.us
Subject: FW: Field Hospital
Message-Id:
To: tjones@co.gloucester.nj.us
To: aruiz@co.gloucester.nj.us

From: Jankauskas, Dittymae
Sent time: 05/11/2020 12:12:51 PM
To: Jones, Tammy; Ruiz, Annmarie
Subject: FW: Field Hospital

Can this be used for migrant farm workers??

Ditty Mae Jankauskas RN, MSN, CRNP

Director of Public Health Nursing
Gloucester County Department of Health
204 E Holly Ave
Sewell, NJ 08080
(856) 218-4135
FAX (856) 218-4109



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From: Cerny, Lisa A.
Sent: Monday, May 11, 2020 12:01 PM
To: Jones, Tammy ; Doyle, Kathleen (Katie) ; Jankauskas, Dittymae
Subject: FW: Field Hospital
FYI

From: Yoo, Sharon syoo@co.morris.nj.us>
Sent: Monday, May 11, 2020 11:54 AM
To: Cerny, Lisa A. lcerny@co.gloucester.nj.us>; Adrienne Hart ahart@mercercounty.org>; Anibal Ramos (aramos@dedte.essexcountynj.org) aramos@dedte.essexcountynj.org>; Carol Novrit (CNovrit@sussex.nj.us) CNovrit@sussex.nj.us>; Christine Florio cflorio@sussex.nj.us>; Darice Toon dtoon@hcnj.us>; Debbie Ann Anderson (danderson@ucnj.org) danderson@ucnj.org>; Diana Cooper dcooper@cpachvi.org>; Francine Vince francinev@passaiccountynj.org>; Hilary Colbert (hcolbert@cpachvi.org) hcolbert@cpachvi.org>; J. Forrest Gilmore Gilmore_forrest@aclink.org>; Jeffrey Schwartz jeffrey.schwartz@co.monmouth.nj.us>; Jessica Torres essexhsac@dedte.essexcountynj.org>; Karen Dinsmore kdinsmore@ucnj.org>; Marygrace Billek mbillek@mercercounty.org>; Meagan O'Reilly moreilly@co.hunterdon.nj.us>; Melissa DeBartolo mdebartolo@co.bergen.nj.us>; Melissa Niles melissani@co.cumberland.nj.us>; Melyssa Lewis Melyssa.lewis@co.middlesex.nj.us>; Michael J. Frost frost@co.somerset.nj.us>; Nicole Harrison-Garcia nhgarcia@hcnj.us>; Pat Devaney - Cape May County (Patricia.devaney@co.cape-may.nj.us) Patricia.devaney@co.cape-may.nj.us>; Rocco Mazza rmazza@co.bergen.nj.us>; S. Buskirk sbuskirk@co.warren.nj.us>; Shirla Simpson ssimpson@co.burlington.nj.us>; Tracy Maksel tmaksel@co.ocean.nj.us>
Subject: Field Hospital

Hi All:

I just spoke with Deb Hartel at DOH as it pertains to the use of the field hospitals. As we all know Secaucus is packing up today. However, they are relocating their operations to East Orange with approx. 125 beds. It appears their new plan is to utilize the East Orange, Edison, and Atlantic City Operations as quarantine sites for those who cannot quarantine at home. They anticipate it's use for that purpose to start next week (at least for the East Orange location). When I obtain more information, I'll share with everyone. Which counties might see use for this purpose?

Sharon J.L. Yoo, Esq.
Director
Department of Human Services
Morris County
One Medical Drive
Morris Plains, N.J. 07950
Phone: 973-285-6863
Fax: 973-829-8543
Cell: [REDACTED]



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From: Cerny, Lisa A. lcerny@co.gloucester.nj.us>

Sent: Friday, May 8, 2020 12:44 PM

To: Adrienne Hart ahart@mercercounty.org>; Anibal Ramos (aramos@dedte.essexcountynj.org)
aramos@dedte.essexcountynj.org>; Carol Novrit (CNovrit@sussex.nj.us) CNovrit@sussex.nj.us>; Christine Florio
cflorio@sussex.nj.us>; Darice Toon dtoon@hcnj.us>; Debbie Ann Anderson (danderson@ucnj.org) danderson@ucnj.org>;
Diana Cooper dcooper@cpachvi.org>; Francine Vince francinev@passaiccountynj.org>; Hilary Colbert (hcolbert@cpachvi.org)
hcolbert@cpachvi.org>; J. Forrest Gilmore Gilmore_forrest@aclink.org>; Jeffrey Schwartz
jeffrey.schwartz@co.monmouth.nj.us>; Jessica Torres essexhsac@dedte.essexcountynj.org>; Karen Dinsmore
kdinsmore@ucnj.org>; Marygrace Billek mbillek@mercercounty.org>; Meagan O'Reilly moreilly@co.hunterdon.nj.us>; Melissa
DeBartolo mdebartolo@co.bergen.nj.us>; Melissa Niles melissani@co.cumberland.nj.us>; Melyssa Lewis
Melyssa.lewis@co.middlesex.nj.us>; Michael J. Frost frost@co.somerset.nj.us>; Nicole Harrison-Garcia nhgarcia@hcnj.us>; Pat
Devaney - Cape May County (Patricia.devaney@co.cape-may.nj.us) Patricia.devaney@co.cape-may.nj.us>; Rocco Mazza
rmazza@co.bergen.nj.us>; S. Buskirk sbuskirk@co.warren.nj.us>; Yoo, Sharon syoo@co.morris.nj.us>; Shirla Simpson
ssimpson@co.burlington.nj.us>; Tracy Maksiel tmaksiel@co.ocean.nj.us>

Subject: FW: COVID-19 Webinar: Operating I/Q Facilities

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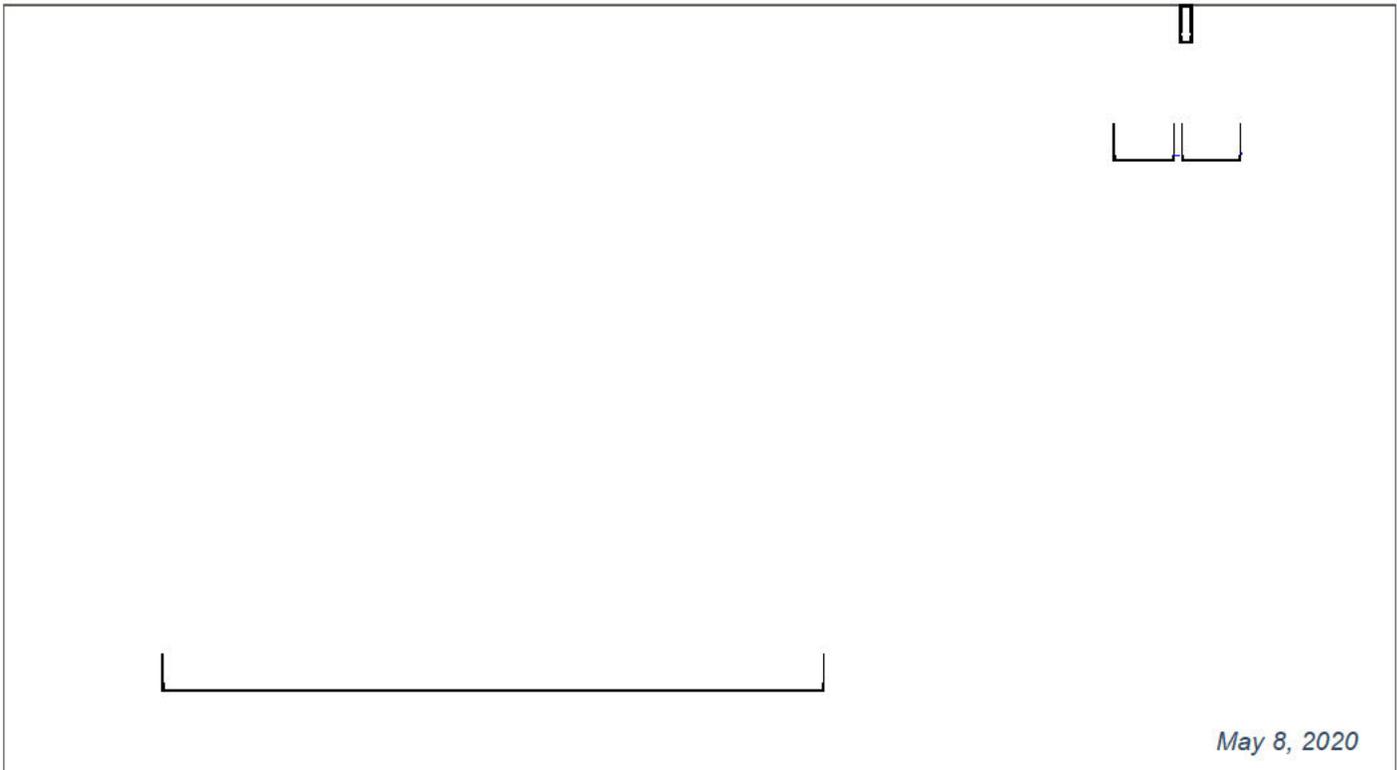
Thought this might be interesting

From: U.S. Interagency Council on Homelessness communications@usich.gov>

Sent: Friday, May 8, 2020 12:42 PM

To: Cerny, Lisa A. lcerny@co.gloucester.nj.us>

Subject: COVID-19 Webinar: Operating I/Q Facilities



May 8, 2020

Trauma-Informed Care + Affordable Housing = Housing Stability



COVID-19 Planning and Response Webinar



CE304B0AE439844691B443A16E23557A@co.gloucester.nj.us.msg

**Operating Isolation and Quarantine Facilities and Providing Medical, Behavioral Health, and Substance Use Treatment:
Lessons Learned from King County**

Featuring:

Julie Dombrowski, MD, MPH

Associate Professor of Medicine, University of Washington
Deputy Director, Public Health, Seattle & King County HIV/STD Program
I/Q Medical Lead

Josephine Wong

Deputy Director, King County Department of Community & Human Services
I/Q Operations Lead

Kelli Nomura

Director, DCHS Behavioral Health and Recovery Division
I/Q Behavioral Health Lead

**May 12, 2020
2:00 - 3:30 PM ET**

If you have trouble accessing the webinar due to overwhelming demand, please know that we will send the recording to all registrants and post it on www.usich.gov/covid-19 by the end of the day on May 12.

Register

NEW Coronavirus Resources

- [COVID-19 Dislocated Worker Grants](#), DOL (May 5)
- [Framework for COVID-19 Homelessness Response: Responding to the Intersecting Crises of Homelessness and COVID-19](#), NAEH (May 1)

Access all of the latest resources at www.usich.gov/covid-19.

Website Goals Solutions Tools For Action

U.S. Interagency Council on Homelessness

301 7th St. SW, Washington, DC 20407
Phone: 202.708.4663 / E-mail: usich@usich.gov

United States Interagency Council on Homelessness | 301 7th St. SW, Washington, DC
20407

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From: Jones, Tammy
Sent time: 06/03/2020 12:29:26 PM
To: Ruiz, Annmarie
Subject: FW: field investigation request-produce farm
Attachments: FW: field investigation request-produce farm

Sender: tjones@co.gloucester.nj.us
Subject: FW: field investigation request-produce farm
Message-Id: <4f258319d62b4adf971ed30331683d6f@co.gloucester.nj.us>
To: aruiz@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 06/03/2020 12:29:26 PM
To: Ruiz, Annmarie
Subject: FW: field investigation request-produce farm

Hi Annmarie:
Would you kindly address this?
Thanks,
Tammy

From: Knight, Margaret [mailto:margaret.knight@bassett.org]
Sent: Wednesday, June 3, 2020 12:24 PM
To: Jones, Tammy
Subject: field investigation request-produce farm

Dear Ms. Jones,

I am inquiring from the Northeast Center for Occupational Health and Safety about the COVID-19 outbreak at the produce farm in Gloucester County. We developed a model, predicating the spread of COVID-19 in farmworker housing, and a copy of the field investigation would be extremely helpful.

Thank you for your help,

Margaret Knight

Bassett Healthcare Network

Northeast Center for Occupational Health and Safety (NEC)

607-437-8348

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Thank you.

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From: Jones, Tammy
Sent time: 06/03/2020 12:31:42 PM
To: Jankauskas, Dittymae
Subject: FW: field investigation request-produce farm
Attachments: FW: field investigation request-produce farm

Sender: tjones@co.gloucester.nj.us
Subject: FW: field investigation request-produce farm
Message-Id: <49b21d04fee846ac878837ddd1443860@co.gloucester.nj.us>
To: djankauskas@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 06/03/2020 12:31:42 PM
To: Jankauskas, Dittymae
Subject: FW: field investigation request-produce farm

FYI

From: Jones, Tammy
Sent: Wednesday, June 3, 2020 12:32 PM
To: 'Knight, Margaret'
Subject: RE: field investigation request-produce farm

Hello Ms. Knight:

I am in receipt of your e-mail correspondence below.

I've asked our Health Officer, Annmarie Ruiz, to follow-up directly with you to obtain some additional information so that we can assist you further.

She will be in touch shortly,

Thanks,

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave

Sewell, NJ 08080

(856) 218 - 4130

From: Knight, Margaret [mailto:margaret.knight@bassett.org]
Sent: Wednesday, June 3, 2020 12:24 PM
To: Jones, Tammy
Subject: field investigation request-produce farm

Dear Ms. Jones,

I am inquiring from the Northeast Center for Occupational Health and Safety about the COVID-19 outbreak at the produce farm in Gloucester County. We developed a model, predicating the spread of COVID-19 in farmworker housing, and a copy of the field investigation would be extremely helpful.

Thank you for your help,

Margaret Knight

Bassett Healthcare Network

Northeast Center for Occupational Health and Safety (NEC)

607-437-8348

Please consider the environment before printing this e-mail.

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Thank you.

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From: Ruiz, Annmarie
Sent time: 05/11/2020 01:02:32 PM
To: Jankauskas, Dittymae; Jones, Tammy
Cc: Ruiz, Annmarie
Subject: FW: Follow-up - FQHCs and FMS-AC
Attachments: FW: Follow-up - FQHCs and FMS-AC

Sender: aruiz@co.gloucester.nj.us
Subject: FW: Follow-up - FQHCs and FMS-AC
Message-Id:
To: djankauskas@co.gloucester.nj.us
To: tjones@co.gloucester.nj.us
Cc: aruiz@co.gloucester.nj.us

From: Ruiz, Annmarie
Sent time: 05/11/2020 01:02:31 PM
To: Jankauskas, Dittymae; Jones, Tammy
Cc: Ruiz, Annmarie
Subject: FW: Follow-up - FQHCs and FMS-AC
Attachments: image001.png ATT00001.htm AC-FMS - For FQHCs.pptx ATT00002.htm Field Medical Station Inclusion exclusion criteria.rev050720202.docx ATT00003.htm New Jersey Uniform Transfer Form.docx ATT00004.htm

Megan Sheppard from Cumberland shared information FQHC's recived regarding the migrant farm testing and use of FMS in Atlantic City

From: Megan Sheppard
Sent: Saturday, May 9, 2020 4:38 PM
To: Ruiz, Annmarie
Subject: Fw: Follow-up - FQHCs and FMS-AC

From: James Edwards jedwards@chcinj.org>
Sent: Thursday, May 7, 2020 1:05 PM
To: Meghan Spinelli mspinelli@chcinj.org>
Cc: Megan Sheppard msheppard@ccdoh.org>
Subject: Fwd: Follow-up - FQHCs and FMS-AC
FYI

Sent from my iPhone

Begin forwarded message:

From: "Brown, Jeff" jeff.brown@doh.nj.gov>
Date: May 7, 2020 at 12:53:20 PM EDT
To: "Sam, Sharon" Sharon.Sam@doh.nj.gov>, "Flake, Linda" Linda.Flake@sjfmc.org>, "eturbiner (zufallhealth.org)" eturbiner@zufallhealth.org>, James Edwards jedwards@chcinj.org>, "tberger (ohinj.org)" tberger@ohinj.org>, "Anderson, Denise" Denise.Anderson@doh.nj.gov>, Amanda Medina-Forrester amanda.medina-forrester@doh.nj.gov>, "Koslow, Damon" Damon.Koslow@doh.nj.gov>
Cc: "Scott, Rick" Rick.Scott@doh.nj.gov>, "Emmons, Kevin" Kevin.Emmons@doh.nj.gov>, "Croushore, Susan" Susan.Croushore@doh.nj.gov>
Subject: Follow-up - FQHCs and FMS-AC

Good afternoon,

As a follow-up to our call yesterday, here are some materials related to FMS – Atlantic City. The first is a powerpoint created by the Southern Jersey Transfer Command Center (at Cooper) which talks about capabilities, shows the layout, and provides some info on transportation to and from FMS-AC (currently done with Logisticare, more options in the works).

The second is a list of inclusion/exclusion criteria for FQHC's and hospitals to consider when sending patients to the FMS.

The new inclusion criteria to accommodate seasonal farm workers testing positive is:

- COVID-19 + patients found on screening who are asymptomatic or minimally symptomatic, i.e.:
 - Cough, fatigue, temp under 102 but with no signs of respiratory distress
 - COVID-19 + who are not able to socially distance and self-isolate due to living conditions

We are updating the 1-pagers that can be shared with patients based on some of the barriers you all mentioned on the call (i.e. skepticism/fear of federal gov't), and will circulate those once completed.

I will also send around a transfer process document. In the meantime, should you have any patients that you think could benefit from isolation and medical monitoring at FMS-Atlantic City, please call the main number (**609 449-3900**). Rick Scott, our CMO, will then be able to discuss the patient(s) with you to determine if they are appropriate for transfer, and then the FMS-AC staff can work with you to arrange transportation. A NJ Universal Transfer Form will need to be filled out for each patient (attached).

Finally, the whole leadership team at FMS-AC (Rick Scott, Kevin Emmons, and Susan Croushore) are cc'd on this email should you have any specific questions.

Thank you,
Jeff Brown

Assistant Commissioner, Medicinal Marijuana

NJ Department of Health

Cell

(609) 984-2200 Office

jeff.brown@doh.nj.gov

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FEA6C92109CE9F4B953AB77DA4DB823C@co.gloucester.nj.us.msg



From: Sam, Sharon <Sharon.Sam@doh.nj.gov>

Sent: Wednesday, May 6, 2020 10:56 AM

To: Flake, Linda <Linda.Flake@sjfmc.org>; eturbiner (zufallhealth.org) <eturbiner@zufallhealth.org>; James Curtis Edwards <jedwards@chcinj.org>; tberger (ohinj.org) <tberger@ohinj.org>; Brown, Jeff <jeff.brown@doh.nj.gov>; Anderson, Denise <Denise.Anderson@doh.nj.gov>; Amanda Medina-Forrester <amanda.medina-forrester@doh.nj.gov>; Koslow, Damon <Damon.Koslow@doh.nj.gov>

Subject: FMS-AC Call at 12pm

The goal of today's call is to provide the following:

1. An overview of FMS-AC and its capabilities to the FQHCs
2. Testing process (i.e. what type of assessment is done)
3. Discuss what potential patient intake would look like

Thank you in advance for your assistance.

Regards,

Sharon

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COVID-19 COMMAND CENTER FOR SOUTHERN NEW JERSEY

FIELD MEDICAL STATION

Atlantic City

Atlantic | Burlington | Camden | Cape May | Cumberland | Gloucester | Salem

AtlantiCare | Cape Regional | Cooper | Deborah | Jefferson | Inspira | Salem Memorial | Shore Medical | Virtua

AC-FMS Hospital List

18 South Jersey Regional Hospitals

AtlantiCare

- AtlantiCare Regional Medical Center, Atlantic City
- AtlantiCare Regional Medical Center Mainland, Pomona

Cape Regional Health System

The Cooper Health System

Deborah Heart and Lung Center

Inspira Health

- Inspira Medical Center Elmer
- Inspira Medical Center Vineland
- Inspira Medical Center Woodbury

Jefferson Health New Jersey

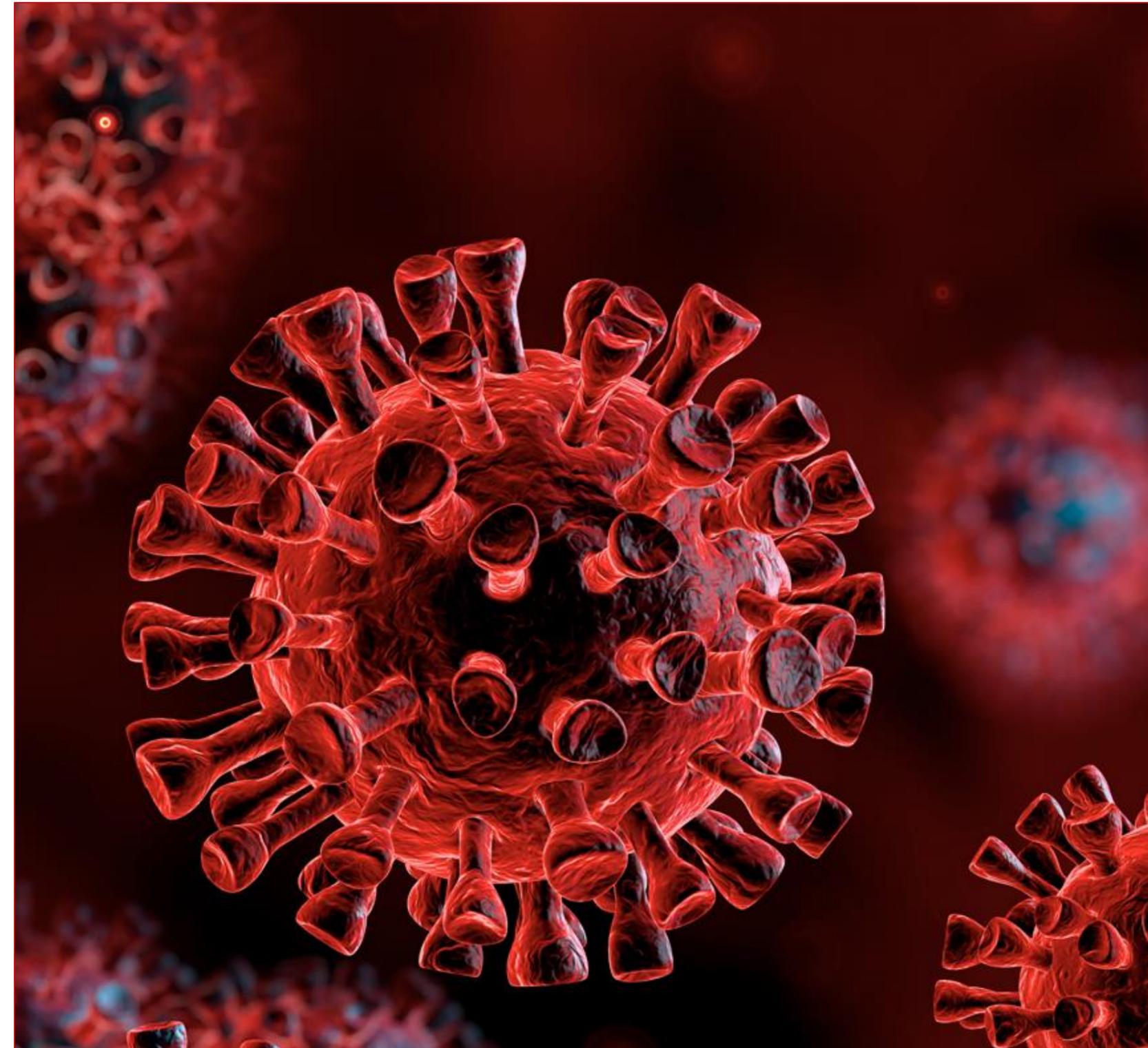
- Jefferson Cherry Hill Hospital
- Jefferson Stratford Hospital
- Jefferson Washington Township Hospital

Salem Medical Center

Shore Medical Center

Virtua

- Virtua Memorial Hospital, Mt. Holly
- Virtua Marlton Hospital
- Virtua Voorhees Hospital
- Virtua Our Lady of Lourdes Hospital, Camden
- Virtua Willingboro Hospital



Field Medical Station – Atlantic City

PURPOSE

To provide support to regional hospitals during the current COVID-19 crisis by providing additional capacity for low acuity, medical and surgical patients who are not yet ready to be discharged home.

ADDRESS

Field Medical Site – Atlantic City (AC-FMS)
COVID19 Public Health Emergency Response
Atlantic City Convention Center
1 Convention Boulevard
Atlantic City, NJ 08401
Main phone: (609) 449-3900



AC-FMS Leadership & Expected Medical Care

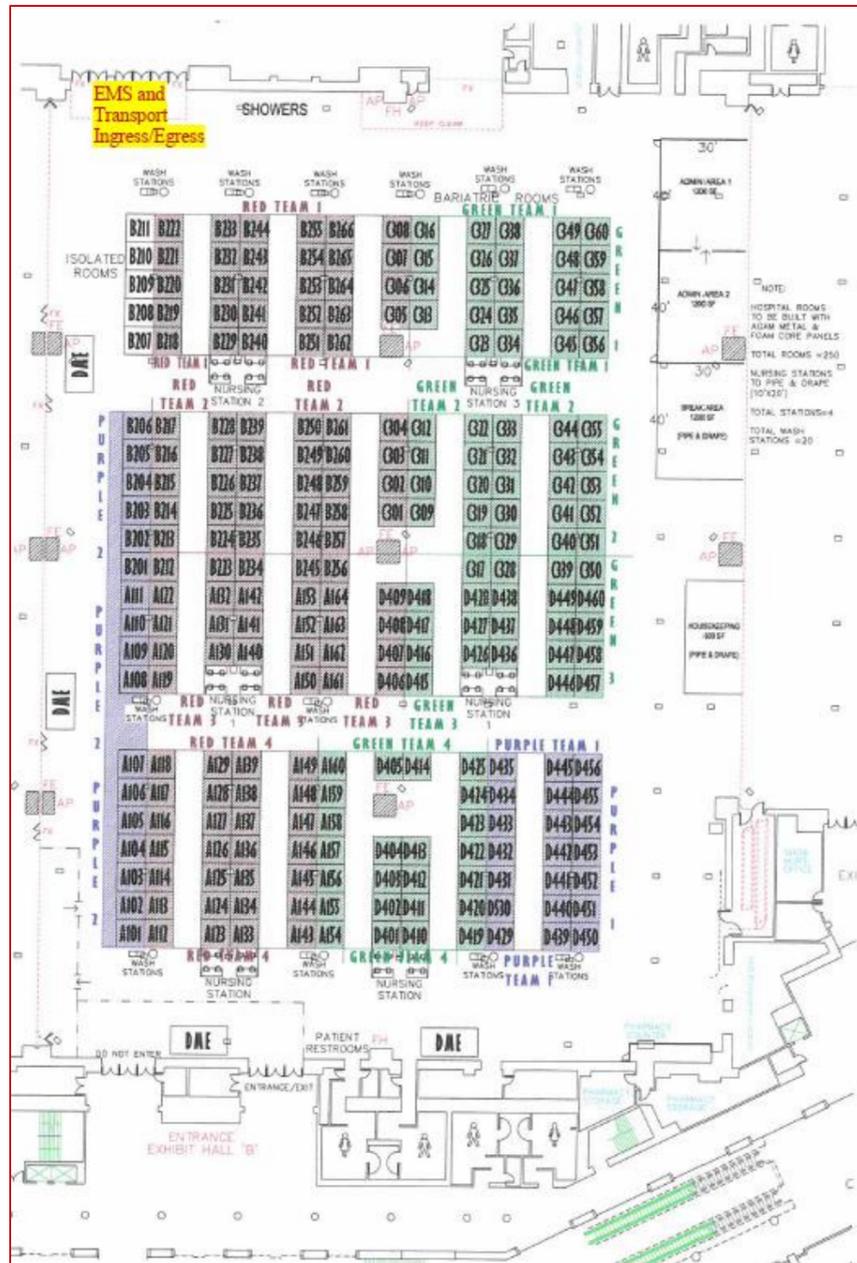
Leadership

- Kevin Emmons, DrNP, APN- Chief Nursing Officer
 - Richard Scott, MD -- Chief Medical Officer
 - Susan Croushore, MBA – Chief Operating Officer
-

Expected Medical Care

- Basic (non-telemetry, non-continuous) monitoring
- Nursing care for patients able to perform most of their ADLs
- Non-stat laboratory located off campus with processing station at facility
- EKGs
- Basic bedside imaging (bedside provider ultrasound, portable x-ray)
- IV therapy and IV piggy back medications
- Oral medications
- Limited PT/OT
- Limited Behavioral health
- Limited post discharge planning with social workers
- Respiratory therapy for prn and maintenance treatment
- Emergency airway management and defibrillator/monitors

Layout of AC-FMS



The Facility Is Comprised Of The Following:

- 250 bed facility
- Staffing:
 - Medical Providers (MD/DO/APN/PA)
 - RN's
 - Care Technicians
 - (LPNs/PCAs/Tech/Medics)
- Full-Time pharmacy station
- Pharmacy onsite
- 24/7 intake capability
- Standard and bariatric beds
- EKGs
- Limited basic bedside imaging
- Command/Admin Center
- Reception/employee screening area
- Patient bathrooms
- Patient shower units, ADA compliant
- Various storage areas for supplies, linen, portable equipment and soiled supplies
- Staff break room
- Staff bathrooms
- Designated entry/exit for incoming/outgoing patients

LogisitiCare

Transportation Assistance with AC-FMS related to COVID-19

LogistiCare Has Created A Small Task Force And Webmail Address To Be Able To Intake Transportation Reservations For Both Medicaid And Non-Medicaid Members

Intake request procedures:

- A unique webmail account and "Special Service Trip Request Form" is set up to receive the incoming requests. This email account will be monitored to respond within 15 minutes of request:
 - NJspecialservices@logisticare.com
- If you have an urgent request or have not received a call from the LogistiCare staff within 15 minutes, you can call:
 - During normal business hours (8:00-18:00) call : 866-527-9834 Ext. 2384 or Ext. 2382 or Ext. 2276
 - For after hours (18:00-8:00) you can call 267-679-4400 ext. 2603 and 2604
- Facilities will be provided with "Special Service Trip Request Form" and email request instructions.

AC-FMS Patient Triage & Step-up Transfers

- **AC-FMS identifies patient requiring transfer to a hospital**
- **AC-FMS triages patient into one of 3 tiers and prepares necessary paperwork**

EMERGENCY

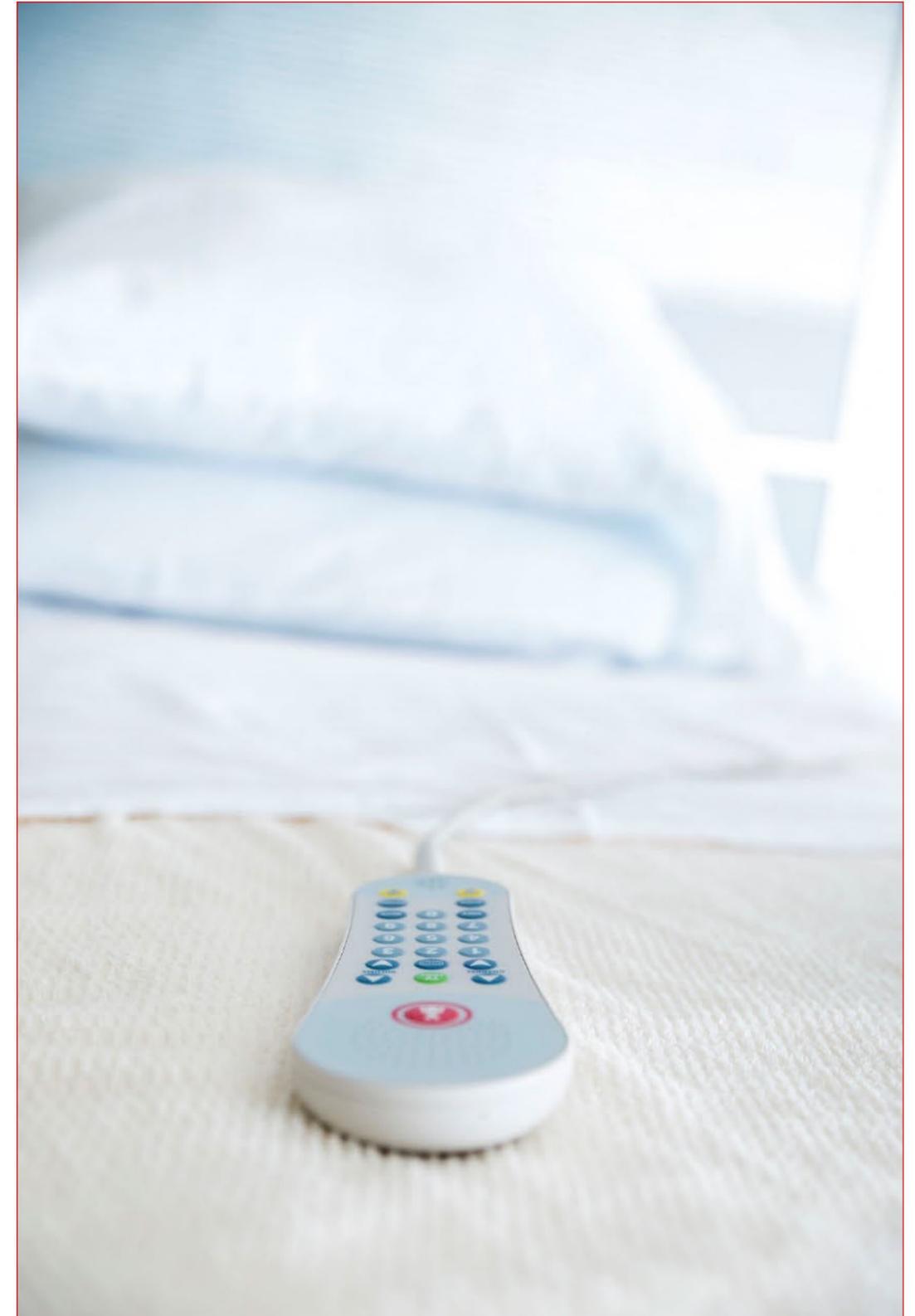
Patient requiring immediate response. Patient experiencing emergency (e.g. stroke) and requiring rapid transfer to nearest available facility.

URGENT

Patient requiring response in under 2 hours. Patient stabilized at AC-FMS, but requires urgent transfer to critical care facility (e.g. sustained invasive ventilation).

ROUTINE

Patient requiring response in under 4 hours. Patient requires specific care that AC-FMS is unable to provide (e.g. bed sores, CT).



AC-FMS Step-up Transfer Process by Triage Level

EMERGENT
IMMEDIATE RESPONSE REQUIRED

AC-FMS calls 911 to transfer to closest appropriate facility (ARMC-City)

AC-FMS notifies SJMCC of patient transfer

URGENT
RESPONSE REQUIRED IN <2 HOURS

AC-FMS calls SJMCC transfer center to initiate transfer. SJMCC transfer center works with originating hospital to determine destination hospital for readmission.

SJMCC transfer center coordinates with destination hospital and AC-FMS. AC-FMS requests transport from VisitiCare if required.

ROUTINE
RESPONSE REQUIRED IN <4 HOURS

AC-FMS PATIENT DISCHARGE

- AC-FMS contacts family member to determine capability of providing follow-up care
- Arrangements for ancillary support will be provided as needed (oxygen, DME, Home Therapy, etc.)
- AC-FMS will arrange mode of transportation
 - Family Pick-up
 - LogisitiCare/Transport Company
- AC-FMS will gather paperwork for post discharge care to give to patient
- Nursing staff will prepare patient for discharge and deliver to designated discharge area
- Once discharge is complete, Nursing Staff will complete and package medical records for release
- AC-FMS notifies SJMCC of patient discharge



**Your efforts in creating
healthcare capacity for all
patients in the South Jersey
community are appreciated.**

THANK YOU

Field Medical Station- Atlantic City

The Counties: Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Salem

The Hospitals: AtlantiCare, Cape Regional, Cooper, Deborah, Jefferson, Inspira, Salem Medical Center, Shore Medical, Virtua

Contact Information: FMC-AC Main Line: 609 449-3900* Transfer Center Conf Line: [REDACTED]
[REDACTED]

Fax: 609 449-3935

***Please call Main Line for any transfers.**

Leadership of AC-FMS: Kevin Emmons, Dr.NP APN- CNO/Rick Scott MD- CMO/ Susan Croushore COO

DOH Liaison- Jeff Brown

Purpose: To provide support to regional hospitals during the current COVID-19 crisis by providing additional capacity for low acuity COVID-19 positive requiring isolation or medical and surgical patients who require continued monitoring by healthcare professionals and are not stable for discharge to home, or cannot be discharged home.

EXPECTED MEDICAL CARE

- Basic monitoring of vital signs and intermittent pulse-oximetry
- Respiratory therapy for maintenance and prn treatments (No nebulizer)
- Basic nursing care for patients able to perform most of their ADLs
- Non-stat laboratory located off campus with processing station at facility
- Basic bedside imaging (CXR, bedside provider ultrasound, other portable xray) , EKGs
- IV medications that do not require monitoring or administration via pump/Oral medications
- PT/OT
- Limited Behavioral health
- Limited post discharge planning with social workers
- Emergency airway management and defibrillator/monitors

Inclusion Criteria for Transfer from Hospital or referral from FQHC:

The ideal patient is “COVID-19 positive” in need of isolation/ or one recovering from COVID-19 illness who do not fall into other exclusion criteria.

- COVID-19 + patients found on screening who are asymptomatic or minimally symptomatic, i.e.:
 - Cough, fatigue, temp under 102 but with no signs of respiratory distress

- COVID-19 + who are not able to socially distance and self-isolate due to living conditions
- Convalescent COVID-19 patients (COVID-19 + patients still deemed infectious by test)
 - Includes COVID-19 + patients who cannot return to their place of residence until they test negative for the virus.
- Patients at LOW RISK to progress to worsening illness who have remained stable in an acute care setting for > 2 days
- Patients with a reasonable LOS of 2-7 days based on progress to date, however, FMS can accommodate LOS over 7 days if needed.
- Recovering patients with COVID-19 that continue to be admitted for non-COVID-19 related issues
- Patients at low risk to progress to worsening illness who remained stable in the acute care setting for more than 2 days
- Patients with infectious diseases requiring IV antibiotics or basic IVF hydration with otherwise stable vital signs (i.e. pyelonephritis, cellulitis, dehydration).
- Medical conditions requiring symptomatic control such as pain management or management of nausea or vomiting.
- Patients requiring non-emergent, episodic laboratory studies within the capabilities of the FMS.
- Patients requiring regular, clinical re-evaluation by physical exam such as neurovascular checks or wound check.
- Post-operative patients requiring further monitoring or management beyond post-op day 2.

Exclusion Criteria

Due to limitations of the facility and in the interest of patient safety, the following patients and conditions are not appropriate for management at the FMS:

- COVID-19 status not confirmed or negative
- Pediatric Patients (age younger than 18)
- Pregnant Patients
- Patients receiving therapy for COVID-19 illness not available at the FMS
- Patients requiring more than minimal assistance with activities of daily living
- Patient at high risk for deterioration based on comorbidities and age
- Unstable hemodynamically
- Patients requiring more than 5 LPM of O2 to maintain an O2 sat of >92%
- Require higher level of care and additional specialist expertise
- Any patient deemed likely to require intubation or other critical care interventions
- Patients with active acute psychiatric issues

- Patients in acute alcohol or benzodiazepine withdrawal
- Dementia or delirium with wandering or fall risk
- Patients requiring 1:1 observation to ensure their safety
- Patients requiring intensive nursing services such as:
 - More than q8h vital signs
 - Require more than q4h nursing care
 - More than q 4h neuro checks
 - More than q4h glucose checks
 - Existing pressure sores
 - Need for 1:1 assistance or behavior management
 - Extensive wound management (vac dressings, etc.)
 - Close monitoring of I/O's
 - Neutropenic precautions
- Patients requiring continuous IV medication infusion/drips or PCA.
- Patients requiring blood transfusions
- Patients on hemodialysis
- Patients requiring regular aerosolized treatments
- Patients who require telemetry monitoring
- Respiratory positive pressure support (BIPAP or CPAP)
- Patients with central venous catheters
- Patients with chest tubes
- Post-op patients within 2 days of surgery or those requiring close intensive nursing services
- Patients requiring stat advanced imaging (MRI, CT)
- Patients in airborne isolation (droplet OK)
- Active or infectious diarrhea

From: Ruiz, Annmarie
Sent time: 05/11/2020 01:03:21 PM
To: Jankauskas, Dittymae; Jones, Tammy
Subject: FW: FQHC testing of Migrant Seasonal Farm Workers

fyi

From: Weller, Jamie
Sent: Monday, May 11, 2020 10:01 AM
To: Weller, Jamie
Cc: Semple, Shereen
Subject: FQHC testing of Migrant Seasonal Farm Workers

Good morning,

OLPH was informed testing of migrant farmers by FQHCs will begin this week at farms in Salem, Cumberland, and Gloucester Counties. The guidance document is in the final stage of approval. As soon as we have it, we will be sure to disseminate it to you.

Thanks,

Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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From: Jean Calderon <jcalderon@chcinj.org>
Sent time: 05/05/2020 11:39:58 AM
To: Ruiz, Annmarie; Jankauskas, Dittymae
Subject: FW: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

FYI

-----Original Appointment-----

From: Jean Calderon [<mailto:jcalderon@chcinj.org>]

Sent: Tuesday, May 5, 2020 11:29 AM

To: Jean Calderon; Jones, Tammy; Meghan Spinelli; James Edwards; Richie Elwell; Azizeh Salloum

Subject: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

When: Wednesday, May 6, 2020 9:00 AM-10:00 AM (UTC-05:00) Eastern Time (US & Canada).

Where: 856-502-3904

Meghan Spinelli – 856-562-5415

Jean Calderon – 856-391-1130

Tamarisk L. Jones, Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 -4130

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35F2592D66AE5645AD4B528DAEBE6F89@co.gloucester.nj.us.msg

From: Cerny, Lisa A.
Sent time: 05/07/2020 11:05:21 AM
To: Anibal Ramos (aramos@dedte.essexcountynj.org) <aramos@dedte.essexcountynj.org>; Jones, Tammy; Jankauskas, Dittymae; Bianco, Thomas A.; Doyle, Kathleen (Katie); Mc Farland Jr., Calvin D.
Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
Attachments: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented

Sender: lcerny@co.gloucester.nj.us
Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
Message-Id:
To: tjones@co.gloucester.nj.us
To: djankauskas@co.gloucester.nj.us
To: aramos@dedte.essexcountynj.org
To: tbianco@co.gloucester.nj.us
To: kdoyle@co.gloucester.nj.us
To: cmcfarland@co.gloucester.nj.us

From: Cerny, Lisa A.
Sent time: 05/07/2020 11:05:20 AM
To: Anibal Ramos (aramos@dedte.essexcountynj.org) <aramos@dedte.essexcountynj.org>; Jones, Tammy; Jankauskas, Dittymae; Bianco, Thomas A.; Doyle, Kathleen (Katie); Mc Farland Jr., Calvin D.
Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
Attachments: COVID-19_Resources_forUndocumented_and_UninsuredFactsheet.pdf COVID-19_Resources_forUndocumented_and_UninsuredFactsheet_Spanish.pdf locations (1).pdf Guidance for Farmers 4-15-20 ENGLISH.pdf Guidance for Farmers 4-16-20 SPANISH.pdf

FYI

From: Melissa Niles
Sent: Thursday, May 7, 2020 11:00 AM
To: Cerny, Lisa A.
Subject: Fwd: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
Get [Outlook for iOS](#)

From: Frank Carozza frankca@co.cumberland.nj.us>
Sent: Thursday, May 7, 2020 8:34:21 AM
To: Adrian McGriff Adrian.McGriff@rutgers.edu>; Alexa Morales amorales@ctsnj.org>; Aline Cornew (acornew@vineland.org) acornew@vineland.org>; Amber Smith asmith@sodat.org>; Angelo Ragonesi Angelo.Ragonesi@DHS.NJ.Gov>; Ashkey Lasoski (alamoski@robinsnestinc.org) alamoski@robinsnestinc.org>; Beth DeForest beth.deforest@millvillenj.gov>; Beth Thomas bthomas@ccdoh.org>; Brittany Fair Brittany.Fair@oaksintcare.org>; Cindy Maione (cindy.maione@njcourts.gov) cindy.maione@njcourts.gov>; cindya@cezcorg.org cindya@cezcorg.org>; Dave Bailey, Jr. d Bailey@ranchhope.org>; dbennett@southjerseybig.org dbennett@southjerseybig.org>; Diana Ciurczak dciurczak@weismanchildrens.com>; esmith@ccgcnj.org esmith@ccgcnj.org>; Gary Bryant - Probation (Gary.Bryant@njcourts.gov) Gary.Bryant@njcourts.gov>; Jenn Schino jschino@myronlpowell.org>; JoAnna Powell (jpowell-chestnut@bridgeton.k12.nj.us) jpowell-chestnut@bridgeton.k12.nj.us>; Josephine White (jwhite@ccgcnj.org) jwhite@ccgcnj.org>; Kyle Earley (Kyle.Earley@judiciary.state.nj.us) Kyle.Earley@judiciary.state.nj.us>; Lauren Snyder lsnyder@robinsnestinc.org>; Leahe Togno (tognol@ihn.org) tognol@ihn.org>; Linda Smith lindas@ranchhope.org>; Lionel Woodley (lwoodley@cgsfso.org) lwoodley@cgsfso.org>; Mark Anderson MARKAN@co.cumberland.nj.us>; MaryAnn Hamidy (mhamidy@yapinc.org) mhamidy@yapinc.org>; Melissa Niles MELISSANI@co.cumberland.nj.us>; Mike Cudemo (mcudemo@gatewaycap.org) mcudemo@gatewaycap.org>; nicola gilmore ngilmore@sodat.org>; Patricia.Baitinger@judiciary.state.nj.us Patricia.Baitinger@judiciary.state.nj.us>; Riccina Cabezas riccina@unitedadvocacygroup.org>; Ron Hudak Rhudak@cgsfso.org>; Rosemarie Cuevas ROSEMARIECU@co.cumberland.nj.us>; Shawn Claybrooks (DCP&P West) shawn.claybrooks@dcf.state.nj.us>; Steiner, Jackie justeiner@arccumberland.org>; Tammy Smith-Halter tammysmithhalterssw@gmail.com>; teresa.edwards@dcf.state.nj.us teresa.edwards@dcf.state.nj.us>; Theresa Black (blackt1@ihn.org) blackt1@ihn.org>; Veronica Surrency VERONICASU@co.cumberland.nj.us>; Andy Dunkle, Jr. ANDYDU@co.cumberland.nj.us>; Brenda Smaniotto SmaniottoB@ihn.org>; Dawn Reed dreed@sodat.org>; Elisabeth Corona (elisabeth.corona@millville.org) elisabeth.corona@millville.org>; Fasolino, Kristin Kristin.Fasolino@millville.org>; Janet Margusity (jmargusity@weismanchildrens.com) jmargusity@weismanchildrens.com>; Paulette Mader pm241@ubhc.rutgers.edu>; Pitt, Tia tia.pitt@oaksintcare.org>; Shelly Fairman sfairman@snjpc.org>; Tatsiana Dagrosa tdagrosa@spanadvocacy.org>

Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented

Hello Everyone,

Please see the attached regarding bi-lingual resources for undocumented or uninsured individuals. Please share with your networks.

Thanks,

F

Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented

Importance: High

For your information, please share!

Sara Williams
Coordinator Homeless Services
Cumberland County Human Services

Dear Community Partners:

Inspira Health System has asked me to forward the attached information for your information and dissemination to the community. The attached flyers were created by NJ Department of Health, Complete Care & Vineland Health Department about social distancing and healthcare services available during the pandemic. Inspira wants to make sure that our population that is "at risk" and uninsured/undocumented receive this information. **Food Pantries/Soup Kitchens should distribute these flyers with food distributions.** Help spread the word!

Thank you for your assistance in spreading the word!

Stay safe and healthy!

Rob

—

Dr. Rob Weinstein, President & Founder
The M25 Initiative
1-844-M25-HOPE
WWW.M25INITIATIVE.ORG

From: Robin Weinstein rbw@m25initiative.org>

Sent: Wednesday, May 6, 2020 2:05 PM

To: clergy@m25initiative.org; cbvolunteer@codeblueccnj.org

Cc: bridgetonbusiness@m25initiative.org; noreply-spamdigest via Vineland Business VinelandBusiness@m25initiative.org>; noreply-spamdigest via Millville Business MillvilleBusiness@m25initiative.org>

Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented

Importance: High

Please do not hit REPLY TO ALL- Please Forward to Interested Parties

Dear Community Partners:

Inspira Health System has asked me to forward the attached information for your information and dissemination to the community. The attached flyers were created by NJ Department of Health, Complete Care & Vineland Health Department about social distancing and healthcare services available during the pandemic. Inspira wants to make sure that our population that is "at risk" and uninsured/undocumented receive this information. **Food Pantries/Soup Kitchens should distribute these flyers with food distributions.** Help spread the word!

Thank you for your assistance in spreading the word!

Stay safe and healthy!

Rob

—

Dr. Rob Weinstein, President & Founder
The M25 Initiative
1-844-M25-HOPE
WWW.M25INITIATIVE.ORG

--

[Redacted content]

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2ED5541E26F9A443B3C5726D2759CB0E@co.gloucester.nj.us.msg

COVID-19 Resources for Individuals Who Are Undocumented or Uninsured

The State of New Jersey is focused on ensuring that all people, regardless of immigration status and/or whether or not they have health insurance, are protected from the outbreak and receive appropriate testing and treatment. You should talk to a medical professional about when and how to seek testing and treatment. Please read the following information carefully:

Am I eligible for COVID-19 testing?

- ✓ You must live in New Jersey.
- ✓ Have a cough, fever, and shortness of breath.
- ✓ Complete the **COVID-19 Symptom Checker** on <https://self.covid19.nj.gov/> to see if you should be tested for COVID-19. The tool will help you know what actions you can take to protect you and your loved ones' health.

Where can I get tested?

- 1 Drive-thru Testing Centers.** Read each testing center's requirements before leaving your home. For a list of testing sites and requirements visit: <https://covid19.nj.gov/faqs/nj-information/testing-information/where-are-testing-centers-in-new-jersey>

Cost: This is **free of charge**.

- 2 Federally Qualified Health Centers (FQHCs).** Federally Qualified Health Centers (FQHCs) provide health care and COVID-19 testing without cost to all people without insurance and without regard to immigration status. Please call your local Federally Qualified Health Center ahead of time for **availability** and **instructions**. A list of Federally Qualified Health Centers can be found at: <https://www.nj.gov/health/fhs/primarycare/fqhc/>.

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Public Charge Rule:

What is Public Charge?

Some people who apply for a green card (lawful permanent residence) or a visa to enter the U.S. must pass a “public charge” test. The “public charge” test requires a person to show that they are not likely to become dependent on specific government programs. The new public charge test considers: Supplemental Nutrition Assistance Program (SNAP, EBT, Food Stamps), Federal Public Housing and Section 8 assistance, Medicaid (except for emergency services, children under 21 years, pregnant women and new mothers), and cash assistance programs (like SSI, TANF, General Assistance). Please check with your legal services provider if you have any questions.

Can I get tested despite the Public Charge Rule?

✓ **Yes, Immigration officials have confirmed that testing, treatment, and preventative care** related to COVID-19 will not negatively affect an individual’s public charge analysis.

For more COVID-19 information:

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Mental Health Hotline: **866-202-4357** (8a-8p)



Recursos sobre la COVID-19 para personas indocumentadas o sin seguro

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Recursos sobre la COVID-19 para personas indocumentadas o sin seguro

Regla de Carga Pública:

¿Qué es la Carga Pública?

Algunas personas que solicitan una tarjeta verde (residencia permanente legal) o una visa para ingresar a los Estados Unidos deben pasar la prueba de "Carga Pública". La prueba de "Carga Pública" requiere que una persona demuestre no depender de programas gubernamentales específicos. La nueva prueba de Carga Pública considera lo siguiente: El Programa de Asistencia Nutricional Suplementaria ([Supplemental Nutrition Assistance Program, SNAP], EBT [Electronic Benefit Transfer], Food Stamps), la asistencia de Federal Public Housing y Section 8 (Sección 8), Medicaid (excepto para servicios de emergencia, menores de 21 años, mujeres embarazadas y madres recientes) y programas de asistencia económica (como el programa de Seguridad de Ingreso Suplementario [Supplemental Security Income, SSI], el Programa de Asistencia Temporal para Familias Necesitadas [Temporary Assistance for Needy Families, TANF] y el de General Assistance [Asistencia general]). Comuníquese con su proveedor de servicios legales si tiene alguna pregunta.

¿Puedo acceder a la prueba a pesar de la Regla de Carga Pública?

- ✓ **Sí, los funcionarios de Inmigración han confirmado** que las pruebas, el tratamiento y el cuidado preventivo relacionados con la COVID-19 no afectarán negativamente el análisis de Carga Pública de una persona.

Para obtener más información sobre la COVID-19:

Visite el Centro de Información de New Jersey en <https://covid19.nj.gov/>.

Por preguntas generales sobre la COVID-19, llame al **2-1-1** (de 7 a. m. a 11 p. m.).

Por preguntas clínicas, llame al **1-800-962-1253** (24/7).

Envíe un mensaje de texto con la palabra **NJCOVID** a **898-211** para recibir alertas.

Línea directa de salud mental: **866-202-4357** (de 8 a. m. a 8 p. m.)





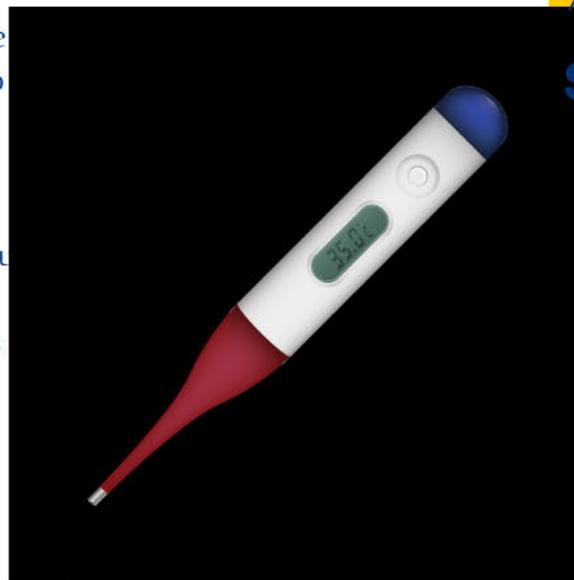
WAYS TO PREVENT COVID-19

1. STAY home as much as you can.
2. KEEP a safe distance from others. At least 6-feet.
3. WASH hands often.
4. COVER your cough.
5. AVOID touching your face.
6. WEAR a mask in all stores and public places.
7. SICK? Call before going out.

SYMPTOMS OF COVID-19

People with COVID-19 can have symptoms that range from mild to severe. These symptoms are common after exposure to the virus:

- Fever
- Cough
- Shortness of breath or difficulty breathing
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell



TO GET TESTED FOR COVID-19

Stay home. Call **856-451-4700** or visit **CompleteCareNJ.org** to request a COVID-19 screening. Testing sites are available locally, but you must have an appointment. Testing does not take place at CompleteCare Health Network offices.

For emergencies call 911.

LOCATIONS:

The following sites are open during COVID-19:

3700 New Jersey Ave, Wildwood

715 N. Delsea Drive, Glassboro

785 W. Sherman Ave, Vineland

484 S. Brewster Road, Vineland

105 Manheim Ave, Bridgeton

75 W. Red Bank Ave, Woodbury

SERVICES:

Sick Visits

Emergency Dental

Emergency Foot Care

Medication Refills

OB Care

Emergency Gynecology

Hospital Discharge

Physicals

Well Exams for Kids Under 5

Mental Health

- Birth Control

-Some visits with the doctor can be done over the phone.-

Call 856-451-4700 or visit CompleteCareNJ.org to schedule an appointment.



Public Health
Prevent. Promote. Protect.

Vineland Health Department

COVID-19

Guidance for Migrant Workers

PREVENT ILLNESS BY...

wash your hands often
for at least 20 seconds



avoid gatherings



keep 6 feet from others



do not shake hands



cover your coughs and sneezes



IN SHARED HOUSING...



sleep at least 6 feet away
from others



isolate sick people in their
own space with their own
bathroom



disinfect surfaces and objects
regularly



have hand washing stations or
hand sanitizer
available



Public Health
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Vineland Health Department

COVID-19

Guidance for Farmers

PREVENT ILLNESS BY...

Wash your hands often for at least 20 seconds



Avoid gatherings



Keep 6 feet from others



Do not shake hands



Cover your coughs and sneezes



ON THE FARM...



1. Record all deliveries and on-farm entries.



2. Sanitize contact surfaces like door handles, knobs, floor mats, steering wheels & other common surfaces daily.



3. Sanitize common spaces like front offices, lunch rooms, bathrooms & locker areas daily.



4. Space out employee lunch breaks.

WHEN MAKING DELIVERIES...



1. Verify delivery details before delivery.



2. Sanitize vehicle before and after every delivery (include door handles, steering wheel, & floor mats).



3. Wear gloves and dispose immediately after.

If you come in contact with a sick person...

- Quarantine yourself (stay home)
- Monitor yourself for symptoms

If you begin experiencing...



- Do NOT go to work and call your supervisor
- Stay away from others
- Call your doctor for an assessment
- Your doctor will assess your symptoms and determine if you should be tested and discuss next steps

If you do not have a doctor,
contact Complete Care:
856-451-4700

You can *only* be tested with a script from a doctor!



Public Health
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Vineland Health Department

COVID-19

Guía para los trabajadores Migrantes

COMO PREVENIR ENFERMEDADES...

Lávese sus manos por lo menos por 20 segundos



Evite reuniones



Mantenga 6 pies de distancia de los demás



No saludar con las manos



Cubra su boca y nariz cuando tosa o estornude



EN CASA COMPARTIDAS...



Dormir al menos 6 pies de distancia



Separa a las personas enfermas en su propio espacio y con su propio baño



Si tiene solo un baño asegúrese de desinfectar después de cada uso



Asegura de desinfectar superficies y objetos regularmente

Hacer estaciones de lavado de manos o desinfectante de manos disponibles



Public Health
Prevent. Promote. Protect.

Vineland Health Department

COVID-19

Guía para los trabajadores agrícolas

COMO PREVENIR ENFERMEDADES...

Lávese sus manos por lo menos por 20 segundos



Evite reuniones



Mantenga 6 pies de distancia de los demás



No salude con las manos



Cubra su boca y nariz cuando tosa o estornude



EN LA FINCA...



1. Registre todas las entregas y entradas en la granja.



2. Desinfecte las superficies de contacto, como manijas y perillas de las puertas, tapetes, volantes y otras superficies de contacto común.



3. Desinfecte los lugares comunes de reunión como vestíbulos, espacios de oficina, comedores e instalaciones de casilleros.



4. Espaciar las horas de almuerzo para sus empleados.

PARA ENTREGAS EN LA FINCA ...



1. Verifique los detalles de entrega antes de la entrega.



2. Desinfecte el vehículo antes y después de cada entrega, incluidas las manijas de las puertas, el volante y las alfombrillas.



3. Use guantes durante cada entrega y deséchelo inmediatamente después de cada entrega.

Si usted entra en contacto con una persona enferma...

- Debe de ponerse en cuarentena y quedarse en su casa
- Examine sus síntomas

Si usted comienza a sufrir de...



FIEBRE/CALENTURA



TOS



FALTA DE RESPIRACIÓN

- No vaya a trabajar y llame a su supervisor
- Asegúrese de mantenerse alejado de los demás
- Llame a su médico para una evaluación
- Su médico evaluará sus síntomas y determinará si debe hacerse la prueba y analizará los siguientes pasos a seguir

**Si no tiene un médico primario, comuníquese con la clínica de Complete Care:
856-451-4700**

¡La prueba solo se puede tomar con una receta del médico!

From: Jones, Tammy
Sent time: 05/07/2020 05:40:23 PM
To: Mitchell Infante-Casella (minfante@njaes.rutgers.edu) <minfante@njaes.rutgers.edu>
Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
Attachments: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented

Sender: tjones@co.gloucester.nj.us
Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
Message-Id:
To: minfante@njaes.rutgers.edu

From: Jones, Tammy
Sent time: 05/07/2020 05:40:21 PM
To: Michell Infante-Casella (minfante@njaes.rutgers.edu) <minfante@njaes.rutgers.edu>
Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
COVID-19_Resources_forUndocumented_and_UninsuredFactsheet.pdf COVID-
Attachments: 19_Resources_forUndocumented_and_UninsuredFactsheet_Spanish.pdf locations (1).pdf Guidance for Farmers 4-15-20 ENGLISH.pdf
Guidance for Farmers 4-16-20 SPANISH.pdf

FYI Michelle

Tammy

From: Cerny, Lisa A.

Sent: Thursday, May 7, 2020 11:05 AM

To: Jones, Tammy ; Jankauskas, Dittymae ; Anibal Ramos (aramos@dedte.essexcountynj.org) ; Bianco, Thomas A. ; Doyle, Kathleen (Katie) ; Mc Farland Jr., Calvin D.

Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
FYI

From: Melissa Niles MELISSANI@co.cumberland.nj.us>

Sent: Thursday, May 7, 2020 11:00 AM

To: Cerny, Lisa A. lcerny@co.gloucester.nj.us>

Subject: Fwd: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
Get [Outlook for iOS](#)

From: Frank Carozza frankca@co.cumberland.nj.us>

Sent: Thursday, May 7, 2020 8:34:21 AM

To: Adrian McGriff Adrian.McGriff@rutgers.edu>; Alexa Morales amorales@ctsnj.org>; Aline Cornew (acornew@vineland.org)
acornew@vineland.org>; Amber Smith asmith@sodat.org>; Angelo Ragonesi Angelo.Ragonesi@DHS.NJ.Gov>; Ashkey Lasoski
(alamoski@robinsnestinc.org) alamoski@robinsnestinc.org>; Beth DeForest beth.deforest@millvillenj.gov>; Beth Thomas
bthomas@ccdoh.org>; Brittany Fair Brittany.Fair@oaksintcare.org>; Cindy Maione (cindy.maione@njcourts.gov)
cindy.maione@njcourts.gov>; cindya@cezc corp.org cindya@cezc corp.org>; Dave Bailey, Jr. dbailey@ranchhope.org>;
dbennett@southjerseybig.org dbennett@southjerseybig.org>; Diana Ciurczak dciurczak@weismanchildrens.com>;
esmith@ccgc nj.org esmith@ccgc nj.org>; Gary Bryant - Probation (Gary.Bryant@njcourts.gov) Gary.Bryant@njcourts.gov>; Jenn
Schino jschino@myronlpowell.org>; JoAnna Powell (jpowell-chestnut@bridgeton.k12.nj.us) jpowell-chestnut@bridgeton.k12.nj.us>;
Josephine White (jwhite@ccgc nj.org) jwhite@ccgc nj.org>; Kyle Earley
(Kyle.Earley@judiciary.state.nj.us) Kyle.Earley@judiciary.state.nj.us>; Lauren Snyder lsnyder@robinsnestinc.org>; Leahe
Togno (tognol@ihn.org) tognol@ihn.org>; Linda Smith lindas@ranchhope.org>; Lionel Woodley (lwoodley@cgsfso.org)
lwoodley@cgsfso.org>; Mark Anderson MARKAN@co.cumberland.nj.us>; MaryAnn Hamidy (mhamidy@yapinc.org)
mhamidy@yapinc.org>; Melissa Niles MELISSANI@co.cumberland.nj.us>; Mike Cudemo (mcudemo@gatewaycap.org)
mcudemo@gatewaycap.org>; nicola gilmore ngilmore@sodat.org>; Patricia.Baitinger@judiciary.state.nj.us
Patricia.Baitinger@judiciary.state.nj.us>; Riccina Cabezas riccina@unitedadvocacygroup.org>; Ron Hudak
Rhudak@cgs cmo.org>; Rosemarie Cuevas ROSEMARIECU@co.cumberland.nj.us>; Shawn Claybrooks (DCP&P West)
shawn.claybrooks@dcf.state.nj.us>; Steiner, Jackie justeiner@arccumberland.org>; Tammy Smith-Halter
tammysmithhalterssw@gmail.com>; teresa.edwards@dcf.state.nj.us teresa.edwards@dcf.state.nj.us>; Theresa Black
(blackt1@ihn.org) blackt1@ihn.org>; Veronica Surrency VERONICASU@co.cumberland.nj.us>; Andy Dunkle, Jr.
ANDYDU@co.cumberland.nj.us>; Brenda Smaniotto SmaniottoB@ihn.org>; Dawn Reed dreed@sodat.org>; Elisabeth Corona
(elisabeth.corona@millville.org) elisabeth.corona@millville.org>; Fasolino, Kristin Kristin.Fasolino@millville.org>; Janet
Margusity (jmargusity@weismanchildrens.com) jmargusity@weismanchildrens.com>; Paulette Mader
pm241@ubhc.rutgers.edu>; Pitt, Tia tia.pitt@oaksintcare.org>; Shelly Fairman sfairman@snjpc.org>; Tatsiana Dagrosa
tdagrosa@spanadvocacy.org>

Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented

Hello Everyone,

Please see the attached regarding bi-lingual resources for undocumented or uninsured individuals. Please share with your networks.

Thanks,

F

Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented

Importance: High

For your information, please share!

Sara Williams
Coordinator Homeless Services
Cumberland County Human Services

Dear Community Partners:

Inspira Health System has asked me to forward the attached information for your information and dissemination to the community. The attached flyers were created by NJ Department of Health, Complete Care & Vineland Health Department about social distancing and healthcare services available during the pandemic. Inspira wants to make sure that our population that is "at risk" and uninsured/undocumented receive this information. **Food Pantries/Soup Kitchens should distribute these flyers with food distributions.** Help spread the word!
Thank you for your assistance in spreading the word!
Stay safe and healthy!
Rob

—
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From: Robin Weinstein rbw@m25initiative.org>

Sent: Wednesday, May 6, 2020 2:05 PM

To: clergy@m25initiative.org; cbvolunteer@codeblueccnj.org

Cc: bridgetonbusiness@m25initiative.org; noreply-spamdigest via Vineland Business VinelandBusiness@m25initiative.org>; noreply-spamdigest via Millville Business MillvilleBusiness@m25initiative.org>

Subject: FW: Help with Communication of Social Distancing & Outreach to the "At Risk" and Uninsured/Undocumented
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*Please do not hit **REPLY TO ALL** - Please Forward to Interested Parties*

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Regla de Carga Pública:

¿Qué es la Carga Pública?

Algunas personas que solicitan una tarjeta verde (residencia permanente legal) o una visa para ingresar a los Estados Unidos deben pasar la prueba de "Carga Pública". La prueba de "Carga Pública" requiere que una persona demuestre no depender de programas gubernamentales específicos. La nueva prueba de Carga Pública considera lo siguiente: El Programa de Asistencia Nutricional Suplementaria ([Supplemental Nutrition Assistance Program, SNAP], EBT [Electronic Benefit Transfer], Food Stamps), la asistencia de Federal Public Housing y Section 8 (Sección 8), Medicaid (excepto para servicios de emergencia, menores de 21 años, mujeres embarazadas y madres recientes) y programas de asistencia económica (como el programa de Seguridad de Ingreso Suplementario [Supplemental Security Income, SSI], el Programa de Asistencia Temporal para Familias Necesitadas [Temporary Assistance for Needy Families, TANF] y el de General Assistance [Asistencia general]). Comuníquese con su proveedor de servicios legales si tiene alguna pregunta.

¿Puedo acceder a la prueba a pesar de la Regla de Carga Pública?

- ✓ **Sí, los funcionarios de Inmigración han confirmado** que las pruebas, el tratamiento y el cuidado preventivo relacionados con la COVID-19 no afectarán negativamente el análisis de Carga Pública de una persona.

Para obtener más información sobre la COVID-19:

Visite el Centro de Información de New Jersey en <https://covid19.nj.gov/>.

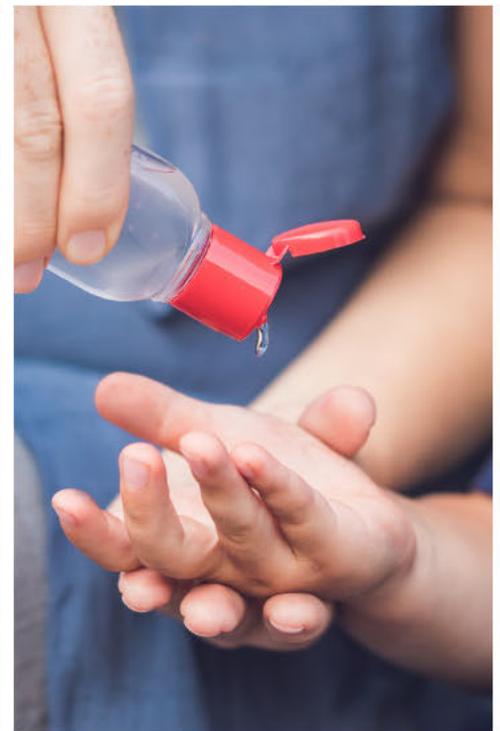
Por preguntas generales sobre la COVID-19, llame al **2-1-1** (de 7 a. m. a 11 p. m.).

Por preguntas clínicas, llame al **1-800-962-1253** (24/7).

Envíe un mensaje de texto con la palabra **NJCOVID** a **898-211** para recibir alertas.

Línea directa de salud mental: **866-202-4357** (de 8 a. m. a 8 p. m.)





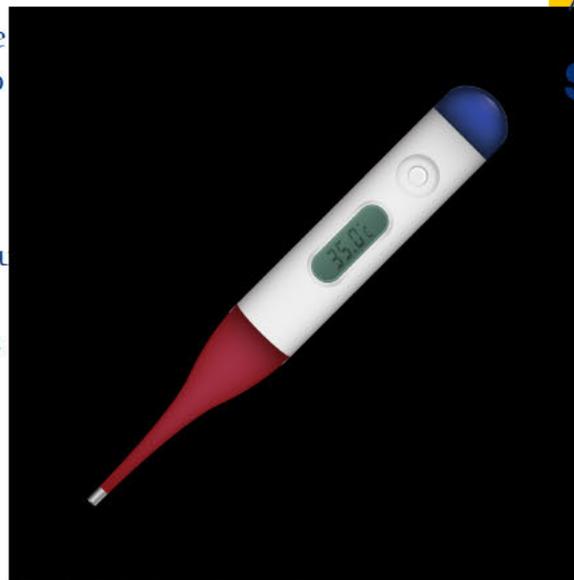
WAYS TO PREVENT COVID-19

1. STAY home as much as you can.
2. KEEP a safe distance from others. At least 6-feet.
3. WASH hands often.
4. COVER your cough.
5. AVOID touching your face.
6. WEAR a mask in all stores and public places.
7. SICK? Call before going out.

SYMPTOMS OF COVID-19

People with COVID-19 can have symptoms that range from mild to severe. These symptoms are common after exposure to the virus:

- Fever
- Cough
- Shortness of breath or difficulty breathing
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell



TO GET TESTED FOR COVID-19

Stay home. Call **856-451-4700** or visit **CompleteCareNJ.org** to request a COVID-19 screening. Testing sites are available locally, but you must have an appointment. Testing does not take place at CompleteCare Health Network offices.

For emergencies call 911.

LOCATIONS:

The following sites are open during COVID-19:

3700 New Jersey Ave, Wildwood

715 N. Delsea Drive, Glassboro

785 W. Sherman Ave, Vineland

484 S. Brewster Road, Vineland

105 Manheim Ave, Bridgeton

75 W. Red Bank Ave, Woodbury

SERVICES:

Sick Visits

Emergency Dental

Emergency Foot Care

Medication Refills

OB Care

Emergency Gynecology

Hospital Discharge

Physicals

Well Exams for Kids Under 5

Mental Health

- Birth Control

-Some visits with the doctor can be done over the phone.-

Call 856-451-4700 or visit CompleteCareNJ.org to schedule an appointment.



Public Health
Prevent. Promote. Protect.

Vineland Health Department

COVID-19

Guidance for Migrant Workers

PREVENT ILLNESS BY...

wash your hands often
for at least 20 seconds



avoid gatherings



keep 6 feet from others



do not shake hands



cover your coughs and sneezes



IN SHARED HOUSING...



sleep at least 6 feet away
from others



isolate sick people in their
own space with their own
bathroom



disinfect surfaces and objects
regularly



have hand washing stations or
hand sanitizer
available



Public Health
Prevent. Promote. Protect.

Vineland Health Department

COVID-19

Guidance for Farmers

PREVENT ILLNESS BY...

Wash your hands often for at least 20 seconds



Avoid gatherings



Keep 6 feet from others



Do not shake hands



Cover your coughs and sneezes



ON THE FARM...



1. Record all deliveries and on-farm entries.



2. Sanitize contact surfaces like door handles, knobs, floor mats, steering wheels & other common surfaces daily.



3. Sanitize common spaces like front offices, lunch rooms, bathrooms & locker areas daily.



4. Space out employee lunch breaks.

WHEN MAKING DELIVERIES...



1. Verify delivery details before delivery.



2. Sanitize vehicle before and after every delivery (include door handles, steering wheel, & floor mats).



3. Wear gloves and dispose immediately after.

If you come in contact with a sick person...

- Quarantine yourself (stay home)
- Monitor yourself for symptoms

If you begin experiencing...



- Do NOT go to work and call your supervisor
- Stay away from others
- Call your doctor for an assessment
- Your doctor will assess your symptoms and determine if you should be tested and discuss next steps

If you do not have a doctor,
contact Complete Care:
856-451-4700

You can *only* be tested with a script from a doctor!



Public Health
Prevent. Promote. Protect.

Vineland Health Department

COVID-19

Guía para los trabajadores Migrantes

COMO PREVENIR ENFERMEDADES...

Lávese sus manos por lo menos por 20 segundos



Evite reuniones



Mantenga 6 pies de distancia de los demás



No saludar con las manos



Cubra su boca y nariz cuando tosa o estornude



EN CASA COMPARTIDAS...



Dormir al menos 6 pies de distancia



Separa a las personas enfermas en su propio espacio y con su propio baño



Si tiene solo un baño asegúrese de desinfectar después de cada uso



Asegura de desinfectar superficies y objetos regularmente

Hacer estaciones de lavado de manos o desinfectante de manos disponibles



Public Health
Prevent. Promote. Protect.

Vineland Health Department

COVID-19

Guía para los trabajadores agrícolas

COMO PREVENIR ENFERMEDADES...

Lave sus manos por lo menos por 20 segundos



Evite reuniones



Mantenga 6 pies de distancia de los demás



No salude con las manos



Cubra su boca y nariz cuando tosa o estornude



EN LA FINCA...



1. Registre todas las entregas y entradas en la granja.



2. Desinfecte las superficies de contacto, como manijas y perillas de las puertas, tapetes, volantes y otras superficies de contacto común.



3. Desinfecte los lugares comunes de reunión como vestíbulos, espacios de oficina, comedores e instalaciones de casilleros.



4. Espaciar las horas de almuerzo para sus empleados.

PARA ENTREGAS EN LA FINCA ...



1. Verifique los detalles de entrega antes de la entrega.



2. Desinfecte el vehículo antes y después de cada entrega, incluidas las manijas de las puertas, el volante y las alfombrillas.



3. Use guantes durante cada entrega y deséchelo inmediatamente después de cada entrega.

Si usted entra en contacto con una persona enferma...

- Debe de ponerse en cuarentena y quedarse en su casa
- Examine sus síntomas

Si usted comienza a sufrir de...



FIEBRE/CALENTURA



TOS



FALTA DE RESPIRACIÓN

- No vaya a trabajar y llame a su supervisor
- Asegúrese de mantenerse alejado de los demás
- Llame a su médico para una evaluación
- Su médico evaluará sus síntomas y determinará si debe hacerse la prueba y analizará los siguientes pasos a seguir

**Si no tiene un médico primario, comuníquese con la clínica de Complete Care:
856-451-4700**

¡La prueba solo se puede tomar con una receta del médico!



CITY OF
VINELAND
HEALTH DEPARTMENT

From: Doyle, Kathleen (Katie)
Sent time: 05/12/2020 08:15:44 AM
To: Jones, Tammy
Subject: FW: HELP
Attachments: FW: HELP

Sender: kdoyle@co.gloucester.nj.us
Subject: FW: HELP
Message-Id: <4b63ab76e9124cc1892900d8782de041@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Doyle, Kathleen (Katie)
Sent time: 05/12/2020 08:15:44 AM
To: Jones, Tammy
Subject: FW: HELP

I called the Farmer Joe. He stated they are checking the workers temp every day and this worker had a temperature this morning. He has space to isolate this worker from the other workers. The worker is scheduled to be tested tomorrow for COVID-19. This worker is not a citizen and therefore not eligible to apply for EA through Social Services. Joe stated he has 6 different buildings to separate workers. He is basically waiting for guidance from the State regarding their "plan".

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Doyle, Kathleen (Katie)
Sent: Tuesday, May 12, 2020 8:07 AM
To: 'Meghan Spinelli'
Subject: RE: HELP

I spoke with Joe the Farm owner. The worker is not a citizen and therefore not eligible to apply for Emergency Assistance through Social Services. He has the worker quarantined away from the other workers pending testing.

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Meghan Spinelli mspinelli@chcinj.org>
Sent: Tuesday, May 12, 2020 7:30 AM
To: Doyle, Kathleen (Katie) kdoyle@co.gloucester.nj.us>
Subject: Re: HELP

Here is the owner Joe whom I have been in contact with .

On May 12, 2020, at 7:26 AM, Doyle, Kathleen (Katie) kdoyle@co.gloucester.nj.us> wrote:

Megan,

We can evaluate for our services. I believe the H2A workers are not citizens and therefore will not qualify. The Hotel in Galloway will require payment before he will accept any placements.

Please advise me of a contact phone number for this worker and we will reach out.

Thank you,

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Meghan Spinelli mspinelli@chcinj.org>

Sent: Tuesday, May 12, 2020 7:04 AM

To: Jones, Tammy tjones@co.gloucester.nj.us>; Doyle, Kathleen (Katie) kdoyle@co.gloucester.nj.us>

Subject: HELP

Hello,

We have a H2A worker in a migrant camp in Gloucester who's has a fever and needs a place to stay until he can be tested and sent to AC. The farmer doesn't have somewhere for him to stay alone .

Could you assist me with this -

Meghan

From: Doyle, Kathleen (Katie) [<mailto:kdoyle@co.gloucester.nj.us>]

Sent: Wednesday, May 06, 2020 10:58 AM

To: Meghan Spinelli

Cc: Jones, Tammy

Subject: Contact information

Good Morning Meghan,

Attached please find the Gloucester County Division of Social Services, program contact phone numbers, being used during the COVID-19 public emergency.

Any questions feel free to reach out to me.

Thank you,

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Jones, Tammy
Sent time: 05/26/2020 10:19:02 AM
To: O'Brien, Shannon
Cc: Bruner, Chad
Subject: FW: Media query

[Redacted]

Thanks for your help-
Tammy

From: IAN SHEARN [mailto:ishearn@prodigy.net]
Sent: Tuesday, May 26, 2020 10:12 AM
To: Jones, Tammy
Subject: Media query

Hi.

I am a reporter for NJ Spotlight. I have been writing stories about migrant workers, including the infections you had at one of your farms. I would like to talk to you about how your health department is doing under this strain, and what help the state DOH is providing. Are you up for that?

Ian T. Shearn

121 Meadowbrook Drive
Hillsborough, NJ 08844
c: 973.879.1150
f: 908.829.4805
Skype: iantshearn

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C984831806431E47A5A70789AE184BBE@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/26/2020 10:20:12 AM
To: Ruiz, Annmarie; Jankauskas, Dittymae
Subject: FW: Media query
Attachments: FW: Media query

Sender: tjones@co.gloucester.nj.us
Subject: FW: Media query
Message-Id:
To: aruiz@co.gloucester.nj.us
To: djankauskas@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/26/2020 10:20:11 AM
To: Ruiz, Annmarie; Jancauskas, Dittymae
Subject: FW: Media query

Hi Ladies:

[REDACTED]

Thx,
Tammy

From: Jones, Tammy
Sent: Tuesday, May 26, 2020 10:19 AM
To: O'Brien, Shannon
Cc: Bruner, Chad
Subject: FW: Media query

[REDACTED]

[REDACTED]

Thanks for your help-
Tammy

From: IAN SHEARN [mailto:ishearn@prodigy.net]
Sent: Tuesday, May 26, 2020 10:12 AM
To: Jones, Tammy
Subject: Media query

Hi

I am a reporter for NJ Spotlight. I have been writing stories about migrant workers, including the infections you had at one of your farms. I would like to talk to you about how your health department is doing under this strain, and what help the state DOH is providing. Are you up for that?

Ian T. Shearn

121 Meadowbrook Drive
Hillsborough, NJ 08844
c: 973.879.1150
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Skype: iantshearn

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456AC3A62B72A34AA37920A7F918E71B@co.gloucester.nj.us.msg

From: Ruiz, Annmarie
Sent time: 05/08/2020 12:45:32 PM
To: Jones, Tammy
Subject: FW: Migrant Farm Worker Testing
Attachments: FW: Migrant Farm Worker Testing

Sender: aruiz@co.gloucester.nj.us
Subject: FW: Migrant Farm Worker Testing
Message-Id: <3985919f572b4f2b8717efbbd1e9d630@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Ruiz, Annmarie
Sent time: 05/08/2020 12:45:31 PM
To: Jones, Tammy
Subject: FW: Migrant Farm Worker Testing

The state is requesting information regarding any partnerships we have with hotels or other facilities for isolation or quarantine in our area

From: Weller, Jamie
Sent: Friday, May 8, 2020 12:06 PM
To: Weller, Jamie
Cc: Semple, Shereen
Subject: Migrant Farm Worker Testing

Good morning,

As you know, the testing of migrant farm workers by FQHCs will be rolled out very soon. I was asked to reach out to see if your county has any established partnerships with hotels or other facilities that could be used in case an isolation or quarantine site is needed. There are plans being actively worked on by the task force to identify a site that can be accessed regionally (through an ordering provider at the FQHC/in conjunction with health officer recommendation), however we are trying to ascertain what supports could be in available if needed very soon.

Again, we will get you the guidance document as soon as we have it to disseminate.

Thank you!

Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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123F3DEC6D1BF541AA98CFD25A774E52@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/08/2020 04:02:08 PM
To: Doyle, Kathleen (Katie)
Subject: FW: Migrant Farm Worker Testing
Attachments: FW: Migrant Farm Worker Testing

Sender: tjones@co.gloucester.nj.us
Subject: FW: Migrant Farm Worker Testing
Message-Id:
To: kdoyle@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/08/2020 04:02:07 PM
To: Doyle, Kathleen (Katie)
Subject: FW: Migrant Farm Worker Testing

Hi Katie:

[REDACTED]

Thanks for your input Katie-
As I know we have been asked to let State Health know today-
Much appreciated,
Tammy

From: Ruiz, Annmarie
Sent: Friday, May 8, 2020 12:46 PM
To: Jones, Tammy
Subject: FW: Migrant Farm Worker Testing

The state is requesting information regarding any partnerships we have with hotels or other facilities for isolation or quarantine in our area

From: Weller, Jamie Jamie.Weller@doh.nj.gov>
Sent: Friday, May 8, 2020 12:06 PM
To: Weller, Jamie Jamie.Weller@doh.nj.gov>
Cc: Semple, Shereen Shereen.Semple@doh.nj.gov>
Subject: Migrant Farm Worker Testing

Good morning,

As you know, the testing of migrant farm workers by FQHCs will be rolled out very soon. I was asked to reach out to see if your county has any established partnerships with hotels or other facilities that could be used in case an isolation or quarantine site is needed. There are plans being actively worked on by the task force to identify a site that can be accessed regionally (through an ordering provider at the FQHC/in conjunction with health officer recommendation), however we are trying to ascertain what supports could be in available if needed very soon.

Again, we will get you the guidance document as soon as we have it to disseminate.

Thank you!

Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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further use or disclose the information contained in the email.

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6F109E35A80A4A40819BB399B4AE63AA@co.gloucester.nj.us.msg

From: Ruiz, Annmarie
Sent time: 05/06/2020 09:44:12 PM
To: Jones, Tammy; Jankauskas, Dittymae
Subject: FW: Migrant Seasonal Farm Worker-FQHC testing
Attachments: FW: Migrant Seasonal Farm Worker-FQHC testing

Sender: aruiz@co.gloucester.nj.us
Subject: FW: Migrant Seasonal Farm Worker-FQHC testing
Message-Id:
To: tjones@co.gloucester.nj.us
To: djankauskas@co.gloucester.nj.us

From: Ruiz, Annmarie
Sent time: 05/06/2020 09:44:12 PM
To: Jones, Tammy; Jankauskas, Dittymae
Subject: FW: Migrant Seasonal Farm Worker-FQHC testing

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: "Weller, Jamie"
Date: 5/6/20 7:33 PM (GMT-05:00)
To: "rdickinson (vinelandcity.org)" , "Ruiz, Annmarie" , "diamond_patricia (aclink.org)" , "msheppard (ccdoh.org)"
Cc: "Robert.dickinson.salemcountynj.gov" , "Semple, Shereen" , Amanda Medina-Forrester
Subject: Migrant Seasonal Farm Worker-FQHC testing

Good evening,

As you know, an interagency task force was created at the State level to address the unique needs of the migrant seasonal farm worker population. This task force is comprised of individuals in the NJ Departments of Health, Agriculture, Labor, Education, and Human Services. The group has created a guidance document that will be shared very soon. As soon as we have the guidance in OLPH, we will ensure all local health officers have access to it as well.

One strategy to address this vulnerable population relates to testing of migrant farmers. FQHCs will be performing pilot testing starting in the following counties: Salem, Gloucester, Atlantic, and Cumberland. OLPH does not have information about the progression of counties after the initial pilot. Testing is expected to begin in the coming days.

Understanding your role as the leads for communicable disease response in your jurisdictions, OLPH wished to share this information with you as soon as we were able. Once the guidance document is available for your review, we will offer an opportunity for you to ask questions and receive clarification. In addition, there will be a stakeholder call next week regarding this matter. Again, when the specific details are available, we will be sure to share them with you.

If you should have any immediate questions about this pilot, please feel free to reach out to me.

Thank you,

Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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From: Carey, Wendy
Sent time: 05/21/2020 11:06:01 AM
To: Jones, Tammy; Baylor, Michelle
Subject: FW: NJACCHO Concerence Call
Attachments: FW: NJACCHO Concerence Call

Sender: wcarey@co.gloucester.nj.us
Subject: FW: NJACCHO Concerence Call
Message-Id: <8279c472c0ce47d992d2a8413b53f0a9@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us
To: mbaylor@co.gloucester.nj.us

From: Carey, Wendy
Sent time: 05/21/2020 11:06:00 AM
To: Jones, Tammy; Baylor, Michelle
Subject: FW: NJACCHO Concerence Call
Attachments: NJACCHO Meeting .docx

Hi Tammy and Michelle,
Annmarie asked Katie to sit in on a NJACCHO conference call regarding contact tracing. She also provided the information to me in the event I wanted to listen in. I did not due to other work. I asked Katie to copy me as well.
Please see Katie's email below and attachment.
Wendy

From: Romero, Katie
Sent: Thursday, May 21, 2020 11:02 AM
To: Ruiz, Annmarie
Cc: Carey, Wendy
Subject: NJACCHO Concerence Call

Hi Annmarie,
I have attached notes from today's call. The discussion focused heavily on contact tracing, LTC facilities, and the need for local health department capacity to be strengthened for the future, not just temporarily.
No discussion regarding migrant farmworkers.
If you have questions or need additional information let me know.

Thank you,
Katie Romero, MPH
Principal Registered Environmental Health Specialist
Gloucester County Department of Health
204 East Holly Avenue
Sewell, NJ 08080
856-218-4170 (phone)
856-218-4161 (fax)
www.co.gloucester.nj.us

From: Kephart, Carla
Sent time: 05/18/2020 11:10:53 AM
To: Fisher, Eric; Jones, Tammy; Ruiz, Annmarie; Baylor, Michelle; Jankauskas, Dittymae; Christina, Karen; Carey, Wendy; Mahmoud, Kathleen
Subject: FW: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 15 2020
Attachments: FW: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 15 2020

Sender: ckephart@co.gloucester.nj.us

Subject: FW: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 15 2020

Message-Id:

To: efisher@co.gloucester.nj.us

To: tjones@co.gloucester.nj.us

To: aruiz@co.gloucester.nj.us

To: mbaylor@co.gloucester.nj.us

To: djankauskas@co.gloucester.nj.us

To: kchristi@co.gloucester.nj.us

To: wcarey@co.gloucester.nj.us

To: kmahmoud@co.gloucester.nj.us

From: Kephart, Carla
Sent time: 05/18/2020 11:10:52 AM
To: Fisher, Eric; Jones, Tammy; Ruiz, Annmarie; Baylor, Michelle; Jankauskas, Dittymae; Christina, Karen; Carey, Wendy; Mahmoud, Kathleen
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fyi

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From: NJLINCS Health Alert Network
Sent: Saturday, May 16, 2020 12:47 PM
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NJLINCS Health Alert Network

Public Health Info

Distributed by the New Jersey Department of Health

Subject: COVID-19 Talking Points and Frequently Asked Questions_05 15 2020

Date: 5/16/2020; 12:46:40

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Attachments: 2019-Novel_CV-TP-05152020_TOCr.pdf

Hello! Attached are the updated COVID-19 Talking Points and Frequently Asked Questions.

Document distribution is for the public health sector ONLY.

Please recycle last week's version of "Talking Points and Frequently Asked Questions" and replace with today's updated version.

Thank you.

This information has been distributed to: DOH Senior Staff; DOH Staff; LINCS Health Officers; LINCS Health Officer Assistants; LINCS Coordinators; LINCS Coordinator Backups; LINCS Epidemiologists; LINCS Health Educators; LINCS Health Planners; LINCS IT Specialists; LINCS Partnership Coordinators; LINCS Public Health Nurses; LINCS Regional Health Planners; LINCS Team Members; LINCS CD Investigators; LINCS REHS; LOCAL Health Officers; LOCAL Public Health; LOCAL CD Investigators; LOCAL Health Educators; LOCAL Public Health Nurses; LOCAL REHS; LOCAL Epidemiologists; DOH Program Staff; Public Health Associations; Public Health Council

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Talking Points and Frequently Asked Questions

Name of event: 2019 Novel Coronavirus (COVID-19)

Date/Time: May 15, 2020

****Information in this document is not for public dissemination or public posting****

New information highlighted

Overview of issue/event

- On March 9, 2020, Governor Murphy declared a State of Emergency in response to the COVID-19 outbreak. On March 11, 2020 COVID-19 declared a pandemic by the World Health Organization.
- Governor Murphy extended the public health state of emergency through June 5, 2020.
- NJDOH Commissioner of Health signed an Executive Directive that requires every long term care facility to verify that they developed disease and outbreak plans for testing staff and residents by May 19, 2020. Facilities must amend these plans to include COVID-19 testing; and plans must be implemented by May 26, 2020. The directive also includes re-testing of individuals who test negative within 3-7 days to detect new infections.
- New testing priority groups were outlined by the Governor on May 12, 2020. These groups include vulnerable populations (individuals in long term care facilities, psychiatric hospitals, migrant farm workers, and persons who are incarcerated), front line workers (hospital staff, grocery store personnel and other essential workers, and first responders), and the general public.
- On May 12, 2020, NJDOH issued a Standing Order that allows individuals to undergo COVID-19 testing without a prescription. Eligibility for this includes NJ residents age 12 or older who may have been exposed to COVID-19 (symptomatic or asymptomatic) and other individuals for whom a medical provider has not prescribed a test.
- NJ is hiring a corps of contact tracers to supplement staff and volunteers at local and county health departments with contact tracing efforts.
- CVS will offer COVID-19 testing at 50 New Jersey locations by the end of May.
- Effective Monday, May 18, 2020 non-essential construction may begin, and all non-essential retail stores may reopen for curbside pick-up. Also permitted are drive-in and drive-thru events (Executive Order #142).
- Governor Murphy announced that the shore will be open for Memorial Day! Each shore town will determine capacity limitations and enforce social distancing measures (Executive Order #143).
- Elective surgeries will be permitted to resume effective May 26, 2020. Guidance for facilities is forthcoming.

Main messages/Key messages

- All New Jersey residents are encouraged to practice social distancing (stay 6 feet from one another), wash hands often, and stay home (especially if sick).
- There are two COVID-19 call centers:
 - 1-800-962-1253: For health-related and clinical issues, such as who should get tested, when to seek medical attention and proper steps to take if exposed
 - 211: For information about how to stay safe, financial assistance, unemployment, donations, food, and other non-medical needs
 - COVID19.nj.gov website: Testing sites, case counts by county, and other resources
- Face coverings are to be worn by the public when out in public places, picking up food from restaurants, and using public transportation (such as busses, trains, light rails). Face coverings do not need to be surgical masks, they can be any cloth barrier worn over the nose and mouth, such as a folded t-shirt, bandana, dish towel, or scarf.
- Increased testing of vulnerable populations is underway in New Jersey. This includes staff and residents in various settings such as corrections, veterans' homes, psychiatric facilities, and long-term care. Testing of other groups, such as those without transportation to get to drive-in testing sites and seasonal workers, are also being planned.
- COVID19.nj.gov has a Data Dashboard which includes county and state specific data about cases, deaths, hospitalizations, and demographics. It is updated daily.
- Asymptomatic testing now available at FEMA testing sites for NJ residents who are first responders, persons who live in congregate living, and individuals who are close contacts with persons who tested COVID-19 positive.
- Ongoing investigation into Multisystem Inflammatory Syndrome in Children (MIC-S) associated with COVID-19. MIC-S has symptoms similar to Kawasaki Disease/toxic shock syndrome.

Public health recommendations

- Wear a cloth face covering if out in public.
- Practice social distancing (keep a 6 feet space between you and others)
- Follow good respiratory hygiene recommendations.
- Cover coughs and sneezes with a tissue or sleeve, not your hands.
- Wash your hands often with soap and water. Use alcohol-based hand sanitizer if soap and water are not available.
- Stay home if you are sick and avoid sick people.
- Review and follow CDC travel advisories when planning travel. If you become ill after returning home to the United States, **call** your healthcare provider before going to a doctor's office or emergency department of a hospital. Wear a face covering/mask on entering the building to protect other people.

FREQUENTLY USED TERMS

SARS-CoV-2: The scientific name for the novel 2019 coronavirus. The full name is: Severe Acute Respiratory Syndrome Coronavirus 2.

COVID-19: The disease caused by the virus SARS-CoV-2

Coronavirus: A family of viruses that SARS-CoV-2 belongs to. The 2003 SARS outbreak was a coronavirus, as was the MERS outbreak in 2012.

Pneumonia: A lung infection caused by a bacteria, virus, or fungus. The most common type of pneumonia is bacterial.

Epidemic: Widespread occurrence of an infectious disease in a community at a particular time.

Pandemic: A worldwide spread of a disease. The World Health Organization declared COVID-19 a pandemic on March 11, 2020.

“Flattening the Curve”: An epidemiology term that means to limit the spread of disease in an effort to reduce the number of new cases of disease.

Confirmed cases: The number of cases that have been confirmed through diagnostic testing. Due to a shortage of COVID-19 tests and limited testing criteria, the actual number of cases that exist is likely higher.

Case fatality rate: The death rate. This explains what percentage of COVID-19 cases are fatal.

Asymptomatic: Showing or having no symptoms.

Symptomatic: Actively showing symptoms. For COVID-19, symptoms may include fever, cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste and smell. Persons are thought to be more able to spread COVID-19 if they are experiencing symptoms. At this time, testing for COVID-19 is limited to those who have symptoms.

Isolation: Separates sick people with a contagious disease from people who are not sick.

Quarantine: Separated and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

Ventilator: A machine that helps a person breathe when they cannot breathe on their own.

Personal Protective Equipment (PPE): Items that protect the wearer from injury or infection. Examples of PPE includes goggles, face shields, masks, gowns, gloves, and booties (to cover shoes).

Respirator: A type of facemask that prevents the wearer from inhaling small particles, including viruses. A common type of respirator is an N95 mask.

Droplet: A type of disease transmission. The spray of droplets during coughing, sneezing, and speaking. Droplets are heavy and fall to the ground within a few feet. This type of transmission requires persons to be within close proximity for spread.

Airborne: A type of disease transmission. When viral particles linger in the air and travel long distances for an extended period of time. At this time, it is unknown if/how long the COVID-19 particles remain suspended in the air.

Fecal-Oral: A type of disease transmission. Transmission through feces (poop), which can then contaminate water or food if hygiene is lacking. Washing hands often is a way to reduce fecal-oral transmission. There is limited research that shows that coronaviruses may be present in feces. Good hand hygiene after going to the toilet, helping another person use the toilet, and changing diapers is recommended.

Community spread: Means people have been infected with the virus in an area, including some who are not sure how or where they became infected. COVID-19 seems to be spreading easily and sustainably in the community.

Social distancing: A public health measure put in place to limit people from gathering, with the goal of keeping people 6 feet apart from one another. Since it is thought that droplet spread is the primary way the COVID-19 is transmitted, social distancing will help to reduce the spread of disease.

Underlying conditions: Chronic diseases that are thought to make some persons more at risk for and for developing more severe COVID-19 disease. These diseases include, heart disease, high blood pressure, diabetes, kidney disease, obesity, asthma and other chronic lung problems.

Cleaning: The removal of visible foreign matter from a surface.

Disinfecting: Killing the bacteria and viruses on a surface. It is possible to be clean but not disinfected, and similarly disinfected but not clean.

FEMA: Federal Emergency Management Agency. Located within the Office of Homeland Security, FEMA is responsible to coordinating the government’s response to natural and manmade disasters.

Antibody testing (Serology): Antibodies are produced by the body to fight infection and can be found in the blood. If a person is found to have antibodies to a particular virus or bacteria, then it is likely they had been exposed in the past and possible that they may be immune. This type of testing relies on obtaining a blood sample and is often called “serology” or “serologic testing.” While there are numerous tests out there designed to test for antibodies to SARS-CoV-2 (the virus that causes COVID-19), there are significant issues associated with them. There is still a lot about SARS-CoV-2 serology that is unknown at this time, and NJDOH recommends that serologic tests should not be used to diagnose acute or prior SARS-CoV-2 infection, nor should they be used to determine immune status to SARS-CoV-2. They may produce false negative or false positive results, the consequences of which include providing patients incorrect guidance on preventive interventions like physical distancing or protective equipment.

Immunoglobulin M (IgM): This is a type of antibody that is made first by the body in response to an infection.

Immunoglobulin G (IgG): This is a type of antibody that is made by the body and replaces IgM and may persist as the antibody response to infection.

Convalescent plasma: Plasma from a person who was tested and diagnosed with COVID-19 and who recovered from the illness.

Contact tracing: The process of identifying, notifying, and interviewing persons who may have come into contact with an infected/infectious person. This process is done to prevent the further spread of disease.

False negative: When a test result incorrectly shows that the absence of a condition (i.e., disease, antibody, etc.), when the condition is actually present.

False positive: When a test result incorrectly shows the presence of a condition (i.e., disease, antibody), when the condition is not present.

Mortality: Deaths in a population.

Multisystem Inflammatory Syndrome in Children (MIS-C): A syndrome found in children and young adults that is associated with COVID-19.

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FREQUENTLY ASKED QUESTIONS

COVID-19 BASICS

GENERAL INFORMATION

What are coronaviruses?

A coronavirus is a type of common virus that can infect your respiratory tract. They can spread much like cold viruses. Almost everyone gets a coronavirus infection at least once in their life, most likely as a young child. They tend to circulate in the fall and winter.

What is the 2019 Novel Coronavirus (COVID-19)?

Sometimes a novel (meaning “new”) type of coronavirus emerges and begins infecting humans. The type of coronavirus is a new type of coronavirus and is infecting people for the first time, which means people do not have any immunity to it. It is causing an outbreak of respiratory illness.

What is the difference between 2019-nCoV and COVID-19?

These are two different names for the same disease. 2019-nCoV was the original name and this was changed by the World Health Organization on February 12, 2020 to COVID-19 (Coronavirus Disease 2019).

What is the difference between seasonal coronavirus and COVID-19?

Common human coronaviruses usually cause mild to moderate upper-respiratory tract illnesses, like the common cold. Most people get infected with a coronavirus at some point in their lives. Human coronaviruses are not the same as COVID-19.

COVID-19 is a new coronavirus that has not been previously identified. This new virus is spread easily and there is community spread. This means that people have been infected with the virus in an area, including some who are not sure how or where they became infected.

Is it true that drinking alcohol puts people at increased risk for contracting COVID-19?

Excessive alcohol use may put people at increased risk by weakening the body’s immune system and leaving drinkers at risk for other risky behaviors that could increase the likelihood of getting the COVID-19.

Drinking alcohol may also put those with mental health struggles and a history of alcohol-use disorders at greater risk due to increased self-isolation. It may also increase the risk of domestic violence.

Is it true that if you got a flu shot during the 2019-2020 season, you are at higher risk for getting COVID-19?

No. The influenza vaccine does not include any of the coronaviruses. It is also not meant to protect someone from them. While it is true that people who get the flu shot are still able to get infected by other respiratory viruses, they are not more susceptible to get COVID-19 than those who did not get the flu shot.

If I got the flu shot this year, will I automatically test positive for COVID-19?

There is no known connection between the flu vaccine and the novel coronavirus. The flu shot will not affect whether person tests positive for COVID-19.

Does the microwave kill the virus?

Microwaves kill germs in food and water by heating up food items to a high temperature. Attempting to heat other objects in a microwave, like paper or fabric, to disinfect them, can be dangerous and they may catch fire. Do not put objects other than food and water in the microwave.

Is it true that taking ibuprofen to ease COVID-19 symptoms could actually make your symptoms worse?

No, the World Health Organization and other infectious disease experts say that there is no good scientific evidence establishing a link between ibuprofen and worsening of COVID-19.

Is homemade hand sanitizer effective?

The CDC does not advise making hand sanitizer at home. The CDC recommends using commercially available hand sanitizer made with at least 60% alcohol.

Does taking a hot bath prevent COVID-19?

No, taking a hot bath will not prevent you from getting COVID-19. One of the best ways to protect yourself against COVID-19 is by frequently washing your hands. By doing this you eliminate viruses that may be on your hands and avoid infection that could occur if you touch your eyes, mouth, and nose. Wearing a face covering when out in public and social distancing are two other ways to help prevent COVID-19.

Are antibiotics effective in preventing and treating COVID-19?

No, antibiotics do not work against viruses, only bacteria. The new coronavirus (COVID-19) is caused by a virus and antibiotics should not be used as a means of prevention or treatment. However, if you are hospitalized for the COVID-19, you may receive antibiotics since bacterial co-infection is possible.

I heard that the coronavirus remains in the throat for 4 days, causing sore throat and coughing before it reaches the lungs. I was told to drink a lot of water and that gargling with warm water and salt or vinegar eliminates the virus.

While it is true that coronavirus can cause a sore throat and gargling with warm water make it feel better, it has no direct effect on the virus.

Can eating garlic help prevent COVID-19 infection?

Garlic is a healthy food that may have some antimicrobial properties. However, there is no evidence from the current outbreak that eating garlic has protected people from getting COVID-19.

Can regularly rinsing your nose with saline help prevent COVID-19 infection?

There is no evidence that regularly rinsing the nose with saline has protected people from COVID-19 infection. There is some limited evidence that shows regularly rinsing the nose with saline can help people recover more quickly from the common cold. However, regularly rinsing the nose with saline has not been shown to prevent respiratory infections.

Is it safe to go to the gym? Can I get COVID-19 from going to the gym? [NOTE: as of 3/16/20 at 8pm, all gyms and fitness centers should be closed]

Every person must assess their personal health. Individuals who have underlying health conditions should weigh going to the gym and staying away from crowds where they may possibly be exposed to someone with COVID-19. If you do decide to go to the gym, be sure to practice good hand hygiene and stay away from sick people.

Can I get COVID-19 from swimming in a swimming pool?

COVID-19 is mainly spread from person-to-person. There is no evidence that the virus spreads to humans through the use of pools and hot tubs, as long as they are properly maintained and disinfected (e.g., with chlorine and bromine).

Can the COVID-19 virus spread through sewerage systems?

At this time the transmission of the virus that causes COVID-19 through sewerage systems is thought to be low. Although transmission of COVID-19 through sewage may be possible, there is no evidence to date that this has occurred.

Can the COVID-19 virus spread through drinking water?

The virus that causes COVID-19 has not been detected in drinking water. Conventional water treatment methods that use filtration and disinfection, such as those in most municipal drinking water systems, should remove or inactivate the virus that causes COVID-19.

Is the COVID-19 virus found in feces (poop)?

The virus that causes COVID-19 has been detected in the feces of some patients diagnosed with COVID-19. The amount of virus released from the body (shed) in stool, how long the virus is shed, and whether the virus in the stool is infectious are not known. There have been no reports of fecal-oral transmission of COVID-19 to date.

If I had COVID-19 and recovered, am I immune?

It is unknown at this time if a person is immune to COVID-19 if they had it and recovered.

Can COVID-19 be transmitted through mosquito or tick bites?

To date there has been no information nor evidence to suggest that COVID-19 could be transmitted by mosquitoes. COVID is spread primarily through droplets generated when an infected person coughs or sneezes. There is no evidence that COVID-19 or other similar coronaviruses (e.g. SARS, MERS) are spread by mosquitoes or ticks.

Can spraying alcohol or chlorine over your body kill COVID-19?

Spraying alcohol or chlorine all over your body will not kill viruses that have already entered the body. Spraying these substances can be harmful to clothes or mucous membranes (e.g., eyes, mouth). Both alcohol and chlorine can be used to disinfect surfaces, as recommended by the manufacturer.

Is it safe to eat Chinese food?

Here in New Jersey, eating Chinese food does not create any additional risk to being infected with this virus.

Is it safe to receive packages from China?

Coronaviruses do not live very long on surfaces, so it is considered to be very low risk to become infected by handling a package from China. There has been no evidence to support the spread of the virus through imported goods.

Why can't I worship at my church/temple/mosque?

Since the Governor instituted the no gathering Executive Order, many religious services have stopped holding in-person services/gatherings. Many are now live-streaming their services. Individuals should contact their faith leaders with any specific questions, but in general they are recommending the same precautions that would be followed to prevent the flu. Use normal good judgement. If you are sick, stay home.

DATA

When did NJ report its first COVID-19 case?

NJ reported its first COVID-19 case on March 4, 2020.

How many cases/deaths of COVID-19 are there in NJ?

Counts of new cases of and deaths related to COVID-19 in New Jersey are released one time a day and posted to the NJ COVID-19 Dashboard which may be found at either: covid19.nj.gov or nj.gov/health

I saw on social media that there are more cases and more people are sick than what is being reported.

NJDOH has updated information on our website and various social media platforms, such as Facebook and Twitter. Be certain to get information from trusted and credible sources, such as CDC, NJDOH, your local health department and our call center. Misinformation exists, but all are encouraged to check credible sources for the most up-to-date information about COVID-19. New Jersey posts updates on their website: www.nj.gov/health

Why are case counts of COVID-19 from counties different from what the state is reporting?

NJDOH reports new and total COVID-19 cases and deaths one time per day. This is the official case count. Laboratories continue to process specimens and are required to contact the local health departments with results. Sometimes they get results before they are reported to the NJDOH.

What type of information can I find on the COVID-19 Data Dashboard?

The COVID-19 Data Dashboard may be accessed at [COVID19.nj.gov](https://covid19.nj.gov). The information included in the Data Dashboard includes data about the number of cases and deaths and updates of cases in multiple NJ healthcare settings. The information on the Data Dashboard is updated daily.

See below for the type of information listed on each of the tabs within the Data Dashboard (information provided may change):

- Cases and Trends: provides overview of total COVID-19 cases and deaths by state and county as well as the percent positivity rate.

- Hospital Census: data collected by the NJ Hospital Association; includes total hospitalizations, discharges, type of care (number of patients on ventilators and number of patients in critical care beds).
- Long Term Care: data provided to NJDOH by each facility; includes facilities with current outbreaks, cases of and deaths from COVID-19 at long term care facilities, includes information about veterans' memorial homes.
- State Psychiatric Hospitals: includes total number of COVID-19 positive patients and staff.
- Demographics: includes total COVID-19 deaths by race/ethnicity, underlying conditions, and deaths by age.

What is included in terms of “discharged” in the “Hospital Census” tab on the Data Dashboard?

This data is provided by the New Jersey Hospital Association. They are including the following in the discharged category: persons who have left the hospital and are now either at home, a rehabilitation facility, hospice, or another healthcare facility.

What types of underlying conditions are most frequently seen in persons who pass away from COVID-19?

Mortality data is included on the “Demographics” tab on the Data Dashboard. The top five underlying health conditions that are most commonly seen in patients who pass away from COVID-19 include: cardiac disease (includes heart disease and high blood pressure), diabetes, other chronic diseases, lung disease (includes asthma, emphysema, and COPD) and renal (kidney) disease. Other diseases also found in persons who die from COVID-19 include neurological disease/neurodevelopmental/intellectual disability, cancer and other. Public health investigations into the hospitalizations and death of persons with COVID-19 are ongoing.

PREVENTION

CLEANING

What type of office school/cleaning should be done if there is a case of coronavirus?

Special sanitizing processes beyond routine cleaning are not necessary or recommended to slow the spread of respiratory illness. Businesses should follow standard procedures for routine cleaning and disinfecting with an EPA-registered product. Typically, this means daily sanitizing of surfaces and objects that are frequently touched. Disposable wipes should be provided so that commonly used surfaces such as doorknobs, keyboards, desks, etc. can be wiped down by employees before each use.

What is the difference between cleaning and disinfecting?

- Cleaning is the removing of visible foreign matter from a surface.
- Disinfecting is killing the bacteria and viruses on a surface. It is possible to be clean but not disinfected, and similarly disinfected but not clean.

People should follow the instructions on the label of cleaning products to ensure that disinfection is done properly. Some products must sit on the surface for a number of minutes before being wiped away in order to be effective.

My facility houses people overnight and there may have been ill persons. What is the best guidance for cleaning?

It is recommended to close off areas used by anyone who is ill or has symptoms and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection.

In areas where ill persons have visited or used, continue routine cleaning and disinfection in the guidance below. More info may be found at: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

How to Clean and Disinfect Surfaces and Linens:**Surfaces**

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.

Linens, Clothing and Other items that go in the Laundry

- Do not shake dirty laundry; this minimizes the possibility of dispersing the virus through the air.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items.
- Clean and disinfect hampers or other carts for transporting laundry.

For businesses, more information may also be accessed at: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

For households with suspected/confirmed COVID-19, please check out the most recent CDC information: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/cleaning-disinfection.html>

Are there any special recommendations for cleaning staff at facilities?

Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash. Gloves should be removed after cleaning a room or area occupied by ill persons. Clean hands immediately after gloves. Be sure to clean hands after removing gloves.

Additional personal protective equipment (PPE) might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash (i.e., gowns, gloves, and eye protection). Employers should ensure that employees are trained to put on and safely remove PPE, if it is needed.

Cleaning staff and others should clean hands often, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 second. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used.

<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

What are cleaning recommendations for my home?

Practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, toilets, faucets, and sinks with household cleaners that are appropriate for the surface, following label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

What are the cleaning recommendations in my home if there is someone who is isolating with COVID-19 (suspected/confirmed)?

- Clean and disinfect high-touch surfaces daily in household common areas (e.g. tables, hard-backed chairs, doorknobs, light switches, phones, tablets, touch screens, remote controls, keyboards, handles, desks, toilets, sinks)
 - In the bedroom/bathroom dedicated for an ill person: consider reducing cleaning frequency to **as-needed** (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill person.
- As much as possible, an ill person should stay in a specific room and away from other people in their home.
- The caregiver can provide personal cleaning supplies for an ill person's room and bathroom, unless the room is occupied by child or another person for whom such supplies would not be appropriate. These supplies include tissues, paper towels, household cleaners.
- If a separate bathroom is not available, the bathroom should be cleaned and disinfected after each use by an ill person. If this is not possible, the caregiver should wait as long as practical after use by an ill person to clean and disinfect the high-touch surfaces.

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html>

FACE COVERINGS

Should I wear a facemask in public?

CDC recommends that the public wear a cloth face covering in public settings where other social distancing measures are difficult to maintain, especially in areas with community-transmission. CDC advises that the use of face covering to slow the spread of the virus and help people who have the virus and do not know it from transmitting it to others. ***Cloth face coverings are recommended for the public, not N95s or surgical masks, as those critical supplies should be reserved for health care workers and other first responders.***

NOTE: Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

CDC also recommends everyday preventive actions to prevent the spread of respiratory viruses, such as avoiding people who are sick, avoiding touching your eyes or nose and covering your cough or sneeze with a tissue. People who are sick should stay home and not go into public places.

I can't find/don't have a facemask. How can I make one?

It is not necessary to purchase a facemask. You can make a face covering out of fabric in your home. The CDC has instructions about how to make a face covering here: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Why did the CDC change the recommendation from do not wear masks to wear face coverings?

The recommendations to wear a face covering in public are to prevent those who may have the virus, but do not know it, from passing it to others. Wearing a face covering limits droplet spread when in public when practicing social distancing is difficult to maintain, especially in areas with community-transmission. Social distancing is still the best option to limit the spread of the virus to others.

What is the best type of fabric to use to make a face covering?

Use any fabric that you have at home to make a face covering. Be sure the fabric is breathable. A face covering is simply a physical barrier to another person's coughs and sneezes. Options include a t-shirt, hand towel, bandana, or scarf.

If this disease isn't airborne, then why do we need to wear face coverings in public?

Face coverings can block the droplets that carry the virus. The concept of wearing a face covering in public is important for two reasons:

1. To help block the spread of droplets from someone who has the virus and may not yet even have any symptoms and

2. In instances when social distancing is difficult to maintain, a face covering may also protect the wearer from these droplets

How often should I wash the cloth face covering?

It is recommended to wash the cloth face covering at least once per day or after you are done wearing it for the day.

What is the best way to wash a cloth face covering?

Detergents with bleach-like compounds or other active ingredients should be used when washing face coverings. Machine washing is the best way to wash a face covering. Use the warmest water that the fabric will tolerate. If hand washing is your only option, lather the fabric with soap and scrub for at least 20 minutes with warm to hot water. Washing should be followed by hot air drying.

NOTE: Public materials about face coverings, how to wear them, and why they are important are available.

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Face_Coverings.pdf

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-face-coverings-information.pdf>

OUTDOORS

NOTE: Governor Murphy opened state and county parks, trails, and golf courses with restrictions on May 2, 2020. Parking at these facilities is limited to 50% capacity and people must maintain social distancing. Wearing of face coverings is strongly recommended. Playgrounds, picnic areas, and restrooms at parks will remain closed. Organized sports at parks are not permitted.

Any suggestions about how to protect myself and others from COVID-19 while enjoying the outdoors?

Staying physically active is one of the best ways to keep your mind and body healthy. People can visit trails and open spaces as a way to relieve stress, get some fresh air and vitamin D, stay active, and safely connect with others. Follow a few Do's and Don'ts when visiting outdoor recreation areas during the pandemic.

DO

Visit parks that are close to your home. Travelling long distances to visit a park may contribute to the spread of COVID-19.

Prepare before you visit. Check with the park in advance to be sure you know which services or areas are open (such as bathrooms).

Stay at least 6 feet away from others (“social distancing”) and take other steps to prevent COVID-19.

Avoid gathering with others outside of your household.

DON'T

Visit parks if you are sick or were recently exposed to COVID-19.

Visit crowded parks. Do not visit parks where you cannot stay at least 6 feet away from others at all times.

Use playgrounds. Using playgrounds may lead to the spread of COVID-19 because they are often crowded, and social distancing may be difficult to maintain. It can be challenging to keep surfaces clean and disinfected. The virus can spread when young children touch contaminated equipment and then touch their hands to their eyes, nose, or mouth.

Participate in organized activities or sports. Most organized activities and sports such as basketball, baseball, soccer, and football that are held on park fields, open areas, and courts are not recommended. These activities and sports typically require coaches and athletes who are not from the same household or living unit to be in close proximity, which increases their potential for exposure to COVID-19.

Do I need to wear a face covering while exercising outdoors?

The CDC recommends wearing a face covering in public settings where it is harder to stay away from people. If you are exercising in an area where you know you will be crossing paths with a lot of other people, you should wear a face covering. But you should also try to avoid those settings. It is recommended to find less crowded areas and avoid peak hours when others are out exercising.

Any tips about how to wear a face covering when exercising outdoors?

Wearing a face covering makes it harder to breathe when you are exercising. Don't be afraid to slow down and take breaks. Don't push yourself too hard. Select a face covering that is comfortable, stays in place, and covers your mouth and nose. Figure out what type of face covering works best for you when you are outdoors exercising.

Are beaches open? Are people allowed to use them?

Some beaches in some shore towns are open. Some towns only permit exercise (walking, jogging) and not sitting or group sports. Check the website of the town before going to the beach to learn more about what is permitted.

Governor Murphy signed an Executive Order (143) that allows beaches and boardwalks to remain open with social distancing measures in place. The Order takes effect on Friday, May 22. The Order explicitly prohibits capacity limitations that discriminate against non-residents, low-income people, and other protected classes. It is recommended that people wear a face covering while in public settings at the beaches, when social distancing measures are difficult to maintain. Restaurants and bars located on the beaches and boardwalks are still limited to delivery and take-out services only and that amusements parks and arcades, and other places of public amusement located on the beaches and boardwalks remain closed. Any outdoor seating, such as tables or benches, must be removed, taped off, or otherwise blocked

What else is open at the shore? What is not open at the shore?

Under Governor Murphy's Executive Order, the following shall remain closed on private and public beaches and boardwalks: water fountains, picnic areas, playgrounds, pavilions, indoor recreational facilities, and other buildings and facilities, such as visitor centers. There is an exception allowing bathrooms, showering areas, and changing areas to stay open.

To limit physical interactions, the Order requires municipalities, lake commissions, private club associations or entities, and other local government to implement reasonable restrictions, including:

- Imposing non-discriminatory capacity restrictions;
- Requiring that members of the public practice social distancing;
- Developing and implementing lifeguard training and beach operation plans that address COVID-19 considerations;
- Removing, taping-off or otherwise blocking all benches and tables;
- Prohibiting the tying together of boats to prevent group gatherings;
- Developing and implementing a continuous public outreach campaign, including signage, social media, town and county websites, mobile device applications, radio, and banner-plane advertising;
- Prohibiting special events such as festivals, concerts, fireworks, and movies;
- Prohibiting all organized or contact activities or sports;
- Limit occupancy in public restrooms; and
- Implementing sanitization protocols.

The restrictions also apply to public piers, docks, wharfs, boat ramps, and boat landings throughout the State. Municipalities, counties, any responsible commission, association, or unit of county or local government, and private beach clubs may impose additional restrictions to the ones listed above and retain the legal authority to close beaches or boardwalks if they choose to do so. Due to the diverse nature of the shore and lake communities, the Order does not mandate specific social distancing measures.

Examples of social distancing measures left to a municipality's discretion include but are not limited to the following:

- Identifying six feet of spacing in any areas where the public may form a line;
- Limiting the number of lifeguards to each stand or tower, maintaining social distance between lifeguards, and adding stands or towers as necessary;
- Installing physical barriers between the public and employees in ticket or beach badge sale booths; and
- Limiting occupancy of ticket or beach badge sales booth to one person at a time.

What about lakes and lakeshores? Does the Executive Order include them, too?

Yes, Executive Order 143 applies to beaches, boardwalks, lakes and lakeshores. Refer to the information above.

RESPIRATORY, HAND HYGIENE & PERSONAL PROTECTIVE EQUIPMENT (PPE)

What is respiratory hygiene?

Respiratory hygiene refers to ways that we can prevent the spread of germs via the respiratory route of infection. This includes coughing and sneezing into a tissue and then properly disposing of the tissue. You can also cough or sneeze into your sleeve. For more information about respiratory hygiene see the CDC website at <https://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm>

If I am in close contact with someone who has coronavirus should I wear a surgical mask protect myself from becoming infected?

The new CDC recommendation is to wear a cloth face covering when out in public. A face covering is different from a mask, as it can be made out of items found in the home and is simply used to cover the face. Face coverings protect the wearer from individuals who may be sick. Wearing face coverings, practicing frequent hand washing, and social distancing are good prevention activities.

Health care workers should follow all infection control guidance when caring for patients who are suspected or confirmed cases of 2019-nCoV (COVID-19).

What is a respirator?

A respirator is a personal protective device that is worn on the face or head and covers at least the nose and mouth. A respirator is used to reduce the wearer's risk of inhaling hazardous airborne particles (including infectious agents), gases or vapors. A commonly referred to respirator is N95.

What's the difference between a facemask and a respirator?

Unlike NIOSH-approved N95s, facemasks are loose-fitting and provide only barrier protection against droplets, including large respiratory particles. No fit testing or seal check is necessary with facemasks. Most facemasks do not effectively filter small particles from the air and do not prevent leakage around the edge of the mask when the user inhales. The role of facemasks is for sick patients to wear to prevent contamination of the surrounding area when they cough or sneeze.

Where can I find more information about use of expired respirators when supplies are low?

More information can be found at the link below:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/crisis-alternate-strategies.html>

What measures are being taken by OSHA regarding fit testing requirements during the COVID-19 response?

On March 14, 2020, the Occupational Safety and Health Administration (OSHA) released Temporary Enforcement Guidance - Healthcare Respiratory Protection Annual Fit-Testing for N95 Filtering Facepieces During the COVID-19 Outbreak. The guidance can be found here: <https://www.osha.gov/memos/2020-03-14/temporary-enforcement-guidance-healthcare-respiratory-protection-annual-fit>. A fit test is required for anyone wearing a respirator to protect against COVID-19. Annual fit test can be temporarily suspended if the employee has already been fit tested to that respirator.

For more information about OSHAS's rule relaxation for fit testing and use of expired respirators during the COVID-19 response, please refer to the LINCS message from March 16, 2020.

What is hand hygiene?

Hand hygiene refers to washing hands often with soap and water for 20 seconds, especially after changing diapers, touching pets and commonly touched surfaces. Soap does not need to be antibacterial; any kind of hand soap is fine to use. If soap and water are not available, use an alcohol-based hand sanitizer that is at least 60% alcohol content. Avoid touching eyes, nose and mouth with unwashed hands. To learn more about hand hygiene see the CDC website at <https://www.cdc.gov/handwashing/when-how-handwashing.html>

SOCIAL DISTANCING

What is social distancing?

Social distancing is a public health measure taken to help slow down the spread of a contagious disease by restricting when and where people can gather. These measures can include limiting large groups of people coming together, closing buildings, and canceling events. For example, a college suspending classes and going to web-based learning would be a social distancing measure. People should begin to think about the various ways their lives could be disrupted by such measures and begin to make plans such as finding out about work-from-home policies if schools or childcare centers are closed.

SIGNS & SYMPTOMS and TRANSMISSION

What are the signs and symptoms of 2019-nCoV (COVID-19)?

There is limited information at this time on the full range of clinical illness associated with this virus. However, it is causing symptoms consistent with a respiratory illness such as **fever, cough, shortness of breath, and other symptoms, including chills, shivering, muscle pain, headaches, sore throat and new loss of taste or smell**. Symptoms have varied from mild to severe. CDC believes at this time that symptoms of COVID-19 may appear in as few as two days or as long as 14 days after exposure.

It is allergy season. How do I know whether I have COVID-19 or allergies?

COVID-19 symptoms mainly include fever, dry cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste or smell.

Seasonal allergy symptoms include runny nose, itchy eyes, mouth or skin, sneezing, and stuffy nose. There is almost never fever associated with seasonal allergies.

What does the term “pre-symptomatic” mean?

Pre-symptomatic transmission is defined as transmission of a virus from an infected person (source patient) to a secondary patient before the source patient developed symptoms. The existence of pre-symptomatic or asymptomatic transmission during the current COVID-19 pandemic presents challenges for contact tracing.

How is 2019-nCoV (COVID-19) treated?

There is no specific treatment for the virus that causes COVID-19, other than supportive care as needed.

How is the virus that causes 2019-nCoV (COVID-19) spread?

The virus is thought to spread mainly from person to person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It is possible that you can also become infected by touching something which has been contaminated by the virus and then touching your eyes, nose or mouth.

Can someone spread the virus without being sick?

People are thought to be most contagious when they are the most symptomatic (the sickest). However, it is possible for the virus to spread from people who have minor or no symptoms. This is why it is now recommended to wear a face covering when out in public.

Am I at risk?

There are currently cases of COVID-19 in New Jersey. This is an evolving situation and latest updates are available on the Data Dashboard at covid19.nj.gov and the NJDOH website at www.nj.gov/health.

What is meant by “community spread”?

Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected. COVID-19 seems to be spreading easily and sustainably in the community.

What are the main symptoms of COVID-19?

The main symptoms of COVID-19 are fever, dry cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste or smell.

What does it mean to have “mild symptoms”?

Mild symptoms include fever, dry cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste or smell. Persons with mild symptoms are recommended to stay home, rest, and recover.

Is there any information about COVID-19 and persons with disabilities?

- People with disabilities may not be at greater risk for getting COVID-19. However, some people with disabilities, or long-term limitation in activity resulting from a condition or health problem, may be at a higher risk for infection.
- People with disabilities may experience higher rates of chronic health conditions.
- Adults with disabilities are three times more likely to have heart disease, stroke, diabetes, or cancer than adults without disabilities.
- People with disabilities may experience potential challenges to routine medical care and access.

How easily does the virus spread?

The virus that causes COVID-19 seems to be spreading easily and sustainably in the community in some affected geographic areas. Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

How long does the COVID-19 virus survive on surfaces?

Most recent studies show that the virus that causes COVID-19 can survive for up to 72 hours on plastic and steel and up to 24 hours on cardboard. If you think a surface may be infected, clean it with a disinfectant to kill the virus and protect yourself and others.

Will warm weather stop the outbreak of COVID-19?

It is not yet known whether weather and temperature impact the spread of COVID-19. Some other viruses, like the common cold and flu, spread more during cold weather months but that does not mean it is impossible to become sick with these viruses during other months. At this time, it is not known whether the

spread of COVID-19 will decrease when weather becomes warmer. There is much more to learn about the transmissibility, severity, and other features associated with COVID-19 and investigations are ongoing.

CLINICAL MANAGEMENT and TREATMENT

Is there a vaccine?

There is no vaccine for the 2019 novel coronavirus.

What drugs are available to treat COVID-19?

The Secretary of the Department of Health and Human Services has declared a public health emergency that justifies the emergency use of remdesivir to treat coronavirus disease 2019 (COVID-19) caused by SARS-CoV-2 infection. In response, the U.S. Food and Drug Administration (FDA) has issued an Emergency Use Authorization (EUA) for the unapproved product, remdesivir, for the treatment of COVID-19.

Remdesivir is an investigational drug that has not been approved by the FDA for any use. It is not yet known if remdesivir is safe and effective for the treatment of COVID-19. The distribution of remdesivir has been authorized only for the treatment of hospitalized patients with severe COVID-19. It is not authorized for the treatment of any other viruses or pathogens. This use is authorized only for the duration of the declaration that circumstances exist justifying the authorization of the emergency use, unless the authorization is terminated or revoked sooner.

There is only one manufacturer of remdesivir and there is a limited quantity of the drug. The manufacturer is donating all available doses to the federal government who will then determine how to distribute the supply to the areas most in need.

Fact sheet about remdesivir: <https://www.fda.gov/media/137566/download>

What is the clinical management for COVID-19?

At present, clinical management includes infection prevention and control measures and supportive care, including supplementary oxygen and mechanical ventilatory support, when indicated. Patients with mild clinical presentation may not initially require hospitalization. The decision to monitor a patient in the inpatient or outpatient setting should be made on a case-by-case basis. Please note, the clinical management/care for a person who is exhibiting COVID-19 symptoms who has not been tested does not differ from the individual who tested positive for COVID-19.

What are the therapeutic options for COVID-19 patients?

While we learn more about COVID-19 everyday, there is still much we do not know. For full information on therapeutic options, visit: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/therapeutic-options.html/>

- Remdesivir is an investigational intravenous drug with broad antiviral activity that inhibits viral replication through premature termination of RNA transcription. It has in-vitro activity against SARS-CoV-2 and in-vitro and in-vivo activity against related betacoronaviruses. **NOTE: Remdesivir was approved by the FDA for Emergency Use Authorization (EUA) to treat hospitalized patients with COVID-19 on May 1, 2020.** <https://www.gilead.com/remdesivir>
- Hydroxychloroquine and chloroquine are oral prescription drugs that have been used for treatment of malaria and certain inflammatory conditions. **UPDATE: FDA announced that hydroxychloroquine is not recommended as a treatment for COVID-19 outside of the hospital setting.**
- Convalescent plasma is also being evaluated as treatment for patients with serious or immediately life-threatening COVID-19 infections, or those judged by a healthcare provider to be at high risk of progression to severe or life-threatening disease.

Should post-exposure prophylaxis (medication) be used for people who may have been exposed to a person with COVID-19?

There is currently no FDA-approved post-exposure prophylaxis for people who may have been exposed to COVID-19. For information about registered clinical trials of investigational therapeutics for pre or post exposure prophylaxis of SARS-CoV-2 infection, visit [ClinicalTrials.gov](https://clinicaltrials.gov)

How are COVID-19 patients treated?

Not all patients with COVID-19 will require medical supportive care. Clinical management for hospitalized patients with COVID-19 is focused on supportive care for complications, including supplemental oxygen and advanced organ support for respiratory failure, septic shock, and multi-organ failure. Testing and treatment for other viral or bacterial etiologies may be warranted.

Do patients with confirmed or suspected COVID-19 need to be admitted to the hospital?

Not all patients with COVID-19 require hospital admission. Patients whose clinical presentation warrants in-patient clinical management for supportive medical care should be admitted to the hospital under appropriate isolation precautions.

Some patients with initial mild clinical presentation may worsen in the second week of illness. The decision to monitor these patients in the inpatient or outpatient setting should be made on a case-by-case basis. This decision will depend not only on the clinical presentation, but also on the patient's ability to engage in self-monitoring, the feasibility of safe isolation at home, and the risk of transmission in the patient's home environment.

When can patients with confirmed COVID-19 be discharged from the hospital?

Patients can be discharged from the healthcare facility whenever clinically indicated. Isolation should be maintained at home if the patient returns home before the time period recommended for discontinuation of hospital Transmission-Based Precautions.

Decisions to discontinue Transmission-Based Precautions or in-home isolation can be made on a case-by-case basis in consultation with clinicians, infection prevention and control specialists, and public health authorities based upon multiple factors, including disease severity, illness signs and symptoms, and results of laboratory testing for COVID-19 in respiratory specimens.

TESTING & SEROLOGY

TESTING

On May 12, 2020, Governor Murphy announced a comprehensive strategy to expand testing capacity and implement a robust contact tracing program for New Jersey. The plan includes a flexible testing plan that is accessible to all residents who need it. New Jersey will implement the following strategies to expand capacity and access to testing:

- Double testing capacity and increase to at least 20,000 tests per day by the end of May. This capacity will be built out moving forward with a minimum of 25,000 tests completed per day by the end of June.
- Prioritize access to testing for vulnerable populations, including residents in long-term care facilities and developmental centers, individuals in the corrections system, those in homeless shelters, patients in psychiatric hospitals, and seasonal farmworkers. The state testing program will also ensure ready access for frontline health care workers, first responders, and transit workers.
- Use mobile testing units to serve communities who may not have access to motor vehicles.
- Require long-term care facilities to supplement or amend their current disease outbreak plan to include a COVID-19 testing plan for all staff and patients/residents.
- Issue a standing order permitting testing for COVID-19 without a prescription for New Jersey residents who may have been exposed and who meet certain conditions.

The Executive Directive and Standing Order may be found here:

<https://www.state.nj.us/health/legal/covid19/index.shtml>

Who should be tested for COVID-19 with the new testing priority groups announced by the CDC?

On May 5, 2020 new testing priority groups were posted to the NJDOH website. Increasing testing capacity will allow clinicians to consider COVID-19 testing for a wider group of symptomatic patients and persons without symptoms in certain situations.

Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Most patients with confirmed COVID-19 have

developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing) but some people may present with other symptoms as well, such as headache, sore throat and loss of taste and smell. Other considerations that may guide testing are epidemiologic factors such as the occurrence of local community transmission of COVID-19 infections in a community. Clinicians are encouraged to test for other causes of respiratory illness.

The two lists below explain who should be tested for COVID-19 as testing is expanded to get a better sense of how many individuals were infected with or exposed to the virus.

High Priority

- Hospitalized patients
- Healthcare facility workers, workers in congregate living settings, and first responders **with** symptoms
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, **with** symptoms
- Persons identified through public health cluster and selected contact investigations

Priority

- Persons who had close contact (within 6 feet for at least 10 minutes) with someone who tests positive for COVID-19, both **with** and **without** symptoms.
- Residents and staff in long-term care facilities or other congregate living settings, including prisons and shelters, as part of house-wide point prevalence studies, including those **with** and **without** symptoms.
- Persons **with** symptoms of COVID-19 infection, including: fever, cough, shortness of breath, chills, muscle pain, new loss of taste or smell, vomiting or diarrhea and/or sore throat.

Refer to NJDOH guidance for more information:

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Testing_Guidance.pdf

I work for NJ Transit and want to be tested for COVID-19. Where can I get tested?

COVID-19 testing is available in East Rutherford to all NJ TRANSIT employees. Through an agreement with Agile Urgent Care and Accurate Diagnostics Lab, NJ TRANSIT employees will be accepted for appointment-only testing at the site which opened on April 13 and is currently geared toward first responders and frontline healthcare workers. Online registration access for NJ TRANSIT employees will be available beginning on Sunday, May 3. NJ TRANSIT is also working to expand access to similar testing sites in central and south Jersey. <https://nj.gov/governor/news/news/562020/approved/20200430c.shtml>

I work for/have a loved one in a NJ Dept of Corrections facility, are we/they able to get tested for COVID-19?

The New Jersey Department of Corrections (NJDOC), in partnership with Rutgers University Correctional Healthcare (UCHC) and Accurate Diagnostics Lab, has announced plans to provide COVID-19 tests to staff, inmates, and residents on-site at each of NJDOC's facilities and halfway houses.

Testing will include the FDA-approved Rutgers saliva test administered to NJDOC's staff of approximately 8,000 employees and 18,000 inmates by UCHC. Universal testing is expected to begin by the end of next week and will help the Department inform its operational needs related to the management of those who are sick while maintaining the safe operation of facilities. <https://nj.gov/governor/news/news/562020/approved/20200501a.shtml>

I have symptoms of respiratory illness. I am not sure if it is the flu or COVID-19. I do not have a primary care doctor.

If you have health insurance, you might consider going to an urgent care center. There are urgent care centers in many towns across the state and some are providing COVID-19 testing.

If you do not have health insurance, consider a federally qualified health center (FQHC). These are federally funded clinics and see anyone. Due to the ongoing COVID-19 pandemic, call the nearest FQHC to inquire about appointments. To find an FQHC near you: <https://www.njpca.org/current-members/>

How can I locate the nearest COVID-19 testing site?

Go to COVID.nj.gov/testing for locations of testing sites across the state. Some testing sites require pre-screening, a prescription from a health care provider, or proof of residency. Be sure that you read the testing requirements before you show up at a testing site.

Will there be FEMA community-based COVID-19 testing available?

There are public testing locations across the state that are sponsored by FEMA, a Federal Emergency Management Agency. Testing is open to New Jersey residents only. You must bring identification to show proof of NJ residency (government issued photo ID). If a health care worker or first responder, bring appropriate ID. Parent/Guardian of an individual less than 18 years of age must be present. The public is encouraged to complete the self-assessment on covid19.nj.gov before going to get tested at a public site.

Testing will be staffed by NJ Department of Health, the New Jersey State police, and the New Jersey National Guard. These sites will be open until the end of May 2020.

Testing is free and will be covered by the federal government or personal insurance company. If you have health insurance, please bring your healthcare/medical insurance card, although this is not a requirement to be tested. Do not take fever-reducing medicine prior to testing (such as Tylenol or Advil) for at least 6 hours prior to arrival. Pre-registration is not required. If you have a prescription for testing, please bring it with you.

Testing at the FEMA sites is prioritized for:

- Symptomatic persons (those with three of the following symptoms: fever of at least 99.6°F, cough, shortness of breath, chills or shivering, muscle pain, headache, sore throat, new loss of taste or smell, vomiting, diarrhea)
- Asymptomatic first responders, persons who live in congregate living and individuals who are close contacts with persons who tested COVID-19 positive.

Asymptomatic New Jersey residents should attempt to seek guidance from a health care provider before accessing testing. There are two drive-thru FEMA community-based testing locations. For exact days each testing site is open go to covid19.nj.gov/testing.

1. Bergen County Community College, 400 Paramus Road in Paramus (Bergen County).
2. PNC Art Center, 116 Garden State Parkway in Holmdel (Monmouth County).

What should I expect at the FEMA community-based testing site?

Individuals will drive thorough a secured area and will remain in their vehicles throughout the entire testing process. Hours of operation are 8am-4pm or until testing runs out. Be prepared for long wait times. No restrooms will be available. Bring water and other items to be comfortable while waiting. Every effort will be made by managers of the sites to maintain patient privacy.

Interpreters may be available to accommodate residents for whom English is not their primary language.

If you are having a medical emergency, call 9-1-1. Do not report to a testing site or wait at a testing site. Testing sites are not emergency care facilities. Call 9-1-1 and tell the dispatcher about your symptoms.

Do not take fever-reducing medicine prior to testing (such as Tylenol or Advil) for at least 6 hours prior to arrival. Testing includes a nasal swab.

Testing at the FEMA sites is prioritized for:

- Symptomatic persons (those with three of the following symptoms: fever of at least 99.6°F, cough, shortness of breath, chills or shivering, muscle pain, headache, sore throat, new loss of taste or smell, vomiting, diarrhea)
- Asymptomatic first responders, persons who live in congregate living and NJ residents who are close contacts with persons who tested COVID-19 positive.

Asymptomatic New Jersey residents should attempt to seek guidance from a health care provider before accessing testing.

Why are you asking me to bring my health insurance card?

If you have health insurance, you are asked to bring it. Testing is covered by insurance. However, healthcare/medical insurance is not a requirement to be tested.

Is the FEMA community-based testing just for residents of a certain county?

No, the FEMA community-based testing is for New Jersey residents, regardless of where they may live in the state. Anyone planning to attend a FEMA community-based testing site, please bring proof of your New Jersey residency by bringing a government-issued photo ID.

In addition to the two FEMA community-based testing sites, there is testing being offered in other counties. In most cases this testing is for county residents only. Contact your local health department for more information. County testing clinics have various requirement that may include: being pre-screened, symptomatic, have a doctor's prescription for testing, and have an appointment.

How soon are test results coming back from the FEMA community-based testing sites?

Test results from FEMA community-based sites are being provided within 3-5 days after testing. You will be called with test results. You should have instructions on the paper provided to you at the testing site with more information.

I was tested at one of the FEMA sites. What should I do about work while I wait for test results?

As the instructions on the paper you received at the FEMA testing site says, you should:

- Inform your supervisor that you were tested for COVID-19 and note the date of testing.
- If you are experiencing symptoms: Notify your supervisor and stay home.
- If you are not experiencing symptoms: Request guidance from your supervisor on any potential work restrictions until you know your test results.
- Avoid using public transportation, ridesharing, or taxis when commuting.

What should you do to protect yourself while you wait for test results from the FEMA community-based testing site?

- Wash hands often with soap and water for at least 20 seconds. Clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.
- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Clean all “high-touch” surfaces every day. High-touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and remote controls.
- Cover coughs and sneezes.

How will I get my test results from the FEMA community-based testing site?

Instructions about what you should do while you wait for test results and monitoring symptoms were provided when you were tested. You will be called at the number you provided on the registration form with your results. Due to privacy considerations, no voice message will be left on your phone. You must answer your phone directly to receive results. The results calling center will call to follow up two times.

I was tested at a location that was not my doctor’s office, how do I get my test results?

If the testing location required a doctor’s prescription, you should contact your physician for the test results. Test results are sent to the ordering physician.

Do not call the COVID-19 hotlines for your test results. They do not have test results.

I got my COVID-19 test results back and they told me I am positive. What should I do?

If you tested positive, you must stay at home and self-isolate. This means stay in a different bedroom from others in your home, and if possible, use a separate bathroom. You must self-isolate until at least 3 full days (or 72 hours) have passed since you had a fever without the use of fever-reducing medications AND other symptoms are greatly improved AND at least 10 days have passed since symptoms first started.

If you live with other people and they were not tested, they should keep their distance from you. This includes not eating meals together and not sitting around the house together. Practice social distancing as much as is possible (stay at least 6 feet from each other).

I tested positive for COVID-19. What should I do about the other people in my home? Do they need to be tested?

- If they are **symptomatic** (sick; have COVID-19 symptoms), they should also self-isolate until 3 full days (or 72 hours) have passed since you had a fever without the use of fever-reducing medications AND other symptoms are greatly improved AND at least 10 days have passed since symptoms first started. If the symptoms are mild, they should recover at home.
- If the symptoms worsen and a medical evaluation is needed, contact your health care provider.
- If they are **asymptomatic** (not sick; have no COVID-19 symptoms), they should self-quarantine for 14 days AFTER any sick person in the household's self-isolation period ends. If the asymptomatic person develops symptoms, they should follow the self-isolation instructions above.
- If testing is available, both symptomatic and asymptomatic persons who live in the house should consider getting tested.

I tested positive for COVID-19 and self-isolated the recommended 10 days until my symptoms were gone. I was re-tested once I was asymptomatic and the results came back positive again! Now what should I do?

There is still a lot that we do not know about this new virus. Since you were tested twice, it is recommended that you continue self-isolate until you have two negative tests, performed at least 24 hours apart.

I tested negative for COVID-19 but still feel sick. What should I do?

If you test negative for COVID-19 but still have symptoms, it is likely you may have another respiratory virus. You should continue to isolate yourself from others, practice good hand hygiene, and clean and disinfect surfaces in the home.

You should not return to work or school until 72 hours after your fever has ended without the use of fever-reducing medications and other symptoms have improved. If your symptoms worsen or if you do not get better after several days, you should call your health care provider.

I was tested at one of the FEMA drive-thru sites (Bergen Co College and PNC Arts Center only) and did not receive my results. Where can I get my results?

You should have received at least 2 phone calls to the number you provided to get your results. However if you have not received your test results and it is 7 days AFTER you got tested, contact the NJ Department of Health by email at covid.testing@doh.nj.gov

Do NOT call the public COVID-19 hotlines (1-800-962-1253 or 211) for test results. They do NOT have test results.

I went to a FEMA site for testing. I need to see/print the results. Can I do this?

Yes, if you went to a FEMA testing site for COVID-testing, you may use the patient portal at the commercial lab listed below to view/print your COVID-19 test results.

- Bergen County College: Quest Diagnostics
- PNC Arts Center (Monmouth): LabCorp

Q: Where/How do I obtain my COVID-19 test results?

A (LabCorp): Your COVID-19 sample was processed by LabCorp. To access your results, you can go to www.labcorp.com/results. Once you arrive at this website, you can Register for an account, or, if you already have an account with LabCorp, you can simply Sign In.

A (Quest): Your COVID-19 sample was processed by Quest Diagnostics. To access your test results, you can go to www.MyQuestdiagnostics.com. Once you arrive at this website, you can Create an Account, or, if you already have an account with Quest Diagnostics, you can simply Sign In.

Q: What information do I need to Create an Account?

A (LabCorp): You will need to enter the following information to create an account:

- First Name, Last Name
- Gender
- DOB
- Address (Street, City, State, Zip Code)
- Phone Number
- Email Address
- SSN

A (Quest): You will need to enter the following information to create an account:

- Full Name
- DOB
- Full Address (including city, state, zip code)
- Phone Number (10-digit)

Q: What information do I need to Sign Into an existing account?

A (LabCorp): You will need to enter the following information to sign into an existing account: your email and the password you created.

A (Quest): You will need to enter the following information to sign into an existing account: the username and password you created.

Q: When will my results be available?

A (LabCorp): Your results will be available on the LabCorp patient portal 2 business days after your results are in

A (Quest): Your results will be available on the Quest patient portal 48 hours after your results are in.

I was tested at a county testing site, not one of the FEMA sites. The lab they used was BioReference (not LabCorp or Quest). How do I get those results?

If the testing site required you to get a prescription from your doctor/health care provider to be tested, your provider should contact you when your results are ready. However, individuals who were at testing sites that use BioReference to test specimens, can check results by visiting the BioReference portal at: www.bioreference.com/patient-portal/

I heard I can get tested for COVID-19 at a commercial laboratory (i.e., LabCorp and Quest)?

These tests must be ordered, and specimens collected by health care providers in their offices. Testing is not available at individual lab offices (i.e., local LabCorp or Quest labs). Do not go to a commercial lab and ask to be tested for COVID-19. Work with your health care provider to coordinate testing. All costs and fees associated with commercial laboratories is the responsibility of the patient.

Not everyone who has a mild illness needs to be tested, and it may take several days to get test results. The most important thing is to stay home if you are ill. You do not need approval from public health officials to be tested by a commercial laboratory.

Should “contacts of contacts” be tested?

No, being the contact of someone who has close contact with a person who has COVID-19 does not warrant testing. For example, you have a coworker whose family member is a confirmed case. You would not need to be tested. Despite coming into contact with the coworker, you did not have close contact with the person who actually has COVID-19.

What you can do is monitor yourself for symptoms and practice good hand hygiene. If you notice that you have symptoms and feel that you need to be medically evaluated, contact your health care provider and stay home/do not go to public gatherings or work.

I was told by my employer that I need to get tested for COVID-19 since I was out of work after having respiratory symptoms (e.g., coughing, sneezing, influenza, bronchitis).

Sick people should remain home. Once recovered, testing is available for individuals who are symptomatic and asymptomatic. Check the [COVID19.nj.com/testing](https://www.covid19.nj.com/testing) website for locations near you. Or contact your health care provider.

I was told that if I call out of work sick, I must get a doctor’s note saying I do not have COVID-19 in order to return to work.

This requirement will increase those going to work sick. Calling out of work to rest and recover from a mild illness is common during this time of year. Testing for COVID-19 is not recommended as a way to allow people to go back to work.

Is there any cost to the patient for COVID-19 testing?

If testing is done at the NJDOH public health lab under strict guidance from public health officials, there is no charge for the testing. Additionally, county-run testing sites do not charge a fee.

However, at private clinics/commercial labs, there may be a charge for the medical care provided, assessing patients, writing prescriptions, and collecting the specimen. These costs would be the responsibility of the patient. Some facilities do not accept insurance and are self-pay only. Call the facility before you get screened and ask about the cost of the testing.

How is the novel coronavirus diagnosed?

Symptoms of COVID-19 are very similar to other common illnesses such as the flu or the common cold. Healthcare providers can tell whether you have symptoms that could be COVID-19 but can’t make the diagnosis without a diagnostic test (nasal swab or saliva test).

I was recently diagnosed with coronavirus, does this mean I have 2019-nCoV (COVID-19)?

Coronavirus is the term used for a family of viruses. Just like there are different types of influenza viruses, there are also different types of coronaviruses. Coronaviruses are quite common causes of respiratory infections and tend to circulate in the fall and winter months.

The four most common types of coronavirus are OC43, 229E, HKU1, and NLO63. However, from time to time a new coronavirus will emerge and begin to cause infections in humans. The type of coronavirus is a new type of coronavirus and is infecting people for the first time which means that people do not have any immunity to it. Severe Acute Respiratory Syndrome (SARS) and Middle Eastern Respiratory Syndrome (MERS) were two respiratory illnesses caused by new strains of coronaviruses that made headlines years ago because they emerged suddenly and caused severe respiratory illness.

NOTE: Public information materials for persons who tested COVID-19 positive and/or negative are available on the NJDOH website. Materials are available in both English and Spanish.

Person Tested Positive:

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Instructions_Persons_Who_Test_Positive.pdf

Persons Tested Negative:

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Instructions_Persons_Who_Test_Negative.pdf

CONTACT TRACING

New Jersey will implement the following strategies to build a contact tracing program:

- Incorporate technology
- Use a common data program to support contact tracing efforts
- Partner with the state's colleges and universities to employ public health, social work, and related students as frontline workers.
- Individuals interested in becoming contact tracers, may register at covid19.nj.gov/tracers.

<https://nj.gov/governor/news/news/562020/approved/20200512a.shtml>

What is Contact Tracing?

Contact tracing is a public health tool used to identify those who come into contact with people who have tested positive for many infectious diseases – such as measles, tuberculosis, STDs. Contact tracing is a public health activity that involve working with a patient who has been diagnosed with an infectious disease (case) to identify and provide support to people (contacts) who may have been infected through exposure to a case.

Where can I get more information about contact tracing in NJ?

For more information about contact tracing, what it is and why it is an important public health disease prevention tool, go to: covid19.nj.gov/testandtrace

What types of questions will public health contact tracers ask?

The purpose of the call is primarily to let you know that you may be a contact of a person who tested positive for COVID-19. They will not tell you who the person is but will ask how you are feeling and might recommend that you get tested. Public health contact tracers will ask you if you have any symptoms that may be COVID-19 related, such as cough, fever, shortness of breath. They will ask you locations that you might have visited over the last few days, and if anyone you live with was tested for COVID-19 or has symptoms. A contact tracer will never ask you for information such as your social security number or bank account information.

How did the public health contact tracers get my name and contact info/phone number?

A public health contact tracer should tell you their name and why they are calling. More than likely, your name and phone number were given to them by a person who tested positive for COVID-19. They are calling individuals to let them know that they had close contact with a person who has COVID-19. They will not tell you the person's name or anything other than you were in contact with a person who tested positive for COVID-19.

A public health contact tracer will contact you first by phone. If they are unable to get a hold of you, they may come to your home. Remember, the contact tracer's job is to provide education, information, and support to individuals so they understand their risk, what they should do to separate themselves from others who are not exposed, monitor themselves for illness, and the possibility that they could spread the infection to others even if they themselves do not feel ill.

What should I do if I am called by a public health contact tracer?

Answer the phone and speak with the contact tracer. The reason you have been called is because you may have come into contact with an individual confirmed to have COVID-19. Public health contact tracers are here to let you know about the risk to you and your family and what you can do to protect them and your community.

A public health contact tracer will work with you to identify your "close contacts" - anyone who was within six feet of you for more than 10 minutes starting two days before you first had symptoms. If you don't have symptoms, they will ask about your activity during the two days before your diagnosis. They will also ask for the phone numbers of anyone you tell us about, so they can be called and cared for. Your identity is kept anonymous and your information confidential. If you tested positive, your contacts will NOT be told that it was you. If you are staying at home during the isolation period, the contact tracer will discuss any needs

2019-Novel_CV-TP-05152020_TOCr.108220.pdf

you may have and can connect you with resources, if needed. **A contact tracer will never ask you for information such as your social security number or bank account information.**

What will the public health contact tracer do with my medical information?

Confidentiality and privacy are important. The public health contact tracer will not reveal your identity to others who you identify as contacts. Contact tracing carries implications both for the confidentiality of the patient diagnosed with an infectious disease and the privacy of individuals the patient identifies as contacts. Sharing the names and contact information of persons who are close contacts, with the public health contact tracer is an important way you can help to reduce the spread of COVID-19 in the community.

SEROLOGY

Can I get the antibody COVID-19 test to see if I am immune?

Serological tests for antibodies have been developed, but data is lacking on the significance and interpretation of these tests. Since this is a new virus, it is unknown if a person who is exposed is immune to future exposures of SARS-CoV-2. Serological testing should currently **not be used** for case detection or public health action. This guidance may change as additional information is known about these tests.

What are antibody tests and what is their purpose?

Here is what we DO know about antibody testing:

- Antibody testing (serology) is performed on blood, plasma or serum specimens.
- The immunoglobulin G (IgG) antibody test cannot be used as a diagnostic test for COVID-19, it is still necessary to do a PCR test on a sample from the respiratory tract.
- A negative serologic test does not exclude prior or current SARS-CoV-2 infection.
- IgG antibodies typically develop 15 days after exposure to the virus.
- A positive IgG test may indicate the following:
 - Past exposure to SARS-COV-2; this will be useful to understand the burden of COVID19 in our state and country.
 - Based upon what we know from other viruses, the presence of IgG suggests the patient may have partial or full immunity to COVID19 compared to a seronegative individual, but we do not have information on the level or duration of immunity.
- There are NO point- of- care (i.e. tests performed in non-laboratory settings) serologic tests presently available on the market that have been reviewed and approved by the FDA. Those serologic tests that have not been approved by the FDA should NOT be used without significant validation studies since they may result in many false positive and false negative results.
- False positive results may occur with any serologic test if patients have been previously exposed to seasonal coronaviruses (which circulate yearly in the U.S. and cause mild cold symptoms).

Serologic tests may be used to identify potential donors for convalescent plasma.

There is still a lot that is not known about the serology for SARS-CoV-2.

If not all antibody tests are approved, which ones are FDA approved antibody tests?

There are currently four FDA approved antibody tests (listed below). Only FDA approved antibody tests should be used, as unapproved tests may lead to false or invalid test results.

- Cellex Inc.: [qSARS-CoV-2 IgG/IgM Rapid Test](#)
- Ortho Clinical Diagnostics, Inc: VITROS Immunodiagnostic Products Anti-SARS-CoV-2 Total Reagent Pack
- Chembio Diagnostic System, Inc: DPP COVID-19 IgM/IgG System
- Mount Sinai Laboratory: COVID-19 ELISA IgG Antibody Test

What is the difference between serology and antibody testing?

Serology testing means testing for antibodies in blood. The terms mean the same thing.

Can I get an antibody test so I can show my employer that I longer have the COVID-19?

Presently, antibody testing is not being used to determine if an employee may go back to work. Having antibodies does not mean that a person is immune to COVID-19.

Should I get an antibody test?

There are limits to COVID-19 serology (antibody) testing. The Infectious Disease Society of America (IDSA) states that antibody tests are not to be used for diagnosis, return-to-work decisions, or to reassure individuals who have antibodies that they are protected: an immune response is not the same as immunity.

Follow-up of infected patients to see if they develop disease in the future is the only way to be certain. Serologic tests are good for epidemiology and research studies and may be evidence of prior infection but having antibody levels do not predict immunity to COVID-19 infection or inform return-to-work decisions.

What do my antibody test results mean?

At this time, there is still a lot that we do not know about the serology. Since this is a new virus, it is unknown if a person who is exposed is immune to future exposures of SARS-CoV-2. What we do know is serology test results do not exclude prior or current SARS-CoV-2 infection. False positive results may occur with any serologic test if persons were previously exposed to seasonal coronaviruses (which circulate yearly in the U.S. and cause mild cold symptoms). Having antibody levels do not predict immunity to COVID-19 infection or inform return-to-work decisions.

NOTE: An infographic for the public about antibody testing is now available on the NJDOH website.

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID-infographic_antibody%20testing.pdf

ISOLATION, QUARANTINE and EXPOSURE

ISOLATION AND QUARANTINE

What is the difference between isolation and quarantine?

Quick answer:

Isolation and quarantine help protect the public by preventing exposure to people who have or may have a contagious disease.

- **Isolation** separates sick people with a contagious disease from people who are not sick.
- **Quarantine** separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

Longer answer:

Isolation separates sick people with a contagious disease from people who are not sick.

- Isolation separates and restricts the movement of sick people so they can't spread disease to healthy people.
- Isolation is a routine procedure in hospitals and healthcare facilities.
- Isolation is voluntary, but in a public health emergency, officials have the authority to isolate people who are sick.

Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

- Quarantined people may or may not become sick.
- Quarantined people may stay at home, so they don't spread disease to healthy people.
- If you are quarantined and you become ill, you can seek medical treatment from a healthcare provider.
- Quarantine is voluntary, but in a public health emergency, officials have the authority to quarantine people who have been exposed to an infectious disease

What is self-isolation?

This is a public health strategy where individuals who are sick and exposed to a confirmed COVID-19 case are separated from well persons. They should not go to work/school or other public places. For possible COVID-19 exposures, self-monitoring is 14 days. People who are asked to self-isolate should stay in a separate bedroom and, if possible, use a separate bathroom and have minimal contact with other persons and pets in the home.

What should I do while I am self-isolation?

It is important that anyone who is self-isolation should monitor their symptoms in case they get worse. It is recommended that people take their temperature with a thermometer at least twice per day. If the symptoms become worse or do not improve AND you feel that you need a medical evaluation, call your health care provider. If you are directed to go to a medical facility, be sure to call ahead and wear a face mask/face covering.

I was told to self-isolate, since I was sick but not able to get tested. When can I resume my normal life and discontinue self-isolation?

Persons with respiratory symptoms who were directed to care for themselves at home may discontinue home isolation when you meet all three criteria listed below:

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 10 days have passed since your symptoms first appeared.

I was tested for COVID-19 and had a lab confirmation of my illness. When may I discontinue self-isolation?

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 10 days have passed since your symptoms first appeared.

Should household members of people who are self-isolating also stay at home?

Household members of confirmed COVID-19 cases should follow the instructions below.

Household contacts of people who are lab confirmed cases of COVID-19 persons who are experiencing symptoms (**symptomatic**) should stay home until:

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND

- At least 10 days have passed since your symptoms first appeared.

Household contacts of people who are lab confirmed cases of COVID-19 persons who have no symptoms (**asymptomatic**): Self-quarantine for 14 days **after** the self-isolation period ends for the person who is the confirmed COVID-19 case.

Is there any support being provided by the state for those who are self-isolating?

The state does not provide support for basic needs when a person is advised to self-isolate. All individuals are encouraged to have an emergency supply of needed items including food, water, medications, pet supplies, baby supplies, etc. in the home to last for at least two weeks in the event they need to remain in the home and restrict their movement.

What is the difference between self-isolation and self-monitoring (also known as self-observation)?

- Self-isolation is for persons who are sick/have symptoms.
- Self-monitoring/self-observation is for persons who are not sick/have no symptoms.

What is self-monitoring (also known as self-observation)?

Self-monitoring is when an individual is not sick/has no symptoms but may have been exposed to a close contact. Persons who are self-monitoring should monitor themselves for symptoms.

EXPOSURE

You mentioned contacts vs. close contacts. What is a “close contact?”

A close contact is defined as being within approximately 6 feet (2meters) of a COVID-19 case for a prolonged period of time (approximately 10 minutes or longer); close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case

OR

Having direct contact with infectious secretions of a COVID-19 case (for example, being coughed on).

I am a close contact of a COVID-19 case. I was told to self-quarantine for 14 days. It is day 10 and I have no symptoms, can I go to work?

No. Symptoms may appear anywhere between 2-14 days. You should continue to isolate yourself and do not go to work/school or public places/gatherings.

I am a close contact of a confirmed COVID-19 case, but I am not sick and have no symptoms. Can I go to work? Can I get tested?

Close contacts of confirmed COVID-19 cases who do not have symptoms of fever, cough or difficulty breathing, should stay home and self-monitor for symptoms for 14 days.

If symptoms appear, you must stay home about be fever-free for at least 3 days (72 hours) without the use of fever-reducing medicine AND symptoms improve AND at least 10 days have passed since symptoms first started. Wash hands frequently and do not go to work/school or public gatherings while self-isolating.

If testing is available for COVID-19, you should consider getting tested.

I am a health care provider and was notified that I may have been exposed to a person who is a confirmed COVID-19 case. What should I do? I have mild symptoms.

Self-isolate at home for at least 3 days (72 hours) until you are fever-free without the use of fever reducing medicine, AND your symptoms have improved AND at least 10 days have passed since your symptoms first appeared. Stay in a separate bedroom from other persons who live in your house and use a separate bathroom (if possible). If available, you may want to get tested for COVID-19. Contact your health care provider if your symptoms get worse. If your symptoms get worse, your health care provider may recommend COVID-19 testing. Wash hands frequently, do not go to work or attend public gatherings while self-isolating. If you go to a medical facility for testing, wear a face mask.

I am an EMS worker. How can I protect myself from getting COVID-19?

Persons needing 9-1-1 services or transportation to the hospital have been told to let EMS and others know they have COVID-19 symptoms and to wear a mask. If they do not have a face mask, give them one as soon as possible.

EMS workers can protect themselves by wearing the appropriate personal protective equipment and practicing good hand hygiene. Be sure that your rig is cleaned after transporting a suspect COVID-19 person or person with respiratory symptoms.

SETTING SPECIFIC

BLOOD and PLASMA DONATION

Can I donate blood during the COVID-19 pandemic?

Yes, blood and plasma donations are needed. See below for specific information about routine blood donations and plasma donation.

Routine Blood donations: Blood donation is an essential service and is urgently needed. Donors should check with the local blood centers (American Red Cross Blood Services, New York Blood Center, Vitalant Blood Center, Miller-Keystone Blood Center) for specific requirements for donations.

When going to donate blood, potential donors will be asked about their health, travel history - both internationally and within the U.S., if they've been tested for COVID-19, and if they've had close contact with someone who may have had COVID-19. Also, at the time of arrival at the blood center, donor staff may take the temperature of potential donors. The blood centers are asking that donations be on an appointment-only basis to maintain safe practices for the donor staff and to consistently follow all social distancing guidelines for donor safety.

Prospective donors should self-defer and **refrain from donating blood** if they have:

1. been diagnosed with or are suspected of having COVID-19. These individuals should refrain from donating at least 28 days after resolution of all symptoms after a diagnosis of COVID-19.
2. cared for, lived with, or otherwise had close contact with individuals diagnosed with or suspected of having COVID-19. These individuals should refrain from donating 28 days after the last possible close contact exposure to a person diagnosed with or are suspected of having COVID-19.
3. traveled either internationally, depending on the country, or within the U.S., depending on the state. These individuals should contact the local blood center for self-deferral requirements from donating.

Blood donations are **not** being screened for COVID-19. Negative COVID-19 test results are not required to donate blood. Do not donate blood if you are experiencing COVID-19 symptoms.

American Red Cross blood donation centers may be found: www.redcrossblood.org. Put in your zip code to locate nearest donation center.

Convalescent plasma donations: (plasma from individuals who tested positive for COVID-19 but are recovered) Prospective donors should contact the local blood centers (American Red Cross Blood Services, New York Blood Center, Vitalant Blood Center, Miller-Keystone Blood Center) or check their websites for the options and specific requirements for collection of convalescent plasma. Prospective donors can also check with their local hospital for availability.

BUSINESSES

I know that K-12 public, private and parochial schools and universities are to close on Wednesday, March 18, 2020, but what about childcare/daycare centers?

Childcare/Daycare centers should make the call to close themselves. Centers should contact the Department of Children and Families (DCF), who licenses childcare/daycare centers in NJ, for guidance and work with their local health department to assess level of risk in the community. Health departments do not license childcare/daycare centers.

I am a family dentist. Should I close my office/When can I re-open my office?

The American Dental Association (ADA) is asking that all dental offices exercise professional judgement and consider availability of appropriate PPE to minimize risk of virus transmission in an April 18, 2020 interim statement and guidance document. Many practices are open for emergency care only. Beginning on March 16, 2020, the ADA called on dentists nationwide to postpone non-urgent dental procedures through April 30, 2020 in order to help slow the spread of COVID-19. Dentists should not send emergency patients to the local hospital emergency department. Dentists have a professional responsibility to care for their patients in an emergency. Please refer to the ADA website (ada.org) for other guidance and recommendations for your practice.

I am a small business owner, when can I open my business?

The Governor recently signed an Executive Order enabling non-essential construction to resume and for curbside pick-up for non-essential retail businesses. This Executive Order (#142) is effective Monday, May 18, 2020. Refer to the Executive Order for more information about the restrictions that must be followed for non-essential businesses to open.

<https://nj.gov/governor/news/news/562020/approved/20200513a.shtml>

My businesses need to remain open during COVID-19. What can I do to keep my employees safe?

- **Practice good hand hygiene:** stop handshaking, clean hands at the door and throughout the day, clean surfaces like doorknobs, tables, desks, handrails regularly (and have employees clean their phones, keyboards, and any other high-touch surfaces).
- **Limit face-to-face meetings and travel:** use videoconferencing when possible, limit meetings to smaller number of attendees, postpone travel.
- **Avoid crowding:** stagger customer flow, require appointments, use online transactions when possible.
- **Handle food carefully:** limit food sharing, ensure food handlers/cafeteria workers practice good hand hygiene.
- **Have employees stay home if:** they are feeling sick or if they have a sick family member in their home.

I am a critical infrastructure essential worker. There was a COVID-19 exposure at my place of business. What is the recommendation for the employees?

The CDC released Interim Guidance on April 8, 2020: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf>

To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community.

A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19. The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic.

Critical Infrastructure workers who have had an exposure but remain **asymptomatic** should adhere to the following practices prior to and during their work shift:

- Pre-Screen: Employers should measure the employee’s temperature and assess symptoms prior to them starting work. Ideally, temperature checks should happen before the individual enters the facility.
- Regular Monitoring: As long as the employee doesn’t have a temperature or symptoms, they should self-monitor under the supervision of their employer’s occupational health program.
- Wear a Mask/Face covering: The employee should wear a face covering at all times while in the workplace for 14 days after last exposure. Employers can issue facemasks or can approve employees’ supplied cloth face coverings in the event of shortages.
- Social Distance: The employee should maintain 6 feet and practice social distancing as work duties permit in the workplace.
- Disinfect and Clean workspaces: Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment routinely.

If the employee becomes sick during the day, they should be sent home immediately. Surfaces in their workspace should be cleaned and disinfected. Information on persons who had contact with the ill employee during the time the employee had symptoms and 2 days prior to symptoms should be compiled. Others at the facility with close contact within 6 feet of the employee during this time would be considered exposed.

What is meant by “critical infrastructure” employees?

According to the interim CDC guidance, this refers to:

- Federal, state, & local law enforcement
- 911 call center employees
- Fusion center employees
- Hazardous material responders from government and the private sector
- Janitorial staff and other custodial staff
- Workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities

Additional considerations for employees:

- Employees should not share headsets or other objects that are near mouth or nose.
- Employers should increase the frequency of cleaning commonly touched surfaces.
- Employees and employers should consider pilot testing the use of face masks to ensure they do not interfere with work assignments.
- Employers should work with facility maintenance staff to increase air exchanges in room.

- Employees should physically distance when they take breaks together. Stagger breaks and don't congregate in the break room, and don't share food or utensils.

This guidance is posted on the NJDOH webpage:

https://www.state.nj.us/health/cd/topics/covid2019_schoolbusiness.shtml

For more information: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf>

CONGREGATE/SHARED HOUSING

What is meant by shared housing or congregate housing?

Shared or congregate housing includes apartments, condominiums, student or faculty housing, national and state park staff housing, transitional housing, and domestic violence and abuse shelters.

Why is congregate housing an issue when it comes to COVID-19?

Shared housing residents often gather together closely for social, leisure, and recreational activities; shared dining; laundry facilities; stairwells; and elevators. Shared housing residents may have challenges with social distancing to prevent the spread of COVID-19.

How can people who live in congregate housing protect themselves?

- Social distance by staying at least 6 feet apart from others that you do not live with.
- Wear cloth face coverings in any shared spaces, not including your room.
- Seek out a "buddy" in the facility who will check on you and make sure you are getting necessities, including food and household essentials.
- Create a list of local organizations you and your household can contact in case you need access to information, healthcare services, support, and resources.
- Create an emergency contact list including family, friends, neighbors, carpool drivers, healthcare providers, teachers, employers, the local public health department, and other community resources.

As well as the usual prevention activities to protect yourself:

- Wash hands frequently.
- Avoid touching eyes, nose, and mouth.
- Stay home when sick.
- Cover coughs or sneezes with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.

What should congregate facilities know about how to keep residents safe?

COVID-19 prevention supplies should be provided in common areas, such as soap, alcohol-based hand sanitizers that contain at least 60% alcohol, tissues, trash baskets, and, if possible, cloth face coverings that are washed or discarded after each use. Non-essential volunteers and visitors in shared areas should be limited or avoided. Staff should avoid entering residents' rooms or living quarters unless it is necessary. Staff should use virtual communications and check ins (phone or video chat), as appropriate.

Are there any recommendation for common spaces or shared facilities, such as kitchens, bathrooms, etc.?

Common spaces: Be flexible, rules may change in common areas. Maintain 6 feet of social (physical) distance between yourself and everyone that you do not live with. This may mean there will be alternatives to activities, cancelled activities, or closed areas. If you see people in areas that are small like, stairwells and elevators, consider going one at a time. Here are some examples of how the rules in common spaces may change:

Shared kitchens, dining rooms, laundry rooms, bathrooms: Access should be available, but the number of people should be restricted so that everyone can stay at least 6 feet apart from one another.

People who are sick, their roommates, and those who have higher risk of severe illness from COVID-19 should eat or be fed in their room, if possible.

Do not share dishes, drinking glasses, cups, or eating utensils. Non-disposable food service items used should be handled with gloves and washed with dish soap and hot water or in a dishwasher.

Sinks could be an infection source and residents should avoid placing toothbrushes directly on counter surfaces. Totes can be used for personal items, so they do not touch the bathroom countertop.

What if a person in congregate housing is sick with COVID-19?

Residences should be notified if someone with COVID-19 could have exposed people in their building. The confidentiality of the person should be maintained by the facility as required by the Americans with Disabilities Act (ADA) and, if applicable, the Health Insurance Portability and Accountability Act (HIPAA).

If possible, designate a separate bathroom for residents with COVID-19 symptoms. Consider reducing cleaning frequency in bedrooms and bathrooms dedicated to persons with COVID-19 symptoms to as-needed cleaning (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill persons.

The sick person, their roommates, and close contacts need to self-isolate – limit their use of shared spaces as much as possible. They should wear a cloth face covering when it is necessary to be in shared spaces and avoid using public transportation, ride-sharing, or taxis.

FOOD and SAFETY

How do I safely interact with cashiers, store clerks and items on store shelves when I must purchase essentials?

Stay home if you are sick, except to get medical care. If you are not sick and must leave your home to purchase essentials – like food, water, or medication – maintain social distancing whenever possible by staying at least six feet from others. If this is not possible, for instance when purchasing an item from a cashier, you should limit contact, cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow, and avoid touching your eyes, mouth, and face. Wear a cloth face covering when in a public setting. Wash your hands with soap and water or an alcohol-based sanitizer thoroughly as soon as possible after the interaction.

A recent study showed that virus that causes COVID-19 survives on surfaces, but it seems to behave like other coronaviruses and may live on surfaces for a few hours or up to several days (depending on the surface): 72 hours on plastic and steel and up to 24 hours on cardboard.

If you think a surface, such as items you purchased at a store, may be contaminated, clean it with simple disinfectant to kill the virus and protect yourself and others. Clean your hands with an alcohol-based sanitizer or wash them with soap and water. Avoid touching your eyes, mouth, or nose.

Is Coronavirus spread through food? Is it safe to eat fruits, vegetables, frozen food, or takeout?

Currently there is no evidence to support transmission of COVID-19 associated with food. Coronaviruses are generally thought to be spread from person-to-person through respiratory droplets.

Researchers have found the COVID-19 virus can live on surfaces for a few hours or up to several days. However, there is likely very low risk of spread from food products or packaging that are shipped over a period of days or weeks at ambient (temperature around you), refrigerated, or frozen temperatures. You can minimize your risk of contracting COVID-19 by following basic food preparation practices like washing produce and other foods well with water, cooking food thoroughly, and washing your hands with soap and water before and after food preparation and before eating.

I'm seeing empty store shelves more than a month after the pandemic started changing our lives. Are there food shortages?

Some foods are temporary out of stock because of unprecedented consumer demand, not a lack of the food system's ability to produce, process and deliver food. The same thing happened with pet food and, in some cases, food for livestock.

The typical grocery store today can carry over 50,000 different food products. And while there are reported outages in some stores of select products, the reality is that most of the food items you typically find in a grocery store remain there. The retail supply chain remains strong. For those products that have been out of stock, manufacturers and retailers of both human and animal foods are working around the clock to replenish shelves. The Food and Drug Administration (FDA) is working closely with the food

industry to monitor for disruptions in the supply chain that could cause shortages and to work on solutions to help avoid that.

Should I wear gloves while grocery shopping?

Latex gloves are not recommended to wear when grocery shopping. Handwashing is recommended. Wash your hands before leaving your home, after leaving the store, and again when you get home. If soap and water are not available, use hand sanitizer with at least 60% alcohol.

Do you have any other safe grocery shopping tips?

- Avoid crowds
- Make a list and shop quickly
- Shop alone, don't bring the family
- Wear a face covering
- Sanitize carts and hands, before and after shopping
- Give the cashier some space or use the self-check out
- Choose no-touch payment when you can
- If you are anxious about grocery shopping, select the pick-up option at your grocery store instead of going inside and doing the shopping yourself

FUNERALS

Can I have an open-casket funeral for my loved one?

At this time, the state of New Jersey does not permit in-person viewings, visitations, or ceremonies with an open casket. Speak with your funeral director to discuss other options such as virtually streaming a ceremony or homegoing service.

Am I at risk if I go to a funeral or visitation service for someone who died of COVID-19?

There is currently no known risk associated with being in the same room at a funeral or visitation service with the body of someone who died of COVID-19. However, please keep in mind that the Governor has restricted gatherings during this time. There should be no physical in-person service. Talk with your funeral director or faith leader about other ways to pay tribute to your loved one and delaying the service/wake/viewing.

Am I at risk if I touch someone who died of COVID-19 after they have passed away?

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

People should consider not touching the body of someone who has died of COVID-19. Older people and people of all ages with severe underlying health conditions are at higher risk of developing serious COVID-19 illness. There may be less of a chance of the virus spreading from certain types of touching, such as holding the hand or hugging after the body has been prepared for viewing. Other activities, such as kissing, washing, and shrouding should be avoided before, during, and after the body has been prepared, if possible. If washing the body or shrouding are important religious or cultural practices, families are encouraged to work with their community cultural and religious leaders and funeral home staff on how to reduce their exposure as much as possible. At a minimum, people conducting these activities should wear disposable gloves. If splashing of fluids is expected, additional personal protective equipment (PPE) may be required (such as disposable gown, face shield or goggles and facemask).

What do funeral home workers need to know about handling people who have died from COVID-19?

Funeral home workers should follow their routine infection prevention and control precautions when handling a decedent who died of COVID-19. If it is necessary to transfer a body to a bag, follow Standard Precautions, including additional personal protective equipment (PPE) if splashing of fluids is expected. For transporting a body after the body has been bagged, disinfect the outside of the bag with a product with EPA-approved emerging viral pathogens claims expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.). Wear disposable nitrile gloves when handling the body bag.

Embalming can be conducted. During embalming, follow Standard Precautions including the use of additional PPE if splashing is expected (e.g. disposable gown, face shield or goggles and facemask). Wear appropriate respiratory protection if any procedures will generate aerosols or if required for chemicals used in accordance with the manufacturer's label. Wear heavy-duty gloves over nitrile disposable gloves if there is a risk of cuts, puncture wounds, or other injuries that break the skin. Additional information on how to safely conduct aerosol-generating procedures is in the CDC's Postmortem Guidance:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html>

Cleaning should be conducted in accordance with manufacturer's instructions. Products with EPA-approved emerging viral pathogens claims are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).

After cleaning and removal of PPE, perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.

Decedents with COVID-19 can be buried or cremated but check for any additional state and local requirements that may dictate the handling and disposition of the remains of individuals who have died of certain infectious diseases.

HEALTH SYSTEM CAPACITY

Field Medical Stations

New Jersey opened Field Medical Stations (FMS) regionally across the state. The FMS are at the Meadowlands Exposition Center in Secaucus (north), the Expo Center in Edison (central) and the Atlantic City Convention Center (south). The FMS will serve as a “step-down” facility for patients that would otherwise go to area hospitals to alleviate pressure on them but can be ramped up for intensive care use. Depending on the need, the FMS may be used for COVID-19 patients. The Meadowlands Expo Center FMS will close over the weekend and operations transferred to East Orange General Hospital.

Information about the FMS current census and number discharged from FMS is now included on the Data Dashboard at covid19.nj.gov

Medical Triage Plan

A medical triage plan was announced on April 13, 2020. This framework outlines decision-making guidance to determine how resources will be allocated in the event a region runs out of lifesaving equipment while caring for an increasing number of coronavirus patients. Shortages in ventilators, PPE and staffing are still concerns. These types of plans are designed to save the most lives possible with the resources that are available and require providers to make the dramatic shift from the patient-centered model to the community-centered model. This type of plan is only able to be enacted when the government declares a public health emergency and only if the hospital is operating in crisis or, under guidelines designed to promote safety and preserve resources.

Hospitals are asked to create triage teams that will conduct the assessments, so patients’ clinicians are not the ones making the decisions.

Non-Congregate Sheltering for Vulnerable Populations

Federal Emergency Management Agency (FEMA) has approved New Jersey’s request to use emergency, non-congregate sheltering for individuals impacted by COVID-19 that do not have the means or ability to isolate themselves.

Non-congregate sheltering option frees up critical space and reduce the likelihood of further community spread, which in turn will save lives. This increased access to housing for vulnerable populations, health care workers, and first responders will allow New Jerseyans to isolate themselves without fear of spreading COVID-19 to family members and their surrounding communities.

FEMA’s approval allows State, county, and local entities to be reimbursed for providing housing at hotels or motels for certain vulnerable populations, including:

- Homeless families who live in congregate shelters with at least one family member who has tested positive for COVID-19;
- Homeless individuals who require quarantine or isolation due to a positive test for COVID-19;

- Children and adults living in congregate living settings, such as group homes, who have tested positive for COVID-19;
- First responders and healthcare workers who do not require hospitalization, but nevertheless need to avoid direct contact with their families due to exposure to COVID-19; and
- COVID-19 positive patients who do not require hospitalization in a traditional setting, but who nonetheless require quarantine and isolation outside their resident to prevent the further spread of the virus.

State, county, and local entities should implement programs in accordance with FEMA guidance in order to seek reimbursement for these COVID-19 costs. Contact the local or county OEM for information about accessing non-congregate sheltering option.

<https://nj.gov/governor/news/news/562020/approved/20200411a.shtml>

LAW ENFORCEMENT

Are there any recommendations for law enforcement personnel?

Law enforcement agencies should encourage all personnel to self-monitor for symptoms before they come to work. Workers who have symptoms (fever, cough, shortness of breath, fever, chills, sore throat, headaches or loss of taste or smell) should notify their supervisor and stay home. At this time, first responders with symptoms are in the high priority category for testing for COVID19.

All persons taken into custody should be given a facemask or cloth face covering to wear. A facemask or cloth face covering may help protect others nearby if these people are infected with the virus that causes COVID19.

- If a person taken into custody exhibits symptoms of COVID-19, the person should be assessed for transport to a healthcare facility for further evaluation and management.
- If law enforcement personnel have direct personal contact with an individual with suspected or confirmed COVID-19, they should immediately use alcohol-based hand sanitizers with at least 60% alcohol, or wash hands with soap and water for at least 20 seconds.
- They should also avoid touching their eyes, nose, and mouth.
- Any uniform items (or other surfaces) that were potentially exposed should be disinfected or cleaned as soon as feasible. For example, the duty belt or other non-porous items can be disinfected using products that are EPA-approved for use against the virus.

LONG TERM CARE/POST-ACUTE/RESIDENTIAL SETTINGS

There have been cases of COVID-19 in residential and long term care facilities across the state. To limit the spread of COVID-19 among residents and staff, the following immediate actions are recommended:

- Restrict persons entering the facility, except in certain compassionate-care situations.
- Actively screen residents and person in the facility for fever and other COVID-19 signs and symptoms, per shift.

- Create separate wing/unit or floor to accept patients/residents with symptoms coming or returning from the hospital. This may mean moving patients/residents in the facility to create a new wing/unit. Limit staff working between wing/units as much as possible.
- Create separate wing/unit to accept COVID-19 positive patients/residents and care for those suspected or confirmed with COVID-19.
- Stop communal dining and all group activities. Encourage patients/residents to stay in their room
- Use telemedicine and alternate means of communication to maintain social distancing orders
- **Implement universal masking of all persons in the facility.**
- Dedicate staff and mobile equipment to a unit/wing to minimize exposures and transmission throughout a facility and in-between facilities.

Review CDC's Strategies to Optimize the Supply of PPE and Equipment at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>.

Long Term Care facilities in need of PPE should complete the form on the COVID19 website:
<https://report.covid19.nj.gov>

I suspect that there was/is misconduct at a NJ long term care or nursing home facility. To whom should I report this and how should I report?

The Attorney General's Office has launched a website where individuals can report misconduct in long term care and nursing home facilities to determine if an investigation should take place. The investigation will determine whether any individuals or entities broke the law and should face civil or criminal penalties for their actions (or lack thereof) during the outbreak. To report, go to: covid19.nj.gov/LTC. The site allows pictures to be uploaded as well as other documents.

Please keep in mind that the website is designed to further an ongoing statewide investigation, not to answer specific questions about a long-term care (LTC) or someone living at an LTC. Investigators will only contact you if they need additional information beyond what you included in your submission. If you are seeking information about a loved one, please contact the LTC directly or file a complaint with the New Jersey Long-Term Care Ombudsman at 1-877-582-6995 or ombudsman@ltco.nj.gov.

I work at a drug treatment program. Is there any special guidance?

Yes, the NJ Department of Human Services-Division of Mental Health and Addictions Services has guidance posted on their website for opioid treatment programs and other addictions providers:
www.nj.gov/humanservices/coronavirus.html

The guidance includes information about planning for reducing incidence and transmission of COVID-19 at facilities, staffing shortages, dosing patients in separate rooms, take-home dosing, and telehealth.

I have a loved one in a long term care facility. I am concerned that they are not telling me about the number of infections (both residents and staff). What should I do?

If you asked the administration for information and they are unresponsive, you may consider calling the NJDOH Health Facility Complaint Line. The health care facility 24-hour NJDOH complaint hotline handles consumer complaints and facility emergencies. Patients, health care facility employees, and other members of the public may file complaints about hospitals, ambulatory surgery centers, home health agencies, nursing homes, assisted living facilities, comprehensive personal care homes, adult medical day care, pediatric medical day facilities, and other licensed acute- and long term care facilities. 1-800-792-9770.

However, you may also lodge a complaint online, by phone, by fax or by mail.

https://www.state.nj.us/health/healthfacilities/file_complaint.shtml

How to File a Complaint about a Health Care Facility

Online

The Division takes on-line complaints. You can file a complaint by phone if you do not want to provide your name.

By Phone

Complaint Hotline: 1-800-792-9770

The 24-hour hotline handles consumer complaints and facility emergencies seven days a week. Patients, health care facility employees and other members of the public may file complaints about hospitals, ambulatory surgery centers, home health agencies, nursing homes, assisted living facilities, comprehensive personal care homes, adult medical day care, pediatric medical day facilities, and many other licensed acute- and long-term care facilities.

By FAX

You may choose to print and complete our Consumer Resident/Patient Complaint Report Form (AAS-60). The FAX line operates 24 hours a day. A Division staff member will review your complaint during regular business hours. When faxing, please include the following information:

- Your specific complaint
- Your name and mailing address including zip code
- Daytime phone number including area code

OR you may submit an anonymous complaint.

For Long Term Care Complaints including nursing homes and assisted living, please fax your information to 609-943-4977. For hospitals and outpatient facility complaints, please fax your information to 609- 943-3013.

By Mail

Please print out and complete the [Consumer Resident/Patient Complaint Report Form \(AAS-60\)](#).

Mail complaints about nursing homes, assisted living, medical day care, comprehensive personal care homes, long-term care facilities, hospitals, ambulatory surgical centers, home health agencies and other ambulatory or long-term care facilities to:

I am afraid for my loved one who lives in a long term care facility. I want to bring them home during the pandemic. Can I do this?

It is recommended that you speak to the administration at the facility where your loved one lives. Discuss with them your concerns and determine the best plan of action for your loved one.

A long term care facility will not admit/readmit my loved one. Why not?

NJ Nursing Homes and Assisted Living Facilities were provided with an emergency conditional curtailment of admissions order on April 13, 2020. This order outlines the steps that facilities must take in order to continue to admit individuals to facilities.

Facilities that are not able to cohort residents (sick, exposed, and not ill/exposed), follow guidance for infection control and maintain adequate staffing, may not accept admissions or readmissions. The order shall remain in effect until the Department lifts the order.

What should long term care facility administrators do/know right now?

Facilities should review their outbreak response plan to determine whether it includes a cohorting plan. If it does not, the facility is directed to implement such a plan which allows for: overall separation of residents, dedicated staff for each cohort, and allowing for necessary space to cohort at the onset of an outbreak.

Additionally, each facility shall identify a minimum of three cohort groups:

1. Individuals who are showing symptoms of COVID-19 or who have tested positive for COVID-19
2. Individuals who have been exposed to someone who has tested positive for COVID-19 or have shown symptoms of COVID-19 (i.e., individuals who are not themselves symptomatic, but may potentially be incubating the virus)
3. Individuals who are not ill and have not been exposed.

Facilities that are not able to cohort residents (sick, exposed, and not ill/exposed), follow guidance for infection control and maintain adequate staffing, may not accept admissions or readmissions.

The facility shall be permitted to accept admission or readmission of individuals if the facility has COVID-19 residents and the facility can cohort residents, follow CDC guidance for infection prevention and control, and maintain adequate staffing.

A facility without any COVID-19 positive residents shall be permitted to accept admissions or readmissions of individuals with or without COVID-19 if the facility has the ability to cohort residents, follow CDC guidance for infection prevention and control, and maintain adequate staffing.

Admissions or readmissions for persons under investigation for COVID-19 is permitted only if they can be placed in isolation.

The facility shall comply with infection control measures as per NJDOH guidance and shall implement outbreak interventions outline in the NJDOH’s Outbreak Management Checklist. Guidance and documents may be found at:

https://www.nj.gov/health/cd/documents/topics/NCOV/COVID_LTC_Recommendations.pdf

https://www.nj.gov/health/cd/documents/topics/NCOV/COVID_Outbreak_Management_Checklist.pdf

When should local health departments reach out to NJDOH’s Health Facility Survey and Field Operations (HFS& FO) regarding issues pertaining to or regarding long term care facilities?

LHDs may reach out to HFS&FO directly by filing an online complaint https://www.nj.gov/health/healthfacilities/file_complaint.shtml or by calling the NJDOH Complaint Hotline: 1-800-792-9770

PPE: Long Term Care facilities are to report their PPE inventory on a daily basis, in accordance with Executive Order 111, to <https://report.covid19.nj.gov>

Facilities in need of PPE can receive PPE based on the information included in this daily reporting and working with their county Office of Emergency Management (OEM).

Staffing: NJDOH does not have an immediate solution to address facilities staffing needs.

Facilities need to:

- 1) Handle staffing internally (i.e., extra shifts, extra pay, contact staffing agencies, et cetera)
- 2) Reach out to sister facilities if owner has more than one long term care facility
- 3) Reach out to county or local OEM for Medical Reserve Corps or other possible resources

If all of those fail, NJDOH can be contacted to determine operational capacity and compliance of the facility.

Admissions to other Facilities: HFS&FO can be contacted if a licensed health care facility is **refusing to admit** a patient/resident that is appropriate for admission/transfer.

Where can I get information/data about COVID-19 cases in long term care facilities in my county/town?

This information/data may be found on the Data Dashboard on the covid19.nj.gov website.

NJ PUBLIC HEALTH & ENVIROMENTAL (PHEL) LABORATORY

When can results be expected if a patient/person was tested by the NJ Public Health and Environmental Lab (PHEL), also known as the state public health lab?

Results from PHEL should be available 24-48 hours after PHEL receives the specimen(s).

How do I submit specimens to be tested at PHEL?

Please visit the PHEL webpage: <https://www.nj.gov/health/phel/>

View the current bulletin about SARS-CoV-2 testing for COVID-19:

<https://www.nj.gov/health/phel/documents/Bulletins/Supplemental%20Bulletin%2020.1.4%20SARS-CoV-2%20Testing%20at%20PHEL.pdf>

How do I know if PHEL received my specimens/How do I package the specimens/Where do I send specimens for PHEL testing?

Questions or technical assistance with specimen collection, packaging or shipping should be directed to the NJ Public Health and Environmental Laboratory-Virology Program at 609-530-8516 or virology.PHEL@doh.nj.gov

How are results of PHEL tested specimens communicated?

PHEL provides negative test results via email to NJDOH Communicable Disease Service staff and other contacts identified at intake. Positive results are relayed via phone. All results (both positive and negative) are provided via email and fax to the submitting laboratory.

PUBLIC TRANSPORTATION**As a transit station worker/bus transit operator/rail transit operator, how can I protect myself?**

Potential sources of exposure include having close contact with a passenger with COVID-19 or by touching surfaces contaminated with coronavirus.

- Limit close contact with others by maintaining a distance of at least 6 feet, when possible.
- Avoid touching surfaces often touched by passengers.
- Practice routine cleaning and disinfection of frequently touched surfaces, following the directions on the cleaning product's label.
- Use gloves if required to touch surfaces contaminated by body fluids.
- Proper hand hygiene is an important infection control measure. Wash your hands regularly with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer containing at least 60% alcohol.
- Key times to clean hands include:
 - Before, during, and after preparing food
 - Before eating food
 - After using the toilet
 - After blowing your nose, coughing, or sneezing
- Additional workplace-specific times to clean hands include:
 - Before and after work shifts
 - Before and after work breaks

- After touching frequently touched surfaces, such as fareboxes and handrails
- Avoid touching your eyes, nose, or mouth.

Which public transportation station surfaces should be cleaned? What are the best cleaning chemicals to use when cleaning?

Perform routine cleaning and disinfection of all frequently touched non-porous surfaces within the transit station on a daily basis. These include kiosks, ticket machines, turnstiles, benches, handrails, garbage cans, door handles, payphones, restroom surfaces (e.g., faucets, toilets, counters), elevator buttons, and system maps. If the surfaces are visibly dirty, they should be cleaned prior to disinfectant application. For soft or porous surfaces, remove any visible contamination if present and clean with appropriate cleansers indicated for use on these surfaces.

Wear the personal protective equipment (PPE) required for using the cleaning and disinfection products according to the product manufacturer's instructions. After removing PPE, wash your hands with soap and water for at least 20 seconds. Work uniforms worn during cleaning and disinfecting should be laundered afterwards. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Clean your hands after handling laundry by washing your hands with soap and water or using an alcohol-based hand sanitizer with at least 60% alcohol if soap and water are not available.
<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator.html>

SCHOOLS

Schools will remain closed through the end of the 2019-2020 school year. All learning will continue remotely.

Citing the need to protect the health of New Jersey's 1.6 million public and private school students as well as thousands of educators and support staff, Governor Phil Murphy on May 4, 2020 announced that statewide school closures will be extended through the end of the 2019-2020 academic year. Private schools with longer academic years will remain closed until at least June 30. While the prohibition of in-person instruction will be maintained through the end of the school year, public schools will continue to provide remote learning for students to allow districts to meet the state-required minimum of 180 instruction days. <https://nj.gov/governor/news/news/562020/approved/20200504a.shtml>

TRAVEL

Due to the rapidly changing situation, travel recommendations and countries with various levels of travel alerts are subject to frequent updates. Please refer callers to the CDC website Coronavirus Disease 2019 Information for Travel page at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>. This webpage provides information about travel in the US, travel health notices, returning from international travel, cruise ship travel, and travel FAQs.

Questions regarding exposures on commercial flights

If callers have concerns about exposures to COVID-19 on commercial flights, please refer to the document “Risk Exposure Categories for Asymptomatic Individuals with Possible Exposure to 2019-nCoV.”

If travelers are returning to the United States from any flight (regardless of destination) and are identified as having an exposure to a confirmed COVID-19 case while on the flight, the CDC will notify any passengers who were deemed to be at risk based upon their seating location in relation to the case (within 2 rows of a passenger with confirmed 2019-nCoV. Roughly 2 rows in any direction).

Travel to Alaska, Florida, and Hawaii

Governors from Alaska, Florida, and Hawaii are asking travelers from states with high cases of COVID-19 to not visit. This includes New York, New Jersey or Connecticut. Governors from these states used orders mandating a 14-day quarantine upon arrival for all visitors and residents arriving at state airports.

Alaska: Travelers arriving at state airports will be required to fill out a mandatory State of Alaska Travel Declaration Form and identify their “designated quarantine location”, which would be home for residents and a hotel room or rented lodging for visitors. The state’s order requires travelers to go straight to their quarantine location from the airport and remain there for 14 days, or for the duration of their stay if it’s shorter. People in self-isolation can leave only for medical emergencies or to seek medical care, and they are not allowed to have visitors other than a health care provider. Violators in Alaska will face a maximum \$25,000 fine or up to one year in jail, according to the state.

Florida: Requires people arriving on flights from the New York Tri-State area – NY, NJ, and CT -to quarantine for 14 days or for the length of their stay if that time is shorter. The mandate makes exceptions for airline employees, military, health and emergency personnel. Those who self-quarantine are responsible for the costs of isolation including transportation, food, lodging and medical care, according to the state. Anyone who violates the quarantine order in Florida is subject to a second-degree misdemeanor punishable by a 60-day jail sentence and up to a \$500 fine, the executive order says.

Hawaii: Mandates all visitors and residents arriving at airports in the state to self-quarantine for 14 days.

According to the state, travelers will be required to complete a Hawaii Department of Agriculture form on their flight and present it to checkpoint staff after landing. The travelers must then go straight to the "designated quarantine location" that they identify on the form and remain there for 14 days or the length of their stay if it is shorter.

Those in self-isolation can leave the location only for medical emergencies or to seek medical care. They also can't have visitors unless it's a health care provider. In Hawaii, violating the order is a misdemeanor punishable by a maximum \$5,000 fine and up to one year in jail, according to the state.

POPULATIONS

CHILDREN

Can you explain the new inflammatory syndrome that is being seen in children?

Multisystem Inflammatory Syndrome in Children (MIS-C) Associated with Coronavirus Disease 19 is a health condition appearing in children in the United States and elsewhere. Some doctors think the condition is related to having coronavirus disease 2019 (COVID-19), but the connection is still not clear.

MIS-C is similar to other serious inflammatory conditions such as Kawasaki disease and toxic shock syndrome. Children with MIS-C can have problems with their heart and other organs and need to stay in a hospital to receive support in an intensive care unit. MIS-C is a rare condition. However, because it may be life-threatening, it is important that parents know the signs and symptoms, so they can get help right away.

What are the signs or symptoms of MIS-C?

Most children have fever (temperature of 100.4 degrees F or 38.0 degrees C or greater) lasting several days, along with other symptoms. These symptoms may include:

- Fever for more than 24 hours
- Irritability or sluggishness
- Abdominal pain without another explanation
- Diarrhea
- Vomiting
- Rash
- Conjunctivitis, or red or pink eyes
- Enlarged lymph node ("gland") on one side of the neck
- Red, cracked lips or red tongue that looks like a strawberry
- Swollen hands and feet, which might also be red

Is there a case definition for MIS-C?

Yes, the CDC Case Definition for Multisystem Inflammatory Syndrome in Children (MIS-C) was disseminated to states on May 14, 2020. See below for more information.

- An individual aged <21 years presenting with fever, laboratory evidence of inflammation, and evidence of clinically severe illness requiring hospitalization, with multisystem (>2) organ involvement (cardiac, renal, respiratory, hematologic, gastrointestinal, dermatologic or neurological); AND
- No alternative plausible diagnoses; AND

- Positive for current or recent SARS-CoV-2 infection by RT-PCR, serology, or antigen test; or COVID-19 exposure within the 4 weeks prior to the onset of symptoms

Fever >38.0°C for ≥24 hours, or report of subjective fever lasting ≥24 hours Including, but not limited to, one or more of the following: an elevated C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), fibrinogen, procalcitonin, d-dimer, ferritin, lactic acid dehydrogenase (LDH), or interleukin 6 (IL-6), elevated neutrophils, reduced lymphocytes and low albumin

Additional comments:

- Some individuals may fulfill full or partial criteria for Kawasaki disease but should be reported if they meet the case definition for MIS-C
- Consider MIS-C in any pediatric death with evidence of SARS-CoV-2 infection

What is Kawasaki disease?

Kawasaki disease is a fever-causing illness of children. The cause of Kawasaki disease is not known. The symptoms of Kawasaki disease include a high fever usually lasting for at least 10 days and a rash. The rash is usually limited to the person's trunk.

Complications of Kawasaki disease include coronary artery aneurysm (ballooning of vessels in the heart). Other organs may be affected.

NOTE: Do not confuse Kawasaki disease with Coxsackie virus. Coxsackie virus causes hand, foot and mouth disease. Symptoms associated with Coxsackie virus also includes a blister-like rash It causes a blister-like rash that involves the hands, feet and mouth. Coxsackie virus usually occurs in children under the age of 10 but can occur in young adults. The names sound similar but are different illnesses.

What clinical features are health care providers seeing pediatric cases with MIS-C associated with COVID-19?

Health care providers are observing the following:

- Illness characterized by persistent fever and features of Kawasaki disease and/or toxic shock syndrome; abdominal symptoms common.
- Cases may require intensive care unit admission for cardiac and/or respiratory support.
- Polymerase chain reaction (PCR) testing for SARS-CoV-2 may be positive or negative.
- Early recognition and specialist referral are essential, including to critical care if warranted.

Are there any isolation recommendations for children who are exhibiting the symptoms associated with MIS-C?

Kawasaki disease is not transmitted person-to-person. However, children displaying characteristics of inflammatory syndrome have tested positive and negative for COVID-19. If a child's COVID-19 status is unknown or if they are a close contact of a COVID-19 positive individual, follow COVID-19 isolation recommendations.

What is NJDOH doing to investigate cases of **Multisystem Inflammatory Syndrome in Children (MIS-C) Associated with Coronavirus Disease 19?**

NJDOH is working with the CDC, neighboring states, and health care professionals to investigate reported pediatric cases of multi-system inflammatory syndrome associated with COVID-19. Cases characterized by persistent fever and features of Kawasaki disease and/or toxic shock syndrome were reported in the United Kingdom and have recently been identified in children in the United States. Similar presentations have been reported from facilities in New Jersey and the NJDOH is working to gather additional information on these reports. Health care providers are asked to complete and submit a case report form to the NJDOH. Contact the NJDOH Communicable Disease Service with questions about reporting at 609-826-5964. The case report form may also be found on the NJDOH Communicable Disease Service COVID-19 webpage at:

https://www.nj.gov/health/cd/documents/topics/NCOV/NJDOH_CRF_COVID_Peds_Inflammatory_Syndro me.pdf

Who should complete the NJDOH **MIS-C Associated with COVID-19 Case Report Form?**

The form should be completed by the health care provider, infection preventionist, or someone from the health care facility. The completed form should be emailed to pedcov@doh.nj.gov. The NJDOH team will review the form for missing information, coordinate securing medical records, and conduct chart abstraction, if necessary. The information collected on these cases will be included in CDRSS; and Local Health Departments will be informed of cases within their jurisdiction. Contact the NJDOH Communicable Disease Service with questions about reporting at 609-826-5964.

For more information about MIS-C reporting, please refer to the LINC's message sent on May 16, 2020.

Can adults (or persons over the age of 21) get MIS-C?

It is currently unknown if multisystem inflammatory syndrome is specific to children or if it also occurs in adults.

Are children more susceptible to the virus that causes COVID-19 compared with the general population and how can infection be prevented?

At this time, there is no evidence that children are more susceptible. Infections in children have been reported, including in very young children. From limited information published from past Severe Acute Respiratory Syndrome coronavirus (SARS CoV) and Middle East respiratory syndrome coronavirus (MERS CoV) outbreaks, infection among children was relatively uncommon.

Children should practice preventive actions to avoid infection, including cleaning hands often using soap and water or alcohol-based hand sanitizer, avoiding people who are sick, and staying up to date on vaccinations, including influenza vaccine.

Does the illness differ in children compared with adults?

Limited reports of children with COVID-19 in China and the United Kingdom have described cold-like symptoms, such as fever, runny nose, and cough. Gastrointestinal symptoms, such as vomiting and diarrhea, have been reported in at least one child with COVID-19. These limited reports suggest that children with confirmed COVID-19 have generally presented with mild symptoms, and though severe complications (acute respiratory distress syndrome, septic shock) have been reported, they appear to be uncommon. However, NJDOH is aware of a multisystem inflammatory syndrome (MIC-S) associated with COVID-19 in children. NJDOH is working with the CDC, neighboring states, and health care providers to investigate reports of illness.

Are there any treatments available for children with COVID-19?

There are currently no antiviral drugs approved by the US Food and Drug Administration for COVID-19. There is one drug, remdesivir, which has received an Emergency Use Authorization and may have some effect on the disease. It is only used in those severe enough to be hospitalized. Clinical management includes prompt implementation of recommended infection prevention and control measures in health care settings and supportive management of complications. Children and their family members should engage in usual preventive actions to prevent the spread of respiratory infections, including covering coughs, cleaning hands often with soap and water or alcohol-based hand sanitizer, and staying up to date on vaccinations, including influenza.

My child's pediatrician is only open for emergencies. Why is the office closed for regular appointments?

Because of personal, practice, or community circumstances related to COVID-19, some providers may not be able to provide well-child visits, including provision of immunizations, for all patients in their practice. **If a practice can provide only limited well-child visits, healthcare providers are encouraged to prioritize newborn care and vaccination of infants and young children (through 24 months of age) when possible.**

Can my child still go on "play dates"?

It is not recommended. During the COVID-19 outbreak, schools are closed to limit the spread of the virus. The practice of social distancing is public health measure taken to help slow down the spread of a contagious disease by restricting when and where people can gather. These measures can include limiting groups of people coming together.

HEALTHCARE WORKERS (HCWs)

I am an HCW and am being asked to return to work before the recommended self-isolation timeframe ends. Is that OK?

Current NJDOH guidance does not allow for healthcare providers (HCPs) to return to work while still symptomatic (with the understanding that very mild symptoms such as slight cough may persist long periods of time and are not themselves considered to be exclusionary). Our guidance, which follows general CDC guidance, recommends that:

What is being asked of HCWs who work in long term care facilities?

New Jersey's long term care facilities have been asked to implement new mask and resident isolations to slow the spread of COVID-19. As of 4/1/20, the recommendation is for "universal masking of all staff and anyone entering" any long term care facility. Symptomatic residents should also be masked. Facilities are being encouraged to create separate wings, units or floors to separate people with the virus from those who do not have the virus (also known as cohorting).

What is the procedure if a HCW cares for someone with confirmed COVID-19?

HCWs who care for someone with COVID-19 should alert their supervisor to determine if they had a high-risk exposure to the confirmed COVID-19 person and what the next step should be. If the HCW does not have symptoms the next steps to take will depend on the type of contact and what personal protective equipment (PPE) was used.

There may not be additional further action, or the HCW may be asked to quarantine (14 days), or the HCW may be asked wear a mask while working. The HCW should work with their supervisor and occupational health group to determine the best action to take.

If someone in my family tested positive for COVID-19, what should I do?

In general, close contact means being within 6 feet of a person for longer than 10 minutes. Contact your supervisor or employer. Remain on home isolation until you receive additional guidance from your employer on when to return to work and what precautions to take.

Talk to your employer or local/county Office of Emergency Management (OEM) about voluntary isolation at a FEMA-approved facility, possibly a contracted hotel near your residence/work. Facilities have been identified for HCW and others to voluntarily isolate if social distancing within the home is not an option.

I am a healthcare worker (HCW or HCP) who tested positive for COVID-19, when can I return to work?

According to the latest guidance:

- a) **Asymptomatic HCP Tested Positive:** Due to the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness. Asymptomatic HCP who have tested positive for COVID-19 may return to work using one of the below two strategies:

- i) **Time-based strategy:** Asymptomatic HCP who have tested positive for COVID-19 may return to work 10 days after their first positive COVID-19 test AND have had no subsequent symptoms. If symptoms develop, refer to the “Symptomatic HCP Tested Positive” criteria, below.
- ii) **Test-based strategy²:** Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens).
- b) **Symptomatic HCP Tested Positive:** Symptomatic HCP who have tested positive for COVID-19 may return to work once one of the following criteria have been met:
 - i) **Symptom-based strategy:** 10 days after symptoms first developed AND 3 days (72 hours) after fever has resolved without the use of fever-reducing medications with a significant improvement in respiratory symptoms (whichever period is longer).
 - ii) **Test-based strategy²:** Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from at least two consecutive nasopharyngeal swabs specimens collected ≥ 24 hours apart (total of two negative specimens) AND resolution of fever, without use of fever-reducing medication AND improvement in respiratory symptoms.

For more information about this guidance, please refer to the May 5, 2020 LINC message.

What if I’m concerned that I may have exposed a patient?

Healthcare workers are more likely to expose a patient while they are symptomatic and in close contact with a patient. This includes any activity in close proximity to a patient or in an enclosed space with a patient for longer than a few minutes (i.e. physical exams, certain diagnostic procedures, discussions in close proximity). The risk is higher if neither the provider nor the patient was using appropriate PPE during these interactions. If you think your patients may have been exposed to COVID-19, alert your supervisor and infection control practitioner (if applicable). The facility should take the steps necessary to assess the risk to patients and provide patient notification where indicated.

If you are in private practice, then you must take the steps necessary to identify the risk to your patients and notify them as appropriate.

Check the NJDOH website for the latest guidance for HCWs:

https://www.state.nj.us/health/cd/topics/covid2019_professionals.shtml

What if I tested negative, but still feel sick?

If you test negative for COVID-19 but still have symptoms, it is likely you may have another respiratory virus. You should continue to follow similar guidance to isolate yourself from others, practice good hand hygiene and clean and disinfect surfaces in the home. You should not return to work until 72 hours after your fever has ended without the use of fever-reducing medications and your other symptoms have improved. If your symptoms worsen, or if they are not improving after several days, you should speak to your doctor.

HOMELESS

What is being done for the homeless population during COVID-19?

People experiencing homelessness may be at risk for infection during the COVID-19 pandemic. CDC has interim guidance for homeless shelters and interim guidance for responding to COVID-19 among people experiencing unsheltered homelessness.

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html>

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html>

OLDER ADULTS

What about the elderly and people with underlying medical conditions? Are they more at-risk?

The elderly and people of all ages with underlying health conditions seem to be at higher risk for more serious COVID-19 illness. Early data suggest older people are twice as likely to have serious COVID-19 illness. This may be because:

- As people age, their immune systems change, making it harder for their body to fight off diseases and infection.
- Many older adults are also more likely to have underlying health conditions that make it harder to cope with and recover from illness.

If you are at increased risk for COVID-19 complications due to age or a severe underlying medical condition, it is especially important for you to take actions to reduce your risk of exposure.

These people should also speak to their health care provider ahead of time to have a plan in place in the event they become sick. By talking to your health care provider ahead of time you can have a plan in the event that you do become ill if community spread of the virus occurs in your area. You can determine together what medications you may need to have on hand, make plans for any additional supportive care, or decide at what point the doctor would actually like for you to come into the office for an exam or at what point you should go to a hospital for medical support as needed.

On March 8, 2020, CDC recommended travelers, particularly those with underlying health issues, defer all cruise ship travel worldwide. CDC also recommends that older adults and travelers with underlying health issues avoid situations that put them at increased risk for more severe disease, including non-essential travel on long plane trips.

I am an older adult How can I protect myself?

The CDC developed a checklist of actions that older adults can take to protect themselves.

<https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/checklist.html>

If I get the pneumonia vaccine, will that protect me from COVID-19?

No. Vaccines against pneumonia, such as pneumococcal vaccine and the Haemophilus influenza type B (HiB) vaccine do not provide protection against COVID-19. Although vaccination against pneumonia and seasonal flu is recommended to protect your health in general.

PETS & ANIMALS

I need to have my pet spayed, but I can't find a spay/neuter clinic that is open. Why have they been closed?

On March 27, 2020, Governor Murphy issued an Executive Order (# 109) calling for the suspension of all "elective" surgeries and medical and dental procedures for adults. Although the order did not specify veterinary procedures, many veterinarians chose to suspend these services to preserve personal protective equipment (PPE), which is currently in great demand and short supply.

The NJ Veterinary Medical Association (NJVMA) encourages all NJ veterinarians to suspend elective surgeries, non-emergency procedures, and well visits in order to limit exposure risk and conserve needed personal protective equipment. Veterinarians should use their clinical judgment when deciding which procedures are essential. The NJDOH low-cost spay/neuter program continues to reimburse enrolled facilities for eligible surgeries. NJDOH does not have the authority to mandate that a spay/neuter clinic, or any private animal hospital remain open or to determine what services are provided.

I need to license my dog but can't get a rabies vaccination from my primary veterinarian. Are rabies vaccines essential?

Yes, rabies vaccines (and other vaccines) are essential services to protect both human and animal health. If your veterinarian is unable to give your pet his/her rabies vaccine, try calling other vets in the area to see if they can provide rabies vaccine to your pet. You can also contact your municipality and ask about local rabies clinics. Some municipalities are extending their licensing periods due to the pandemic (the license period may be extended through June 30th). NJ has not waived rabies vaccination requirements.

The animal hospital I bring my pets to has closed due to COVID-19 concerns. If they are considered essential, don't they have to stay open to take care of our pets?

No. As essential service providers, veterinary practices can stay open, but there is no requirement that veterinary practices must remain open for business. If your animal hospital has closed, they should provide reasonable options for emergency clinics.

I work at an animal hospital, and I need guidance on determining which of the services we offer are considered essential vs elective.

Veterinarians should use their clinical judgment when determining what services are essential. The NJ Veterinary Medical Association (NJVMA) has guidance on veterinary issues, including questions to consider when making decisions on elective vs non-elective care:

https://cdn.ymaws.com/njvma.org/resource/resmgr/hot_topics/COVID_19_3.21.20_FB_Live_QA_.pdf

Veterinarians should follow recommendations for social distancing and infection control: COVID-19 And NJ Veterinary Practices: (https://cdn.ymaws.com/njvma.org/resource/resmgr/covid_19_njvma.pdf)

I own a veterinary hospital, and I want to close my business for now, because I am immunocompromised. Do I have to stay open since veterinarians are considered essential?

No. As essential businesses, veterinary hospitals are permitted to remain open for business, while implementing social distancing practices, but they are not mandated to remain open. If you close your hospital it is recommended the following ways to serve your clients:

- Have information about the closest emergency clinic on your voicemail, business entrances, and website.
- Send an email notification of the closure to all clients and include information about the closest emergency clinic.

I am a house call veterinarian. Am I permitted to continue to make house calls during the COVID-19 “shelter-at-home” rules?

Yes, you may continue to make house calls for essential services, if you can do so safely while following infection control and social distancing guidelines. Here is a helpful resource:

<https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19/mobile-housecall-veterinarians-covid19-pandemic>

I am an employee at an animal hospital, and I want to know if I am allowed to wear PPE to see my patients. I have heard that some clinics are not letting their staff wear PPE because of the shortage, while others are using too much PPE. Are there any guidelines for us to follow?

The American Veterinary Medical Association (AVMA) has some recommendations about wearing PPE. These recommendations discuss strategies such as postponing elective procedures that require the use of PPE, safely extending the use of disposable PPE, re-using disposable PPE, and increased use of washable PPE. <https://www.avma.org/resources-tools/animalhealth-and-welfare/covid-19/guidelines-ppe-covid-19-pandemic-demand-exceeds>.

Are dog-grooming facilities considered essential?

Yes. Pet groomers have recently been added to the list of businesses that are permitted to remain open.

Are dog shelters allowed to remain open during the COVID-19 shelter-at-home restrictions?

Yes, shelters, pounds, and humane societies are permitted to remain open, although some may have limited hours and services. There are many important functions that need to continue, including reuniting lost pets with their owners, finding adoptive or foster families for abandoned pets, and assisting humane law enforcement with cruelty cases.

Are dog kennels/boarding facilities considered essential?

Pet boarding facilities are included in the list of essential businesses permitted to operate.

I heard that boarding facilities are considered essential, but the one I usually use is still closed. What if I get sick and need to go to the hospital, or I need to board my pet for some other reason. What should I do?

Pet boarding facilities are listed as essential businesses that are permitted to remain open. If you are unable to care for your animal and cannot find a boarding facility, it is best to try to find a friend or family member to help. If this is not possible, and you must board your pet in an emergency, you can sometimes locate a veterinary hospital that would be willing to board your pet.

Another option is to contact your county's Office of Emergency Management (OEM). For more information on managing animals during emergencies, please see the following website:

<https://www.nj.gov/agriculture/animalemergency/cart/>

I volunteer for a non-profit dog rescue group. We have foster families in NJ ready to take in dogs that are being shipped into NJ from another state. Are there any special requirements for movement of animals during the COVID-19 pandemic?

All public gathering is prohibited and therefore an adoption event where people gather to obtain pets for adoption or transfer would not be permitted. Animals transported into New Jersey for adoption or transfer would need to be transferred directly to the foster or owner's home or point of destination with all precautions being adhered to, including face masks and social distancing, hand washing, sanitizing, and continual cleaning and disinfection of surfaces.

Rescue groups and animal welfare organizations transporting animals into New Jersey for adoption shall comply with all applicable local and State laws, rules, and ordinances, including the Charities Registration Section of New Jersey Consumer Affairs and USDA Animal Welfare requirements for transporting animals across state lines in commerce (including adoptions).

My pet has to go to the veterinarian for treatment. How long is COVID-19 viable on my pet's fur, and is it safe for me and my family to handle my pet after treatment if it may have been exposed during the exam?

At this time, it is unknown how long the virus can remain viable on a pet's fur. It is important to practice good hand hygiene, which includes washing your hands for 20 seconds, after touching your pet, and avoid touching your eyes, nose, or mouth with unwashed hands.

I heard about the two cats in New York City who tested positive for the virus that causes COVID-19. What do I need to know?

On Wednesday, April 22, 2020 the U.S. Centers for Disease Control and Prevention (CDC) and the United States Department of Agriculture's (USDA) National Veterinary Service Laboratories (NVSL) announced the first confirmed cases of SARS-CoV-2 (the virus that causes COVID-19) infection in two pet cats. These are the first pets in the U.S. to test positive for SARS-CoV-2.

Public health officials are still learning about SARS-CoV-2, but there is NO evidence that pets play a role in spreading the virus in the U.S. Therefore, there is no justification in taking measures against companion animals that may compromise their welfare. Further studies are needed to understand if and how different animals, including pets, could be affected.

Should I be concerned about pets or other animals and COVID-19?

To date, CDC is aware of a very small number of pets or other animals reported to be infected with COVID-19. However, since animals can spread other diseases to people, it's always a good idea to wash your hands after being around animals.

On April 5, USDA reported the first confirmed case of COVID-19 infection in an animal in the United States. This case is the first confirmed infection in a tiger in the world. This is also the first animal reported to be sick with a confirmed COVID-19 infection in the world.

On April 22, the CDC and USDA reported the first confirmed cases of SARS-CoV-2 in pet cats in the U.S. The cats were from 2 different households, from 2 different areas of NY state. Each cat had mild respiratory illness, and each is expected to make a full recovery. One of the cats came from a household where the owner had been tested positive for COVID-19 prior to the cat becoming ill. The other cat came from a household where no people were confirmed to be ill with COVID-19. This cat was known to go outside occasionally, so is thought to have become infected by an asymptomatic household member, or from someone outside the home.

It's important to remember that dogs and cats have their coronaviruses, which cannot spread to people. Further studies are needed to understand if and how different animals could be affected by COVID-19 and we are continuing to learn more every day. CDC continues to recommend that people sick with COVID-19 isolate themselves from other people and animals, including pets, during their illness until we know more about how this virus affects animals.

Can I have my pet tested for COVID-19?

At this time the CDC does not recommend routine testing of pets. There are many causes of respiratory illnesses in cats and dogs. If your pet is sick, you should contact your veterinarian. If your pet has had contact with someone who has COVID-19, the veterinarian should be informed. If the veterinarian has

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concerns about testing the pet for COVID-19, they need to contact the NJDOH for guidance. In some circumstances, testing may be approved.

If there is a shortage of tests for people, why were the cats in NY tested?

The cats were tested by a lab that uses supplies that are not used for human testing.

My pet is showing signs of respiratory disease. What should I do?

Call your veterinarian with any concerns about your pet’s health. The veterinarian will determine if they need to see your pet. Please let them know if anyone in the household has signs of COVID-19 before visiting the animal hospital.

At this time, we know that in rare situations, cats can become infected with the virus that causes COVID-19, and they may experience mild signs of illness. There is no evidence that cats can spread the disease to people.

Until we know more, the CDC recommends the following:

- Do not let pets interact with people or other animals outside the household.
- Keep cats indoors when possible to prevent them from interacting with other animals or people.
- Walk dogs on a leash, maintaining at least 6 feet from other people and animals.
- Avoid dog parks or public places where a large number of people and dogs gather.

Should I avoid contact with pets or other animals if I am sick with COVID-19?

You should restrict contact with pets and other animals while you are sick with COVID-19, just like you would around other people. Limit contact with animals until more information is known about the virus. When possible, have another member of your household care for your animals while you are sick. If you are sick with COVID-19, avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with pets and wear a facemask.

A pet owner in my town who had COVID and recently passed away. There is no one in the home to care for the animal. What can be done?

The Animal Control Officer (ACOs) or facility receiving the pet should attempt to reach the next of kin or other family members to see if they can provide a home to the animal. ACOs or facilities should ensure the animal is unwanted before offering the pet for adoption. The animal would not need to be held 7 days because it is not a stray, but the family should be contacted in case there is dual ownership, or the family wants the pet. Action should occur quickly, depending on the situation, to ensure that the pet was provided with basic needs, such as food and water. A home receiving a new household animal should follow standard handwashing practices before and after interacting with the animal.

Shelters receiving household animals should ensure they review and adhere to their established biosafety and biosecurity practices for infectious diseases. <https://www.cdc.gov/coronavirus/2019-ncov/php/interim-guidance-managing-people-in-home-care-and-isolation-who-have-pets.html> and follow guidelines from the American Veterinarian Medical Association (AVMA). <https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19/interim-recommendations-intake-companion-animals-households-humans-COVID-19-are-present>

Is it ok to take my pet's ivermectin, a pill that treats parasites, as a coronavirus cure?

Ivermectin is the latest drug highlighted by social and mainstream media to fight against the coronavirus pandemic. The Food and Drug Administration (FDA) is warning people against taking ivermectin to prevent or treat COVID-19. There are reports from other states that people are taking the ivermectin prescribed for pets for the prevention of heartworm disease as a prevention for COVID-19. The FDS reminds people that there is no approved preventative medicine for coronavirus.

I heard there is a coronavirus vaccine for dogs. Should I talk to my vet about getting my dog vaccinated to protect them against COVID-19?

The canine corona vaccines available in some global markets are intended to protect against intestinal coronavirus infection and are NOT licensed for protection against respiratory infections. Veterinarians should NOT use such vaccines in the face of the current outbreak thinking that there may be some form of cross-protection against COVID-a9. There is **absolutely no evidence** that vaccinating dogs with commercially available vaccines will provide cross-protection against the infection by COVID-19, since the intestinal and respiratory viruses are distinctly different types of coronavirus. No vaccines are currently available in any market for respiratory coronavirus infection in the dog.

Additionally, canine intestinal coronavirus can cause intestinal disease (diarrhea) and make parvovirus infection worse. Canine respiratory coronavirus can be involved in cases of "kennel cough" (respiratory disease usually seen in shelter situations). These are both different from the coronavirus that causes COVID-19. Currently there is no evidence that companion animals can spread COVID-19.

PREGNANCY

What is being done to ensure safe care for pregnant patients?

The New Jersey Perinatal Care During COVID-19 Work Group led by the New Jersey Health Care Quality Institute (NJHCQI) published a series of recommendations to ensure safe and equitable care for pregnant individuals and infants throughout the current pandemic. The recommendations focus on safety and accommodations to support pregnant individuals in areas such as:

- Safety and accommodations during prenatal visits
- Advance communications to patients on changes in protocols for arriving at the hospital to deliver
- Protocols for COVID-19 testing of pregnant individuals
- Ways to support patients through labor and delivery when there are limitations on the number of support persons that can be with them in person

- Protocols for suspected or confirmed COVID-19 patients
- Lactation advice for COVID-19 positive patients
- Consideration of resources and supports needed postpartum when hospital discharges may occur more quickly and access to supplies and food can be more challenging due to the statewide health emergency.

To read more about the NJHQCI perinatal work group recommendations, please visit:

<https://www.njhcqi.org/ceo-blog-5-07-2020/>

Are pregnant women more susceptible to infections, or at increased risk for severe illness, morbidity, or mortality with COVID-19, compared with the general public?

CDC does not have information from published scientific reports about susceptibility of pregnant women to COVID-19. Pregnant women experience physical changes which might make them more susceptible to viral respiratory infections, including COVID-19. Pregnant women also might be at risk for severe illness, morbidity, or mortality compared to the general population as observed in cases of other related coronavirus infections [including severe acute respiratory syndrome coronavirus (SARS-CoV) and Middle East respiratory syndrome coronavirus (MERS-CoV)] and other viral respiratory infections, such as influenza, during pregnancy.

Are pregnant women with COVID-19 at increased risk for adverse pregnancy outcomes?

CDC does not have information on adverse pregnancy outcomes in pregnant women with COVID-19. Pregnancy loss, including miscarriage and stillbirth, has been observed in cases of infection with other related coronaviruses [SARS-CoV and MERS-CoV] during pregnancy. High fevers during the first trimester of pregnancy can increase the risk of certain birth defects.

Are infants born to mothers with COVID-19 during pregnancy at increased risk for adverse outcomes?

Based on limited case reports, adverse infant outcomes (such as pre-term birth) have been reported among infants born to mothers positive for COVID-19 during pregnancy. However, it is not clear that these outcomes were related to maternal infection, and at this time the risk of adverse infant outcomes is not known.

Given the limited data available related to COVID-19 during pregnancy, knowledge of adverse outcomes from other respiratory viral infections may provide some information. For example, other respiratory viral infections during pregnancy, such as influenza, have been associated with adverse neonatal outcomes, including low birth weight and preterm birth. Additionally, having a cold or influenza with high fever early in pregnancy may increase the risk of certain birth defects. Infants have been born preterm and/or small for gestational age to mothers with other coronavirus infections. SARS-CoV and MERS-CoV, during pregnancy.

Is there a risk that COVID-19 in a pregnant woman or neonate could have long-term effects on infant health and development that may require clinical support beyond infancy?

At this time, there is no information on long-term health effects on infants either with COVID-19, or those exposed to the virus that causes COVID-19 in utero. In general, prematurity and low birth weight are associated with adverse long-term health effects.

Is maternal illness with COVID-19 during lactation associated with potential risk to a breastfeeding infant?

Human-to-human transmission by close contact with a person with confirmed COVID-19 has been reported and is thought to occur mainly via respiratory droplets produced when a person with infection coughs or sneezes. To date, no evidence of virus has been found in the breast milk of women with COVID-19.

No information is available on the transmission of the virus that causes COVID-19 through breast milk (i.e., whether infectious virus is present in the breast milk of an infected woman). In limited reports of lactating women with COVID-19, the virus has not been detected in breast milk; however, we do not know whether mothers with COVID-19 can transmit the virus via breast milk. Whether and how to start or continue breastfeeding should be determined by the mother in coordination with her family and health care providers.

A mother with confirmed COVID-19 or who is a symptomatic Person Under Investigation (PUI) should take all possible precautions to avoid spreading the virus to her infant, including washing her hands before touching the infant and wearing a face mask, if possible, while feeding at the breast. If expressing breast milk with a manual or electric breast pump, the mother should wash her hands before touching any pump or bottle parts and follow recommendations for proper pump cleaning after each use. If possible, consider having someone who is well feed the expressed milk to the infant.

UNDERLYING CONDITIONS

Who is at highest risk for severe COVID-19 illness?

Older adults and people who have severe underlying medical condition seem to be at higher risk for more serious COVID-19 illness. This includes:

- People 65 years and older
- People who live in a nursing home or long-term care facility
- People of any age with the following underlying medical conditions, particularly those that are not well controlled:
 - Heart disease (includes high blood pressure)
 - Diabetes
 - Lung disease (includes asthma, emphysema, and chronic obstructive pulmonary disease or COPD)
 - Hemoglobin disorders (includes sickle cell disease or thalassemia)

If you are a person with a serious underlying medical condition that can put you at higher risk, stay home and away from other people.

Check out this link for more info: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html>

I have asthma, am I at risk for COVID-19?

People with asthma may be at higher risk of getting infected with COVID-19. The virus can affect your respiratory tract (nose, throat, lungs), cause an asthma attack and possibly lead to pneumonia and acute respiratory disease.

Follow your asthma action plan, take your medication as prescribed, talk to your health care provider, insurer, pharmacist about creating an emergency supply of prescription medications, such as asthma inhalers. Avoid your asthma triggers and clean and disinfect frequently touched surfaces like tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks and hand railings. Check out this link for more info: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/asthma.html>

I am a diabetic and would like to receive an emergency diabetic kit. Can you provide info?

The Diabetes Foundation, Inc, is providing emergency diabetes kits (while supplies last). The kits include the most used diabetes supplies, such as glucose meter, test strips, lancing device and lancets, ketone strips, alcohol swabs, glucose tabs and more. To get a free kit, go to: diabetesfoundationinc.org or call 973-849-5234.

MENTAL HEALTH and STIGMA

MENTAL HEALTH

I am feeling stressed about the novel coronavirus and would like to talk with a mental health professional. Who can I call?

The NJ Department of Human Services operates a toll free “warm line” which is a resource for people seeking mental health service. The warm line is activated during events that impact the mental health of New Jersey residents. The warm line is available 24 hours and has language access; (877) 294-HELP (4357). NOTE: The “warm line” does not replace 911 and is not used to report emergencies.

Mental Health Hotline: 866-202-4357

NJ Hopeline (Peer Support & Suicide Prevention Hotline): 1-855-654-6735

NJ VET2VET: 1-866-838-7654 (Peer hotline for veterans)

Other NJ Hotlines

Child Abuse/Neglect Hotline: 1-877-NJ-ABUSE (1-877-652-2873)

Domestic Violence Hotline: 1-800-572-SAFE (1-800-572-7233)

Family Helpline: 1-800-THE-KIDS (1-800-843-5437)

Are there any coronavirus grief and loss support groups?

Yes, the Atlantic Health System is hosting a Coronavirus Grief and Loss support group. To register call 862-260-3199 (option 3) for an invitation. The support group is web-based and is led by Atlantic Health behavioral health clinicians and social workers.

What are things I can do to support myself and the people I care for during this stressful time?

- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- Take care of your body. Take deep breaths, stretch, or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep, and avoid alcohol and drugs.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others through calls (audio or video), instant messaging, email, letters, or other forms of communication, even if you cannot be together in person.
- Talk with people you trust about your concerns and how you are feeling.

STIGMA

Know the facts about COVID-19 and help prevent the spread of rumors:

- Fight stigma by supporting people who are coming back to school or work after completing their isolation period for COVID-19 exposure or illness.
- Someone who has completed their isolation or met the requirements to discontinue infection control measures does not pose a risk of spreading COVID-19.
- People of Asian descent, including Chinese Americans, are not more likely to get coronavirus than anyone else. Let people know that being of Asian descent does not increase the chance of getting or spreading COVID-19.
- Viruses cannot target people from specific populations, ethnicities, or racial backgrounds.

EXECUTIVE ORDERS AND LEGISLATION

EXECUTIVE ORDERS

Executive Order 103: Declares a public health and a state of emergency across all 21 counties in New Jersey, allowing state agencies and departments to utilize state resources to assist affected communities.

<https://nj.gov/governor/news/news/562020/approved/20200309b.shtml>

Executive Order 104: Implements aggressive social distancing measures to mitigate further spread of COVID-19. This order closed all public and private preschool, elementary, and secondary schools, as well as institutions of higher education. Order also mandates all non-essential retail, recreation and entertainment businesses cease daily operations from 8am-5pm. Restaurants may only offer delivery and/or takeout. Order also specifies a limit to gatherings to 50 people or fewer.

<https://nj.gov/governor/news/news/562020/approved/20200316c.shtml>

Executive Order 105: Implements changes to upcoming elections to further mitigate the spread of COVID-19 and ensure that voters can exercise their right to vote without risking their health and safety.

<https://nj.gov/governor/news/news/562020/approved/20200319a.shtml>

Executive Order 106: Protects residents from eviction for renters and foreclosure for homeowners.

<https://nj.gov/governor/news/news/562020/approved/20200319c.shtml>

Executive Order 107: Issues a statewide stay at home order and closure of all non-essential retail businesses, and orders businesses to allow employees to telework (where practical) may be accessed here:

<https://nj.gov/governor/news/news/562020/approved/20200320j.shtml>. This order was updated to identify additional businesses as essential:

<https://nj.gov/governor/news/news/562020/approved/20200324b.shtml>

- **ADMINISTRATIVE ORDER:** On April 27, 2020, Governor Phil Murphy and Superintendent of the State Police Colonel Patrick Callahan announced an Administrative Order clarifying which businesses are permitted to operate and ways in which certain businesses may operate in accordance with Executive Order 107. The Administrative Order states the following:
- 1) Pet grooming businesses, pet daycare, and pet boarding businesses and 2) stores that principally sell items necessary for religious observation or worship shall be considered essential retail businesses.
- Car dealerships may permit customers that have ordered and/or purchased a vehicle online or by phone to test drive the vehicle at the time of pick-up or prior to delivery, provided the dealership adopts social distancing policies, the individual is given access to the vehicle alone, and the dealership appropriately cleans and sanitizes the vehicle after such test drive if the customer does not purchase the vehicle.
- Licensees, owners, operators, employees, or independent contractors of personal care services facilities are not permitted to provide personal care services in their own homes, the homes of others, or in any facility or business setting unless the individual personal care service provider is

providing the service to their household members, immediate family or other individuals with whom the personal care service provider has a close personal relationship, such as those for whom the personal care service provider is a caretaker or romantic partner. A prior business relationship alone does not qualify as a close personal relationship.

- **ADMINISTRATIVE ORDER:** On May 7, 2020 Governor Phil Murphy and Superintendent of the State Police Colonel Patrick Callahan announced an Administrative Order clarifying that recreational and entertainment activities prohibited under [Executive Order No. 107 \(2020\)](#) are also prohibited from taking place within the brick-and-mortar premises of essential retail businesses that are permitted to remain open. Under the order, recreational and entertainment activities are also prohibited within the facilities of public, private, and parochial preschool programs, or elementary and secondary schools, including charter and renaissance schools that remain closed to students.

Executive Order 108: Invalidates any county or municipal restriction that might conflict with any of the provisions in Executive Order 107. This includes permitting municipalities and counties to restrict online marketplaces for arranging and offering lodging. This Administrative Order gives municipalities and counties the ability to impose additional restrictions on the ability of hotels, motels, guest houses, or private residences, or parts thereof, to accept new transient guests or seasonal tenants after 8:00 p.m. on Sunday, April 5. <https://www.nj.gov/governor/news/news/562020/20200320j.shtml> and <https://nj.gov/governor/news/news/562020/approved/20200404a.shtml>

Executive Order 109: Suspends all elective surgeries, invasive procedures to preserve essential equipment and hospital capacity. <https://nj.gov/governor/news/news/562020/approved/20200323b.shtml>

Executive Order 110: Directs all child care centers to certify that they will serve as emergency child care centers by March 27, 2020. Those who do not certify as emergency child care centers must close by April 1, 2020 and remain closed through the school closure period. <https://nj.gov/governor/news/news/562020/approved/20200325a.shtml>

Executive Order 111: Requires all designated health care facilities to report their daily number of ventilators, bed capacity and personal protective equipment (PPE) inventory to the NJ Office of Emergency Management and the NJ Department of Health. <https://nj.gov/governor/news/news/562020/approved/20200328d.shtml>

Executive Order 112: Removes barriers to health care professionals joining NJ's COVID-19 response and provides protections for front line health care responders. This includes temporarily re-activating licenses of recently retired health care professionals and granting temporary licenses to doctors licensed in foreign countries. Also permits certain health care providers to perform acts outside of their ordinary scope of practice. <https://nj.gov/governor/news/news/562020/approved/20200401b.shtml>

Executive Order 113: Authorizes the New Jersey State Director of Emergency Management to use the Governor's full authority under the Disaster Control Act to commandeer personal services and/or real or personal property. This includes medical supplies and equipment from private companies and institutions in order to help meet the continued need for ventilators and Personal Protective Equipment (PPE) in the State in hospitals, health care facilities, and emergency response agencies due to the ongoing outbreak of COVID-19. <https://nj.gov/governor/news/news/562020/approved/20200402c.shtml>

Executive Order 114: Orders that the U.S. and New Jersey flags be flown at half-staff at all state buildings and facilities indefinitely starting Friday, April 3rd, in recognition and mourning of all those who have lost their lives and been affected by COVID-19.

<https://nj.gov/governor/news/news/562020/approved/20200403a.shtml>

Executive Order 115: Allows retirees to return to State and local government employment without impacting their retirement pensions and removing restrictions on law enforcement's ability to temporarily supplement their ranks. Governor Murphy's Executive Order also enrolls newly hired State employees in the State Health Benefits Plan (SHBP) immediately upon hire. The SHBP enrollment only applies to new State employees hired in connection with COVID-19 response efforts.

<https://nj.gov/governor/news/news/562020/approved/20200406b.shtml>

Executive Order 116: Extends certain statutory deadlines for school districts with elections in May, including 1) the governing body of the municipality presenting and certifying a tax levy to the county board of taxation and 2) districts giving notice to nontenured teaching staff members whether they will be employed for the following year. Governor Murphy previously signed Executive Order No. 105, which postponed school board elections scheduled for April 21, 2020 until May 12, 2020.

<https://nj.gov/governor/news/news/562020/approved/20200407a.shtml>

Executive Order 117: Waives 2019-2020 statutory school year assessment requirements for eighth grade students and twelfth grade students who have not yet met the graduation assessment requirement due to the ongoing COVID-19 pandemic. <https://nj.gov/governor/news/news/562020/approved/20200407c.shtml>

Executive Order 118: Closes all state parks and forests and county parks to further social distancing measures. <https://nj.gov/governor/news/news/562020/approved/20200407d.shtml>

Executive Order 119: Extends the Public Health Emergency declared on March 9, 2020 through Executive Order No. 103. Under the Emergency Health Powers Act, a declared public health emergency expires after 30 days unless renewed. This order extends all Executive Orders issued under the Governor's authority under the Emergency Health Powers Act. It also extends all actions taken by any Executive Branch departments and agencies in response to the Public Health Emergency presented by the COVID-19 outbreak. <https://nj.gov/governor/news/news/562020/approved/20200407e.shtml>

Executive Order 120: Postpones primary elections on Tuesday, June 2nd to Tuesday, July 7th in response to the ongoing COVID-19 pandemic. This includes primaries for President, the U.S. Senate, the U.S. House of Representatives, the 25th District of the New Jersey Legislature, and county and municipal elections, as well as county committee elections. Last month, Governor Murphy issued Executive Order No. 105, which delayed certain elections set to take place in March and April until May 12th. <https://nj.gov/governor/news/news/562020/approved/20200408a.shtml>

Executive Order 121: Allows an increase in the maximum weight limit on certain interstate highways and toll roads from 80,000 pounds (40 tons) tons to 92,000 pounds (46 tons) for vehicles transporting COVID-19 relief supplies. <https://nj.gov/governor/news/news/562020/approved/20200408d.shtml>

Executive Order 122: Ceases all non-essential construction projects and imposing additional mitigation requirements on essential retail businesses and essential industries to limit the spread of COVID-19 in New Jersey. This order requires the use of face coverings when in public space and limits the number of persons permitted in stores. The order also outlines specific protections and policies for all essential retail, manufacturing, and warehousing businesses, as well as businesses engaged in essential construction projects. All non-essential construction must end by Friday, April 10, 2020 at 8pm. <https://nj.gov/governor/news/news/562020/approved/20200408e.shtml>

- **ADMINISTRATIVE ORDER:** On May 2, 2020, declares construction of new religious facilities or involving existing religious facilities to be essential construction projects. <https://nj.gov/governor/news/news/562020/approved/20200502c.shtml>

Executive Order 123: Extends grace periods during which certain insurance companies, including health insurers, life insurers, and property and casualty insurers, will not be able to cancel policies for nonpayment of premiums. <https://nj.gov/governor/news/news/562020/approved/20200409a.shtml>

Executive Order 124: Establishes a process by which the Department of Corrections may grant temporary reprieve to certain at-risk inmates during the public health emergency. The Governor's Executive Order creates the Emergency Medical Review Committee to make recommendations on which inmates should be placed on temporary home confinement through the Commissioner's statutory furlough authority. All recommendations to place an individual on home confinement will be made after thorough review and consideration of the conditions that an individual may face in the community. <https://nj.gov/governor/news/news/562020/approved/20200410d.shtml>

Executive Order 125: Imposes additional mitigation requirements on NJ TRANSIT and all private carriers to limit the spread of COVID-19. The order also outlines specific policies on restaurants that have remained open for takeout orders. <https://nj.gov/governor/news/news/562020/approved/20200411b.shtml>

Executive Order 126: Prohibits cable and telecommunications providers from terminating Internet and voice service due to nonpayment until 30 days after the current public health emergency has ended. The order also mandates that all service downgrades, service reductions, or late fees due to nonpayment are prohibited unless they are imposed in accordance with a policy approved by the New Jersey Board of Public Utilities. Additionally, any Internet or voice service that was disconnected after March 16 due to nonpayment must be reconnected.

<https://nj.gov/governor/news/news/562020/approved/20200413b.shtml>

Executive Order 127: Extends various deadlines associated with rulemaking for state agencies until 90 days following the end of the public health emergency. The order additionally allows for any rules or emergency rules that would expire during the current public health emergency to be extended until 90 days following the end of the public health emergency.

<https://nj.gov/governor/news/news/562020/approved/20200414a.shtml>

Executive Order 128: Provides additional options to tenants who are struggling financially as result of COVID-19, allowing tenants to direct their landlords to use their security deposits to offset rent or back rent. This executive order waives provisions of statutory law that prohibit the use of security deposits for rental payments, enabling tenants to instruct landlords to use their security deposits to offset rent or back rent. Tenants will not be obligated to make any further security deposit relating to their current lease agreement but would still be responsible for any monies landlords expend that would have been reimbursable via the security deposit as outlined in the original contract (i.e. damage to the property). However, should the tenant and landlord extend or renew their lease, then the tenant would be obligated to replenish the security deposit in full either six months following the end of the Public Health Emergency established by Executive Order No. 103 (2020), or on the date on which the current lease agreement is extended or renewed, whichever is

later. <https://nj.gov/governor/news/news/562020/approved/20200424c.shtml>

Executive Order 129: Extends Retired Officer Carry Permits by a period of 90 days until after the ongoing Public Health Emergency ends. The order also creates a process for individuals seeking to obtain or renew a Carry Permit to demonstrate the ability to safely handle and use a handgun as required by existing law. Executive Order No. 129 extends Retired Officer Carry Permits that expire during the term of Public Health Emergency declared in Executive Order No. 103, including those that expired after the issuance of Executive Order No. 103, until 90 days after the Public Health Emergency ends. The order further creates a process for applicants seeking to obtain or renew a Carry Permit to complete training, practice, or testing required by law, including by granting access to shooting ranges. Shooting ranges that are closed to the public under Executive Order No. 107 may only offer access to the above individuals, and must comply with social distancing practices where practicable.

<https://nj.gov/governor/news/news/562020/approved/20200427c.shtml>

Executive Order 130: Allows municipalities to extend the grace period for property tax payments due on May 1st to June 1st. Such an extension would provide much-needed relief to homeowners struggling

financially as a result of the COVID-19 pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200428a.shtml>

Executive Order 131: Creates a commission charged with advising the administration on the timing and preparation for New Jersey's recovery from the COVID-19 shutdown. The Governor's Restart and Recovery Commission will be comprised of 21 members, all with a vast wealth of experience in health care, business, finance, academics, and economics. The Commission will begin virtual meetings immediately as the administration tackles the work of restarting the state and putting New Jerseyans back to work. Among the Commission's first tasks will be to advise the governor on the timing of the restart as it aligns with predetermined public health metrics. This Commission will stay empaneled as long as necessary to inform the restart and recovery of the state's economy.

<https://nj.gov/governor/news/news/562020/approved/20200428b.shtml>

Executive Order 132: Allows county and municipal clerks to accept initiative and referendum petitions electronically and allowing signatures for these petitions to be collected electronically. Under Governor Murphy's executive order, a generic template of the online form for electronic signature and submission requirements shall be created and available for use by May 1, 2020. County clerks and municipal clerks shall require that signatures for initiative and referendum petitions be gathered electronically. Hand signatures obtained prior to the effective date of this Executive Order shall also be accepted.

<https://nj.gov/governor/news/news/562020/approved/20200429a.shtml>

Executive Order 133: Reopens state parks and golf courses and restores the authority of county governments to determine whether county parks will be open or closed. The order takes effect at sunrise on Saturday, May 2. The order allows State parks and forests to open to the public for passive recreation, including fishing, hunting, boating, canoeing, hiking, walking, running or jogging, biking, birding, and horseback riding. Picnic areas, playgrounds, exercise stations and equipment, chartered watercraft services and rentals, swimming, pavilions, restrooms, and other buildings and facilities, such as visitor centers, interpretive centers, and interior historical sites, shall remain closed at this time. To limit physical interaction, the State parks and forests must implement reasonable restrictions that include:

- Limiting parking to 50% of maximum capacity and prohibiting parking in undesignated areas;
- Prohibiting picnics;
- Requiring social distancing to be practiced except with immediate family members, caretakers, household members, or romantic partners; and
- Banning organized or contact activities or sports; and gatherings of any kind.

The order also recommends that people wear a cloth face covering while in public settings at the parks and forests where social distancing measures are difficult to maintain.

<https://nj.gov/governor/news/news/562020/approved/20200429c.shtml>

Executive Order 134: Orders that the U.S. and New Jersey flags be flown at half-staff at all state buildings and facilities on Friday, May 1st, in recognition of the passing of former First Lady of New Jersey Debby Kean. <https://nj.gov/governor/news/news/562020/approved/20200430d.shtml>

Executive Order 135: Suspends in-person requirements for receipt of a marriage license and marriage ceremonies, and for the receipt of working papers for minors. Under the executive order, individuals may use videoconferencing technology for the licensing process and the marriage ceremony. The order also suspends the 72-hour waiting period between the license application and issuance, extends the period that a license is valid from 30 to 90 days, and waives fees imposed for the issuance of a second marriage or civil union license if the original has expired. Additionally, minors seeking to certify their working papers with a school designated official will be permitted to do so through videoconference. Individual school districts will craft procedures that satisfy the statutory requirements without requiring in-person contact. <https://nj.gov/governor/news/news/562020/approved/20200501d.shtml>

Executive Order 136: Extends statutory deadlines required under environmental laws for the length of New Jersey's public health emergency. The order, which suspends timeframes for certain permit decisions and reporting, will ensure greater opportunities for public engagement while enabling the New Jersey Department of Environmental Protection (DEP) to conduct thorough environmental reviews. Among the directives, Executive Order No.136 includes the following:

- Pauses or delays timeframes governing the Department's provision of public notice, review and decisions on permits and other approvals for the duration of the public health emergency, including those which would deem applications approved without conditions deemed necessary by DEP to ensure protection of public health, safety and the environment.
- Extends deadlines for soil and fill recycling services under the Dirty Dirt Law by the number of days of the Public Health Emergency declared in Executive Order No. 103 (2020) plus an additional 60 days.
- Extends the July 1, 2020 deadline for the governing body of each municipality to submit its yearly recycling tonnage report to DEP by 60 days.
- Extends the August 1, 2020 deadline for recyclers, manufacturers, collection locations and local government units who collect electronic devices to submit their semiannual report to DEP by 60 days.
- Directs DEP to identify where public comment periods must be extended to ensure adequate public participation.

<https://nj.gov/governor/news/news/562020/approved/20200502d.shtml>

Executive Order 137: Rescinds Executive Order No. 73 (2019), which directed the Department of the Treasury to achieve a \$1.276 billion surplus by the end of this current fiscal year. The executive order states the following:

- Executive Order No. 73 (2019), which is today being rescinded, required the State Treasurer to monitor the achievement of budget savings, monthly revenue collections, and other factors including usage and enrollment trends, legislative activity, and other developments directly affecting fund balances throughout Fiscal Year 2020, and to take any necessary actions to ensure that the estimated closing undesignated fund balance plus the balance in the rainy day fund, when added together, total at least \$1.276 billion.
- In March, the State Treasurer disseminated a voluntary disclosure regarding the severe impacts that the COVID-19 pandemic is expected to have on the State's economy and financial condition,

including declines in revenues in gross income taxes, corporate business taxes, sales taxes, motor fuels taxes, casino-related taxes, and lottery sales, among other sources of revenue in both Fiscal Year 2020 and Fiscal Year 2021, as well as negative impacts on liquidity due to the extension of the State tax filing deadline from April 15, 2020 until July 15, 2020.

- In early April, in response to the unprecedented fiscal effects of the COVID-19 pandemic, including the decision of the federal government to defer its tax filing deadline from April 15, 2020 until July 15, 2020, the end of Fiscal Year 2020 was extended by law for three months from June 30, 2020 until September 30, 2020.

The Governor's executive order also authorizes and directs the State Treasurer and the Director of the Division of Budget and Accounting to continue, update, and expand, as necessary, their ongoing actions and activities in response to the COVID-19 pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200504c.shtml>

Executive Order 138: Extends the Public Health Emergency declared on March 9, 2020 through Executive Order No. 103 and extended on April 7 through Executive Order No. 119. Under the Emergency Health Powers Act, a declared public health emergency expires after 30 days unless renewed. Executive Order No. 138 extends all Executive Orders issued under the Governor's authority under the Emergency Health Powers Act. It also extends all actions taken by any Executive Branch departments and agencies in response to the Public Health Emergency presented by the COVID-19 outbreak.

<https://nj.gov/governor/news/news/562020/approved/20200506a.shtml>

Executive Order 139: Orders that the U.S. and New Jersey flags be flown at half-staff at all state buildings and facilities on Friday, May 8th, in recognition of the 75th Anniversary of V-E Day. The flags will also fly at half-staff to honor the victims of COVID-19, pursuant to Executive Order No. 114, which remains in effect indefinitely. <https://nj.gov/governor/news/news/562020/approved/20200508a.shtml>

Executive Order 140: Announces the formation of a statewide council of leaders to advise on New Jersey's restart and recovery from the COVID-19 pandemic. The Governor's Restart and Recovery Advisory Council will work in conjunction with the commission named last week and will bring together leaders from various industry, community, and faith-based groups and institutions across New Jersey to advise state leadership on economic issues impacted by the pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200508c.shtml>

Executive Order 141: Mandates that all local, county, and regional health departments use the CommCare platform to support their contact tracing efforts. The Commissioner of the Department of Health will determine appropriate timing for this requirement. This coordinated regional approach will ensure support, training, oversight, and an accurate and centralized statewide database. The state will bear the cost of this technology platform. <https://nj.gov/governor/news/news/562020/approved/20200512a.shtml>

Executive Order 142: Permits the resumption of non-essential construction, curbside pickup at non-essential retail businesses, and car gatherings for the purpose of drive-through and drive-in events. The construction and non-essential retail provisions will take effect at 6:00 a.m. on Monday, May 18, while the

car gatherings provision will take effect immediately.

<https://nj.gov/governor/news/news/562020/approved/20200513a.shtml>

Executive Order 143: Allows beaches, boardwalks, lakes, and lakeshores to remain open with social distancing measures in place. The Order takes effect on Friday, May 22.

<https://nj.gov/governor/news/news/562020/approved/20200514b.shtml>

Executive Order 144: In an effort to protect all New Jersey voters from the spread of COVID-19, Governor Phil Murphy today signed an executive order to create a modified vote-by-mail election for the July 7th Primary. The order requires that each county's elections officials send vote-by-mail (VBM) ballots to all registered Democratic and Republican voters and send VBM ballot applications to unaffiliated and inactive voters. All VBM ballots and VBM ballot applications will come with pre-paid postage. The order also requires opening a minimum of at least one polling place in each municipality, and provided that there are enough poll workers, a minimum of 50 percent of polling places in each county to provide New Jersey voters who may need access to in-person voting opportunities. Polling locations will be required to follow public health standards including ensuring six feet of distance, requiring poll workers to wear face coverings and gloves, frequent sanitization of high-touch areas, and providing sanitization materials to all individuals at a polling place. <https://nj.gov/governor/news/news/562020/approved/20200515g.shtml>

Executive Order 145: Allows elective surgeries and invasive procedures, both medical and dental, to resume on Tuesday, May 26 at 5:00 a.m. These procedures will resume according to policies that will be issued by the New Jersey Department of Health and the Division of Consumer Affairs by Monday, May 18. This order rescinds the suspension of all elective surgeries and invasive procedures performed on adults, which was instituted beginning on March 27 under Executive Order No. 109 to preserve essential equipment and health care system capacity to respond to COVID-19. Among the directives, Executive Order No. 145 requires that the Department of Health issue policies by Monday, May 18 that will address how elective surgeries and invasive procedures may proceed in health care facilities. Also, by Monday, May 18, the Division of Consumer Affairs will issue policies addressing similar considerations for how elective surgeries and invasive procedures may proceed in outpatient settings that are not licensed by the Department of Health. <https://nj.gov/governor/news/news/562020/approved/20200515i.shtml>

LEGISLATION

Governor Murphy signed A1104 on May 4, 2020, also known as the Hunger Free Students' Bill of Rights Act. The bill seeks to prevent school districts from taking adverse action, such as denial of meals or public identification measures, known as "lunch shaming," against students who have school meal bills that are in arrears. The bill also requires districts to annually provide all parents and/or guardians with the information and forms necessary to maximize participation in programs. Additionally, the bill requires a district's liaison for homeless students to ensure that homeless students receive free meals.

<https://nj.gov/governor/news/news/562020/approved/20200504d.shtml>

Governor Murphy signed legislation (S2357) on April 22, 2020 which will require hospitals to report demographic data to the Department of Health. In conjunction with this signing, the COVID-19 Information Hub has been updated with preliminary racial data that has already been collected. S2357 requires hospitals to report demographic data including age, ethnicity, gender, and race of individuals who have tested positive for COVID-19, who have died from COVID-19, and who have tried to get testing but have been turned away. <https://nj.gov/governor/news/news/562020/approved/20200422b.shtml>

On April 16, 2020, Governor Murphy announces the New Jersey Housing and Mortgage Finance Agency has unanimously voted to suspend rent increases at all eligible properties within the Agency's portfolio, which includes 36,000 rental units across the state. The suspension of rent increases will remain in place until the termination of Executive Order 103. Thereafter, eligible properties in the Agency's portfolio seeking rent increases of up to 1.4% may do so only after 30-day notice is provided to NJHMFA and residents. Any request in excess of this amount must first be reviewed and approved by NJHMFA staff. Homeowners and renters whose ability to pay their mortgage or rent has been impacted by COVID-19 can now seek housing counseling to help prevent possible eviction or foreclosure. These services are available at no cost to the consumer. A full list of participating housing counselors and more details on the program may be found at: www.njhousing.gov/foreclosure

<https://nj.gov/governor/news/news/562020/approved/20200416a.shtml>

Governor Murphy signed legislation (S2374) on April 14, 2020, which expands protections of the Family Leave Act to allow employees forced to take time off to care for a family member during the COVID-19 outbreak with up to 12 weeks of unpaid family leave in a 24-month period without losing their jobs. Under the bill, employees will be eligible for leave to care for a family member as a result of an epidemic of a communicable disease, or efforts to prevent spread of a communicable disease. These job protections will extend to employees requiring leave to provide care or treatment for their child if the child's school or place of care is closed in response to a public health emergency.

<https://nj.gov/governor/news/news/562020/approved/20200414d.shtml>

Governor Murphy signed the following bills into law on April 14, 2020:

A-2371/S-865: Requires large food waste generators to separate and recycle food waste and amends definition of "Class I renewable energy"

A-3901/S-2334: Permits professional and occupational licensing boards to reactivate licensure of certain individuals during state of emergency or public health emergency

A-3903/S-2336: Allows remote notarial acts during Public Health Emergency and State of Emergency declared by Governor in Executive Order 103 of 2020

A-3904/S-2337: Permits use of virtual or remote instruction to meet minimum 180-day school year requirement under certain circumstances

S-2333/A-3910: Provides civil and criminal immunity to certain health care professionals and health care facilities during public health emergency and state of emergency; facilitates issuance of certain temporary licenses and certifications during public health emergency and state of emergency

S-2338/A-3918: "COVID-19 Fiscal Mitigation Act"; clarifies filing and payment deadline for CBT and GIT taxpayers, modifies duration of State Fiscal Years 2020 and 2021, requires certain updates and presentation for State Fiscal Years 2020 and 2021

S-2342/A-3915: Permits nonprofit corporations to allow members to participate in meetings by means of remote communication, and permits nonprofit corporations to hold meetings in part or solely by means of remote communication during state of emergency

S-2349/A-3922: Changes date of 2020 primary election from June 2 to July 7

S-2353/A-3938: Excludes from severance requirements under "Millville Dallas Airmotive Plant Job Loss Notification Act" mass layoffs resulting from coronavirus disease 2019 pandemic

<https://nj.gov/governor/news/news/562020/approved/20200414f.shtml>

REOPENING THE STATE/REGION

Recognizing that their states have one integrated regional economy, NJ Governor Phil Murphy, NY Governor Andrew M. Cuomo, CT Governor Ned Lamont, PA Governor Tom Wolf, DE Governor John Carney and RI Governor Gina Raimondo announced on April 13, 2020 MA Governor Charlie Baker is joining the multi-state council to restore the economy and get people back to work. This announcement builds on the states' ongoing regional approach to combatting the COVID-19 pandemic. The coordinating group will work together to develop a fully integrated regional framework to gradually lift the states' stay at home orders while minimizing the risk of increased spread of the virus.

<https://nj.gov/governor/news/news/562020/approved/20200413e.shtml>

On April 18, 2020 Governors from NJ, NY, and CT announced marinas, boatyards and marine manufacturers will be allowed open for personal use as long as strict social distancing and sanitization protocols are followed. Chartered watercraft services or rentals will not be allowed, and restaurant activity at these sites must be limited to take-out or delivery only, like anywhere else in the three states. This announcement aligns the policies of the three states on this particular service.

<https://nj.gov/governor/news/news/562020/approved/20200418c.shtml>

Governors from NJ, NY, CT, PA, DE, RI and MA announced on April 19, 2020 their appointees to the multi-state council to restore the economy and get people back to work. The appointees include one health expert, one economic development expert and the respective Chief of Staff from each state. <https://nj.gov/governor/news/news/562020/approved/20200419a.shtml>

On April 27, 2020 Governor Murphy announced his vision, "The Road Back: Restoring Economic Health Through Public Health," to restart New Jersey and put the state on the road to recovery. Gov Murphy's stay-at-home Executive Order, which has been in effect since March 21st, will remain in effect in its entirety until further notice. The following six principles and key metrics will guide the process for lifting restrictions and restoring New Jersey's economic health through public health:

- Principle 1: Demonstrate Sustained Reductions in New COVID-19 Cases and Hospitalizations
 - 14-day trend lines showing appreciable and sustained drop in cases, hospitalizations, and other metrics;
 - Hospitals stepping down from functioning under crisis standards of care.
- Principle 2: Expand Testing Capacity
 - At least double current diagnostic testing capacity;
 - Prioritize testing for health care workers, essential personnel, and vulnerable populations;
 - Create a flexible testing plan accessible to all residents;
 - Expand partnerships with institutions of higher education, private-sector labs, and the federal government.
 - Ensure that those who test positive are linked to a health care provider.
- Principle 3: Implement Robust Contact Tracing
 - Recruit and deploy an army of personnel who will identify and follow-up with contacts;
 - Leverage technological data and innovative solutions to increase efficiency;
 - Coordinate the approach of local and state health officials, which will have a coordinated county/regional component.
- Principle 4: Secure Safe Places and Resources for Isolation and Quarantine
 - To the greatest extent possible, provide individuals who do test positive in the future with a safe and free place to isolate and protect others from COVID-19;
 - • Ensure that quarantined contacts are provided supportive services, if needed.
- Principle 5: Execute a Responsible Economic Restart
 - Create the Governor’s Restart and Recovery Commission to advise on the process and recommend responsible and equitable decisions;
 - Plan for a methodical and strategic return to work based on level of disease transmission risk and essential classification;
 - Continuation of social distancing measures where feasible and appropriate;
 - Leverage any available federal funds and programs to support health care, individual, and small business recoveries
- Principle 6: Ensure New Jersey’s Resiliency
 - Learn from the lessons of COVID-19 and prepare for the possibility of a resurgence;
 - Ensure hospitals, health care systems, and other health delivery facilities have inventories of personal protective equipment and ventilators;
 - Build our own state personal protective equipment and ventilator stockpile;
 - Create a playbook for future administrations for the next pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200427b.shtml>

On April 28, 2020, The Governor’s Restart and Recovery Commission was announced. The Commission will be comprised of 21 members, all with a vast wealth of experience in health care, business, finance, academics, and economics and will be chaired by Princeton Professor and former University President Shirley Tilghman and Ken Frazier, Chief Executive Officer of Merck and Co., Inc. The Commission will begin virtual meetings immediately as the administration tackles the work of restarting the state and putting New Jerseyans back to work. Among the Commission’s first tasks will be to advise the governor on the timing of the restart as it aligns with predetermined public health metrics.

Among the major issues to be addressed by the Commission will be immediate questions surrounding the safe restart of society. The Commission will also address both short-term and long-term economic issues as well as areas such as public health, workforce issues, and transportation. The Commission will develop strategies for how the State and Federal government can support the economic recovery of the private sector and identify critical needs for federal support and intervention. Members will advise the administration on potential investments that will speed the recovery and position New Jersey's economy for long-term success. Where possible, the Commission will identify opportunities for various sectors to be rebuilt to be well-positioned for both the economy of today and the economy of the future, while promoting equity for disadvantaged communities. This Commission will stay empaneled as long as necessary to inform the restart and recovery of our state's economy.

<https://nj.gov/governor/news/news/562020/approved/20200428b.shtml>

On May 3, 2020 Governors from NJ, NY, CT, PA, DE, RI, and MA announced a joint multi-state agreement to develop a regional supply chain for personal protective equipment, other medical equipment and testing.

The states will also coordinate policies regarding the inventory of PPE each state's health care infrastructure should have to be prepared for a possible second wave of COVID-19. The states will also coordinate policies on what supplies local governments should have on hand for their First Responders, and if any requirements regarding PPE for the non-for-profit and private sector are needed. The states will then seek to identify suppliers within the country, region or state who can scale to meet the demand of the entire region over the next three months. The goal of this approach is to decrease the potential for disruptions in the supply chain for PPE and medical equipment, including sanitizer and ventilators, and testing, and promote regional economic development.

<https://nj.gov/governor/news/news/562020/approved/20200503a.shtml>

Acting on a commitment to coordinate regional policies in response to COVID-19, Governors from NJ, NY, CT, and DE announced a multi-state agreement to reopen public and private beaches with certain restrictions in place effective, Friday, May 22. This approach will better align the states' policies ahead of the summer months. <https://nj.gov/governor/news/news/562020/approved/20200515a.shtml>

ADDITIONAL RESOURCES and REFERENCES

NON-HEALTH RESOURCES

I am a small business owner and need help during this crisis. Who can I talk with about that?

Call the Business Helpline at 1-800-JERSEY-7 or cv.business.nj.gov

How do I access unemployment benefits during the COVID-19 outbreak?

2019-Novel_CV-TP-05152020_TOCr.108220.pdf

Go to the NJ Department of Labor & Workforce Development: <https://www.nj.gov/labor/worker-protections/earnedsick/covid.shtml>

How do I know what benefits I am entitled to if I was laid-off or if I am unable to work due to school/daycare or daycare closed?

The Department of Labor & Workforce Development has a printable guideline outlining COVID-19 related benefits for persons employed in NJ.

<https://www.nj.gov/labor/assets/PDFs/COVID-19%20SCENARIOS.pdf>

To provide feedback about **New Jersey Transit** during the COVID-19 response, go to the COVID19.nj.gov website and search NJ Transit.

To report a Businesses (Employer, Organization or Entity) in Violation of Non-essential Business Closure (Executive Order 107), go to the website and complete the form: <https://covid19.nj.gov/violation>

Price Gouging?

Excessive price increases are defined as **price increases that are more than 10 percent higher** than the price at which merchandise was sold during the normal course of business prior to the state of emergency. The Division of Consumer Affairs has set up a hotline for price gouging complaints related to coronavirus. Please call 973-504-6240 to report any price gouging concerns.

Unlawful Hoarding of Medical Supplies

To anonymously report unlawful hoarding of medical supplies and/or price gouging of medical supplies, call 866-720-5721 or disaster@leo.gov

Rumor Control

Please visit the FEMA Rumor Control website to distinguish between rumors and facts regarding the response to COVID-19. Rumors can easily circulate within communities during a crisis, stay informed with updated myths and facts related to the federal response.

<https://www.fema.gov/coronavirus-rumor-control>

The NJ Office of Homeland Security also has a webpage to help the public distinguish between facts and rumors/disinformation regarding COVID-19. The page will be updated as more information becomes available. Go to: <https://www.njhomelandsecurity.gov/covid19>

I know New Jersey has an Earned Sick Leave Law. Where can I get more info about this?

<https://www.nj.gov/labor/worker-protections/earned-sick/covid.shtml>

See suspicious online content?

Report it to your local authorities or to the NJ Homeland Security Counterterrorism Watch Desk at 1-866-4-SAFE-NJ or tips@njohsp.gov

I need to renew my driver's license/registration/inspection. What is being done about that?

Motor Vehicle Commission and Inspection stations closure extended through May 11. Many services such as change of address, paying fees, renewing driver's licenses, etc., can be completed online.

Visit the NJ Motor Vehicle Commission for more information:

<https://www.state.nj.us/mvc/press/archives/2020/031320.htm>

PPE Donation

NJ State Police is seeking donations of PPE. Anyone willing to donate equipment is asked to email: ppedonations@njp.org or go to covid19.nj.gov/ppedonations

Unsolicited Goods/Resources

I received an unsolicited offer about resources or donated goods from the private sector. Who should I contact? Forward emails to: [REDACTED]

NOTE: Do not provide this number/email to the public.

File a Complaint against a Business

<https://www.njconsumeraffairs.gov/Pages/Consumer-Complaints.aspx> or AskConsumerAffairs@dca.lps.state.nj.us

Food Assistance and SNAP

Individuals who receive NJ Supplemental Nutrition Assistance Program (NJ SNAP) benefits will receive an extra benefit payment and benefits will be higher in April to help address critical food needs related to the COVID-19 pandemic. To see if you are eligible for food assistance and to apply for NJ SNAP, go to the website: www.NJHelps.org

MISCELLANEOUS

I am a graduating student in Nursing/Pharmacy/Physician Assistant/Respiratory Therapy and I would like to apply for the temporary emergency license. What is the process?

Recent graduates of nursing, physician assistant, pharmacy, and respiratory care therapy programs who have not yet been able to take and pass their licensing exams will be granted temporary emergency licenses. The New Jersey Division of Consumer Affairs will begin accepting applications for the emergency graduate licensure program as of May 5, 2020. The emergency graduate licensure program is open to individuals applying for licensure within six months of graduating from the following programs:

- Accredited registered professional nursing (RN);
- Practical nursing (LPN);
- Physician assistant;
- Pharmacy education and training located in New Jersey; and
- Accredited respiratory care therapy education and training located in any state.

Individuals will not be eligible for the emergency graduate licensure program if they have failed the relevant licensing examination and will be dropped from the program if they fail the exam after receiving an emergency graduate license. With the exception of respiratory care therapists, graduates licensed through this program will be eligible to work only under supervision in an acute care facility licensed by the New Jersey Department of Health. Respiratory care specialists will also be authorized to work under supervision in field hospitals.

The program will end automatically at the conclusion of the COVID-19 state of emergency and public health emergency. The Division may choose to end the program earlier if it determines that it is no longer necessary. In that case, the Division would give licensees 90 days to pass their examination and 120 days to obtain standard licenses. The Division has waived application fees for the emergency temporary license. Graduates can apply for a temporary emergency graduate license online on the Division's website: <https://www.njconsumeraffairs.gov/COVID19/Pages/Emergency-Graduate-Licensure.aspx>

FOR STATE EMPLOYEES ONLY

NJ State employees should go to the Civil Service Commission to view the COVID-19 guidelines and review FAQs regarding time, working from home, sick leave, and other relevant issues

<https://www.nj.gov/csc/employees/covid.html>

From: Kephart, Carla
Sent time: 05/26/2020 03:53:36 PM
To: Carey, Wendy; Christina, Karen; Mahmoud, Kathleen; Jones, Tammy; Baylor, Michelle
Subject: FW: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 22 2020
Attachments: FW: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 22 2020

Sender: ckephart@co.gloucester.nj.us

Subject: FW: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 22 2020

Message-Id:

To: wcarey@co.gloucester.nj.us

To: kchristi@co.gloucester.nj.us

To: kmahmoud@co.gloucester.nj.us

To: tjones@co.gloucester.nj.us

To: mbaylor@co.gloucester.nj.us

From: Kephart, Carla
Sent time: 05/26/2020 03:53:34 PM
To: Carey, Wendy; Christina, Karen; Mahmoud, Kathleen; Jones, Tammy; Baylor, Michelle
Subject: FW: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 22 2020
Attachments: 2019-Novel_CV-TP-05222020fin.108223.pdf

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The County of Gloucester complies with all state and federal rules and regulations against discrimination in admission to, access to, or operations of its programs, services, and activities. In addition, County encourages participation of people with disabilities in its programs and activities and offers special services to all residents 60 years of age and older. Inquiries regarding compliance may be directed to the County's ADA Coordinator at (856) 384-6842/ New Jersey Relay Service 711.



From: NJLINCS Health Alert Network
Sent: Saturday, May 23, 2020 8:59 AM
Subject: Public Health Info: COVID-19 Talking Points and Frequently Asked Questions_05 22 2020
NJLINCS Health Alert Network
Public Health Info

Distributed by the New Jersey Department of Health

Subject: COVID-19 Talking Points and Frequently Asked Questions_05 22 2020

Date: 5/23/2020; 08:58:29

Message#: 104097-5-23-2020-PHIN

Contact Info: Laura Taylor, NJDOH-Communicable Disease Service

Phone: 609-826-5964; Email: laura.taylor@doh.nj.gov

Attachments: 2019-Novel_CV-TP-05222020fin.pdf

Hello! Attached are the updated COVID-19 Talking Points and Frequently Asked Questions (FAQs).

Information for/about seasonal farm workers was added to the "Populations" section.

Please check the NJDOH Communicable Disease Service website often, as there are public education materials (in multiple languages) that are available.

Thank you.

This information has been distributed to: DOH Senior Staff; DOH Staff; LINCS Health Officers; LINCS Health Officer Assistants; LINCS Coordinators; LINCS Coordinator Backups; LINCS Epidemiologists; LINCS Health Educators; LINCS Health Planners; LINCS IT Specialists; LINCS Partnership Coordinators; LINCS Public Health Nurses; LINCS Regional Health Planners; LINCS Team Members; LINCS CD Investigators; LINCS REHS; LOCAL Health Officers; LOCAL Public Health; LOCAL CD Investigators; LOCAL Health Educators; LOCAL Public Health Nurses; LOCAL REHS; LOCAL Epidemiologists; DOH Program Staff; Public Health Associations; Public Health Council

Further distribution of this message should be directed to: Local Boards of Health; and other partners in your region, as appropriate. IMPORTANT NOTE: Please do not use reply feature of your email system. If you have questions about the content of this email or any of its attachments, please call your County/City LINCS agency for assistance. LINCS agencies are instructed to contact the individual listed in message above or on the attachment for questions concerning content.

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Talking Points and Frequently Asked Questions

Name of event: 2019 Novel Coronavirus (COVID-19)

Date/Time: May 22, 2020

****Information in this document is not for public dissemination or public posting****

New information highlighted

Overview of issue/event

- On March 9, 2020, Governor Murphy declared a State of Emergency in response to the COVID-19 outbreak. On March 11, 2020 COVID-19 declared a pandemic by the World Health Organization.
- Governor Murphy extended the public health state of emergency through June 5, 2020.
- Frequently Asked Questions to accompany the Executive Directive (ED #20-013) for long term care facilities to include testing into their outbreak guidance plan were released on Monday, May 18, 2020. They can be found here: <https://nj.gov/health/legal/covid19/>
- Elective surgeries will be permitted to resume effective May 26, 2020. Guidance for facilities was provided earlier this week.
- Each of the 71 hospitals will receive a shipment of remdesivir, amount is based on the amount of current cases at the facility.
- Additional outdoor recreation businesses and community gardens are now able to re-open with social distancing measures.
- Face coverings are recommended while out in public, including outdoors. This includes outdoor areas where there are crowds.
- Additional testing sites open beginning May 22 at various CVS and Walmart stores.
- Reports are increasing about scams, both phone and text, associated with contact tracing. Contact tracers will not ask for social security numbers, bank or credit card information.
- Guidance for seasonal farm workers and employees was released this week. The guidance outlines steps to minimize the spread of COVID-19 throughout the agricultural process and for shared housing, group transportation and screening and caring for individuals with suspected or confirmed COVID-19 infections.
- Governor Murphy signing an Executive Order to lift the limit on outdoor gatherings from 10 to 25 persons; all individuals must adhere to social distancing.

Main messages/Key messages

- All New Jersey residents are encouraged to practice social distancing (stay 6 feet from one another), wash hands often, wear face coverings when in public, and stay home (especially if sick).
- There are two COVID-19 call centers:
 - 1-800-962-1253: For health-related and clinical issues, such as who should get tested, when to seek medical attention and proper steps to take if exposed
 - 211: For information about how to stay safe, financial assistance, unemployment, donations, food, and other non-medical needs
 - COVID19.nj.gov website: Testing sites, case counts by county, and other resources
- Face coverings are to be worn by the public when out in public places, picking up food from restaurants, using public transportation, and in outdoor recreation spaces. Face coverings do not need to be surgical masks, they can be any cloth barrier worn over the nose and mouth. They help prevent community spread.
- Increased testing of vulnerable populations is underway in New Jersey. This includes staff and residents in various settings such as corrections, veterans' homes, psychiatric facilities, and long-term care. Testing of other groups, such as those without transportation to get to drive-in testing sites and seasonal workers, are underway. Expanded testing with private partners such as CVS, Walmart, and Rite Aid is now available.
- COVID19.nj.gov has a Data Dashboard which includes county and state specific data about cases, deaths, hospitalizations, and demographics. It is updated daily.
- Ongoing investigation into Multisystem Inflammatory Syndrome in Children (MIC-S) associated with COVID-19. MIC-S has symptoms similar to Kawasaki Disease/toxic shock syndrome.

Public health recommendations

- Wear a cloth face covering when in public.
- Practice social distancing (keep a 6 feet space between you and others).
- Follow good respiratory hygiene recommendations.
- Cover coughs and sneezes with a tissue or sleeve, not your hands.
- Wash your hands often with soap and water. Use alcohol-based hand sanitizer if soap and water are not available.
- Stay home if you are sick and avoid sick people.
- Review and follow CDC travel advisories when planning travel. If you become ill after returning home to the United States, call your healthcare provider before going to a doctor's office or emergency department of a hospital. Wear a face covering/mask on entering the building to protect other people.
- Stay up to date about COVID-19. If you have COVID-19 questions call 211, 1-800-826-1253, or visit the website at covid19.nj.gov

FREQUENTLY USED TERMS

SARS-CoV-2: The scientific name for the novel 2019 coronavirus. The full name is: Severe Acute Respiratory Syndrome Coronavirus 2.

COVID-19: The disease caused by the virus SARS-CoV-2

Coronavirus: A family of viruses that SARS-CoV-2 belongs to. The 2003 SARS outbreak was a coronavirus, as was the MERS outbreak in 2012.

Pneumonia: A lung infection caused by a bacteria, virus, or fungus. The most common type of pneumonia is bacterial.

Epidemic: Widespread occurrence of an infectious disease in a community at a particular time.

Pandemic: A worldwide spread of a disease. The World Health Organization declared COVID-19 a pandemic on March 11, 2020.

“Flattening the Curve”: An epidemiology term that means to limit the spread of disease in an effort to reduce the number of new cases of disease.

Confirmed cases: The number of cases that have been confirmed through diagnostic testing. Due to a shortage of COVID-19 tests and limited testing criteria, the actual number of cases that exist is likely higher.

Case fatality rate: The death rate. This explains what percentage of COVID-19 cases are fatal.

Asymptomatic: Showing or having no symptoms.

Symptomatic: Actively showing symptoms. For COVID-19, symptoms may include fever, cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste and smell. Persons are thought to be more able to spread COVID-19 if they are experiencing symptoms. At this time, testing for COVID-19 is limited to those who have symptoms.

Isolation: Separates sick people with a contagious disease from people who are not sick.

Quarantine: Separated and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

Ventilator: A machine that helps a person breathe when they cannot breathe on their own.

Personal Protective Equipment (PPE): Items that protect the wearer from injury or infection. Examples of PPE includes goggles, face shields, masks, gowns, gloves, and booties (to cover shoes).

Respirator: A type of facemask that prevents the wearer from inhaling small particles, including viruses. A common type of respirator is an N95 mask.

Droplet: A type of disease transmission. The spray of droplets during coughing, sneezing, and speaking. Droplets are heavy and fall to the ground within a few feet. This type of transmission requires persons to be within close proximity for spread.

Airborne: A type of disease transmission. When viral particles linger in the air and travel long distances for an extended period of time. At this time, it is unknown if/how long the COVID-19 particles remain suspended in the air.

Fecal-Oral: A type of disease transmission. Transmission through feces (poop), which can then contaminate water or food if hygiene is lacking. Washing hands often is a way to reduce fecal-oral transmission. There is limited research that shows that coronaviruses may be present in feces. Good hand hygiene after going to the toilet, helping another person use the toilet, and changing diapers is recommended.

Community spread: Means people have been infected with the virus in an area, including some who are not sure how or where they became infected. COVID-19 seems to be spreading easily and sustainably in the community.

Social distancing: A public health measure put in place to limit people from gathering, with the goal of keeping people 6 feet apart from one another. Since it is thought that droplet spread is the primary way the COVID-19 is transmitted, social distancing will help to reduce the spread of disease.

Underlying conditions: Chronic diseases that are thought to make some persons more at risk for and for developing more severe COVID-19 disease. These diseases include, heart disease, high blood pressure, diabetes, kidney disease, obesity, asthma and other chronic lung problems.

Cleaning: The removal of visible foreign matter from a surface.

Disinfecting: Killing the bacteria and viruses on a surface. It is possible to be clean but not disinfected, and similarly disinfected but not clean.

FEMA: Federal Emergency Management Agency. Located within the Office of Homeland Security, FEMA is responsible to coordinating the government's response to natural and manmade disasters.

Antibody testing (Serology): Antibodies are produced by the body to fight infection and can be found in the blood. If a person is found to have antibodies to a particular virus or bacteria, then it is likely they had been exposed in the past and possible that they may be immune. This type of testing relies on obtaining a blood sample and is often called "serology" or "serologic testing." While there are numerous tests out there designed to test for antibodies to SARS-CoV-2 (the virus that causes COVID-19), there are significant issues associated with them. There is still a lot about SARS-CoV-2 serology that is unknown at this time, and NJDOH recommends that serologic tests should not be used to diagnose acute or prior SARS-CoV-2 infection, nor should they be used to determine immune status to SARS-CoV-2. They may produce false negative or false positive results, the consequences of which include providing patients incorrect guidance on preventive interventions like physical distancing or protective equipment.

Immunoglobulin M (IgM): This is a type of antibody that is made first by the body in response to an infection.

Immunoglobulin G (IgG): This is a type of antibody that is made by the body and replaces IgM and may persist as the antibody response to infection.

Convalescent plasma: Plasma from a person who was tested and diagnosed with COVID-19 and who recovered from the illness.

Contact tracing: The process of identifying, notifying, and interviewing persons who may have come into contact with an infected/infectious person. This process is done to prevent the further spread of disease.

False negative: When a test result incorrectly shows that the absence of a condition (i.e., disease, antibody, etc.), when the condition is actually present.

False positive: When a test result incorrectly shows the presence of a condition (i.e., disease, antibody), when the condition is not present.

Mortality: Deaths in a population.

Multisystem Inflammatory Syndrome in Children (MIS-C): A syndrome found in children and young adults that is associated with COVID-19.

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COVID-19 BASICS

GENERAL INFORMATION

What are coronaviruses?

A coronavirus is a type of common virus that can infect your respiratory tract. They can spread much like cold viruses. Almost everyone gets a coronavirus infection at least once in their life, most likely as a young child. They tend to circulate in the fall and winter.

What is the 2019 Novel Coronavirus (COVID-19)?

Sometimes a novel (meaning “new”) type of coronavirus emerges and begins infecting humans. The type of coronavirus is a new type of coronavirus and is infecting people for the first time, which means people do not have any immunity to it. It is causing an outbreak of respiratory illness.

What is the difference between 2019-nCoV and COVID-19?

These are two different names for the same disease. 2019-nCoV was the original name and this was changed by the World Health Organization on February 12, 2020 to COVID-19 (Coronavirus Disease 2019).

What is the difference between seasonal coronavirus and COVID-19?

Common human coronaviruses usually cause mild to moderate upper-respiratory tract illnesses, like the common cold. Most people get infected with a coronavirus at some point in their lives. Human coronaviruses are not the same as COVID-19.

COVID-19 is a new coronavirus that has not been previously identified. This new virus is spread easily and there is community spread. This means that people have been infected with the virus in an area, including some who are not sure how or where they became infected.

Is it true that drinking alcohol puts people at increased risk for contracting COVID-19?

Excessive alcohol use may put people at increased risk by weakening the body’s immune system and leaving drinkers at risk for other risky behaviors that could increase the likelihood of getting the COVID-19.

Drinking alcohol may also put those with mental health struggles and a history of alcohol-use disorders at greater risk due to increased self-isolation. It may also increase the risk of domestic violence.

Is it true that if you got a flu shot during the 2019-2020 season, you are at higher risk for getting COVID-19?

No. The influenza vaccine does not include any of the coronaviruses. It is also not meant to protect someone from them. While it is true that people who get the flu shot are still able to get infected by other respiratory viruses, they are not more susceptible to get COVID-19 than those who did not get the flu shot.

If I got the flu shot this year, will I automatically test positive for COVID-19?

There is no known connection between the flu vaccine and the novel coronavirus. The flu shot will not affect whether person tests positive for COVID-19.

Does the microwave kill the virus?

Microwaves kill germs in food and water by heating up food items to a high temperature. Attempting to heat other objects in a microwave, like paper or fabric, to disinfect them, can be dangerous and they may catch fire. Do not put objects other than food and water in the microwave.

Is it true that taking ibuprofen to ease COVID-19 symptoms could actually make your symptoms worse?

No, the World Health Organization and other infectious disease experts say that there is no good scientific evidence establishing a link between ibuprofen and worsening of COVID-19.

Is homemade hand sanitizer effective?

The CDC does not advise making hand sanitizer at home. The CDC recommends using commercially available hand sanitizer made with at least 60% alcohol.

Does taking a hot bath prevent COVID-19?

No, taking a hot bath will not prevent you from getting COVID-19. One of the best ways to protect yourself against COVID-19 is by frequently washing your hands. By doing this you eliminate viruses that may be on your hands and avoid infection that could occur if you touch your eyes, mouth, and nose. Wearing a face covering when out in public and social distancing are two other ways to help prevent COVID-19.

Are antibiotics effective in preventing and treating COVID-19?

No, antibiotics do not work against viruses, only bacteria. The new coronavirus (COVID-19) is caused by a virus and antibiotics should not be used as a means of prevention or treatment. However, if you are hospitalized for the COVID-19, you may receive antibiotics since bacterial co-infection is possible.

I heard that the coronavirus remains in the throat for 4 days, causing sore throat and coughing before it reaches the lungs. I was told to drink a lot of water and that gargling with warm water and salt or vinegar eliminates the virus.

While it is true that coronavirus can cause a sore throat and gargling with warm water make it feel better, it has no direct effect on the virus.

Can eating garlic help prevent COVID-19 infection?

Garlic is a healthy food that may have some antimicrobial properties. However, there is no evidence from the current outbreak that eating garlic has protected people from getting COVID-19.

Can regularly rinsing your nose with saline help prevent COVID-19 infection?

There is no evidence that regularly rinsing the nose with saline has protected people from COVID-19 infection. There is some limited evidence that shows regularly rinsing the nose with saline can help people recover more quickly from the common cold. However, regularly rinsing the nose with saline has not been shown to prevent respiratory infections.

Is it safe to go to the gym? Can I get COVID-19 from going to the gym? [NOTE: as of 3/16/20 at 8pm, all gyms and fitness centers should be closed]

Every person must assess their personal health. Individuals who have underlying health conditions should weigh going to the gym and staying away from crowds where they may possibly be exposed to someone with COVID-19. If you do decide to go to the gym, be sure to practice good hand hygiene and stay away from sick people.

Can I get COVID-19 from swimming in a swimming pool?

COVID-19 is mainly spread from person-to-person. There is no evidence that the virus spreads to humans through the use of pools and hot tubs, as long as they are properly maintained and disinfected (e.g., with chlorine and bromine).

Can the COVID-19 virus spread through sewerage systems?

At this time the transmission of the virus that causes COVID-19 through sewerage systems is thought to be low. Although transmission of COVID-19 through sewage may be possible, there is no evidence to date that this has occurred.

Can the COVID-19 virus spread through drinking water?

The virus that causes COVID-19 has not been detected in drinking water. Conventional water treatment methods that use filtration and disinfection, such as those in most municipal drinking water systems, should remove or inactivate the virus that causes COVID-19.

Is the COVID-19 virus found in feces (poop)?

The virus that causes COVID-19 has been detected in the feces of some patients diagnosed with COVID-19. The amount of virus released from the body (shed) in stool, how long the virus is shed, and whether the virus in the stool is infectious are not known. There have been no reports of fecal-oral transmission of COVID-19 to date.

If I had COVID-19 and recovered, am I immune?

It is unknown at this time if a person is immune to COVID-19 if they had it and recovered.

Can COVID-19 be transmitted through mosquito or tick bites?

To date there has been no information nor evidence to suggest that COVID-19 could be transmitted by mosquitoes. COVID is spread primarily through droplets generated when an infected person coughs or sneezes. There is no evidence that COVID-19 or other similar coronaviruses (e.g. SARS, MERS) are spread by mosquitoes or ticks.

Can spraying alcohol or chlorine over your body kill COVID-19?

Spraying alcohol or chlorine all over your body will not kill viruses that have already entered the body. Spraying these substances can be harmful to clothes or mucous membranes (e.g., eyes, mouth). Both alcohol and chlorine can be used to disinfect surfaces, as recommended by the manufacturer.

Is it safe to eat Chinese food?

Here in New Jersey, eating Chinese food does not create any additional risk to being infected with this virus.

Is it safe to receive packages from China?

Coronaviruses do not live very long on surfaces, so it is considered to be very low risk to become infected by handling a package from China. There has been no evidence to support the spread of the virus through imported goods.

Why can't I worship at my church/temple/mosque?

Since the Governor instituted the no gathering Executive Order, many religious services have stopped holding in-person services/gatherings. Many are now live-streaming their services. In some instances, there has been an allowance for private prayer for groups of less than 10 persons. Contact your faith leader to inquire about whether this practice is in place at your place of worship. Additionally, the Governor's recent Executive Order 142 now allows drive-in/drive-thru faith services. All worshipers must stay in their cars.

DATA

When did NJ report its first COVID-19 case?

NJ reported its first COVID-19 case on March 4, 2020.

How many cases/deaths of COVID-19 are there in NJ?

Counts of new cases of and deaths related to COVID-19 in New Jersey are released one time a day and posted to the NJ COVID-19 Dashboard which may be found at either: covid19.nj.gov or nj.gov/health

I saw on social media that there are more cases and more people are sick than what is being reported.

NJDOH has updated information on our website and various social media platforms, such as Facebook and Twitter. Be certain to get information from trusted and credible sources, such as CDC, NJDOH, your local health department and our call center. Misinformation exists, but all are encouraged to check credible sources for the most up-to-date information about COVID-19. New Jersey posts updates on their website: www.nj.gov/health

Why are case counts of COVID-19 from counties different from what the state is reporting?

NJDOH reports new and total COVID-19 cases and deaths one time per day. This is the official case count. Laboratories continue to process specimens and are required to contact the local health departments with results. Sometimes they get results before they are reported to the NJDOH.

What type of information can I find on the COVID-19 Data Dashboard?

The COVID-19 Data Dashboard may be accessed at [COVID19.nj.gov](https://covid19.nj.gov). The information included in the Data Dashboard includes data about the number of cases and deaths and updates of cases in multiple NJ healthcare settings. The information on the Data Dashboard is updated daily.

See below for the type of information listed on each of the tabs within the Data Dashboard (information provided may change):

- **Cases and Trends:** provides overview of total COVID-19 cases and deaths by state and county as well as the percent positivity rate.

- Hospital Census: data collected by the NJ Hospital Association; includes total hospitalizations, discharges, type of care (number of patients on ventilators and number of patients in critical care beds).
- Long Term Care: data provided to NJDOH by each facility; includes facilities with current outbreaks, cases of and deaths from COVID-19 at long term care facilities, includes information about veterans' memorial homes.
- State Psychiatric Hospitals: includes total number of COVID-19 positive patients and staff.
- Demographics: includes total COVID-19 deaths by race/ethnicity, underlying conditions, and deaths by age.

What is included in terms of “discharged” in the “Hospital Census” tab on the Data Dashboard?

This data is provided by the New Jersey Hospital Association. They are including the following in the discharged category: persons who have left the hospital and are now either at home, a rehabilitation facility, hospice, or another healthcare facility.

What types of underlying conditions are most frequently seen in persons who pass away from COVID-19?

Mortality data is included on the “Demographics” tab on the Data Dashboard. The top five underlying health conditions that are most commonly seen in patients who pass away from COVID-19 include: cardiac disease (includes heart disease and high blood pressure), diabetes, other chronic diseases, lung disease (includes asthma, emphysema, and COPD) and renal (kidney) disease. Other diseases also found in persons who die from COVID-19 include neurological disease/neurodevelopmental/intellectual disability, cancer and other. Public health investigations into the hospitalizations and death of persons with COVID-19 are ongoing.

PREVENTION

CLEANING

What type of office school/cleaning should be done if there is a case of coronavirus?

Special sanitizing processes beyond routine cleaning are not necessary or recommended to slow the spread of respiratory illness. Businesses should follow standard procedures for routine cleaning and disinfecting with an EPA-registered product. Typically, this means daily sanitizing of surfaces and objects that are frequently touched. Disposable wipes should be provided so that commonly used surfaces such as doorknobs, keyboards, desks, etc. can be wiped down by employees before each use.

What is the difference between cleaning and disinfecting?

- Cleaning is the removing of visible foreign matter from a surface.
- Disinfecting is killing the bacteria and viruses on a surface. It is possible to be clean but not disinfected, and similarly disinfected but not clean.

People should follow the instructions on the label of cleaning products to ensure that disinfection is done properly. Some products must sit on the surface for a number of minutes before being wiped away in order to be effective.

My facility houses people overnight and there may have been ill persons. What is the best guidance for cleaning?

It is recommended to close off areas used by anyone who is ill or has symptoms and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection.

In areas where ill persons have visited or used, continue routine cleaning and disinfection in the guidance below. More info may be found at: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

How to Clean and Disinfect Surfaces and Linens:

Surfaces

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.

Linens, Clothing and Other items that go in the Laundry

- Do not shake dirty laundry; this minimizes the possibility of dispersing the virus through the air.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items.
- Clean and disinfect hampers or other carts for transporting laundry.

For businesses, more information may also be accessed at: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

For households with suspected/confirmed COVID-19, please check out the most recent CDC information: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/cleaning-disinfection.html>

Are there any special recommendations for cleaning staff at facilities?

Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash. Gloves should be removed after cleaning a room or area occupied by ill persons. Clean hands immediately after gloves. Be sure to clean hands after removing gloves.

Additional personal protective equipment (PPE) might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash (i.e., gowns, gloves, and eye protection). Employers should ensure that employees are trained to put on and safely remove PPE, if it is needed.

Cleaning staff and others should clean hands often, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 second. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used.

<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

What are cleaning recommendations for my home?

Practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, toilets, faucets, and sinks with household cleaners that are appropriate for the surface, following label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

What are the cleaning recommendations in my home if there is someone who is isolating with COVID-19 (suspected/confirmed)?

- Clean and disinfect high-touch surfaces daily in household common areas (e.g. tables, hard-backed chairs, doorknobs, light switches, phones, tablets, touch screens, remote controls, keyboards, handles, desks, toilets, sinks)
 - In the bedroom/bathroom dedicated for an ill person: consider reducing cleaning frequency to **as-needed** (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill person.
- As much as possible, an ill person should stay in a specific room and away from other people in their home.
- The caregiver can provide personal cleaning supplies for an ill person's room and bathroom, unless the room is occupied by child or another person for whom such supplies would not be appropriate. These supplies include tissues, paper towels, household cleaners.
- If a separate bathroom is not available, the bathroom should be cleaned and disinfected after each use by an ill person. If this is not possible, the caregiver should wait as long as practical after use by an ill person to clean and disinfect the high-touch surfaces.

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html>

FACE COVERINGS

Should I wear a facemask in public?

CDC recommends that the public wear a cloth face covering in public settings where other social distancing measures are difficult to maintain, especially in areas with community-transmission. CDC advises that the use of face covering to slow the spread of the virus and help people who have the virus and do not know it from transmitting it to others. ***Cloth face coverings are recommended for the public, not N95s or surgical masks, as those critical supplies should be reserved for health care workers and other first responders.***

NOTE: Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

CDC also recommends everyday preventive actions to prevent the spread of respiratory viruses, such as avoiding people who are sick, avoiding touching your eyes or nose and covering your cough or sneeze with a tissue. People who are sick should stay home and not go into public places.

I can't find/don't have a facemask. How can I make one?

It is not necessary to purchase a facemask. You can make a face covering out of fabric in your home. The CDC has instructions about how to make a face covering here: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Why did the CDC change the recommendation from do not wear masks to wear face coverings?

The recommendations to wear a face covering in public are to prevent those who may have the virus, but do not know it, from passing it to others. Wearing a face covering limits droplet spread when in public when practicing social distancing is difficult to maintain, especially in areas with community-transmission. Social distancing is still the best option to limit the spread of the virus to others.

What is the best type of fabric to use to make a face covering?

Use any fabric that you have at home to make a face covering. Be sure the fabric is breathable. A face covering is simply a physical barrier to another person's coughs and sneezes. Options include a t-shirt, hand towel, bandana, or scarf.

If this disease isn't airborne, then why do we need to wear face coverings in public?

Face coverings can block the droplets that carry the virus. The concept of wearing a face covering in public is important for two reasons:

1. To help block the spread of droplets from someone who has the virus and may not yet even have any symptoms and

2. In instances when social distancing is difficult to maintain, a face covering may also protect the wearer from these droplets

How often should I wash the cloth face covering?

It is recommended to wash the cloth face covering at least once per day or after you are done wearing it for the day.

What is the best way to wash a cloth face covering?

Detergents with bleach-like compounds or other active ingredients should be used when washing face coverings. Machine washing is the best way to wash a face covering. Use the warmest water that the fabric will tolerate. If hand washing is your only option, lather the fabric with soap and scrub for at least 20 minutes with warm to hot water. Washing should be followed by hot air drying.

I heard that wearing face coverings won't protect me from the virus.

Face coverings do work and are especially important to reduce community spread of the virus. While face coverings alone are not a substitution for social distancing, wearing one in public helps protect YOU from others who may have the virus and may not have symptoms or know they are infected. When you wear a face covering, YOU protect others from getting infected.

Explain to me exactly "how" a face covering protects me and others.

Face coverings are recommended when in public places. Remember, a face covering is meant to prevent community spread. Some people have no COVID-19 symptoms and do not know that they have the illness. This means that their face covering catches the small droplets of saliva that exit their mouth when they cough, sneeze, and even talk. When you wear a face covering, YOU protect others from getting infected in these same ways.

Surgical masks and cloth face coverings may not provide complete protection from inhaling another person's respiratory droplets, but this is why it is important that everyone wears a face covering when in public spaces to prevent their droplets from spreading from their nose and mouth.

I don't want to wear a face covering because it is not safe to re-breathe the carbon dioxide that I exhale.

Breathing in too much carbon dioxide can be dangerous. However, there is no evidence that wearing a cloth face covering to go to the store, go for a walk, or run errands would cause carbon dioxide in the blood to rise (also known as hypercapnia).

What is the correct way to wear a face covering?

The correct way to wear a face covering is to make sure that it covers BOTH your nose and mouth. Remember, the virus is spread person-to-person by droplets. These droplets are small, not easily seen and are produced when you sneeze, cough and talk (and sing). Covering both your nose and mouth protects others from breathing in these droplets.

Do I really need to wear a face covering when I am outdoors? Isn't the fresh air good for me?

There has been some confusion over the recommendation about wearing face coverings outdoors. While fresh air is good for you, if you will be in a public space (i.e., store, boardwalk, park) it is recommended that you wear a face covering. Face coverings should be worn when out in crowded public spaces. Remember, you are wearing the face covering to protect others, not yourself. This is something you can do to help prevent the spread of COVID-19. If you stay in your backyard/patio/deck, a face covering is not needed.

NOTE: Public materials about face coverings, how to wear them, and why they are important are available.

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Face_Coverings.pdf

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-face-coverings-information.pdf>

OUTDOORS

NOTE: Governor Murphy opened state and county parks, trails, and golf courses with restrictions on May 2, 2020. Parking at these facilities is limited to 50% capacity and people must maintain social distancing. Wearing of face coverings is strongly recommended. Playgrounds, picnic areas, and restrooms at parks will remain closed. Organized sports at parks are not permitted.

Any suggestions about how to protect myself and others from COVID-19 while enjoying the outdoors?

Staying physically active is one of the best ways to keep your mind and body healthy. People can visit trails and open spaces as a way to relieve stress, get some fresh air and vitamin D, stay active, and safely connect with others. Follow a few Do's and Don'ts when visiting outdoor recreation areas during the pandemic.

DO

Visit parks that are close to your home. Travelling long distances to visit a park may contribute to the spread of COVID-19.

Prepare before you visit. Check with the park in advance to be sure you know which services or areas are open (such as bathrooms).

Stay at least 6 feet away from others ("social distancing") and take other steps to prevent COVID-19. Avoid gathering with others outside of your household.

DON'T

Visit parks if you are sick or were recently exposed to COVID-19.

Visit crowded parks. Do not visit parks where you cannot stay at least 6 feet away from others at all times.

Use playgrounds. Using playgrounds may lead to the spread of COVID-19 because they are often crowded, and social distancing may be difficult to maintain. It can be challenging to keep surfaces clean and disinfected. The virus can spread when young children touch contaminated equipment and then touch their hands to their eyes, nose, or mouth.

Participate in organized activities or sports. Most organized activities and sports such as basketball, baseball, soccer, and football that are held on park fields, open areas, and courts are not recommended. These activities and sports typically require coaches and athletes who are not from the same household or living unit to be in close proximity, which increases their potential for exposure to COVID-19.

Do I need to wear a face covering while exercising outdoors?

The CDC recommends wearing a face covering in public settings where it is harder to stay away from people. If you are exercising in an area where you know you will be crossing paths with a lot of other people, you should wear a face covering. But you should also try to avoid those settings. It is recommended to find less crowded areas and avoid peak hours when others are out exercising.

Any tips about how to wear a face covering when exercising outdoors?

Wearing a face covering makes it harder to breathe when you are exercising. Don't be afraid to slow down and take breaks. Don't push yourself too hard. Select a face covering that is comfortable, stays in place, and covers your mouth and nose. Figure out what type of face covering works best for you when you are outdoors exercising.

Are beaches open? Are people allowed to use them?

Governor Murphy signed an Executive Order (143) that allows beaches and boardwalks to remain open with social distancing measures in place. The Order takes effect on Friday, May 22. The Order explicitly prohibits capacity limitations that discriminate against non-residents, low-income people, and other protected classes. It is recommended that people wear a face covering while in public settings at the beaches, when social distancing measures are difficult to maintain. Restaurants and bars located on the beaches and boardwalks are still limited to delivery and take-out services only and that amusements parks and arcades, and other places of public amusement located on the beaches and boardwalks remain closed. Any outdoor seating, such as tables or benches, must be removed, taped off, or otherwise blocked

What else is open at the shore? What is not open at the shore?

Under Governor Murphy's Executive Order, the following shall remain closed on private and public beaches and boardwalks: water fountains, picnic areas, playgrounds, pavilions, indoor recreational facilities, and other buildings and facilities, such as visitor centers. There is an exception allowing bathrooms, showering areas, and changing areas to stay open.

To limit physical interactions, the Order requires municipalities, lake commissions, private club associations or entities, and other local government to implement reasonable restrictions, including:

- Imposing non-discriminatory capacity restrictions;
- Requiring that members of the public practice social distancing;
- Developing and implementing lifeguard training and beach operation plans that address COVID-19 considerations;
- Removing, taping-off or otherwise blocking all benches and tables;
- Prohibiting the tying together of boats to prevent group gatherings;
- Developing and implementing a continuous public outreach campaign, including signage, social media, town and county websites, mobile device applications, radio, and banner-plane advertising;
- Prohibiting special events such as festivals, concerts, fireworks, and movies;
- Prohibiting all organized or contact activities or sports;
- Limit occupancy in public restrooms; and
- Implementing sanitization protocols.

The restrictions also apply to public piers, docks, wharfs, boat ramps, and boat landings throughout the State. Municipalities, counties, any responsible commission, association, or unit of county or local government, and private beach clubs may impose additional restrictions to the ones listed above and retain the legal authority to close beaches or boardwalks if they choose to do so. Due to the diverse nature of the shore and lake communities, the Order does not mandate specific social distancing measures.

Examples of social distancing measures left to a municipality's discretion include but are not limited to the following:

- Identifying six feet of spacing in any areas where the public may form a line;
- Limiting the number of lifeguards to each stand or tower, maintaining social distance between lifeguards, and adding stands or towers as necessary;
- Installing physical barriers between the public and employees in ticket or beach badge sale booths; and
- Limiting occupancy of ticket or beach badge sales booth to one person at a time.

What about lakes and lakeshores? Does the Executive Order include them, too?

Yes, Executive Order 143 applies to beaches, boardwalks, lakes and lakeshores. Refer to the information above.

RESPIRATORY, HAND HYGIENE & PERSONAL PROTECTIVE EQUIPMENT (PPE)

What is respiratory hygiene?

Respiratory hygiene refers to ways that we can prevent the spread of germs via the respiratory route of infection. This includes coughing and sneezing into a tissue and then properly disposing of the tissue. You can also cough or sneeze into your sleeve. For more information about respiratory hygiene see the CDC website at <https://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm>

If I am in close contact with someone who has coronavirus should I wear a surgical mask protect myself from becoming infected?

The new CDC recommendation is to wear a cloth face covering when out in public. A face covering is different from a mask, as it can be made out of items found in the home and is simply used to cover the face. Face coverings protect the wearer from individuals who may be sick. Wearing face coverings, practicing frequent hand washing, and social distancing are good prevention activities.

Health care workers should follow all infection control guidance when caring for patients who are suspected or confirmed cases of 2019-nCoV (COVID-19).

What is a respirator?

A respirator is a personal protective device that is worn on the face or head and covers at least the nose and mouth. A respirator is used to reduce the wearer's risk of inhaling hazardous airborne particles (including infectious agents), gases or vapors. A commonly referred to respirator is N95.

What's the difference between a facemask and a respirator?

Unlike NIOSH-approved N95s, facemasks are loose-fitting and provide only barrier protection against droplets, including large respiratory particles. No fit testing or seal check is necessary with facemasks. Most facemasks do not effectively filter small particles from the air and do not prevent leakage around the edge of the mask when the user inhales. The role of facemasks is for sick patients to wear to prevent contamination of the surrounding area when they cough or sneeze.

Where can I find more information about use of expired respirators when supplies are low?

More information can be found at the link below:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/crisis-alternate-strategies.html>

What measures are being taken by OSHA regarding fit testing requirements during the COVID-19 response?

On March 14, 2020, the Occupational Safety and Health Administration (OSHA) released Temporary Enforcement Guidance - Healthcare Respiratory Protection Annual Fit-Testing for N95 Filtering Facepieces During the COVID-19 Outbreak. The guidance can be found here: <https://www.osha.gov/memos/2020-03-14/temporary-enforcement-guidance-healthcare-respiratory-protection-annual-fit>. A fit test is required for anyone wearing a respirator to protect against COVID-19. Annual fit test can be temporarily suspended if the employee has already been fit tested to that respirator.

For more information about OSHAS's rule relaxation for fit testing and use of expired respirators during the COVID-19 response, please refer to the LINC message from March 16, 2020.

What is hand hygiene?

Hand hygiene refers to washing hands often with soap and water for 20 seconds, especially after changing diapers, touching pets and commonly touched surfaces. Soap does not need to be antibacterial; any kind of hand soap is fine to use. If soap and water are not available, use an alcohol-based hand sanitizer that is at least 60% alcohol content. Avoid touching eyes, nose and mouth with unwashed hands. To learn more about hand hygiene see the CDC website at <https://www.cdc.gov/handwashing/when-how-handwashing.html>

SOCIAL DISTANCING

What is social distancing?

Social distancing is a public health measure taken to help slow down the spread of a contagious disease by restricting when and where people can gather. These measures can include limiting large groups of people coming together, closing buildings, and canceling events. For example, a college suspending classes and going to web-based learning would be a social distancing measure. People should begin to think about the various ways their lives could be disrupted by such measures and begin to make plans such as finding out about work-from-home policies if schools or childcare centers are closed.

SIGNS & SYMPTOMS and TRANSMISSION

What are the signs and symptoms of 2019-nCoV (COVID-19)?

There is limited information at this time on the full range of clinical illness associated with this virus. However, it is causing symptoms consistent with a respiratory illness such as **fever, cough, shortness of breath, and other symptoms, including chills, shivering, muscle pain, headaches, sore throat and new loss of taste or smell**. Symptoms have varied from mild to severe. CDC believes at this time that symptoms of COVID-19 may appear in as few as two days or as long as 14 days after exposure.

It is allergy season. How do I know whether I have COVID-19 or allergies?

COVID-19 symptoms mainly include fever, dry cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste or smell.

Seasonal allergy symptoms include runny nose, itchy eyes, mouth or skin, sneezing, and stuffy nose. There is almost never fever associated with seasonal allergies.

What does the term “pre-symptomatic” mean?

Pre-symptomatic transmission is defined as transmission of a virus from an infected person (source patient) to a secondary patient before the source patient developed symptoms. The existence of pre-symptomatic or asymptomatic transmission during the current COVID-19 pandemic presents challenges for contact tracing.

How is 2019-nCoV (COVID-19) treated?

There is no specific treatment for the virus that causes COVID-19, other than supportive care as needed.

How is the virus that causes 2019-nCoV (COVID-19) spread?

The virus is thought to spread mainly from person to person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It is possible that you can also become infected by touching something which has been contaminated by the virus and then touching your eyes, nose or mouth.

Can someone spread the virus without being sick?

People are thought to be most contagious when they are the most symptomatic (the sickest). However, it is possible for the virus to spread from people who have minor or no symptoms. This is why it is now recommended to wear a face covering when out in public.

Am I at risk?

There are currently cases of COVID-19 in New Jersey. This is an evolving situation and latest updates are available on the Data Dashboard at covid19.nj.gov and the NJDOH website at www.nj.gov/health.

What is meant by “community spread”?

Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected. COVID-19 seems to be spreading easily and sustainably in the community.

What are the main symptoms of COVID-19?

The main symptoms of COVID-19 are fever, dry cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste or smell.

What does it mean to have “mild symptoms”?

Mild symptoms include fever, dry cough, shortness of breath, as well as chills, shivering, muscle pain, headaches, sore throat, and new loss of taste or smell. Persons with mild symptoms are recommended to stay home, rest, and recover.

Is there any information about COVID-19 and persons with disabilities?

- People with disabilities may not be at greater risk for getting COVID-19. However, some people with disabilities, or long-term limitation in activity resulting from a condition or health problem, may be at a higher risk for infection.
- People with disabilities may experience higher rates of chronic health conditions.
- Adults with disabilities are three times more likely to have heart disease, stroke, diabetes, or cancer than adults without disabilities.
- People with disabilities may experience potential challenges to routine medical care and access.

How easily does the virus spread?

The virus that causes COVID-19 seems to be spreading easily and sustainably in the community in some affected geographic areas. Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

How long does the COVID-19 virus survive on surfaces?

Most recent studies show that the virus that causes COVID-19 can survive for up to 72 hours on plastic and steel and up to 24 hours on cardboard. If you think a surface may be infected, clean it with a disinfectant to kill the virus and protect yourself and others.

Will warm weather stop the outbreak of COVID-19?

It is not yet known whether weather and temperature impact the spread of COVID-19. Some other viruses, like the common cold and flu, spread more during cold weather months but that does not mean it is impossible to become sick with these viruses during other months. At this time, it is not known whether the

spread of COVID-19 will decrease when weather becomes warmer. There is much more to learn about the transmissibility, severity, and other features associated with COVID-19 and investigations are ongoing.

CLINICAL MANAGEMENT and TREATMENT

Is there a vaccine?

There is no vaccine for the 2019 novel coronavirus.

What drugs are available to treat COVID-19?

The Secretary of the Department of Health and Human Services has declared a public health emergency that justifies the emergency use of remdesivir to treat coronavirus disease 2019 (COVID-19) caused by SARS-CoV-2 infection. In response, the U.S. Food and Drug Administration (FDA) has issued an Emergency Use Authorization (EUA) for the unapproved product, remdesivir, for the treatment of COVID-19.

Remdesivir is an investigational drug that has not been approved by the FDA for any use. It is not yet known if remdesivir is safe and effective for the treatment of COVID-19. The distribution of remdesivir has been authorized only for the treatment of hospitalized patients with severe COVID-19. It is not authorized for the treatment of any other viruses or pathogens. This use is authorized only for the duration of the declaration that circumstances exist justifying the authorization of the emergency use, unless the authorization is terminated or revoked sooner.

There is only one manufacturer of remdesivir and there is a limited quantity of the drug. The manufacturer is donating all available doses to the federal government who will then determine how to distribute the supply to the areas most in need.

Fact sheet about remdesivir: <https://www.fda.gov/media/137566/download>

What is the clinical management for COVID-19?

At present, clinical management includes infection prevention and control measures and supportive care, including supplementary oxygen and mechanical ventilatory support, when indicated. Patients with mild clinical presentation may not initially require hospitalization. The decision to monitor a patient in the inpatient or outpatient setting should be made on a case-by-case basis. Please note, the clinical management/care for a person who is exhibiting COVID-19 symptoms who has not been tested does not differ from the individual who tested positive for COVID-19.

What are the therapeutic options for COVID-19 patients?

While we learn more about COVID-19 everyday, there is still much we do not know. For full information on therapeutic options, visit: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/therapeutic-options.html/>

- Remdesivir is an investigational intravenous drug with broad antiviral activity that inhibits viral replication through premature termination of RNA transcription. It has in-vitro activity against SARS-CoV-2 and in-vitro and in-vivo activity against related betacoronaviruses. **NOTE: Remdesivir was approved by the FDA for Emergency Use Authorization (EUA) to treat hospitalized patients with COVID-19 on May 1, 2020.** <https://www.gilead.com/remdesivir>
- Hydroxychloroquine and chloroquine are oral prescription drugs that have been used for treatment of malaria and certain inflammatory conditions. **UPDATE: FDA announced that hydroxychloroquine is not recommended as a treatment for COVID-19 outside of the hospital setting.**
- Convalescent plasma is also being evaluated as treatment for patients with serious or immediately life-threatening COVID-19 infections, or those judged by a healthcare provider to be at high risk of progression to severe or life-threatening disease.

Should post-exposure prophylaxis (medication) be used for people who may have been exposed to a person with COVID-19?

There is currently no FDA-approved post-exposure prophylaxis for people who may have been exposed to COVID-19. For information about registered clinical trials of investigational therapeutics for pre or post exposure prophylaxis of SARS-CoV-2 infection, visit [ClinicalTrials.gov](https://clinicaltrials.gov)

How are COVID-19 patients treated?

Not all patients with COVID-19 will require medical supportive care. Clinical management for hospitalized patients with COVID-19 is focused on supportive care for complications, including supplemental oxygen and advanced organ support for respiratory failure, septic shock, and multi-organ failure. Testing and treatment for other viral or bacterial etiologies may be warranted.

Do patients with confirmed or suspected COVID-19 need to be admitted to the hospital?

Not all patients with COVID-19 require hospital admission. Patients whose clinical presentation warrants in-patient clinical management for supportive medical care should be admitted to the hospital under appropriate isolation precautions.

Some patients with initial mild clinical presentation may worsen in the second week of illness. The decision to monitor these patients in the inpatient or outpatient setting should be made on a case-by-case basis. This decision will depend not only on the clinical presentation, but also on the patient's ability to engage in self-monitoring, the feasibility of safe isolation at home, and the risk of transmission in the patient's home environment.

When can patients with confirmed COVID-19 be discharged from the hospital?

Patients can be discharged from the healthcare facility whenever clinically indicated. Isolation should be maintained at home if the patient returns home before the time period recommended for discontinuation of hospital Transmission-Based Precautions.

Decisions to discontinue Transmission-Based Precautions or in-home isolation can be made on a case-by-case basis in consultation with clinicians, infection prevention and control specialists, and public health authorities based upon multiple factors, including disease severity, illness signs and symptoms, and results of laboratory testing for COVID-19 in respiratory specimens.

TESTING & SEROLOGY

TESTING

On May 12, 2020, Governor Murphy announced a comprehensive strategy to expand testing capacity and implement a robust contact tracing program for New Jersey. The plan includes a flexible testing plan that is accessible to all residents who need it. New Jersey will implement the following strategies to expand capacity and access to testing:

- Double testing capacity and increase to at least 20,000 tests per day by the end of May. This capacity will be built out moving forward with a minimum of 25,000 tests completed per day by the end of June.
- Prioritize access to testing for vulnerable populations, including residents in long-term care facilities and developmental centers, individuals in the corrections system, those in homeless shelters, patients in psychiatric hospitals, and seasonal farmworkers. The state testing program will also ensure ready access for frontline health care workers, first responders, and transit workers.
- Use mobile testing units to serve communities who may not have access to motor vehicles.
- Require long-term care facilities to supplement or amend their current disease outbreak plan to include a COVID-19 testing plan for all staff and patients/residents.
- Issue a standing order permitting testing for COVID-19 without a prescription for New Jersey residents who may have been exposed and who meet certain conditions.

The Executive Directive and Standing Order may be found here:

<https://www.state.nj.us/health/legal/covid19/index.shtml>

Who should be tested for COVID-19 with the new testing priority groups announced by the CDC?

On May 5, 2020 new testing priority groups were posted to the NJDOH website. Increasing testing capacity will allow clinicians to consider COVID-19 testing for a wider group of symptomatic patients and persons without symptoms in certain situations.

Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Most patients with confirmed COVID-19 have

developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing) but some people may present with other symptoms as well, such as headache, sore throat and loss of taste and smell. Other considerations that may guide testing are epidemiologic factors such as the occurrence of local community transmission of COVID-19 infections in a community. Clinicians are encouraged to test for other causes of respiratory illness.

The two lists below explain who should be tested for COVID-19 as testing is expanded to get a better sense of how many individuals were infected with or exposed to the virus.

High Priority

- Hospitalized patients
- Healthcare facility workers, workers in congregate living settings, and first responders **with** symptoms
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, **with** symptoms
- Persons identified through public health cluster and selected contact investigations

Priority

- Persons who had close contact (within 6 feet for at least 10 minutes) with someone who tests positive for COVID-19, both **with** and **without** symptoms.
- Residents and staff in long-term care facilities or other congregate living settings, including prisons and shelters, as part of house-wide point prevalence studies, including those **with** and **without** symptoms.
- Persons **with** symptoms of COVID-19 infection, including: fever, cough, shortness of breath, chills, muscle pain, **headache**, new loss of taste or smell, vomiting or diarrhea and/or sore throat.

Refer to NJDOH guidance for more information:

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Testing_Guidance.pdf

I work for NJ Transit and want to be tested for COVID-19. Where can I get tested?

COVID-19 testing is available in East Rutherford to all NJ TRANSIT employees. Through an agreement with Agile Urgent Care and Accurate Diagnostics Lab, NJ TRANSIT employees will be accepted for appointment-only testing at the site which opened on April 13 and is currently geared toward first responders and frontline healthcare workers. Online registration access for NJ TRANSIT employees will be available beginning on Sunday, May 3. NJ TRANSIT is also working to expand access to similar testing sites in central and south Jersey. <https://nj.gov/governor/news/news/562020/approved/20200430c.shtml>

I work for/have a loved one in a NJ Dept of Corrections facility, are we/they able to get tested for COVID-19?

The New Jersey Department of Corrections (NJDOC), in partnership with Rutgers University Correctional Healthcare (UCHC) and Accurate Diagnostics Lab, has announced plans to provide COVID-19 tests to staff, inmates, and residents on-site at each of NJDOC's facilities and halfway houses.

Testing will include the FDA-approved Rutgers saliva test administered to NJDOC's staff of approximately 8,000 employees and 18,000 inmates by UCHC. Universal testing is expected to begin by the end of next week and will help the Department inform its operational needs related to the management of those who are sick while maintaining the safe operation of facilities. <https://nj.gov/governor/news/news/562020/approved/20200501a.shtml>

I have symptoms of respiratory illness. I am not sure if it is the flu or COVID-19. I do not have a primary care doctor.

If you have health insurance, you might consider going to an urgent care center. There are urgent care centers in many towns across the state and some are providing COVID-19 testing.

If you do not have health insurance, consider a federally qualified health center (FQHC). These are federally funded clinics and see anyone. Due to the ongoing COVID-19 pandemic, call the nearest FQHC to inquire about appointments. To find an FQHC near you: <https://www.njpca.org/current-members/>

How can I locate the nearest COVID-19 testing site?

Go to COVID.nj.gov/testing for locations of testing sites across the state. Some testing sites require pre-screening, a prescription from a health care provider, or proof of residency. Be sure that you read the testing requirements before you show up at a testing site.

Will there be FEMA community-based COVID-19 testing available?

There are public testing locations across the state that are sponsored by FEMA, a Federal Emergency Management Agency. Testing is open to New Jersey residents only. You must bring identification to show proof of NJ residency (government issued photo ID). If a health care worker or first responder, bring appropriate ID. Parent/Guardian of an individual less than 18 years of age must be present. The public is encouraged to complete the self-assessment on covid19.nj.gov before going to get tested at a public site.

Testing will be staffed by NJ Department of Health, the New Jersey State police, and the New Jersey National Guard. These sites will be open until the end of May 2020.

Testing is free and will be covered by the federal government or personal insurance company. If you have health insurance, please bring your healthcare/medical insurance card, although this is not a requirement to be tested. Do not take fever-reducing medicine prior to testing (such as Tylenol or Advil) for at least 6 hours prior to arrival. Pre-registration is not required. If you have a prescription for testing, please bring it with you.

Testing at the FEMA sites is prioritized for:

- Symptomatic persons (those with three of the following symptoms: fever of at least 99.6°F, cough, shortness of breath, chills or shivering, muscle pain, headache, sore throat, new loss of taste or smell, vomiting, diarrhea)
- Asymptomatic first responders, persons who live in congregate living and individuals who are close contacts with persons who tested COVID-19 positive.

Asymptomatic New Jersey residents should attempt to seek guidance from a health care provider before accessing testing. There are two drive-thru FEMA community-based testing locations. For exact days each testing site is open go to covid19.nj.gov/testing.

1. Bergen County Community College, 400 Paramus Road in Paramus (Bergen County).
2. PNC Art Center, 116 Garden State Parkway in Holmdel (Monmouth County).

What should I expect at the FEMA community-based testing site?

Individuals will drive thorough a secured area and will remain in their vehicles throughout the entire testing process. Hours of operation are 8am-4pm or until testing runs out. Be prepared for long wait times. No restrooms will be available. Bring water and other items to be comfortable while waiting. Every effort will be made by managers of the sites to maintain patient privacy.

Interpreters may be available to accommodate residents for whom English is not their primary language.

If you are having a medical emergency, call 9-1-1. Do not report to a testing site or wait at a testing site. Testing sites are not emergency care facilities. Call 9-1-1 and tell the dispatcher about your symptoms.

Do not take fever-reducing medicine prior to testing (such as Tylenol or Advil) for at least 6 hours prior to arrival. Testing includes a nasal swab.

Testing at the FEMA sites is prioritized for:

- Symptomatic persons (those with three of the following symptoms: fever of at least 99.6°F, cough, shortness of breath, chills or shivering, muscle pain, headache, sore throat, new loss of taste or smell, vomiting, diarrhea)
- Asymptomatic first responders, persons who live in congregate living and NJ residents who are close contacts with persons who tested COVID-19 positive.

Asymptomatic New Jersey residents should attempt to seek guidance from a health care provider before accessing testing.

Why are you asking me to bring my health insurance card?

If you have health insurance, you are asked to bring it. Testing is covered by insurance. However, healthcare/medical insurance is not a requirement to be tested.

Is the FEMA community-based testing just for residents of a certain county?

No, the FEMA community-based testing is for New Jersey residents, regardless of where they may live in the state. Anyone planning to attend a FEMA community-based testing site, please bring proof of your New Jersey residency by bringing a government-issued photo ID.

In addition to the two FEMA community-based testing sites, there is testing being offered in other counties. In most cases this testing is for county residents only. Contact your local health department for more information. County testing clinics have various requirement that may include: being pre-screened, symptomatic, have a doctor's prescription for testing, and have an appointment.

How soon are test results coming back from the FEMA community-based testing sites?

Test results from FEMA community-based sites are being provided within 3-5 days after testing. You will be called with test results. You should have instructions on the paper provided to you at the testing site with more information.

I was tested at one of the FEMA sites. What should I do about work while I wait for test results?

As the instructions on the paper you received at the FEMA testing site says, you should:

- Inform your supervisor that you were tested for COVID-19 and note the date of testing.
- If you are experiencing symptoms: Notify your supervisor and stay home.
- If you are not experiencing symptoms: Request guidance from your supervisor on any potential work restrictions until you know your test results.
- Avoid using public transportation, ridesharing, or taxis when commuting.

What should you do to protect yourself while you wait for test results from the FEMA community-based testing site?

- Wash hands often with soap and water for at least 20 seconds. Clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.
- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Clean all “high-touch” surfaces every day. High-touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and remote controls.
- Cover coughs and sneezes.

How will I get my test results from the FEMA community-based testing site?

Instructions about what you should do while you wait for test results and monitoring symptoms were provided when you were tested. You will be called at the number you provided on the registration form with your results. Due to privacy considerations, no voice message will be left on your phone. You must answer your phone directly to receive results. The results calling center will call to follow up two times.

I was tested at a location that was not my doctor’s office, how do I get my test results?

If the testing location required a doctor’s prescription, you should contact your physician for the test results. Test results are sent to the ordering physician.

Do not call the COVID-19 hotlines for your test results. They do not have test results.

I got my COVID-19 test results back and they told me I am positive. What should I do?

If you tested positive, you must stay at home and self-isolate. This means stay in a different bedroom from others in your home, and if possible, use a separate bathroom. You must self-isolate until at least 3 full days (or 72 hours) have passed since you had a fever without the use of fever-reducing medications AND other symptoms are greatly improved AND at least 10 days have passed since symptoms first started.

If you live with other people and they were not tested, they should keep their distance from you. This includes not eating meals together and not sitting around the house together. Practice social distancing as much as is possible (stay at least 6 feet from each other).

I tested positive for COVID-19. What should I do about the other people in my home? Do they need to be tested?

- If they are **symptomatic** (sick; have COVID-19 symptoms), they should also self-isolate until 3 full days (or 72 hours) have passed since you had a fever without the use of fever-reducing medications AND other symptoms are greatly improved AND at least 10 days have passed since symptoms first started. If the symptoms are mild, they should recover at home.
- If the symptoms worsen and a medical evaluation is needed, contact your health care provider.
- If they are **asymptomatic** (not sick; have no COVID-19 symptoms), they should self-quarantine for 14 days AFTER any sick person in the household's self-isolation period ends. If the asymptomatic person develops symptoms, they should follow the self-isolation instructions above.
- If testing is available, both symptomatic and asymptomatic persons who live in the house should consider getting tested.

I tested positive for COVID-19 and self-isolated the recommended 10 days until my symptoms were gone. I was re-tested once I was asymptomatic and the results came back positive again! Now what should I do?

There is still a lot that we do not know about this new virus. Since you were tested twice, it is recommended that you continue self-isolate until you have two negative tests, performed at least 24 hours apart.

I tested negative for COVID-19 but still feel sick. What should I do?

If you test negative for COVID-19 but still have symptoms, it is likely you may have another respiratory virus. You should continue to isolate yourself from others, practice good hand hygiene, and clean and disinfect surfaces in the home.

You should not return to work or school until 72 hours after your fever has ended without the use of fever-reducing medications and other symptoms have improved. If your symptoms worsen or if you do not get better after several days, you should call your health care provider.

I was tested at one of the FEMA drive-thru sites (Bergen Co College and PNC Arts Center only) and did not receive my results. Where can I get my results?

You should have received at least 2 phone calls to the number you provided to get your results. However if you have not received your test results and it is 7 days AFTER you got tested, contact the NJ Department of Health by email at covid.testing@doh.nj.gov

Do NOT call the public COVID-19 hotlines (1-800-962-1253 or 211) for test results. They do NOT have test results.

I went to a FEMA site for testing. I need to see/print the results. Can I do this?

Yes, if you went to a FEMA testing site for COVID-testing, you may use the patient portal at the commercial lab listed below to view/print your COVID-19 test results.

- Bergen County College: Quest Diagnostics
- PNC Arts Center (Monmouth): LabCorp

Q: Where/How do I obtain my COVID-19 test results?

A (LabCorp): Your COVID-19 sample was processed by LabCorp. To access your results, you can go to www.labcorp.com/results. Once you arrive at this website, you can Register for an account, or, if you already have an account with LabCorp, you can simply Sign In.

A (Quest): Your COVID-19 sample was processed by Quest Diagnostics. To access your test results, you can go to www.MyQuestdiagnostics.com. Once you arrive at this website, you can Create an Account, or, if you already have an account with Quest Diagnostics, you can simply Sign In.

Q: What information do I need to Create an Account?

A (LabCorp): You will need to enter the following information to create an account:

- First Name, Last Name
- Gender
- DOB
- Address (Street, City, State, Zip Code)
- Phone Number
- Email Address
- SSN

A (Quest): You will need to enter the following information to create an account:

- Full Name
- DOB
- Full Address (including city, state, zip code)
- Phone Number (10-digit)

Q: What information do I need to Sign Into an existing account?

A (LabCorp): You will need to enter the following information to sign into an existing account: your email and the password you created.

A (Quest): You will need to enter the following information to sign into an existing account: the username and password you created.

Q: When will my results be available?

A (LabCorp): Your results will be available on the LabCorp patient portal 2 business days after your results are in.

A (Quest): Your results will be available on the Quest patient portal 48 hours after your results are in.

I was tested at a county testing site, not one of the FEMA sites. The lab they used was BioReference (not LabCorp or Quest). How do I get those results?

If the testing site required you to get a prescription from your doctor/health care provider to be tested, your provider should contact you when your results are ready. However, individuals who were at testing sites that use BioReference to test specimens, can check results by visiting the BioReference portal at: www.bioreference.com/patient-portal/

I heard I can get tested for COVID-19 at a commercial laboratory (i.e., LabCorp and Quest)?

These tests must be ordered, and specimens collected by health care providers in their offices. Testing is not available at individual lab offices (i.e., local LabCorp or Quest labs). Do not go to a commercial lab and ask to be tested for COVID-19. Work with your health care provider to coordinate testing. All costs and fees associated with commercial laboratories is the responsibility of the patient.

Not everyone who has a mild illness needs to be tested, and it may take several days to get test results. The most important thing is to stay home if you are ill. You do not need approval from public health officials to be tested by a commercial laboratory.

Should “contacts of contacts” be tested?

No, being the contact of someone who has close contact with a person who has COVID-19 does not warrant testing. For example, you have a coworker whose family member is a confirmed case. You would not need to be tested. Despite coming into contact with the coworker, you did not have close contact with the person who actually has COVID-19.

What you can do is monitor yourself for symptoms and practice good hand hygiene. If you notice that you have symptoms and feel that you need to be medically evaluated, contact your health care provider and stay home/do not go to public gatherings or work.

I was told by my employer that I need to get tested for COVID-19 since I was out of work after having respiratory symptoms (e.g., coughing, sneezing, influenza, bronchitis).

Sick people should remain home. Once recovered, testing is available for individuals who are symptomatic and asymptomatic. Check the [COVID19.nj.com/testing](https://www.covid19.nj.com/testing) website for locations near you. Or contact your health care provider.

I was told that if I call out of work sick, I must get a doctor’s note saying I do not have COVID-19 in order to return to work.

This requirement will increase those going to work sick. Calling out of work to rest and recover from a mild illness is common during this time of year. Testing for COVID-19 is not recommended as a way to allow people to go back to work.

Is there any cost to the patient for COVID-19 testing?

If testing is done at the NJDOH public health lab under strict guidance from public health officials, there is no charge for the testing. Additionally, county-run testing sites do not charge a fee.

However, at private clinics/commercial labs, there may be a charge for the medical care provided, assessing patients, writing prescriptions, and collecting the specimen. These costs would be the responsibility of the patient. Some facilities do not accept insurance and are self-pay only. Call the facility before you get screened and ask about the cost of the testing.

How is the novel coronavirus diagnosed?

Symptoms of COVID-19 are very similar to other common illnesses such as the flu or the common cold. Healthcare providers can tell whether you have symptoms that could be COVID-19 but can’t make the diagnosis without a diagnostic test (nasal swab or saliva test).

I was recently diagnosed with coronavirus, does this mean I have 2019-nCoV (COVID-19)?

Coronavirus is the term used for a family of viruses. Just like there are different types of influenza viruses, there are also different types of coronaviruses. Coronaviruses are quite common causes of respiratory infections and tend to circulate in the fall and winter months.

The four most common types of coronavirus are OC43, 229E, HKU1, and NLO63. However, from time to time a new coronavirus will emerge and begin to cause infections in humans. The type of coronavirus is a new type of coronavirus and is infecting people for the first time which means that people do not have any immunity to it. Severe Acute Respiratory Syndrome (SARS) and Middle Eastern Respiratory Syndrome (MERS) were two respiratory illnesses caused by new strains of coronaviruses that made headlines years ago because they emerged suddenly and caused severe respiratory illness.

NOTE: Public information materials for persons who tested COVID-19 positive and/or negative are available on the NJDOH website. Materials are available in both English and Spanish.

Person Tested Positive:

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Instructions_Persons_Who_Test_Positive.pdf

Persons Tested Negative:

https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_Instructions_Persons_Who_Test_Negative.pdf

CONTACT TRACING

New Jersey will implement the following strategies to build a contact tracing program:

- Incorporate technology
- Use a common data program to support contact tracing efforts
- Partner with the state's colleges and universities to employ public health, social work, and related students as frontline workers.
- Individuals interested in becoming contact tracers, may register at covid19.nj.gov/tracers.

<https://nj.gov/governor/news/news/562020/approved/20200512a.shtml>

What is Contact Tracing?

Contact tracing is a public health tool used to identify those who come into contact with people who have tested positive for many infectious diseases – such as measles, tuberculosis, STDs. Contact tracing is a public health activity that involves working with a person who has been diagnosed with an infectious disease (case) to identify and provide support to people (contacts) who may have been infected through exposure to the case.

Where can I get more information about contact tracing in NJ?

For more information about contact tracing, what it is and why it is an important public health disease prevention tool, go to: covid19.nj.gov/testandtrace

What types of questions will public health contact tracers ask?

A public health contact tracer will most likely call to advise persons that they may be a contact of a person who tested positive for COVID-19 (case). The contact tracers will not identify the name of the case but will advise contacts about their potential exposure and might recommend testing.

Public health contact tracers will ask contacts about symptoms that may be COVID-19 related. They will ask about locations that the contact might have visited over the last few days, and if anyone living with the contact with was tested for COVID-19 or has symptoms. A contact tracer will never ask for information such as your social security number or bank account information.

How did the public health contact tracers get my name and contact info/phone number?

A public health contact tracer should provide their name and why they are calling. More than likely, your name and phone number were given to them by a person who tested positive for COVID-19 (case). Public health contact tracers are calling individuals (contacts) to let them know that they had close contact with a person who has COVID-19 (case). They will not tell you the case's name. They will only tell you that you were in contact with a person who tested positive for COVID-19.

A public health contact tracer will contact you first by phone. If they are unable to get a hold of you, they may come to your home. Remember, the contact tracer's job is to provide education, information, and support to individuals so they understand their risk, what they should do to separate themselves from others who are not exposed, monitor themselves for illness, and the possibility that they could spread the infection to others even if they themselves do not feel ill.

What should I do if I am called by a public health contact tracer?

Speak with the contact tracer. The reason you have been called is because you may have come into contact with an individual confirmed to have COVID-19 (case). The role of the public health contact tracer is to advise potential contacts about their risk for COVID-19 and provide recommendations about actions they can do to protect themselves and their community.

If I am a confirmed “case” (tested positive for COVID-19) and I receive a call from the public health tracer, what types of questions will they ask me?

A public health contact tracer will work with cases to identify "close contacts" (anyone who was within six feet for more than 10 minutes starting two days before symptoms began). If a case doesn't have symptoms, the public health contact tracer will ask about activity during the two days before their COVID-19 diagnosis. They will also ask for the phone numbers of anyone who meets the criteria for a close contact so they can be notified. Your identity is kept anonymous and your information confidential. Potential contacts will NOT be told the name of the case. A contact tracer will never ask for information such as your social security number, bank account or credit card information or insurance information.

What will the public health contact tracer do with my medical information?

The public health contact tracer will not reveal your identity to individuals who you identify as contacts. Public health contact tracers take privacy and confidentiality seriously. Your personal health information is not shared outside of the public health investigation. Sharing the names and contact information of persons who are close contacts, with the public health contact tracer is an important way you can help to reduce the spread of COVID-19 in the community.

I have heard about scammers posing as public health contact tracers. How do I know if they are really contact tracers and not scammers?

The call would come from a person legitimately working with a local health department. The contact tracer will provide follow-up resources and assure the person of their privacy. A contact tracer will never ask for information such as your social security number, bank account or credit card, or insurance information.

Hoax text messages regarding contact tracing are also circulating in NJ. This is a scam designed to steal your personal information. Never click on links in messages (texts or emails) from people you do not know.

SEROLOGY

Can I get the antibody COVID-19 test to see if I am immune?

Serological tests for antibodies have been developed, but data is lacking on the significance and interpretation of these tests. Since this is a new virus, it is unknown if a person who is exposed is immune to future exposures of SARS-CoV-2. Serological testing should currently not be used for case detection or public health action. This guidance may change as additional information is known about these tests.

What are antibody tests and what is their purpose?

Here is what we DO know about antibody testing:

- Antibody testing (serology) is performed on blood, plasma or serum specimens.
- The immunoglobulin G (IgG) antibody test cannot be used as a diagnostic test for COVID-19, it is still necessary to do a PCR test on a sample from the respiratory tract.
- A negative serologic test does not exclude prior or current SARS-CoV-2 infection.
- IgG antibodies typically develop 15 days after exposure to the virus.
- A positive IgG test may indicate the following:
 - Past exposure to SARS-COV-2; this will be useful to understand the burden of COVID19 in our state and country.
 - Based upon what we know from other viruses, the presence of IgG suggests the patient **may** have partial or full immunity to COVID19 compared to a seronegative individual, but we do not have information on the level or duration of immunity.
- There are NO point- of- care (i.e. tests performed in non-laboratory settings) serologic tests presently available on the market that have been reviewed and approved by the FDA. Those serologic tests that have not been approved by the FDA should NOT be used without significant validation studies since they may result in many false positive and false negative results.
- False positive results may occur with any serologic test if patients have been previously exposed to seasonal coronaviruses (which circulate yearly in the U.S. and cause mild cold symptoms).

Serologic tests may be used to identify potential donors for convalescent plasma.

There is still a lot that is not known about the serology for SARS-CoV-2.

If not all antibody tests are approved, which ones are FDA approved antibody tests?

There are currently four FDA approved antibody tests (listed below). Only FDA approved antibody tests should be used, as unapproved tests may lead to false or invalid test results.

- Cellex Inc.: [qSARS-CoV-2 IgG/IgM Rapid Test](#)
- Ortho Clinical Diagnostics, Inc: VITROS Immunodiagnostic Products Anti-SARS-CoV-2 Total Reagent Pack
- Chembio Diagnostic System, Inc: DPP COVID-19 IgM/IgG System
- Mount Sinai Laboratory: COVID-19 ELISA IgG Antibody Test

What is the difference between serology and antibody testing?

Serology testing means testing for antibodies in blood. The terms mean the same thing.

Can I get an antibody test so I can show my employer that I longer have the COVID-19?

Presently, antibody testing is not being used to determine if an employee may go back to work. Having antibodies does not mean that a person is immune to COVID-19.

Should I get an antibody test?

There are limits to COVID-19 serology (antibody) testing. The Infectious Disease Society of America (IDSA) states that antibody tests are not to be used for diagnosis, return-to-work decisions, or to reassure individuals who have antibodies that they are protected: an immune response is not the same as immunity.

Follow-up of infected patients to see if they develop disease in the future is the only way to be certain. Serologic tests are good for epidemiology and research studies and may be evidence of prior infection but having antibody levels do not predict immunity to COVID-19 infection or inform return-to-work decisions.

What do my antibody test results mean?

At this time, there is still a lot that we do not know about the serology. Since this is a new virus, it is unknown if a person who is exposed is immune to future exposures of SARS-CoV-2. What we do know is serology test results do not exclude prior or current SARS-CoV-2 infection. False positive results may occur with any serologic test if persons were previously exposed to seasonal coronaviruses (which circulate yearly in the U.S. and cause mild cold symptoms). Having antibody levels do not predict immunity to COVID-19 infection or inform return-to-work decisions.

NOTE: An infographic for the public about antibody testing is now available on the NJDOH website.
https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID-infographic_antibody%20testing.pdf

ISOLATION, QUARANTINE and EXPOSURE

ISOLATION AND QUARANTINE

What is the difference between isolation and quarantine?

Quick answer:

Isolation and quarantine help protect the public by preventing exposure to people who have or may have a contagious disease.

- **Isolation** separates sick people with a contagious disease from people who are not sick.
- **Quarantine** separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

Longer answer:

Isolation separates sick people with a contagious disease from people who are not sick.

- Isolation separates and restricts the movement of sick people so they can't spread disease to healthy people.
- Isolation is a routine procedure in hospitals and healthcare facilities.

- Isolation is voluntary, but in a public health emergency, officials have the authority to isolate people who are sick.

Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

- Quarantined people may or may not become sick.
- Quarantined people may stay at home, so they don't spread disease to healthy people.
- If you are quarantined and you become ill, you can seek medical treatment from a healthcare provider.
- Quarantine is voluntary, but in a public health emergency, officials have the authority to quarantine people who have been exposed to an infectious disease

What is self-isolation?

This is a public health strategy where individuals who are sick and exposed to a confirmed COVID-19 case are separated from well persons. They should not go to work/school or other public places. For possible COVID-19 exposures, self-monitoring is 14 days. People who are asked to self-isolate should stay in a separate bedroom and, if possible, use a separate bathroom and have minimal contact with other persons and pets in the home.

What should I do while I am self-isolation?

It is important that anyone who is self-isolation should monitor their symptoms in case they get worse. It is recommended that people take their temperature with a thermometer at least twice per day. If the symptoms become worse or do not improve AND you feel that you need a medical evaluation, call your health care provider. If you are directed to go to a medical facility, be sure to call ahead and wear a face mask/face covering.

I was told to self-isolate, since I was sick but not able to get tested. When can I resume my normal life and discontinue self-isolation?

Persons with respiratory symptoms who were directed to care for themselves at home may discontinue home isolation when you meet all three criteria listed below:

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 10 days have passed since your symptoms first appeared.

I was tested for COVID-19 and had a lab confirmation of my illness. When may I discontinue self-isolation?

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 10 days have passed since your symptoms first appeared.

Should household members of people who are self-isolating also stay at home?

Household members of confirmed COVID-19 cases should follow the instructions below.

Household contacts of people who are lab confirmed cases of COVID-19 persons who are experiencing symptoms (**symptomatic**) should stay home until:

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 10 days have passed since your symptoms first appeared.

Household contacts of people who are lab confirmed cases of COVID-19 persons who have no symptoms (**asymptomatic**): Self-quarantine for 14 days **after** the self-isolation period ends for the person who is the confirmed COVID-19 case.

Is there any support being provided by the state for those who are self-isolating?

The state does not provide support for basic needs when a person is advised to self-isolate. All individuals are encouraged to have an emergency supply of needed items including food, water, medications, pet supplies, baby supplies, etc. in the home to last for at least two weeks in the event they need to remain in the home and restrict their movement.

What is the difference between self-isolation and self-monitoring (also known as self-observation)?

- Self-isolation is for persons who are sick/have symptoms.
- Self-monitoring/self-observation is for persons who are not sick/have no symptoms.

What is self-monitoring (also known as self-observation)?

Self-monitoring is when an individual is not sick/has no symptoms but may have been exposed to a close contact. Persons who are self-monitoring should monitor themselves for symptoms.

EXPOSURE

You mentioned contacts vs. close contacts. What is a “close contact?”

A close contact is defined as being within approximately 6 feet (2meters) of a COVID-19 case for a prolonged period of time (approximately 10 minutes or longer); close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case

OR

Having direct contact with infectious secretions of a COVID-19 case (for example, being coughed on).

I am a close contact of a COVID-19 case. I was told to self-quarantine for 14 days. It is day 10 and I have no symptoms, can I go to work?

No. Symptoms may appear anywhere between 2-14 days. You should continue to isolate yourself and do not go to work/school or public places/gatherings.

I am a close contact of a confirmed COVID-19 case, but I am not sick and have no symptoms. Can I go to work? Can I get tested?

Close contacts of confirmed COVID-19 cases who do not have symptoms of fever, cough or difficulty breathing, should stay home and self-monitor for symptoms for 14 days.

If symptoms appear, you must stay home about be fever-free for at least 3 days (72 hours) without the use of fever-reducing medicine AND symptoms improve AND at least 10 days have passed since symptoms first started. Wash hands frequently and do not go to work/school or public gatherings while self-isolating.

If testing is available for COVID-19, you should consider getting tested.

I am a health care provider and was notified that I may have been exposed to a person who is a confirmed COVID-19 case. What should I do? I have mild symptoms.

Self-isolate at home for at least 3 days (72 hours) until you are fever-free without the use of fever reducing medicine, AND your symptoms have improved AND at least 10 days have passed since your symptoms first appeared. Stay in a separate bedroom from other persons who live in your house and use a separate bathroom (if possible). If available, you may want to get tested for COVID-19. Contact your health care provider if your symptoms get worse. If your symptoms get worse, your health care provider may recommend COVID-19 testing. Wash hands frequently, do not go to work or attend public gatherings while self-isolating. If you go to a medical facility for testing, wear a face mask.

I am an EMS worker. How can I protect myself from getting COVID-19?

Persons needing 9-1-1 services or transportation to the hospital have been told to let EMS and others know they have COVID-19 symptoms and to wear a mask. If they do not have a face mask, give them one as soon as possible.

EMS workers can protect themselves by wearing the appropriate personal protective equipment and practicing good hand hygiene. Be sure that your rig is cleaned after transporting a suspect COVID-19 person or person with respiratory symptoms.

SETTING SPECIFIC

BLOOD and PLASMA DONATION

Can I donate blood during the COVID-19 pandemic?

Yes, blood and plasma donations are needed. See below for specific information about routine blood donations and plasma donation.

Routine Blood donations: Blood donation is an essential service and is urgently needed. Donors should check with the local blood centers (American Red Cross Blood Services, New York Blood Center, Vitalant Blood Center, Miller-Keystone Blood Center) for specific requirements for donations.

When going to donate blood, potential donors will be asked about their health, travel history - both internationally and within the U.S., if they've been tested for COVID-19, and if they've had close contact with someone who may have had COVID-19. Also, at the time of arrival at the blood center, donor staff may take the temperature of potential donors. The blood centers are asking that donations be on an appointment-only basis to maintain safe practices for the donor staff and to consistently follow all social distancing guidelines for donor safety.

Prospective donors should self-defer and **refrain from donating blood** if they have:

1. been diagnosed with or are suspected of having COVID-19. These individuals should refrain from donating at least 28 days after resolution of all symptoms after a diagnosis of COVID-19.
2. cared for, lived with, or otherwise had close contact with individuals diagnosed with or suspected of having COVID-19. These individuals should refrain from donating 28 days after the last possible close contact exposure to a person diagnosed with or are suspected of having COVID-19.
3. traveled either internationally, depending on the country, or within the U.S., depending on the state. These individuals should contact the local blood center for self-deferral requirements from donating.

Blood donations are **not** being screened for COVID-19. Negative COVID-19 test results are not required to donate blood. Do not donate blood if you are experiencing COVID-19 symptoms.

American Red Cross blood donation centers may be found: www.redcrossblood.org. Put in your zip code to locate nearest donation center.

Convalescent plasma donations: (plasma from individuals who tested positive for COVID-19 but are recovered) Prospective donors should contact the local blood centers (American Red Cross Blood Services, New York Blood Center, Vitalant Blood Center, Miller-Keystone Blood Center) or check their websites for the options and specific requirements for collection of convalescent plasma. Prospective donors can also check with their local hospital for availability.

BUSINESSES

I know that K-12 public, private and parochial schools and universities are to close on Wednesday, March 18, 2020, but what about childcare/daycare centers?

Childcare/Daycare centers should make the call to close themselves. Centers should contact the Department of Children and Families (DCF), who licenses childcare/daycare centers in NJ, for guidance and work with their local health department to assess level of risk in the community. Health departments do not license childcare/daycare centers.

I am a family dentist. Should I close my office/When can I re-open my office?

Please refer to the American Dental Association website (ada.org) for guidance and recommendations for re-opening dental practices. Additionally, the NJ Division of Consumer Affairs Administrative Order and Notice of Rule Adoption for Healthcare Services In-Office Practices is available online at:

<https://www.njconsumeraffairs.gov/COVID19/Documents/DCA-AO-2020-07.pdf>.

I am a small business owner, when can I open my business?

The Governor recently signed an Executive Order enabling non-essential construction to resume and for curbside pick-up for non-essential retail businesses. This Executive Order (#142) is effective Monday, May 18, 2020. Refer to the Executive Order for more information about the restrictions that must be followed for non-essential businesses to open.

<https://nj.gov/governor/news/news/562020/approved/20200513a.shtml>

My businesses need to remain open during COVID-19. What can I do to keep my employees safe?

- **Practice good hand hygiene:** stop handshaking, clean hands at the door and throughout the day, clean surfaces like doorknobs, tables, desks, handrails regularly (and have employees clean their phones, keyboards, and any other high-touch surfaces).
- **Limit face-to-face meetings and travel:** use videoconferencing when possible, limit meetings to smaller number of attendees, postpone travel.
- **Avoid crowding:** stagger customer flow, require appointments, use online transactions when possible.

- **Handle food carefully:** limit food sharing, ensure food handlers/cafeteria workers practice good hand hygiene.
- **Have employees stay home if:** they are feeling sick or if they have a sick family member in their home.

I am a critical infrastructure essential worker. There was a COVID-19 exposure at my place of business. What is the recommendation for the employees?

The CDC released Interim Guidance on April 8, 2020: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf>

To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community.

A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19. The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic.

Critical Infrastructure workers who have had an exposure but remain **asymptomatic** should adhere to the following practices prior to and during their work shift:

- **Pre-Screen:** Employers should measure the employee's temperature and assess symptoms prior to them starting work. Ideally, temperature checks should happen before the individual enters the facility.
- **Regular Monitoring:** As long as the employee doesn't have a temperature or symptoms, they should self-monitor under the supervision of their employer's occupational health program.
- **Wear a Mask/Face covering:** The employee should wear a face covering at all times while in the workplace for 14 days after last exposure. Employers can issue facemasks or can approve employees' supplied cloth face coverings in the event of shortages.
- **Social Distance:** The employee should maintain 6 feet and practice social distancing as work duties permit in the workplace.
- **Disinfect and Clean workspaces:** Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment routinely.

If the employee becomes sick during the day, they should be sent home immediately. Surfaces in their workspace should be cleaned and disinfected. Information on persons who had contact with the ill employee during the time the employee had symptoms and 2 days prior to symptoms should be compiled. Others at the facility with close contact within 6 feet of the employee during this time would be considered exposed.

What is meant by "critical infrastructure" employees?

According to the interim CDC guidance, this refers to:

- Federal, state, & local law enforcement
- 911 call center employees

- Fusion center employees
- Hazardous material responders from government and the private sector
- Janitorial staff and other custodial staff
- Workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities

Additional considerations for employees:

- Employees should not share headsets or other objects that are near mouth or nose.
- Employers should increase the frequency of cleaning commonly touched surfaces.
- Employees and employers should consider pilot testing the use of face masks to ensure they do not interfere with work assignments.
- Employers should work with facility maintenance staff to increase air exchanges in room.
- Employees should physically distance when they take breaks together. Stagger breaks and don't congregate in the break room, and don't share food or utensils.

This guidance is posted on the NJDOH webpage:

https://www.state.nj.us/health/cd/topics/covid2019_schoolbusiness.shtml

For more information: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/critical-workers-implementing-safety-practices.pdf>

CONGREGATE/SHARED HOUSING

What is meant by shared housing or congregate housing?

Shared or congregate housing includes apartments, condominiums, student or faculty housing, national and state park staff housing, transitional housing, and domestic violence and abuse shelters.

Why is congregate housing an issue when it comes to COVID-19?

Shared housing residents often gather together closely for social, leisure, and recreational activities; shared dining; laundry facilities; stairwells; and elevators. Shared housing residents may have challenges with social distancing to prevent the spread of COVID-19.

How can people who live in congregate housing protect themselves?

- Social distance by staying at least 6 feet apart from others that you do not live with.
- Wear cloth face coverings in any shared spaces, not including your room.
- Seek out a “buddy” in the facility who will check on you and make sure you are getting necessities, including food and household essentials.
- Create a list of local organizations you and your household can contact in case you need access to information, healthcare services, support, and resources.

- Create an emergency contact list including family, friends, neighbors, carpool drivers, healthcare providers, teachers, employers, the local public health department, and other community resources.

As well as the usual prevention activities to protect yourself:

- Wash hands frequently.
- Avoid touching eyes, nose, and mouth.
- Stay home when sick.
- Cover coughs or sneezes with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.

What should congregate facilities know about how to keep residents safe?

COVID-19 prevention supplies should be provided in common areas, such as soap, alcohol-based hand sanitizers that contain at least 60% alcohol, tissues, trash baskets, and, if possible, cloth face coverings that are washed or discarded after each use. Non-essential volunteers and visitors in shared areas should be limited or avoided. Staff should avoid entering residents' rooms or living quarters unless it is necessary. Staff should use virtual communications and check ins (phone or video chat), as appropriate.

Are there any recommendation for common spaces or shared facilities, such as kitchens, bathrooms, etc.?

Common spaces: Be flexible, rules may change in common areas. Maintain 6 feet of social (physical) distance between yourself and everyone that you do not live with. This may mean there will be alternatives to activities, cancelled activities, or closed areas. If you see people in areas that are small like, stairwells and elevators, consider going one at a time. Here are some examples of how the rules in common spaces may change:

Shared kitchens, dining rooms, laundry rooms, bathrooms: Access should be available, but the number of people should be restricted so that everyone can stay at least 6 feet apart from one another.

People who are sick, their roommates, and those who have higher risk of severe illness from COVID-19 should eat or be fed in their room, if possible.

Do not share dishes, drinking glasses, cups, or eating utensils. Non-disposable food service items used should be handled with gloves and washed with dish soap and hot water or in a dishwasher.

Sinks could be an infection source and residents should avoid placing toothbrushes directly on counter surfaces. Totes can be used for personal items, so they do not touch the bathroom countertop.

What if a person in congregate housing is sick with COVID-19?

Residences should be notified if someone with COVID-19 could have exposed people in their building. The confidentiality of the person should be maintained by the facility as required by the Americans with Disabilities Act (ADA) and, if applicable, the Health Insurance Portability and Accountability Act (HIPAA).

If possible, designate a separate bathroom for residents with COVID-19 symptoms. Consider reducing cleaning frequency in bedrooms and bathrooms dedicated to persons with COVID-19 symptoms to as-needed cleaning (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill persons.

The sick person, their roommates, and close contacts need to self-isolate – limit their use of shared spaces as much as possible. They should wear a cloth face covering when it is necessary to be in shared spaces and avoid using public transportation, ride-sharing, or taxis.

FOOD and SAFETY

How do I safely interact with cashiers, store clerks and items on store shelves when I must purchase essentials?

Stay home if you are sick, except to get medical care. If you are not sick and must leave your home to purchase essentials – like food, water, or medication – maintain social distancing whenever possible by staying at least six feet from others. If this is not possible, for instance when purchasing an item from a cashier, you should limit contact, cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow, and avoid touching your eyes, mouth, and face. Wear a cloth face covering when in a public setting. Wash your hands with soap and water or an alcohol-based sanitizer thoroughly as soon as possible after the interaction.

A recent study showed that virus that causes COVID-19 survives on surfaces, but it seems to behave like other coronaviruses and may live on surfaces for a few hours or up to several days (depending on the surface): 72 hours on plastic and steel and up to 24 hours on cardboard.

If you think a surface, such as items you purchased at a store, may be contaminated, clean it with simple disinfectant to kill the virus and protect yourself and others. Clean your hands with an alcohol-based sanitizer or wash them with soap and water. Avoid touching your eyes, mouth, or nose.

Is Coronavirus spread through food? Is it safe to eat fruits, vegetables, frozen food, or takeout?

Currently there is no evidence to support transmission of COVID-19 associated with food. Coronaviruses are generally thought to be spread from person-to-person through respiratory droplets.

Researchers have found the COVID-19 virus can live on surfaces for a few hours or up to several days. However, there is likely very low risk of spread from food products or packaging that are shipped over a period of days or weeks at ambient (temperature around you), refrigerated, or frozen temperatures. You can minimize your risk of contracting COVID-19 by following basic food preparation practices like washing produce and other foods well with water, cooking food thoroughly, and washing your hands with soap and water before and after food preparation and before eating.

I'm seeing empty store shelves more than a month after the pandemic started changing our lives. Are there food shortages?

Some foods are temporary out of stock because of unprecedented consumer demand, not a lack of the food system's ability to produce, process and deliver food. The same thing happened with pet food and, in some cases, food for livestock.

The typical grocery store today can carry over 50,000 different food products. And while there are reported outages in some stores of select products, the reality is that most of the food items you typically find in a grocery store remain there. The retail supply chain remains strong. For those products that have been out of stock, manufacturers and retailers of both human and animal foods are working around the clock to replenish shelves. The Food and Drug Administration (FDA) is working closely with the food industry to monitor for disruptions in the supply chain that could cause shortages and to work on solutions to help avoid that.

Should I wear gloves while grocery shopping?

Latex gloves are not recommended to wear when grocery shopping. Handwashing is recommended. Wash your hands before leaving your home, after leaving the store, and again when you get home. If soap and water are not available, use hand sanitizer with at least 60% alcohol.

Do you have any other safe grocery shopping tips?

- Avoid crowds
- Make a list and shop quickly
- Shop alone, don't bring the family
- Wear a face covering
- Sanitize carts and hands, before and after shopping
- Give the cashier some space or use the self-check out
- Choose no-touch payment when you can
- If you are anxious about grocery shopping, select the pick-up option at your grocery store instead of going inside and doing the shopping yourself

FUNERALS

Can I have an open-casket funeral for my loved one?

At this time, the state of New Jersey does not permit in-person viewings, visitations, or ceremonies with an open casket. Speak with your funeral director to discuss other options such as virtually streaming a ceremony or homegoing service.

Am I at risk if I go to a funeral or visitation service for someone who died of COVID-19?

There is currently no known risk associated with being in the same room at a funeral or visitation service with the body of someone who died of COVID-19. However, please keep in mind that the Governor has restricted gatherings during this time. There should be no physical in-person service. Talk with your funeral director or faith leader about other ways to pay tribute to your loved one and delaying the service/wake/viewing.

Am I at risk if I touch someone who died of COVID-19 after they have passed away?

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

People should consider not touching the body of someone who has died of COVID-19. Older people and people of all ages with severe underlying health conditions are at higher risk of developing serious COVID-19 illness. There may be less of a chance of the virus spreading from certain types of touching, such as holding the hand or hugging after the body has been prepared for viewing. Other activities, such as kissing, washing, and shrouding should be avoided before, during, and after the body has been prepared, if possible. If washing the body or shrouding are important religious or cultural practices, families are encouraged to work with their community cultural and religious leaders and funeral home staff on how to reduce their exposure as much as possible. At a minimum, people conducting these activities should wear disposable gloves. If splashing of fluids is expected, additional personal protective equipment (PPE) may be required (such as disposable gown, face shield or goggles and facemask).

What do funeral home workers need to know about handling people who have died from COVID-19?

Funeral home workers should follow their routine infection prevention and control precautions when handling a decedent who died of COVID-19. If it is necessary to transfer a body to a bag, follow Standard Precautions, including additional personal protective equipment (PPE) if splashing of fluids is expected. For transporting a body after the body has been bagged, disinfect the outside of the bag with a product with EPA-approved emerging viral pathogens claims expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.). Wear disposable nitrile gloves when handling the body bag.

Embalming can be conducted. During embalming, follow Standard Precautions including the use of additional PPE if splashing is expected (e.g. disposable gown, face shield or goggles and facemask). Wear appropriate respiratory protection if any procedures will generate aerosols or if required for chemicals used in accordance with the manufacturer's label. Wear heavy-duty gloves over nitrile disposable gloves if there is a risk of cuts, puncture wounds, or other injuries that break the skin. Additional information on how to safely conduct aerosol-generating procedures is in the CDC's Postmortem Guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html>

2019-Novel_CV-TP-05222020fin.108223.pdf

Cleaning should be conducted in accordance with manufacturer’s instructions. Products with EPA-approved emerging viral pathogens claims are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).

After cleaning and removal of PPE, perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.

Decedents with COVID-19 can be buried or cremated but check for any additional state and local requirements that may dictate the handling and disposition of the remains of individuals who have died of certain infectious diseases.

HEALTH SYSTEM CAPACITY

Field Medical Stations

New Jersey opened Field Medical Stations (FMS) regionally across the state. The FMS are at the Meadowlands Exposition Center in Secaucus (north), the Expo Center in Edison (central) and the Atlantic City Convention Center (south). The FMS will serve as a “step-down” facility for patients that would otherwise go to area hospitals to alleviate pressure on them but can be ramped up for intensive care use. Depending on the need, the FMS may be used for COVID-19 patients. The Meadowlands Expo Center FMS will close over the weekend and operations transferred to East Orange General Hospital.

Information about the FMS current census and number discharged from FMS is now included on the Data Dashboard at covid19.nj.gov

Medical Triage Plan

A medical triage plan was announced on April 13, 2020. This framework outlines decision-making guidance to determine how resources will be allocated in the event a region runs out of lifesaving equipment while caring for an increasing number of coronavirus patients. Shortages in ventilators, PPE and staffing are still concerns. These types of plans are designed to save the most lives possible with the resources that are available and require providers to make the dramatic shift from the patient-centered model to the community-centered model. This type of plan is only able to be enacted when the government declares a public health emergency and only if the hospital is operating in crisis or, under guidelines designed to promote safety and preserve resources.

Hospitals are asked to create triage teams that will conduct the assessments, so patients’ clinicians are not the ones making the decisions.

Non-Congregate Sheltering for Vulnerable Populations

Federal Emergency Management Agency (FEMA) has approved New Jersey's request to use emergency, non-congregate sheltering for individuals impacted by COVID-19 that do not have the means or ability to isolate themselves.

Non-congregate sheltering option frees up critical space and reduce the likelihood of further community spread, which in turn will save lives. This increased access to housing for vulnerable populations, health care workers, and first responders will allow New Jerseyans to isolate themselves without fear of spreading COVID-19 to family members and their surrounding communities.

FEMA's approval allows State, county, and local entities to be reimbursed for providing housing at hotels or motels for certain vulnerable populations, including:

- Homeless families who live in congregate shelters with at least one family member who has tested positive for COVID-19;
- Homeless individuals who require quarantine or isolation due to a positive test for COVID-19;
- Children and adults living in congregate living settings, such as group homes, who have tested positive for COVID-19;
- First responders and healthcare workers who do not require hospitalization, but nevertheless need to avoid direct contact with their families due to exposure to COVID-19; and
- COVID-19 positive patients who do not require hospitalization in a traditional setting, but who nonetheless require quarantine and isolation outside their resident to prevent the further spread of the virus.

State, county, and local entities should implement programs in accordance with FEMA guidance in order to seek reimbursement for these COVID-19 costs. Contact the local or county OEM for information about accessing non-congregate sheltering option.

<https://nj.gov/governor/news/news/562020/approved/20200411a.shtml>

LAW ENFORCEMENT

Are there any recommendations for law enforcement personnel?

Law enforcement agencies should encourage all personnel to self-monitor for symptoms before they come to work. Workers who have symptoms (fever, cough, shortness of breath, fever, chills, sore throat, headaches or loss of taste or smell) should notify their supervisor and stay home. At this time, first responders with symptoms are in the high priority category for testing for COVID19.

All persons taken into custody should be given a facemask or cloth face covering to wear. A facemask or cloth face covering may help protect others nearby if these people are infected with the virus that causes COVID19.

- If a person taken into custody exhibits symptoms of COVID-19, the person should be assessed for transport to a healthcare facility for further evaluation and management.
- If law enforcement personnel have direct personal contact with an individual with suspected or confirmed COVID-19, they should immediately use alcohol-based hand sanitizers with at least 60% alcohol, or wash hands with soap and water for at least 20 seconds.
- They should also avoid touching their eyes, nose, and mouth.

- Any uniform items (or other surfaces) that were potentially exposed should be disinfected or cleaned as soon as feasible. For example, the duty belt or other non-porous items can be disinfected using products that are EPA-approved for use against the virus.

LONG TERM CARE/POST-ACUTE/RESIDENTIAL SETTINGS

There have been cases of COVID-19 in residential and long term care facilities across the state. To limit the spread of COVID-19 among residents and staff, the following immediate actions are recommended:

- Restrict persons entering the facility, except in certain compassionate-care situations.
- Actively screen residents and person in the facility for fever and other COVID-19 signs and symptoms, per shift.
- Create separate wing/unit or floor to accept patients/residents with symptoms coming or returning from the hospital. This may mean moving patients/residents in the facility to create a new wing/unit. Limit staff working between wing/units as much as possible.
- Create separate wing/unit to accept COVID-19 positive patients/residents and care for those suspected or confirmed with COVID-19.
- Stop communal dining and all group activities. Encourage patients/residents to stay in their room
- Use telemedicine and alternate means of communication to maintain social distancing orders
- **Implement universal masking of all persons in the facility.**
- Dedicate staff and mobile equipment to a unit/wing to minimize exposures and transmission throughout a facility and in-between facilities.

Review CDC's Strategies to Optimize the Supply of PPE and Equipment at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>.

Long Term Care facilities in need of PPE should complete the form on the COVID19 website:
<https://report.covid19.nj.gov>

I suspect that there was/is misconduct at a NJ long term care or nursing home facility. To whom should I report this and how should I report?

The Attorney General's Office has launched a website where individuals can report misconduct in long term care and nursing home facilities to determine if an investigation should take place. The investigation will determine whether any individuals or entities broke the law and should face civil or criminal penalties for their actions (or lack thereof) during the outbreak. To report, go to: covid19.nj.gov/LTC. The site allows pictures to be uploaded as well as other documents.

Please keep in mind that the website is designed to further an ongoing statewide investigation, not to answer specific questions about a long-term care (LTC) or someone living at an LTC. Investigators will only contact you if they need additional information beyond what you included in your submission. If you are seeking information about a loved one, please contact the LTC directly or file a complaint with the New Jersey Long-Term Care Ombudsman at 1-877-582-6995 or ombudsman@ltco.nj.gov.

I work at a drug treatment program. Is there any special guidance?

Yes, the NJ Department of Human Services-Division of Mental Health and Addictions Services has guidance posted on their website for opioid treatment programs and other addictions providers:

www.nj.gov/humanservices/coronavirus.html

The guidance includes information about planning for reducing incidence and transmission of COVID-19 at facilities, staffing shortages, dosing patients in separate rooms, take-home dosing, and telehealth.

I have a loved one in a long term care facility. I am concerned that they are not telling me about the number of infections (both residents and staff). What should I do?

If you asked the administration for information and they are unresponsive, you may consider calling the NJDOH Health Facility Complaint Line. The health care facility 24-hour NJDOH complaint hotline handles consumer complaints and facility emergencies. Patients, health care facility employees, and other members of the public may file complaints about hospitals, ambulatory surgery centers, home health agencies, nursing homes, assisted living facilities, comprehensive personal care homes, adult medical day care, pediatric medical day facilities, and other licensed acute- and long term care facilities. 1-800-792-9770.

However, you may also lodge a complaint online, by phone, by fax or by mail.

https://www.state.nj.us/health/healthfacilities/file_complaint.shtml

How to File a Complaint about a Health Care Facility

Online

The Division takes on-line complaints. You can file a complaint by phone if you do not want to provide your name.

By Phone

Complaint Hotline: 1-800-792-9770

The 24-hour hotline handles consumer complaints and facility emergencies seven days a week. Patients, health care facility employees and other members of the public may file complaints about hospitals, ambulatory surgery centers, home health agencies, nursing homes, assisted living facilities, comprehensive personal care homes, adult medical day care, pediatric medical day facilities, and many other licensed acute- and long-term care facilities.

By FAX

You may choose to print and complete our Consumer Resident/Patient Complaint Report Form (AAS-60). The FAX line operates 24 hours a day. A Division staff member will review your complaint during regular business hours. When faxing, please include the following information:

- Your specific complaint
- Your name and mailing address including zip code
- Daytime phone number including area code

OR you may submit an anonymous complaint.

For Long Term Care Complaints including nursing homes and assisted living, please fax your information to 609-943-4977. For hospitals and outpatient facility complaints, please fax your information to 609- 943-3013.

By Mail

Please print out and complete the [Consumer Resident/Patient Complaint Report Form \(AAS-60\)](#).

Mail complaints about nursing homes, assisted living, medical day care, comprehensive personal care homes, long-term care facilities, hospitals, ambulatory surgical centers, home health agencies and other ambulatory or long-term care facilities to:

New Jersey Department of Health
Division of Health Facility Survey and Field Operations, PO Box 367, Trenton, NJ 08625-0367

I am afraid for my loved one who lives in a long term care facility. I want to bring them home during the pandemic. Can I do this?

It is recommended that you speak to the administration at the facility where your loved one lives. Discuss with them your concerns and determine the best plan of action for your loved one.

A long term care facility will not admit/readmit my loved one. Why not?

NJ Nursing Homes and Assisted Living Facilities were provided with an emergency conditional curtailment of admissions order on April 13, 2020. This order outlines the steps that facilities must take in order to continue to admit individuals to facilities.

Facilities that are not able to cohort residents (sick, exposed, and not ill/exposed), follow guidance for infection control and maintain adequate staffing, may not accept admissions or readmissions. The order shall remain in effect until the Department lifts the order.

What should long term care facility administrators do/know right now?

Facilities should review their outbreak response plan to determine whether it includes a cohorting plan. If it does not, the facility is directed to implement such a plan which allows for: overall separation of residents, dedicated staff for each cohort, and allowing for necessary space to cohort at the onset of an outbreak.

Additionally, each facility shall identify a minimum of three cohort groups:

1. Individuals who are showing symptoms of COVID-19 or who have tested positive for COVID-19
2. Individuals who have been exposed to someone who has tested positive for COVID-19 or have shown symptoms of COVID-19 (i.e., individuals who are not themselves symptomatic, but may potentially be incubating the virus)
3. Individuals who are not ill and have not been exposed.

Facilities that are not able to cohort residents (sick, exposed, and not ill/exposed), follow guidance for infection control and maintain adequate staffing, may not accept admissions or readmissions.

The facility shall be permitted to accept admission or readmission of individuals if the facility has COVID-19 residents and the facility can cohort residents, follow CDC guidance for infection prevention and control, and maintain adequate staffing.

A facility without any COVID-19 positive residents shall be permitted to accept admissions or readmissions of individuals with or without COVID-19 if the facility has the ability to cohort residents, follow CDC guidance for infection prevention and control, and maintain adequate staffing.

Admissions or readmissions for persons under investigation for COVID-19 is permitted only if they can be placed in isolation.

The facility shall comply with infection control measures as per NJDOH guidance and shall implement outbreak interventions outline in the NJDOH’s Outbreak Management Checklist. Guidance and documents may be found at:

[https://www.nj.gov/health/cd/documents/topics/NCOV/COVID LTC Recommendations.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/COVID_LTC_Recommendations.pdf)

[https://www.nj.gov/health/cd/documents/topics/NCOV/COVID Outbreak Management Checklist.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/COVID_Outbreak_Management_Checklist.pdf)

When should local health departments reach out to NJDOH’s Health Facility Survey and Field Operations (HFS& FO) regarding issues pertaining to or regarding long term care facilities?

LHDs may reach out to HFS&FO directly by filing an online complaint https://www.nj.gov/health/healthfacilities/file_complaint.shtml or by calling the NJDOH Complaint Hotline: 1-800-792-9770

PPE: Long Term Care facilities are to report their PPE inventory on a daily basis, in accordance with Executive Order 111, to <https://report.covid19.nj.gov>

Facilities in need of PPE can receive PPE based on the information included in this daily reporting and working with their county Office of Emergency Management (OEM).

Staffing: NJDOH does not have an immediate solution to address facilities staffing needs.

Facilities need to:

- 1) Handle staffing internally (i.e., extra shifts, extra pay, contact staffing agencies, et cetera)
- 2) Reach out to sister facilities if owner has more than one long term care facility
- 3) Reach out to county or local OEM for Medical Reserve Corps or other possible resources

If all of those fail, NJDOH can be contacted to determine operational capacity and compliance of the facility.

Admissions to other Facilities: HFS&FO can be contacted if a licensed health care facility is **refusing to admit** a patient/resident that is appropriate for admission/transfer.

Where can I get information/data about COVID-19 cases in long term care facilities in my county/town?

This information/data may be found on the Data Dashboard on the covid19.nj.gov website.

NJ PUBLIC HEALTH & ENVIRONMENTAL (PHEL) LABORATORY

When can results be expected if a patient/person was tested by the NJ Public Health and Environmental Lab (PHEL), also known as the state public health lab?

Results from PHEL should be available 24-48 hours after PHEL receives the specimen(s).

How do I submit specimens to be tested at PHEL?

Please visit the PHEL webpage: <https://www.nj.gov/health/phel/>

View the current bulletin about SARS-CoV-2 testing for COVID-19:

<https://www.nj.gov/health/phel/documents/Bulletins/Supplemental%20Bulletin%202020.1.4%20SARS-CoV-2%20Testing%20at%20PHEL.pdf>

How do I know if PHEL received my specimens/How do I package the specimens/Where do I send specimens for PHEL testing?

Questions or technical assistance with specimen collection, packaging or shipping should be directed to the NJ Public Health and Environmental Laboratory-Virology Program at 609-530-8516 or virology.PHEL@doh.nj.gov

How are results of PHEL tested specimens communicated?

PHEL provides negative test results via email to NJDOH Communicable Disease Service staff and other contacts identified at intake. Positive results are relayed via phone. All results (both positive and negative) are provided via email and fax to the submitting laboratory.

PUBLIC TRANSPORTATION

As a transit station worker/bus transit operator/rail transit operator, how can I protect myself?

Potential sources of exposure include having close contact with a passenger with COVID-19 or by touching surfaces contaminated with coronavirus.

- Limit close contact with others by maintaining a distance of at least 6 feet, when possible.
- Avoid touching surfaces often touched by passengers.
- Practice routine cleaning and disinfection of frequently touched surfaces, following the directions on the cleaning product's label.
- Use gloves if required to touch surfaces contaminated by body fluids.

- Proper hand hygiene is an important infection control measure. Wash your hands regularly with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer containing at least 60% alcohol.
- Key times to clean hands include:
 - Before, during, and after preparing food
 - Before eating food
 - After using the toilet
 - After blowing your nose, coughing, or sneezing
- Additional workplace-specific times to clean hands include:
 - Before and after work shifts
 - Before and after work breaks
 - After touching frequently touched surfaces, such as fareboxes and handrails
- Avoid touching your eyes, nose, or mouth.

Which public transportation station surfaces should be cleaned? What are the best cleaning chemicals to use when cleaning?

Perform routine cleaning and disinfection of all frequently touched non-porous surfaces within the transit station on a daily basis. These include kiosks, ticket machines, turnstiles, benches, handrails, garbage cans, door handles, payphones, restroom surfaces (e.g., faucets, toilets, counters), elevator buttons, and system maps. If the surfaces are visibly dirty, they should be cleaned prior to disinfectant application. For soft or porous surfaces, remove any visible contamination if present and clean with appropriate cleansers indicated for use on these surfaces.

Wear the personal protective equipment (PPE) required for using the cleaning and disinfection products according to the product manufacturer's instructions. After removing PPE, wash your hands with soap and water for at least 20 seconds. Work uniforms worn during cleaning and disinfecting should be laundered afterwards. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Clean your hands after handling laundry by washing your hands with soap and water or using an alcohol-based hand sanitizer with at least 60% alcohol if soap and water are not available.

<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator.html>

SCHOOLS

Schools will remain closed through the end of the 2019-2020 school year. All learning will continue remotely.

Citing the need to protect the health of New Jersey's 1.6 million public and private school students as well as thousands of educators and support staff, Governor Phil Murphy on May 4, 2020 announced that statewide school closures will be extended through the end of the 2019-2020 academic year. Private schools with longer academic years will remain closed until at least June 30. While the prohibition of in-person instruction will be maintained through the end of the school year, public schools will continue to provide remote learning for students to allow districts to meet the state-required minimum of 180 instruction days. <https://nj.gov/governor/news/news/562020/approved/20200504a.shtml>

TRAVEL

Due to the rapidly changing situation, travel recommendations and countries with various levels of travel alerts are subject to frequent updates. Please refer callers to the CDC website Coronavirus Disease 2019 Information for Travel page at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>. This webpage provides information about travel in the US, travel health notices, returning from international travel, cruise ship travel, and travel FAQs.

Questions regarding exposures on commercial flights

If callers have concerns about exposures to COVID-19 on commercial flights, please refer to the document “Risk Exposure Categories for Asymptomatic Individuals with Possible Exposure to 2019-nCoV.”

If travelers are returning to the United States from any flight (regardless of destination) and are identified as having an exposure to a confirmed COVID-19 case while on the flight, the CDC will notify any passengers who were deemed to be at risk based upon their seating location in relation to the case (within 2 rows of a passenger with confirmed 2019-nCoV. Roughly 2 rows in any direction).

Travel to Alaska, Florida, and Hawaii

Governors from Alaska, Florida, and Hawaii are asking travelers from states with high cases of COVID-19 to not visit. This includes New York, New Jersey or Connecticut. Governors from these states used orders mandating a 14-day quarantine upon arrival for all visitors and residents arriving at state airports.

Alaska: Travelers arriving at state airports will be required to fill out a mandatory State of Alaska Travel Declaration Form and identify their “designated quarantine location”, which would be home for residents and a hotel room or rented lodging for visitors. The state’s order requires travelers to go straight to their quarantine location from the airport and remain there for 14 days, or for the duration of their stay if it’s shorter. People in self-isolation can leave only for medical emergencies or to seek medical care, and they are not allowed to have visitors other than a health care provider. Violators in Alaska will face a maximum \$25,000 fine or up to one year in jail, according to the state.

Florida: Requires people arriving on flights from the New York Tri-State area – NY, NJ, and CT -to quarantine for 14 days or for the length of their stay if that time is shorter. The mandate makes exceptions for airline employees, military, health and emergency personnel. Those who self-quarantine are responsible for the costs of isolation including transportation, food, lodging and medical care, according to the state. Anyone who violates the quarantine order in Florida is subject to a second-degree misdemeanor punishable by a 60-day jail sentence and up to a \$500 fine, the executive order says.

Hawaii: Mandates all visitors and residents arriving at airports in the state to self-quarantine for 14 days.

According to the state, travelers will be required to complete a Hawaii Department of Agriculture form on their flight and present it to checkpoint staff after landing. The travelers must then go straight to the "designated quarantine location" that they identify on the form and remain there for 14 days or the length of their stay if it is shorter.

Those in self-isolation can leave the location only for medical emergencies or to seek medical care. They also can't have visitors unless it's a health care provider. In Hawaii, violating the order is a misdemeanor punishable by a maximum \$5,000 fine and up to one year in jail, according to the state.

POPULATIONS

CHILDREN

Can you explain the new inflammatory syndrome that is being seen in children?

Multisystem Inflammatory Syndrome in Children (MIS-C) Associated with Coronavirus Disease 19 is a health condition appearing in children in the United States and elsewhere. Some doctors think the condition is related to having coronavirus disease 2019 (COVID-19), but the connection is still not clear.

MIS-C is similar to other serious inflammatory conditions such as Kawasaki disease and toxic shock syndrome. Children with MIS-C can have problems with their heart and other organs and need to stay in a hospital to receive support in an intensive care unit. MIS-C is a rare condition. However, because it may be life-threatening, it is important that parents know the signs and symptoms, so they can get help right away.

What are the signs or symptoms of MIS-C?

Most children have fever (temperature of 100.4 degrees F or 38.0 degrees C or greater) lasting several days, along with other symptoms. These symptoms may include:

- Fever for more than 24 hours
- Irritability or sluggishness
- Abdominal pain without another explanation
- Diarrhea
- Vomiting
- Rash
- Conjunctivitis, or red or pink eyes
- Enlarged lymph node ("gland") on one side of the neck
- Red, cracked lips or red tongue that looks like a strawberry
- Swollen hands and feet, which might also be red

Is there a case definition for MIS-C?

Yes, the CDC Case Definition for Multisystem Inflammatory Syndrome in Children (MIS-C) was disseminated to states on May 14, 2020. See below for more information.

- An individual aged <21 years presenting with fever, laboratory evidence of inflammation, and evidence of clinically severe illness requiring hospitalization, with multisystem (>2) organ

involvement (cardiac, renal, respiratory, hematologic, gastrointestinal, dermatologic or neurological); AND

- No alternative plausible diagnoses; AND
- Positive for current or recent SARS-CoV-2 infection by RT-PCR, serology, or antigen test; or COVID-19 exposure within the 4 weeks prior to the onset of symptoms

Fever $>38.0^{\circ}\text{C}$ for ≥ 24 hours, or report of subjective fever lasting ≥ 24 hours Including, but not limited to, one or more of the following: an elevated C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), fibrinogen, procalcitonin, d-dimer, ferritin, lactic acid dehydrogenase (LDH), or interleukin 6 (IL-6), elevated neutrophils, reduced lymphocytes and low albumin

Additional comments:

- Some individuals may fulfill full or partial criteria for Kawasaki disease but should be reported if they meet the case definition for MIS-C
- Consider MIS-C in any pediatric death with evidence of SARS-CoV-2 infection

What is Kawasaki disease?

Kawasaki disease is a fever-causing illness of children. The cause of Kawasaki disease is not known. The symptoms of Kawasaki disease include a high fever usually lasting for at least 10 days and a rash. The rash is usually limited to the person's trunk.

Complications of Kawasaki disease include coronary artery aneurysm (ballooning of vessels in the heart). Other organs may be affected.

NOTE: Do not confuse Kawasaki disease with Coxsackie virus. Coxsackie virus causes hand, foot and mouth disease. Symptoms associated with Coxsackie virus also includes a blister-like rash that involves the hands, feet and mouth. Coxsackie virus usually occurs in children under the age of 10 but can occur in young adults. The names sound similar but are different illnesses.

What clinical features are health care providers seeing pediatric cases with MIS-C associated with COVID-19?

Health care providers are observing the following:

- Illness characterized by persistent fever and features of Kawasaki disease and/or toxic shock syndrome; abdominal symptoms common.
- Cases may require intensive care unit admission for cardiac and/or respiratory support.
- Polymerase chain reaction (PCR) testing for SARS-CoV-2 may be positive or negative.
- Early recognition and specialist referral are essential, including to critical care if warranted.

Are there any isolation recommendations for children who are exhibiting the symptoms associated with MIS-C?

Kawasaki disease is not transmitted person-to-person. However, children displaying characteristics of inflammatory syndrome have tested positive and negative for COVID-19. If a child's COVID-19 status is

unknown or if they are a close contact of a COVID-19 positive individual, follow COVID-19 isolation recommendations.

What is NJDOH doing to investigate cases of Multisystem Inflammatory Syndrome in Children (MIS-C) Associated with Coronavirus Disease 19?

NJDOH is working with the CDC, neighboring states, and health care professionals to investigate reported pediatric cases of multi-system inflammatory syndrome associated with COVID-19. Cases characterized by persistent fever and features of Kawasaki disease and/or toxic shock syndrome were reported in the United Kingdom and have recently been identified in children in the United States. Similar presentations have been reported from facilities in New Jersey and the NJDOH is working to gather additional information on these reports. Health care providers are asked to complete and submit a case report form to the NJDOH. Contact the NJDOH Communicable Disease Service with questions about reporting at 609-826-5964. The case report form may also be found on the NJDOH Communicable Disease Service COVID-19 webpage at:

https://www.nj.gov/health/cd/documents/topics/NCOV/NJDOH_CRF_COVID_Peds_Inflammatory_Syndrome.pdf

Who should complete the NJDOH MIS-C Associated with COVID-19 Case Report Form?

The form should be completed by the health care provider, infection preventionist, or someone from the health care facility. The completed form should be emailed to pedcov@doh.nj.gov. The NJDOH team will review the form for missing information, coordinate securing medical records, and conduct chart abstraction, if necessary. The information collected on these cases will be included in CDRSS; and Local Health Departments will be informed of cases within their jurisdiction. Contact the NJDOH Communicable Disease Service with questions about reporting at 609-826-5964.

For more information about MIS-C reporting, please refer to the LINC's message sent on May 16, 2020.

Can adults (or persons over the age of 21) get MIS-C?

It is currently unknown if multisystem inflammatory syndrome is specific to children or if it also occurs in adults.

Are children more susceptible to the virus that causes COVID-19 compared with the general population and how can infection be prevented?

At this time, there is no evidence that children are more susceptible. Infections in children have been reported, including in very young children. From limited information published from past Severe Acute Respiratory Syndrome coronavirus (SARS CoV) and Middle East respiratory syndrome coronavirus (MERS CoV) outbreaks, infection among children was relatively uncommon.

Children should practice preventive actions to avoid infection, including cleaning hands often using soap and water or alcohol-based hand sanitizer, avoiding people who are sick, and staying up to date on vaccinations, including influenza vaccine.

Does the illness differ in children compared with adults?

Limited reports of children with COVID-19 in China and the United Kingdom have described cold-like symptoms, such as fever, runny nose, and cough. Gastrointestinal symptoms, such as vomiting and diarrhea, have been reported in at least one child with COVID-19. These limited reports suggest that children with confirmed COVID-19 have generally presented with mild symptoms, and though severe complications (acute respiratory distress syndrome, septic shock) have been reported, they appear to be uncommon. However, NJDOH is aware of a multisystem inflammatory syndrome (MIC-S) associated with COVID-19 in children. NJDOH is working with the CDC, neighboring states, and health care providers to investigate reports of illness.

Are there any treatments available for children with COVID-19?

There are currently no antiviral drugs approved by the US Food and Drug Administration for COVID-19. There is one drug, remdesivir, which has received an Emergency Use Authorization and may have some effect on the disease. It is only used in those severe enough to be hospitalized. Clinical management includes prompt implementation of recommended infection prevention and control measures in health care settings and supportive management of complications. Children and their family members should engage in usual preventive actions to prevent the spread of respiratory infections, including covering coughs, cleaning hands often with soap and water or alcohol-based hand sanitizer, and staying up to date on vaccinations, including influenza.

My child's pediatrician is only open for emergencies. Why is the office closed for regular appointments?

Because of personal, practice, or community circumstances related to COVID-19, some providers may not be able to provide well-child visits, including provision of immunizations, for all patients in their practice. **If a practice can provide only limited well-child visits, healthcare providers are encouraged to prioritize newborn care and vaccination of infants and young children (through 24 months of age) when possible.**

Can my child still go on "play dates"?

It is not recommended. During the COVID-19 outbreak, schools are closed to limit the spread of the virus. The practice of social distancing is public health measure taken to help slow down the spread of a contagious disease by restricting when and where people can gather. These measures can include limiting groups of people coming together.

HEALTHCARE WORKERS (HCWs)

I am an HCW and am being asked to return to work before the recommended self-isolation timeframe ends. Is that OK?

Current NJDOH guidance does not allow for healthcare providers (HCPs) to return to work while still symptomatic (with the understanding that very mild symptoms such as slight cough may persist long periods of time and are not themselves considered to be exclusionary). Our guidance, which follows general CDC guidance, recommends that:

What is being asked of HCWs who work in long term care facilities?

New Jersey's long term care facilities have been asked to implement new mask and resident isolations to slow the spread of COVID-19. As of 4/1/20, the recommendation is for "universal masking of all staff and anyone entering" any long term care facility. Symptomatic residents should also be masked. Facilities are being encouraged to create separate wings, units or floors to separate people with the virus from those who do not have the virus (also known as cohorting).

What is the procedure if a HCW cares for someone with confirmed COVID-19?

HCWs who care for someone with COVID-19 should alert their supervisor to determine if they had a high-risk exposure to the confirmed COVID-19 person and what the next step should be. If the HCW does not have symptoms the next steps to take will depend on the type of contact and what personal protective equipment (PPE) was used.

There may not be additional further action, or the HCW may be asked to quarantine (14 days), or the HCW may be asked wear a mask while working. The HCW should work with their supervisor and occupational health group to determine the best action to take.

If someone in my family tested positive for COVID-19, what should I do?

In general, close contact means being within 6 feet of a person for longer than 10 minutes. Contact your supervisor or employer. Remain on home isolation until you receive additional guidance from your employer on when to return to work and what precautions to take.

Talk to your employer or local/county Office of Emergency Management (OEM) about voluntary isolation at a FEMA-approved facility, possibly a contracted hotel near your residence/work. Facilities have been identified for HCW and others to voluntarily isolate if social distancing within the home is not an option.

I am a healthcare worker (HCW or HCP) who tested positive for COVID-19, when can I return to work?

According to the latest guidance:

- a) **Asymptomatic HCP Tested Positive:** Due to the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness. Asymptomatic HCP who have tested positive for COVID-19 may return to work using one of the below two strategies:

- i) **Time-based strategy:** Asymptomatic HCP who have tested positive for COVID-19 may return to work 10 days after their first positive COVID-19 test AND have had no subsequent symptoms. If symptoms develop, refer to the “Symptomatic HCP Tested Positive” criteria, below.
- ii) **Test-based strategy²:** Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens).
- b) **Symptomatic HCP Tested Positive:** Symptomatic HCP who have tested positive for COVID-19 may return to work once one of the following criteria have been met:
 - i) **Symptom-based strategy:** 10 days after symptoms first developed AND 3 days (72 hours) after fever has resolved without the use of fever-reducing medications with a significant improvement in respiratory symptoms (whichever period is longer).
 - ii) **Test-based strategy²:** Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from at least two consecutive nasopharyngeal swabs specimens collected ≥ 24 hours apart (total of two negative specimens) AND resolution of fever, without use of fever-reducing medication AND improvement in respiratory symptoms.

For more information about this guidance, please refer to the May 5, 2020 LINCS message.

What if I’m concerned that I may have exposed a patient?

Healthcare workers are more likely to expose a patient while they are symptomatic and in close contact with a patient. This includes any activity in close proximity to a patient or in an enclosed space with a patient for longer than a few minutes (i.e. physical exams, certain diagnostic procedures, discussions in close proximity). The risk is higher if neither the provider nor the patient was using appropriate PPE during these interactions. If you think your patients may have been exposed to COVID-19, alert your supervisor and infection control practitioner (if applicable). The facility should take the steps necessary to assess the risk to patients and provide patient notification where indicated.

If you are in private practice, then you must take the steps necessary to identify the risk to your patients and notify them as appropriate.

Check the NJDOH website for the latest guidance for HCWs:

https://www.state.nj.us/health/cd/topics/covid2019_professionals.shtml

What if I tested negative, but still feel sick?

If you test negative for COVID-19 but still have symptoms, it is likely you may have another respiratory virus. You should continue to follow similar guidance to isolate yourself from others, practice good hand hygiene and clean and disinfect surfaces in the home. You should not return to work until 72 hours after your fever has ended without the use of fever-reducing medications and your other symptoms have improved. If your symptoms worsen, or if they are not improving after several days, you should speak to your doctor.

HOMELESS

What is being done for the homeless population during COVID-19?

People experiencing homelessness may be at risk for infection during the COVID-19 pandemic. CDC has interim guidance for homeless shelters and interim guidance for responding to COVID-19 among people experiencing unsheltered homelessness.

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html>

<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html>

OLDER ADULTS

What about the elderly and people with underlying medical conditions? Are they more at-risk?

The elderly and people of all ages with underlying health conditions seem to be at higher risk for more serious COVID-19 illness. Early data suggest older people are twice as likely to have serious COVID-19 illness. This may be because:

- As people age, their immune systems change, making it harder for their body to fight off diseases and infection.
- Many older adults are also more likely to have underlying health conditions that make it harder to cope with and recover from illness.

If you are at increased risk for COVID-19 complications due to age or a severe underlying medical condition, it is especially important for you to take actions to reduce your risk of exposure.

These people should also speak to their health care provider ahead of time to have a plan in place in the event they become sick. By talking to your health care provider ahead of time you can have a plan in the event that you do become ill if community spread of the virus occurs in your area. You can determine together what medications you may need to have on hand, make plans for any additional supportive care, or decide at what point the doctor would actually like for you to come into the office for an exam or at what point you should go to a hospital for medical support as needed.

On March 8, 2020, CDC recommended travelers, particularly those with underlying health issues, defer all cruise ship travel worldwide. CDC also recommends that older adults and travelers with underlying health issues avoid situations that put them at increased risk for more severe disease, including non-essential travel on long plane trips.

I am an older adult How can I protect myself?

The CDC developed a checklist of actions that older adults can take to protect themselves.

<https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/checklist.html>

If I get the pneumonia vaccine, will that protect me from COVID-19?

No. Vaccines against pneumonia, such as pneumococcal vaccine and the Haemophilus influenza type B (HiB) vaccine do not provide protection against COVID-19. Although vaccination against pneumonia and seasonal flu is recommended to protect your health in general.

PETS & ANIMALS

I need to have my pet spayed, but I can't find a spay/neuter clinic that is open. Why have they been closed?

On March 27, 2020, Governor Murphy issued an Executive Order (# 109) calling for the suspension of all "elective" surgeries and medical and dental procedures for adults. Although the order did not specify veterinary procedures, many veterinarians chose to suspend these services to preserve personal protective equipment (PPE), which is currently in great demand and short supply.

The NJ Veterinary Medical Association (NJVMA) encourages all NJ veterinarians to suspend elective surgeries, non-emergency procedures, and well visits in order to limit exposure risk and conserve needed personal protective equipment. Veterinarians should use their clinical judgment when deciding which procedures are essential. The NJDOH low-cost spay/neuter program continues to reimburse enrolled facilities for eligible surgeries. NJDOH does not have the authority to mandate that a spay/neuter clinic, or any private animal hospital remain open or to determine what services are provided.

I need to license my dog but can't get a rabies vaccination from my primary veterinarian. Are rabies vaccines essential?

Yes, rabies vaccines (and other vaccines) are essential services to protect both human and animal health. If your veterinarian is unable to give your pet his/her rabies vaccine, try calling other vets in the area to see if they can provide rabies vaccine to your pet. You can also contact your municipality and ask about local rabies clinics. Some municipalities are extending their licensing periods due to the pandemic (the license period may be extended through June 30th). NJ has not waived rabies vaccination requirements.

The animal hospital I bring my pets to has closed due to COVID-19 concerns. If they are considered essential, don't they have to stay open to take care of our pets?

No. As essential service providers, veterinary practices can stay open, but there is no requirement that veterinary practices must remain open for business. If your animal hospital has closed, they should provide reasonable options for emergency clinics.

I work at an animal hospital, and I need guidance on determining which of the services we offer are considered essential vs elective.

Veterinarians should use their clinical judgment when determining what services are essential. The NJ Veterinary Medical Association (NJVMA) has guidance on veterinary issues, including questions to consider when making decisions on elective vs non-elective care:

https://cdn.ymaws.com/njvma.org/resource/resmgr/hot_topics/COVID_19_3.21.20_FB_Live_QA_.pdf

Veterinarians should follow recommendations for social distancing and infection control: COVID-19 And NJ Veterinary Practices: (https://cdn.ymaws.com/njvma.org/resource/resmgr/covid_19_njvma.pdf)

I own a veterinary hospital, and I want to close my business for now, because I am immunocompromised. Do I have to stay open since veterinarians are considered essential?

No. As essential businesses, veterinary hospitals are permitted to remain open for business, while implementing social distancing practices, but they are not mandated to remain open. If you close your hospital it is recommended the following ways to serve your clients:

- Have information about the closest emergency clinic on your voicemail, business entrances, and website.
- Send an email notification of the closure to all clients and include information about the closest emergency clinic.

I am a house call veterinarian. Am I permitted to continue to make house calls during the COVID-19 “shelter-at-home” rules?

Yes, you may continue to make house calls for essential services, if you can do so safely while following infection control and social distancing guidelines. Here is a helpful resource:

<https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19/mobile-housecall-veterinarians-covid19-pandemic>

I am an employee at an animal hospital, and I want to know if I am allowed to wear PPE to see my patients. I have heard that some clinics are not letting their staff wear PPE because of the shortage, while others are using too much PPE. Are there any guidelines for us to follow?

The American Veterinary Medical Association (AVMA) has some recommendations about wearing PPE. These recommendations discuss strategies such as postponing elective procedures that require the use of PPE, safely extending the use of disposable PPE, re-using disposable PPE, and increased use of washable PPE. <https://www.avma.org/resources-tools/animalhealth-and-welfare/covid-19/guidelines-ppe-covid-19-pandemic-demand-exceeds>.

Are dog-grooming facilities considered essential?

Yes. Pet groomers have recently been added to the list of businesses that are permitted to remain open.

Are dog shelters allowed to remain open during the COVID-19 shelter-at-home restrictions?

Yes, shelters, pounds, and humane societies are permitted to remain open, although some may have limited hours and services. There are many important functions that need to continue, including reuniting lost pets with their owners, finding adoptive or foster families for abandoned pets, and assisting humane law enforcement with cruelty cases.

Are dog kennels/boarding facilities considered essential?

Pet boarding facilities are included in the list of essential businesses permitted to operate.

I heard that boarding facilities are considered essential, but the one I usually use is still closed. What if I get sick and need to go to the hospital, or I need to board my pet for some other reason. What should I do?

Pet boarding facilities are listed as essential businesses that are permitted to remain open. If you are unable to care for your animal and cannot find a boarding facility, it is best to try to find a friend or family member to help. If this is not possible, and you must board your pet in an emergency, you can sometimes locate a veterinary hospital that would be willing to board your pet.

Another option is to contact your county's Office of Emergency Management (OEM). For more information on managing animals during emergencies, please see the following website:

<https://www.nj.gov/agriculture/animalemergency/cart/>

I volunteer for a non-profit dog rescue group. We have foster families in NJ ready to take in dogs that are being shipped into NJ from another state. Are there any special requirements for movement of animals during the COVID-19 pandemic?

All public gathering is prohibited and therefore an adoption event where people gather to obtain pets for adoption or transfer would not be permitted. Animals transported into New Jersey for adoption or transfer would need to be transferred directly to the foster or owner's home or point of destination with all precautions being adhered to, including face masks and social distancing, hand washing, sanitizing, and continual cleaning and disinfection of surfaces.

Rescue groups and animal welfare organizations transporting animals into New Jersey for adoption shall comply with all applicable local and State laws, rules, and ordinances, including the Charities Registration Section of New Jersey Consumer Affairs and USDA Animal Welfare requirements for transporting animals across state lines in commerce (including adoptions).

My pet has to go to the veterinarian for treatment. How long is COVID-19 viable on my pet's fur, and is it safe for me and my family to handle my pet after treatment if it may have been exposed during the exam?

At this time, it is unknown how long the virus can remain viable on a pet's fur. It is important to practice good hand hygiene, which includes washing your hands for 20 seconds, after touching your pet, and avoid touching your eyes, nose, or mouth with unwashed hands.

I heard about the two cats in New York City who tested positive for the virus that causes COVID-19. What do I need to know?

On Wednesday, April 22, 2020 the U.S. Centers for Disease Control and Prevention (CDC) and the United States Department of Agriculture's (USDA) National Veterinary Service Laboratories (NVSL) announced the first confirmed cases of SARS-CoV-2 (the virus that causes COVID-19) infection in two pet cats. These are the first pets in the U.S. to test positive for SARS-CoV-2.

Public health officials are still learning about SARS-CoV-2, but there is NO evidence that pets play a role in spreading the virus in the U.S. Therefore, there is no justification in taking measures against companion animals that may compromise their welfare. Further studies are needed to understand if and how different animals, including pets, could be affected.

Should I be concerned about pets or other animals and COVID-19?

To date, CDC is aware of a very small number of pets or other animals reported to be infected with COVID-19. However, since animals can spread other diseases to people, it's always a good idea to wash your hands after being around animals.

On April 5, USDA reported the first confirmed case of COVID-19 infection in an animal in the United States. This case is the first confirmed infection in a tiger in the world. This is also the first animal reported to be sick with a confirmed COVID-19 infection in the world.

On April 22, the CDC and USDA reported the first confirmed cases of SARS-CoV-2 in pet cats in the U.S. The cats were from 2 different households, from 2 different areas of NY state. Each cat had mild respiratory illness, and each is expected to make a full recovery. One of the cats came from a household where the owner had been tested positive for COVID-19 prior to the cat becoming ill. The other cat came from a household where no people were confirmed to be ill with COVID-19. This cat was known to go outside occasionally, so is thought to have become infected by an asymptomatic household member, or from someone outside the home.

It's important to remember that dogs and cats have their coronaviruses, which cannot spread to people. Further studies are needed to understand if and how different animals could be affected by COVID-19 and we are continuing to learn more every day. CDC continues to recommend that people sick with COVID-19 isolate themselves from other people and animals, including pets, during their illness until we know more about how this virus affects animals.

Can I have my pet tested for COVID-19?

At this time the CDC does not recommend routine testing of pets. There are many causes of respiratory illnesses in cats and dogs. If your pet is sick, you should contact your veterinarian. If your pet has had contact with someone who has COVID-19, the veterinarian should be informed. If the veterinarian has

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concerns about testing the pet for COVID-19, they need to contact the NJDOH for guidance. In some circumstances, testing may be approved.

If there is a shortage of tests for people, why were the cats in NY tested?

The cats were tested by a lab that uses supplies that are not used for human testing.

My pet is showing signs of respiratory disease. What should I do?

Call your veterinarian with any concerns about your pet’s health. The veterinarian will determine if they need to see your pet. Please let them know if anyone in the household has signs of COVID-19 before visiting the animal hospital.

At this time, we know that in rare situations, cats can become infected with the virus that causes COVID-19, and they may experience mild signs of illness. There is no evidence that cats can spread the disease to people.

Until we know more, the CDC recommends the following:

- Do not let pets interact with people or other animals outside the household.
- Keep cats indoors when possible to prevent them from interacting with other animals or people.
- Walk dogs on a leash, maintaining at least 6 feet from other people and animals.
- Avoid dog parks or public places where a large number of people and dogs gather.

Should I avoid contact with pets or other animals if I am sick with COVID-19?

You should restrict contact with pets and other animals while you are sick with COVID-19, just like you would around other people. Limit contact with animals until more information is known about the virus. When possible, have another member of your household care for your animals while you are sick. If you are sick with COVID-19, avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with pets and wear a facemask.

A pet owner in my town who had COVID and recently passed away. There is no one in the home to care for the animal. What can be done?

The Animal Control Officer (ACOs) or facility receiving the pet should attempt to reach the next of kin or other family members to see if they can provide a home to the animal. ACOs or facilities should ensure the animal is unwanted before offering the pet for adoption. The animal would not need to be held 7 days because it is not a stray, but the family should be contacted in case there is dual ownership, or the family wants the pet. Action should occur quickly, depending on the situation, to ensure that the pet was provided with basic needs, such as food and water. A home receiving a new household animal should follow standard handwashing practices before and after interacting with the animal.

Shelters receiving household animals should ensure they review and adhere to their established biosafety and biosecurity practices for infectious diseases. <https://www.cdc.gov/coronavirus/2019-ncov/php/interim-guidance-managing-people-in-home-care-and-isolation-who-have-pets.html> and follow guidelines from the American Veterinarian Medical Association (AVMA). <https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19/interim-recommendations-intake-companion-animals-households-humans-COVID-19-are-present>

Is it ok to take my pet's ivermectin, a pill that treats parasites, as a coronavirus cure?

Ivermectin is the latest drug highlighted by social and mainstream media to fight against the coronavirus pandemic. The Food and Drug Administration (FDA) is warning people against taking ivermectin to prevent or treat COVID-19. There are reports from other states that people are taking the ivermectin prescribed for pets for the prevention of heartworm disease as a prevention for COVID-19. The FDS reminds people that there is no approved preventative medicine for coronavirus.

I heard there is a coronavirus vaccine for dogs. Should I talk to my vet about getting my dog vaccinated to protect them against COVID-19?

The canine corona vaccines available in some global markets are intended to protect against intestinal coronavirus infection and are NOT licensed for protection against respiratory infections. Veterinarians should NOT use such vaccines in the face of the current outbreak thinking that there may be some form of cross-protection against COVID-a9. There is **absolutely no evidence** that vaccinating dogs with commercially available vaccines will provide cross-protection against the infection by COVID-19, since the intestinal and respiratory viruses are distinctly different types of coronavirus. No vaccines are currently available in any market for respiratory coronavirus infection in the dog.

Additionally, canine intestinal coronavirus can cause intestinal disease (diarrhea) and make parvovirus infection worse. Canine respiratory coronavirus can be involved in cases of "kennel cough" (respiratory disease usually seen in shelter situations). These are both different from the coronavirus that causes COVID-19. Currently there is no evidence that companion animals can spread COVID-19.

PREGNANCY

What is being done to ensure safe care for pregnant patients?

The New Jersey Perinatal Care During COVID-19 Work Group led by the New Jersey Health Care Quality Institute (NJHCQI) published a series of recommendations to ensure safe and equitable care for pregnant individuals and infants throughout the current pandemic. The recommendations focus on safety and accommodations to support pregnant individuals in areas such as:

- Safety and accommodations during prenatal visits
- Advance communications to patients on changes in protocols for arriving at the hospital to deliver
- Protocols for COVID-19 testing of pregnant individuals
- Ways to support patients through labor and delivery when there are limitations on the number of support persons that can be with them in person

- Protocols for suspected or confirmed COVID-19 patients
- Lactation advice for COVID-19 positive patients
- Consideration of resources and supports needed postpartum when hospital discharges may occur more quickly and access to supplies and food can be more challenging due to the statewide health emergency.

To read more about the NJHQCI perinatal work group recommendations, please visit:

<https://www.njhcqi.org/ceo-blog-5-07-2020/>

Are pregnant women more susceptible to infections, or at increased risk for severe illness, morbidity, or mortality with COVID-19, compared with the general public?

CDC does not have information from published scientific reports about susceptibility of pregnant women to COVID-19. Pregnant women experience physical changes which might make them more susceptible to viral respiratory infections, including COVID-19. Pregnant women also might be at risk for severe illness, morbidity, or mortality compared to the general population as observed in cases of other related coronavirus infections [including severe acute respiratory syndrome coronavirus (SARS-CoV) and Middle East respiratory syndrome coronavirus (MERS-CoV)] and other viral respiratory infections, such as influenza, during pregnancy.

Are pregnant women with COVID-19 at increased risk for adverse pregnancy outcomes?

CDC does not have information on adverse pregnancy outcomes in pregnant women with COVID-19. Pregnancy loss, including miscarriage and stillbirth, has been observed in cases of infection with other related coronaviruses [SARS-CoV and MERS-CoV] during pregnancy. High fevers during the first trimester of pregnancy can increase the risk of certain birth defects.

Are infants born to mothers with COVID-19 during pregnancy at increased risk for adverse outcomes?

Based on limited case reports, adverse infant outcomes (such as pre-term birth) have been reported among infants born to mothers positive for COVID-19 during pregnancy. However, it is not clear that these outcomes were related to maternal infection, and at this time the risk of adverse infant outcomes is not known.

Given the limited data available related to COVID-19 during pregnancy, knowledge of adverse outcomes from other respiratory viral infections may provide some information. For example, other respiratory viral infections during pregnancy, such as influenza, have been associated with adverse neonatal outcomes, including low birth weight and preterm birth. Additionally, having a cold or influenza with high fever early in pregnancy may increase the risk of certain birth defects. Infants have been born preterm and/or small for gestational age to mothers with other coronavirus infections. SARS-CoV and MERS-CoV, during pregnancy.

Is there a risk that COVID-19 in a pregnant woman or neonate could have long-term effects on infant health and development that may require clinical support beyond infancy?

At this time, there is no information on long-term health effects on infants either with COVID-19, or those exposed to the virus that causes COVID-19 in utero. In general, prematurity and low birth weight are associated with adverse long-term health effects.

Is maternal illness with COVID-19 during lactation associated with potential risk to a breastfeeding infant?

Human-to-human transmission by close contact with a person with confirmed COVID-19 has been reported and is thought to occur mainly via respiratory droplets produced when a person with infection coughs or sneezes. To date, no evidence of virus has been found in the breast milk of women with COVID-19.

No information is available on the transmission of the virus that causes COVID-19 through breast milk (i.e., whether infectious virus is present in the breast milk of an infected woman). In limited reports of lactating women with COVID-19, the virus has not been detected in breast milk; however, we do not know whether mothers with COVID-19 can transmit the virus via breast milk. Whether and how to start or continue breastfeeding should be determined by the mother in coordination with her family and health care providers.

A mother with confirmed COVID-19 or who is a symptomatic Person Under Investigation (PUI) should take all possible precautions to avoid spreading the virus to her infant, including washing her hands before touching the infant and wearing a face mask, if possible, while feeding at the breast. If expressing breast milk with a manual or electric breast pump, the mother should wash her hands before touching any pump or bottle parts and follow recommendations for proper pump cleaning after each use. If possible, consider having someone who is well feed the expressed milk to the infant.

SEASONAL FARM WORKERS

What is NJ doing to protect seasonal farm workers and farms from COVID-19?

In an effort to help protect the thousands of seasonal farm workers in New Jersey, the state Departments of Health, Agriculture, and Labor and Workforce Development have issued guidance on working conditions as well as testing/treatment procedures to assist agricultural businesses and farm workers in minimizing the risk and potential exposure to COVID-19.

The state guidance to employers and owners or operators of seasonal farm labor camps outlines a framework of steps to minimize the spread of COVID-19 for farm workers throughout the agricultural production process, and for their shared housing and group transportation, as well as for screening and caring for individuals with suspected or confirmed virus infections. Steps outlined in the guidance include:

Workplace and housing safety: Workers must wear employer-provided face coverings or masks at all times including while taking transportation, during work hours, and in the presence of others.

Social distancing during work time: Employers are to promote social distancing by requiring workers to remain at least six feet from one another while working in the fields or any food farming production,

processing or cultivation. Staggered shifts are encouraged to minimize workers in the field/other work locations.

Housing: Employers must follow CDC recommendations for congregate living if workers are provided housing by the employer. Beds are to be placed at least six feet apart. If six feet of distance is not possible, beds should be positioned at least three feet apart with a partition, such as hanging a sheet or a shower curtain. Mealtimes should be staggered to reduce crowding in shared eating facilities. Ventilation must be provided in sleeping and living quarters with openable windows or door with properly fitted screens or a device supplying ventilation.

Transportation: Employers must implement social distancing while transporting workers to and from their residency and work. Vehicles should be limited to 50% capacity, which may require additional trips to and from the worksite.

Sanitation: Employers are to ensure disinfection of high-touch areas, such as in communal areas, work and transportation vehicles, in accordance with CDC guidance. Additional guidance is provided on restroom facilities and handwashing.

Suspected or Confirmed COVID-19 Cases: Employers are to screen workers for symptoms, including through temperature and symptom checks, prior to work shifts. If any symptoms are shown, the worker must immediately be separated from other workers and connected to a physician, who will determine if a test is needed. Pending medical attention and testing, workers with symptoms consistent with a COVID-19 infection are to be confined to individual rooms and avoid common areas. The guidance also sets out conditions for when employees can return to work.

The full Guidance may be found here:

https://nj.gov/health/cd/documents/topics/NCOV/COVID_MigrantFarmWorkerGuidance_5.20.2020.pdf

Educational materials and other resources for seasonal farm workers (in multiple languages) is located here: https://www.state.nj.us/health/cd/topics/covid2019_community.shtml

UNDERLYING CONDITIONS

Who is at highest risk for severe COVID-19 illness?

Older adults and people who have severe underlying medical condition seem to be at higher risk for more serious COVID-19 illness. This includes:

- People 65 years and older
- People who live in a nursing home or long-term care facility
- People of any age with the following underlying medical conditions, particularly those that are not well controlled:
 - Heart disease (includes high blood pressure)
 - Diabetes

- Lung disease (includes asthma, emphysema, and chronic obstructive pulmonary disease or COPD)
- Hemoglobin disorders (includes sickle cell disease or thalassemia)

If you are a person with a serious underlying medical condition that can put you at higher risk, stay home and away from other people.

Check out this link for more info: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html>

I have asthma, am I at risk for COVID-19?

People with asthma may be at higher risk of getting infected with COVID-19. The virus can affect your respiratory tract (nose, throat, lungs), cause an asthma attack and possibly lead to pneumonia and acute respiratory disease.

Follow your asthma action plan, take your medication as prescribed, talk to your health care provider, insurer, pharmacist about creating an emergency supply of prescription medications, such as asthma inhalers. Avoid your asthma triggers and clean and disinfect frequently touched surfaces like tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks and hand railings. Check out this link for more info: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/asthma.html>

I am a diabetic and would like to receive an emergency diabetic kit. Can you provide info?

The Diabetes Foundation, Inc, is providing emergency diabetes kits (while supplies last). The kits include the most used diabetes supplies, such as glucose meter, test strips, lancing device and lancets, ketone strips, alcohol swabs, glucose tabs and more. To get a free kit, go to: diabetesfoundationinc.org or call 973-849-5234.

MENTAL HEALTH and STIGMA

MENTAL HEALTH

I am feeling stressed about the novel coronavirus and would like to talk with a mental health professional. Who can I call?

The NJ Department of Human Services operates a toll free “warm line” which is a resource for people seeking mental health service. The warm line is activated during events that impact the mental health of New Jersey residents. The warm line is available 24 hours and has language access; (877) 294-HELP (4357). NOTE: The “warm line” does not replace 911 and is not used to report emergencies.

Mental Health Hotline: 866-202-4357

NJ Hopeline (Peer Support & Suicide Prevention Hotline): 1-855-654-6735

NJ VET2VET: 1-866-838-7654 (Peer hotline for veterans)

Other NJ Hotlines

Child Abuse/Neglect Hotline: 1-877-NJ-ABUSE (1-877-652-2873)

Domestic Violence Hotline: 1-800-572-SAFE (1-800-572-7233)

Family Helpline: 1-800-THE-KIDS (1-800-843-5437)

Are there any coronavirus grief and loss support groups?

Yes, the Atlantic Health System is hosting a Coronavirus Grief and Loss support group. To register call 862-260-3199 (option 3) for an invitation. The support group is web-based and is led by Atlantic Health behavioral health clinicians and social workers.

What are things I can do to support myself and the people I care for during this stressful time?

- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- Take care of your body. Take deep breaths, stretch, or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep, and avoid alcohol and drugs.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others through calls (audio or video), instant messaging, email, letters, or other forms of communication, even if you cannot be together in person.
- Talk with people you trust about your concerns and how you are feeling.

STIGMA

Know the facts about COVID-19 and help prevent the spread of rumors:

- Fight stigma by supporting people who are coming back to school or work after completing their isolation period for COVID-19 exposure or illness.
- Someone who has completed their isolation or met the requirements to discontinue infection control measures does not pose a risk of spreading COVID-19.
- People of Asian descent, including Chinese Americans, are not more likely to get coronavirus than anyone else. Let people know that being of Asian descent does not increase the chance of getting or spreading COVID-19.
- Viruses cannot target people from specific populations, ethnicities, or racial backgrounds.

EXECUTIVE ORDERS AND LEGISLATION

EXECUTIVE ORDERS

Executive Order 103: Declares a public health and a state of emergency across all 21 counties in New Jersey, allowing state agencies and departments to utilize state resources to assist affected communities.

<https://nj.gov/governor/news/news/562020/approved/20200309b.shtml>

Executive Order 104: Implements aggressive social distancing measures to mitigate further spread of COVID-19. This order closed all public and private preschool, elementary, and secondary schools, as well as institutions of higher education. Order also mandates all non-essential retail, recreation and entertainment businesses cease daily operations from 8am-5pm. Restaurants may only offer delivery and/or takeout. Order also specifies a limit to gatherings to 50 people or fewer.

<https://nj.gov/governor/news/news/562020/approved/20200316c.shtml>

Executive Order 105: Implements changes to upcoming elections to further mitigate the spread of COVID-19 and ensure that voters can exercise their right to vote without risking their health and safety.

<https://nj.gov/governor/news/news/562020/approved/20200319a.shtml>

Executive Order 106: Protects residents from eviction for renters and foreclosure for homeowners.

<https://nj.gov/governor/news/news/562020/approved/20200319c.shtml>

Executive Order 107: Issues a statewide stay at home order and closure of all non-essential retail businesses, and orders businesses to allow employees to telework (where practical) may be accessed here:

<https://nj.gov/governor/news/news/562020/approved/20200320j.shtml>. This order was updated to identify additional businesses as essential:

<https://nj.gov/governor/news/news/562020/approved/20200324b.shtml>

- **ADMINISTRATIVE ORDER:** On April 27, 2020, Governor Phil Murphy and Superintendent of the State Police Colonel Patrick Callahan announced an Administrative Order clarifying which businesses are permitted to operate and ways in which certain businesses may operate in accordance with Executive Order 107. The Administrative Order states the following:
- 1) Pet grooming businesses, pet daycare, and pet boarding businesses and 2) stores that principally sell items necessary for religious observation or worship shall be considered essential retail businesses.
- Car dealerships may permit customers that have ordered and/or purchased a vehicle online or by phone to test drive the vehicle at the time of pick-up or prior to delivery, provided the dealership adopts social distancing policies, the individual is given access to the vehicle alone, and the dealership appropriately cleans and sanitizes the vehicle after such test drive if the customer does not purchase the vehicle.
- Licensees, owners, operators, employees, or independent contractors of personal care services facilities are not permitted to provide personal care services in their own homes, the homes of others, or in any facility or business setting unless the individual personal care service provider is

providing the service to their household members, immediate family or other individuals with whom the personal care service provider has a close personal relationship, such as those for whom the personal care service provider is a caretaker or romantic partner. A prior business relationship alone does not qualify as a close personal relationship.

- **ADMINISTRATIVE ORDER:** On May 7, 2020 Governor Phil Murphy and Superintendent of the State Police Colonel Patrick Callahan announced an Administrative Order clarifying that recreational and entertainment activities prohibited under [Executive Order No. 107 \(2020\)](#) are also prohibited from taking place within the brick-and-mortar premises of essential retail businesses that are permitted to remain open. Under the order, recreational and entertainment activities are also prohibited within the facilities of public, private, and parochial preschool programs, or elementary and secondary schools, including charter and renaissance schools that remain closed to students.
- **ADMINISTRATIVE ORDER:** Governor Phil Murphy and Superintendent of the State Police Colonel Patrick Callahan announced on May 19, 2020, an Administrative Order authorizing in-person sales to resume at car dealerships, motorcycle dealerships, boat dealerships, and bike shops, by appointment only and with social distancing measures in place. The Order will take effect at 6:00 a.m. on Wednesday, May 20. Dealerships and bike shops who resume in-person sales must abide by the social distancing, safety, and sanitization requirements that are described in detail in the Administrative Order.

Executive Order 108: Invalidates any county or municipal restriction that might conflict with any of the provisions in Executive Order 107. This includes permitting municipalities and counties to restrict online marketplaces for arranging and offering lodging. This Administrative Order gives municipalities and counties the ability to impose additional restrictions on the ability of hotels, motels, guest houses, or private residences, or parts thereof, to accept new transient guests or seasonal tenants after 8:00 p.m. on Sunday, April 5. <https://www.nj.gov/governor/news/news/562020/20200320j.shtml> and <https://nj.gov/governor/news/news/562020/approved/20200404a.shtml>

Executive Order 109: Suspends all elective surgeries, invasive procedures to preserve essential equipment and hospital capacity. <https://nj.gov/governor/news/news/562020/approved/20200323b.shtml>

Executive Order 110: Directs all child care centers to certify that they will serve as emergency child care centers by March 27, 2020. Those who do not certify as emergency child care centers must close by April 1, 2020 and remain closed through the school closure period. <https://nj.gov/governor/news/news/562020/approved/20200325a.shtml>

Executive Order 111: Requires all designated health care facilities to report their daily number of ventilators, bed capacity and personal protective equipment (PPE) inventory to the NJ Office of Emergency Management and the NJ Department of Health. <https://nj.gov/governor/news/news/562020/approved/20200328d.shtml>

Executive Order 112: Removes barriers to health care professionals joining NJ's COVID-19 response and provides protections for front line health care responders. This includes temporarily re-activating licenses of recently retired health care professionals and granting temporary licenses to doctors licensed in foreign countries. Also permits certain health care providers to perform acts outside of their ordinary scope of practice. <https://nj.gov/governor/news/news/562020/approved/20200401b.shtml>

Executive Order 113: Authorizes the New Jersey State Director of Emergency Management to use the Governor's full authority under the Disaster Control Act to commandeer personal services and/or real or personal property. This includes medical supplies and equipment from private companies and institutions in order to help meet the continued need for ventilators and Personal Protective Equipment (PPE) in the State in hospitals, health care facilities, and emergency response agencies due to the ongoing outbreak of COVID-19. <https://nj.gov/governor/news/news/562020/approved/20200402c.shtml>

Executive Order 114: Orders that the U.S. and New Jersey flags be flown at half-staff at all state buildings and facilities indefinitely starting Friday, April 3rd, in recognition and mourning of all those who have lost their lives and been affected by COVID-19.

<https://nj.gov/governor/news/news/562020/approved/20200403a.shtml>

Executive Order 115: Allows retirees to return to State and local government employment without impacting their retirement pensions and removing restrictions on law enforcement's ability to temporarily supplement their ranks. Governor Murphy's Executive Order also enrolls newly hired State employees in the State Health Benefits Plan (SHBP) immediately upon hire. The SHBP enrollment only applies to new State employees hired in connection with COVID-19 response efforts.

<https://nj.gov/governor/news/news/562020/approved/20200406b.shtml>

Executive Order 116: Extends certain statutory deadlines for school districts with elections in May, including 1) the governing body of the municipality presenting and certifying a tax levy to the county board of taxation and 2) districts giving notice to nontenured teaching staff members whether they will be employed for the following year. Governor Murphy previously signed Executive Order No. 105, which postponed school board elections scheduled for April 21, 2020 until May 12, 2020.

<https://nj.gov/governor/news/news/562020/approved/20200407a.shtml>

Executive Order 117: Waives 2019-2020 statutory school year assessment requirements for eighth grade students and twelfth grade students who have not yet met the graduation assessment requirement due to the ongoing COVID-19 pandemic. <https://nj.gov/governor/news/news/562020/approved/20200407c.shtml>

Executive Order 118: Closes all state parks and forests and county parks to further social distancing measures. <https://nj.gov/governor/news/news/562020/approved/20200407d.shtml>

Executive Order 119: Extends the Public Health Emergency declared on March 9, 2020 through Executive Order No. 103. Under the Emergency Health Powers Act, a declared public health emergency expires after 30 days unless renewed. This order extends all Executive Orders issued under the Governor's authority under the Emergency Health Powers Act. It also extends all actions taken by any Executive Branch departments and agencies in response to the Public Health Emergency presented by the COVID-19 outbreak. <https://nj.gov/governor/news/news/562020/approved/20200407e.shtml>

Executive Order 120: Postpones primary elections on Tuesday, June 2nd to Tuesday, July 7th in response to the ongoing COVID-19 pandemic. This includes primaries for President, the U.S. Senate, the U.S. House of Representatives, the 25th District of the New Jersey Legislature, and county and municipal elections, as well as county committee elections. Last month, Governor Murphy issued Executive Order No. 105, which delayed certain elections set to take place in March and April until May 12th. <https://nj.gov/governor/news/news/562020/approved/20200408a.shtml>

Executive Order 121: Allows an increase in the maximum weight limit on certain interstate highways and toll roads from 80,000 pounds (40 tons) to 92,000 pounds (46 tons) for vehicles transporting COVID-19 relief supplies. <https://nj.gov/governor/news/news/562020/approved/20200408d.shtml>

Executive Order 122: Ceases all non-essential construction projects and imposing additional mitigation requirements on essential retail businesses and essential industries to limit the spread of COVID-19 in New Jersey. This order requires the use of face coverings when in public space and limits the number of persons permitted in stores. The order also outlines specific protections and policies for all essential retail, manufacturing, and warehousing businesses, as well as businesses engaged in essential construction projects. All non-essential construction must end by Friday, April 10, 2020 at 8pm. <https://nj.gov/governor/news/news/562020/approved/20200408e.shtml>

- **ADMINISTRATIVE ORDER:** On May 2, 2020, declares construction of new religious facilities or involving existing religious facilities to be essential construction projects. <https://nj.gov/governor/news/news/562020/approved/20200502c.shtml>

Executive Order 123: Extends grace periods during which certain insurance companies, including health insurers, life insurers, and property and casualty insurers, will not be able to cancel policies for nonpayment of premiums. <https://nj.gov/governor/news/news/562020/approved/20200409a.shtml>

Executive Order 124: Establishes a process by which the Department of Corrections may grant temporary reprieve to certain at-risk inmates during the public health emergency. The Governor's Executive Order creates the Emergency Medical Review Committee to make recommendations on which inmates should be placed on temporary home confinement through the Commissioner's statutory furlough authority. All recommendations to place an individual on home confinement will be made after thorough review and consideration of the conditions that an individual may face in the community. <https://nj.gov/governor/news/news/562020/approved/20200410d.shtml>

Executive Order 125: Imposes additional mitigation requirements on NJ TRANSIT and all private carriers to limit the spread of COVID-19. The order also outlines specific policies on restaurants that have remained open for takeout orders. <https://nj.gov/governor/news/news/562020/approved/20200411b.shtml>

Executive Order 126: Prohibits cable and telecommunications providers from terminating Internet and voice service due to nonpayment until 30 days after the current public health emergency has ended. The order also mandates that all service downgrades, service reductions, or late fees due to nonpayment are prohibited unless they are imposed in accordance with a policy approved by the New Jersey Board of Public Utilities. Additionally, any Internet or voice service that was disconnected after March 16 due to nonpayment must be reconnected.

<https://nj.gov/governor/news/news/562020/approved/20200413b.shtml>

Executive Order 127: Extends various deadlines associated with rulemaking for state agencies until 90 days following the end of the public health emergency. The order additionally allows for any rules or emergency rules that would expire during the current public health emergency to be extended until 90 days following the end of the public health emergency.

<https://nj.gov/governor/news/news/562020/approved/20200414a.shtml>

Executive Order 128: Provides additional options to tenants who are struggling financially as result of COVID-19, allowing tenants to direct their landlords to use their security deposits to offset rent or back rent. This executive order waives provisions of statutory law that prohibit the use of security deposits for rental payments, enabling tenants to instruct landlords to use their security deposits to offset rent or back rent. Tenants will not be obligated to make any further security deposit relating to their current lease agreement but would still be responsible for any monies landlords expend that would have been reimbursable via the security deposit as outlined in the original contract (i.e. damage to the property). However, should the tenant and landlord extend or renew their lease, then the tenant would be obligated to replenish the security deposit in full either six months following the end of the Public Health Emergency established by Executive Order No. 103 (2020), or on the date on which the current lease agreement is extended or renewed, whichever is

later. <https://nj.gov/governor/news/news/562020/approved/20200424c.shtml>

Executive Order 129: Extends Retired Officer Carry Permits by a period of 90 days until after the ongoing Public Health Emergency ends. The order also creates a process for individuals seeking to obtain or renew a Carry Permit to demonstrate the ability to safely handle and use a handgun as required by existing law. Executive Order No. 129 extends Retired Officer Carry Permits that expire during the term of Public Health Emergency declared in Executive Order No. 103, including those that expired after the issuance of Executive Order No. 103, until 90 days after the Public Health Emergency ends. The order further creates a process for applicants seeking to obtain or renew a Carry Permit to complete training, practice, or testing required by law, including by granting access to shooting ranges. Shooting ranges that are closed to the public under Executive Order No. 107 may only offer access to the above individuals, and must comply with social

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distancing practices where practicable.

<https://nj.gov/governor/news/news/562020/approved/20200427c.shtml>

Executive Order 130: Allows municipalities to extend the grace period for property tax payments due on May 1st to June 1st. Such an extension would provide much-needed relief to homeowners struggling financially as a result of the COVID-19 pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200428a.shtml>

Executive Order 131: Creates a commission charged with advising the administration on the timing and preparation for New Jersey's recovery from the COVID-19 shutdown. The Governor's Restart and Recovery Commission will be comprised of 21 members, all with a vast wealth of experience in health care, business, finance, academics, and economics. The Commission will begin virtual meetings immediately as the administration tackles the work of restarting the state and putting New Jerseyans back to work. Among the Commission's first tasks will be to advise the governor on the timing of the restart as it aligns with predetermined public health metrics. This Commission will stay empaneled as long as necessary to inform the restart and recovery of the state's economy.

<https://nj.gov/governor/news/news/562020/approved/20200428b.shtml>

Executive Order 132: Allows county and municipal clerks to accept initiative and referendum petitions electronically and allowing signatures for these petitions to be collected electronically. Under Governor Murphy's executive order, a generic template of the online form for electronic signature and submission requirements shall be created and available for use by May 1, 2020. County clerks and municipal clerks shall require that signatures for initiative and referendum petitions be gathered electronically. Hand signatures obtained prior to the effective date of this Executive Order shall also be accepted.

<https://nj.gov/governor/news/news/562020/approved/20200429a.shtml>

Executive Order 133: Reopens state parks and golf courses and restores the authority of county governments to determine whether county parks will be open or closed. The order takes effect at sunrise on Saturday, May 2. The order allows State parks and forests to open to the public for passive recreation, including fishing, hunting, boating, canoeing, hiking, walking, running or jogging, biking, birding, and horseback riding. Picnic areas, playgrounds, exercise stations and equipment, chartered watercraft services and rentals, swimming, pavilions, restrooms, and other buildings and facilities, such as visitor centers, interpretive centers, and interior historical sites, shall remain closed at this time. To limit physical interaction, the State parks and forests must implement reasonable restrictions that include:

- Limiting parking to 50% of maximum capacity and prohibiting parking in undesignated areas;
- Prohibiting picnics;
- Requiring social distancing to be practiced except with immediate family members, caretakers, household members, or romantic partners; and
- Banning organized or contact activities or sports; and gatherings of any kind.

The order also recommends that people wear a cloth face covering while in public settings at the parks and forests where social distancing measures are difficult to maintain.

<https://nj.gov/governor/news/news/562020/approved/20200429c.shtml>

Executive Order 134: Orders that the U.S. and New Jersey flags be flown at half-staff at all state buildings and facilities on Friday, May 1st, in recognition of the passing of former First Lady of New Jersey Debby Kean. <https://nj.gov/governor/news/news/562020/approved/20200430d.shtml>

Executive Order 135: Suspends in-person requirements for receipt of a marriage license and marriage ceremonies, and for the receipt of working papers for minors. Under the executive order, individuals may use videoconferencing technology for the licensing process and the marriage ceremony. The order also suspends the 72-hour waiting period between the license application and issuance, extends the period that a license is valid from 30 to 90 days, and waives fees imposed for the issuance of a second marriage or civil union license if the original has expired. Additionally, minors seeking to certify their working papers with a school designated official will be permitted to do so through videoconference. Individual school districts will craft procedures that satisfy the statutory requirements without requiring in-person contact. <https://nj.gov/governor/news/news/562020/approved/20200501d.shtml>

Executive Order 136: Extends statutory deadlines required under environmental laws for the length of New Jersey's public health emergency. The order, which suspends timeframes for certain permit decisions and reporting, will ensure greater opportunities for public engagement while enabling the New Jersey Department of Environmental Protection (DEP) to conduct thorough environmental reviews. Among the directives, Executive Order No.136 includes the following:

- Pauses or delays timeframes governing the Department's provision of public notice, review and decisions on permits and other approvals for the duration of the public health emergency, including those which would deem applications approved without conditions deemed necessary by DEP to ensure protection of public health, safety and the environment.
- Extends deadlines for soil and fill recycling services under the Dirty Dirt Law by the number of days of the Public Health Emergency declared in Executive Order No. 103 (2020) plus an additional 60 days.
- Extends the July 1, 2020 deadline for the governing body of each municipality to submit its yearly recycling tonnage report to DEP by 60 days.
- Extends the August 1, 2020 deadline for recyclers, manufacturers, collection locations and local government units who collect electronic devices to submit their semiannual report to DEP by 60 days.
- Directs DEP to identify where public comment periods must be extended to ensure adequate public participation.

<https://nj.gov/governor/news/news/562020/approved/20200502d.shtml>

Executive Order 137: Rescinds Executive Order No. 73 (2019), which directed the Department of the Treasury to achieve a \$1.276 billion surplus by the end of this current fiscal year. The executive order states the following:

- Executive Order No. 73 (2019), which is today being rescinded, required the State Treasurer to monitor the achievement of budget savings, monthly revenue collections, and other factors

including usage and enrollment trends, legislative activity, and other developments directly affecting fund balances throughout Fiscal Year 2020, and to take any necessary actions to ensure that the estimated closing undesignated fund balance plus the balance in the rainy day fund, when added together, total at least \$1.276 billion.

- In March, the State Treasurer disseminated a voluntary disclosure regarding the severe impacts that the COVID-19 pandemic is expected to have on the State's economy and financial condition, including declines in revenues in gross income taxes, corporate business taxes, sales taxes, motor fuels taxes, casino-related taxes, and lottery sales, among other sources of revenue in both Fiscal Year 2020 and Fiscal Year 2021, as well as negative impacts on liquidity due to the extension of the State tax filing deadline from April 15, 2020 until July 15, 2020.
- In early April, in response to the unprecedented fiscal effects of the COVID-19 pandemic, including the decision of the federal government to defer its tax filing deadline from April 15, 2020 until July 15, 2020, the end of Fiscal Year 2020 was extended by law for three months from June 30, 2020 until September 30, 2020.

The Governor's executive order also authorizes and directs the State Treasurer and the Director of the Division of Budget and Accounting to continue, update, and expand, as necessary, their ongoing actions and activities in response to the COVID-19 pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200504c.shtml>

Executive Order 138: Extends the Public Health Emergency declared on March 9, 2020 through Executive Order No. 103 and extended on April 7 through Executive Order No. 119. Under the Emergency Health Powers Act, a declared public health emergency expires after 30 days unless renewed. Executive Order No. 138 extends all Executive Orders issued under the Governor's authority under the Emergency Health Powers Act. It also extends all actions taken by any Executive Branch departments and agencies in response to the Public Health Emergency presented by the COVID-19 outbreak.

<https://nj.gov/governor/news/news/562020/approved/20200506a.shtml>

Executive Order 139: Orders that the U.S. and New Jersey flags be flown at half-staff at all state buildings and facilities on Friday, May 8th, in recognition of the 75th Anniversary of V-E Day. The flags will also fly at half-staff to honor the victims of COVID-19, pursuant to Executive Order No. 114, which remains in effect indefinitely. <https://nj.gov/governor/news/news/562020/approved/20200508a.shtml>

Executive Order 140: Announces the formation of a statewide council of leaders to advise on New Jersey's restart and recovery from the COVID-19 pandemic. The Governor's Restart and Recovery Advisory Council will work in conjunction with the commission named last week and will bring together leaders from various industry, community, and faith-based groups and institutions across New Jersey to advise state leadership on economic issues impacted by the pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200508c.shtml>

Executive Order 141: Mandates that all local, county, and regional health departments use the CommCare platform to support their contact tracing efforts. The Commissioner of the Department of Health will determine appropriate timing for this requirement. This coordinated regional approach will ensure support,

training, oversight, and an accurate and centralized statewide database. The state will bear the cost of this technology platform. <https://nj.gov/governor/news/news/562020/approved/20200512a.shtml>

Executive Order 142: Permits the resumption of non-essential construction, curbside pickup at non-essential retail businesses, and car gatherings for the purpose of drive-through and drive-in events. The construction and non-essential retail provisions will take effect at 6:00 a.m. on Monday, May 18, while the car gatherings provision will take effect immediately.

<https://nj.gov/governor/news/news/562020/approved/20200513a.shtml>

Executive Order 143: Allows beaches, boardwalks, lakes, and lakeshores to remain open with social distancing measures in place. The Order takes effect on Friday, May 22.

<https://nj.gov/governor/news/news/562020/approved/20200514b.shtml>

Executive Order 144: In an effort to protect all New Jersey voters from the spread of COVID-19, Governor Phil Murphy today signed an executive order to create a modified vote-by-mail election for the July 7th Primary. The order requires that each county's elections officials send vote-by-mail (VBM) ballots to all registered Democratic and Republican voters and send VBM ballot applications to unaffiliated and inactive voters. All VBM ballots and VBM ballot applications will come with pre-paid postage. The order also requires opening a minimum of at least one polling place in each municipality, and provided that there are enough poll workers, a minimum of 50 percent of polling places in each county to provide New Jersey voters who may need access to in-person voting opportunities. Polling locations will be required to follow public health standards including ensuring six feet of distance, requiring poll workers to wear face coverings and gloves, frequent sanitization of high-touch areas, and providing sanitization materials to all individuals at a polling place. <https://nj.gov/governor/news/news/562020/approved/20200515g.shtml>

Executive Order 145: Allows elective surgeries and invasive procedures, both medical and dental, to resume on Tuesday, May 26 at 5:00 a.m. These procedures will resume according to policies that will be issued by the New Jersey Department of Health and the Division of Consumer Affairs by Monday, May 18. This order rescinds the suspension of all elective surgeries and invasive procedures performed on adults, which was instituted beginning on March 27 under Executive Order No. 109 to preserve essential equipment and health care system capacity to respond to COVID-19. Among the directives, Executive Order No. 145 requires that the Department of Health issue policies by Monday, May 18 that will address how elective surgeries and invasive procedures may proceed in health care facilities. Also, by Monday, May 18, the Division of Consumer Affairs will issue policies addressing similar considerations for how elective surgeries and invasive procedures may proceed in outpatient settings that are not licensed by the Department of Health. <https://nj.gov/governor/news/news/562020/approved/20200515i.shtml>

Executive Order 146: Allows charter fishing services and for-hire vessel activities, as well as watercraft rental businesses, to open with required social distancing measures. These businesses can open on Sunday, May 17 at 6 am. Watercraft rental businesses will be allowed to reopen so long as they adopt policies consistent with the "curb-side pickup" restrictions that apply to retail establishments pursuant to Executive Order No. 142. <https://nj.gov/governor/news/news/562020/approved/20200516b.shtml>

Executive Order 147: Allows certain outdoor activities at recreational businesses, including archery ranges, batting cages, golf driving ranges, horseback riding, shooting ranges, and tennis clubs as well as community gardens to open with required social distancing measures in place. The Order takes effect on Friday, May 22 at 6:00 a.m. <https://nj.gov/governor/news/news/562020/approved/20200518c.shtml>

Executive Order 148: Increases the limit on outdoor gatherings from 10 to 25 people and allowing recreational campgrounds to reopen with social distancing measures in place. The limit on indoor gatherings remains at 10 people. The Order takes effect immediately. <https://nj.gov/governor/news/news/562020/approved/20200522d.shtml>

LEGISLATION

Governor Murphy signed A1104 on May 4, 2020, also known as the Hunger Free Students' Bill of Rights Act. The bill seeks to prevent school districts from taking adverse action, such as denial of meals or public identification measures, known as "lunch shaming," against students who have school meal bills that are in arrears. The bill also requires districts to annually provide all parents and/or guardians with the information and forms necessary to maximize participation in programs. Additionally, the bill requires a district's liaison for homeless students to ensure that homeless students receive free meals. <https://nj.gov/governor/news/news/562020/approved/20200504d.shtml>

Governor Murphy signed legislation (S2357) on April 22, 2020 which will require hospitals to report demographic data to the Department of Health. In conjunction with this signing, the COVID-19 Information Hub has been updated with preliminary racial data that has already been collected. S2357 requires hospitals to report demographic data including age, ethnicity, gender, and race of individuals who have tested positive for COVID-19, who have died from COVID-19, and who have tried to get testing but have been turned away. <https://nj.gov/governor/news/news/562020/approved/20200422b.shtml>

On April 16, 2020, Governor Murphy announces the New Jersey Housing and Mortgage Finance Agency has unanimously voted to suspend rent increases at all eligible properties within the Agency's portfolio, which includes 36,000 rental units across the state. The suspension of rent increases will remain in place until the termination of Executive Order 103. Thereafter, eligible properties in the Agency's portfolio seeking rent increases of up to 1.4% may do so only after 30-day notice is provided to NJHMFA and residents. Any request in excess of this amount must first be reviewed and approved by NJHMFA staff. Homeowners and renters whose ability to pay their mortgage or rent has been impacted by COVID-19 can now seek housing counseling to help prevent possible eviction or foreclosure. These services are available at no cost to the consumer. A full list of participating housing counselors and more details on the program may be found at: www.njhousing.gov/foreclosure

<https://nj.gov/governor/news/news/562020/approved/20200416a.shtml>

Governor Murphy signed legislation (S2374) on April 14, 2020, which expands protections of the Family Leave Act to allow employees forced to take time off to care for a family member during the COVID-19 outbreak with up to 12 weeks of unpaid family leave in a 24-month period without losing their jobs. Under the bill, employees will be eligible for leave to care for a family member as a result of an epidemic of a communicable disease, or efforts to prevent spread of a communicable disease. These job protections will extend to employees requiring leave to provide care or treatment for their child if the child's school or place of care is closed in response to a public health emergency.

<https://nj.gov/governor/news/news/562020/approved/20200414d.shtml>

Governor Murphy signed the following bills into law on April 14, 2020:

A-2371/S-865: Requires large food waste generators to separate and recycle food waste and amends definition of "Class I renewable energy"

A-3901/S-2334: Permits professional and occupational licensing boards to reactivate licensure of certain individuals during state of emergency or public health emergency

A-3903/S-2336: Allows remote notarial acts during Public Health Emergency and State of Emergency declared by Governor in Executive Order 103 of 2020

A-3904/S-2337: Permits use of virtual or remote instruction to meet minimum 180-day school year requirement under certain circumstances

S-2333/A-3910: Provides civil and criminal immunity to certain health care professionals and health care facilities during public health emergency and state of emergency; facilitates issuance of certain temporary licenses and certifications during public health emergency and state of emergency

S-2338/A-3918: "COVID-19 Fiscal Mitigation Act"; clarifies filing and payment deadline for CBT and GIT taxpayers, modifies duration of State Fiscal Years 2020 and 2021, requires certain updates and presentation for State Fiscal Years 2020 and 2021

S-2342/A-3915: Permits nonprofit corporations to allow members to participate in meetings by means of remote communication, and permits nonprofit corporations to hold meetings in part or solely by means of remote communication during state of emergency

S-2349/A-3922: Changes date of 2020 primary election from June 2 to July 7

S-2353/A-3938: Excludes from severance requirements under "Millville Dallas Airmotive Plant Job Loss Notification Act" mass layoffs resulting from coronavirus disease 2019 pandemic

<https://nj.gov/governor/news/news/562020/approved/20200414f.shtml>

REOPENING THE STATE/REGION

Recognizing that their states have one integrated regional economy, NJ Governor Phil Murphy, NY Governor Andrew M. Cuomo, CT Governor Ned Lamont, PA Governor Tom Wolf, DE Governor John Carney and RI Governor Gina Raimondo announced on April 13, 2020 MA Governor Charlie Baker is joining the multi-state council to restore the economy and get people back to work. This announcement builds on the

2019-Novel_CV-TP-05222020fin.108223.pdf

states' ongoing regional approach to combatting the COVID-19 pandemic. The coordinating group will work together to develop a fully integrated regional framework to gradually lift the states' stay at home orders while minimizing the risk of increased spread of the virus.

<https://nj.gov/governor/news/news/562020/approved/20200413e.shtml>

On April 18, 2020 Governors from NJ, NY, and CT announced marinas, boatyards and marine manufacturers will be allowed open for personal use as long as strict social distancing and sanitization protocols are followed. Chartered watercraft services or rentals will not be allowed, and restaurant activity at these sites must be limited to take-out or delivery only, like anywhere else in the three states. This announcement aligns the policies of the three states on this particular service.

<https://nj.gov/governor/news/news/562020/approved/20200418c.shtml>

Governors from NJ, NY, CT, PA, DE, RI and MA announced on April 19, 2020 their appointees to the multi-state council to restore the economy and get people back to work. The appointees include one health expert, one economic development expert and the respective Chief of Staff from each state. <https://nj.gov/governor/news/news/562020/approved/20200419a.shtml>

On April 27, 2020 Governor Murphy announced his vision, "The Road Back: Restoring Economic Health Through Public Health," to restart New Jersey and put the state on the road to recovery. Gov Murphy's stay-at-home Executive Order, which has been in effect since March 21st, will remain in effect in its entirety until further notice. The following six principles and key metrics will guide the process for lifting restrictions and restoring New Jersey's economic health through public health:

- Principle 1: Demonstrate Sustained Reductions in New COVID-19 Cases and Hospitalizations
 - 14-day trend lines showing appreciable and sustained drop in cases, hospitalizations, and other metrics;
 - Hospitals stepping down from functioning under crisis standards of care.
- Principle 2: Expand Testing Capacity
 - At least double current diagnostic testing capacity;
 - Prioritize testing for health care workers, essential personnel, and vulnerable populations;
 - Create a flexible testing plan accessible to all residents;
 - Expand partnerships with institutions of higher education, private-sector labs, and the federal government.
 - Ensure that those who test positive are linked to a health care provider.
- Principle 3: Implement Robust Contact Tracing
 - Recruit and deploy an army of personnel who will identify and follow-up with contacts;
 - Leverage technological data and innovative solutions to increase efficiency;
 - Coordinate the approach of local and state health officials, which will have a coordinated county/regional component.
- Principle 4: Secure Safe Places and Resources for Isolation and Quarantine
 - To the greatest extent possible, provide individuals who do test positive in the future with a safe and free place to isolate and protect others from COVID-19;
 - • Ensure that quarantined contacts are provided supportive services, if needed.

- Principle 5: Execute a Responsible Economic Restart
 - Create the Governor’s Restart and Recovery Commission to advise on the process and recommend responsible and equitable decisions;
 - Plan for a methodical and strategic return to work based on level of disease transmission risk and essential classification;
 - Continuation of social distancing measures where feasible and appropriate;
 - Leverage any available federal funds and programs to support health care, individual, and small business recoveries
- Principle 6: Ensure New Jersey’s Resiliency
 - Learn from the lessons of COVID-19 and prepare for the possibility of a resurgence;
 - Ensure hospitals, health care systems, and other health delivery facilities have inventories of personal protective equipment and ventilators;
 - Build our own state personal protective equipment and ventilator stockpile;
 - Create a playbook for future administrations for the next pandemic.

<https://nj.gov/governor/news/news/562020/approved/20200427b.shtml>

On April 28, 2020, The Governor’s Restart and Recovery Commission was announced. The Commission will be comprised of 21 members, all with a vast wealth of experience in health care, business, finance, academics, and economics and will be chaired by Princeton Professor and former University President Shirley Tilghman and Ken Frazier, Chief Executive Officer of Merck and Co., Inc.

The Commission will begin virtual meetings immediately as the administration tackles the work of restarting the state and putting New Jerseyans back to work. Among the Commission’s first tasks will be to advise the governor on the timing of the restart as it aligns with predetermined public health metrics.

Among the major issues to be addressed by the Commission will be immediate questions surrounding the safe restart of society. The Commission will also address both short-term and long-term economic issues as well as areas such as public health, workforce issues, and transportation. The Commission will develop strategies for how the State and Federal government can support the economic recovery of the private sector and identify critical needs for federal support and intervention. Members will advise the administration on potential investments that will speed the recovery and position New Jersey’s economy for long-term success. Where possible, the Commission will identify opportunities for various sectors to be rebuilt to be well-positioned for both the economy of today and the economy of the future, while promoting equity for disadvantaged communities. This Commission will stay empaneled as long as necessary to inform the restart and recovery of our state’s economy.

<https://nj.gov/governor/news/news/562020/approved/20200428b.shtml>

On May 3, 2020 Governors from NJ, NY, CT, PA, DE, RI, and MA announced a joint multi-state agreement to develop a regional supply chain for personal protective equipment, other medical equipment and testing.

The states will also coordinate policies regarding the inventory of PPE each state’s health care infrastructure should have to be prepared for a possible second wave of COVID-19. The states will also coordinate policies on what supplies local governments should have on hand for their First Responders, and if any requirements regarding PPE for the non-for-profit and private sector are needed. The states will then seek to identify suppliers within the country, region or state who can scale to meet the demand of the

entire region over the next three months. The goal of this approach is to decrease the potential for disruptions in the supply chain for PPE and medical equipment, including sanitizer and ventilators, and testing, and promote regional economic development.

<https://nj.gov/governor/news/news/562020/approved/20200503a.shtml>

Acting on a commitment to coordinate regional policies in response to COVID-19, Governors from NJ, NY, CT, and DE announced a multi-state agreement to reopen public and private beaches with certain restrictions in place effective, Friday, May 22. This approach will better align the states' policies ahead of the summer months. <https://nj.gov/governor/news/news/562020/approved/20200515a.shtml>

On May 18, 2020, as part of his vision, "[The Road Back: Restoring Economic Health Through Public Health](#)," Governor Phil Murphy unveiled a multi-stage approach to execute a responsible and strategic economic restart to put New Jersey on the road back to recovery from COVID-19. The multi-stage blueprint, guided by the Governor's Restart and Recovery Commission and complementary Advisory Councils, plans for a methodical and strategic reopening of businesses and activities based on level of disease transmission risk and essential classification. Governor Murphy's approach includes the following stages:

MAXIMUM RESTRICTIONS: Maximum restrictions with most individuals staying at home and activity limited to essential tasks. Permitted activities and businesses include:

- Emergency health care
- Essential construction
- Manufacturing
- Essential retail, including grocery stores and pharmacies

STAGE 1: Restrictions relaxed on low-risk activities if appropriately safeguarded. New Jersey is currently in this stage. Phased-in businesses may include:

- Non-essential, but easiest to safeguard, work activities at physical locations if they meet safeguarding and modification guidelines. For example, non-essential construction with protections.
- Some non-essential retail may open with significant modifications. For example, curbside pickup.
- All workers who can work from home continue to work from home even if their industry is reopening. For example, an office manager for a construction company.

Phased-in activities include State and county parks, non-essential construction, curbside retail, drive-in activities, beaches, and elective surgeries.

STAGE 2: Restrictions are relaxed on additional activities that can be easily safeguarded. Phased-in businesses may include:

- More work activities are allowed at physical locations only if they adhere to safeguarding and modification guidelines. For example, work activities to be phased-in over the course of Stage 2 may include expanded retail, safeguarded restaurants with outdoor seating, limited personal care, and possibly indoor dining, museums, and libraries, all with significantly reduced capacity.
- All workers who can work from home continue to work from home. For example, a buying manager for restaurants.
- Some personal care services may be provided on a limited basis.

STAGE 3: Restrictions are relaxed on most activities with significant safeguarding. Phased-in businesses include:

- More work activities, including in-person meetings, are allowed at physical locations only if they can adhere to safeguarding guidelines and modifications. For example, work activities to be phased-in over the course of Stage 3 may include expanded dining, critical in-office work, limited entertainment, expanded personal care, and bars with limited capacity.
- All workers who can work from home continue to work from home. For example, accounting office workers.
- Personal care services may be provided on a more extended basis.

Precautions that apply across all stages include:

- Work that can be done from home should continue to be done from home.
- Clinically high-risk individuals who can stay at home should continue to do so.
- All residents and businesses should follow state and federal safeguarding guidelines:
 - Wash hands
 - Wear masks in public
 - Respect social distancing
 - Minimize gatherings
 - Disinfect workplace and businesses
 - Minimize gatherings
 - No mass gatherings

New Jersey will move toward subsequent stages based on data that demonstrates improvements in public health and the capacity to safeguard the public, including:

- Sustained improvements in public health indicators, including new COVID-19 cases, hospitalizations, individuals in intensive care, and ventilator use.
- Substantial increase in testing and contact tracing capacity.
- Sufficient resilience in New Jersey's health care system to include adequate bed capacity, ventilators, personal protective equipment, and workforce.
- Widespread safeguarding of workplaces.
- Widespread safeguarding and capacity of child care, schools, and transit.
- Continued public compliance.

If public health indicators, safeguarding, or compliance worsen on a sustained basis, New Jersey will be prepared to move back to more restrictive stages as well.

<https://nj.gov/governor/news/news/562020/approved/20200518a.shtml>

ADDITIONAL RESOURCES and REFERENCES

NON-HEALTH RESOURCES

I am a small business owner and need help during this crisis. Who can I talk with about that?

Call the Business Helpline at 1-800-JERSEY-7 or cv.business.nj.gov

How do I access unemployment benefits during the COVID-19 outbreak?

Go to the NJ Department of Labor & Workforce Development: <https://www.nj.gov/labor/worker-protections/earnedsick/covid.shtml>

How do I know what benefits I am entitled to if I was laid-off or if I am unable to work due to school/daycare or daycare closed?

The Department of Labor & Workforce Development has a printable guideline outlining COVID-19 related benefits for persons employed in NJ.

<https://www.nj.gov/labor/assets/PDFs/COVID-19%20SCENARIOS.pdf>

To provide feedback about **New Jersey Transit** during the COVID-19 response, go to the COVID19.nj.gov website and search NJ Transit.

To report a Businesses (Employer, Organization or Entity) in Violation of Non-essential Business Closure (Executive Order 107), go to the website and complete the form: <https://covid19.nj.gov/violation>

Price Gouging?

Excessive price increases are defined as **price increases that are more than 10 percent higher** than the price at which merchandise was sold during the normal course of business prior to the state of emergency. The Division of Consumer Affairs has set up a hotline for price gouging complaints related to coronavirus. Please call 973-504-6240 to report any price gouging concerns.

Unlawful Hoarding of Medical Supplies

To anonymously report unlawful hoarding of medical supplies and/or price gouging of medical supplies, call 866-720-5721 or disaster@leo.gov

Rumor Control

Please visit the FEMA Rumor Control website to distinguish between rumors and facts regarding the response to COVID-19. Rumors can easily circulate within communities during a crisis, stay informed with updated myths and facts related to the federal response.

<https://www.fema.gov/coronavirus-rumor-control>

The NJ Office of Homeland Security also has a webpage to help the public distinguish between facts and rumors/disinformation regarding COVID-19. The page will be updated as more information becomes available. Go to: <https://www.njhomelandsecurity.gov/covid19>

I know New Jersey has an Earned Sick Leave Law. Where can I get more info about this?

<https://www.nj.gov/labor/worker-protections/earnedsick/covid.shtml>

See suspicious online content?

Report it to your local authorities or to the NJ Homeland Security Counterterrorism Watch Desk at 1-866-4-SAFE-NJ or tips@njohsp.gov

I need to renew my driver's license/registration/inspection. What is being done about that?

Motor Vehicle Commission and Inspection stations closure extended through June 8. Many services such as change of address, paying fees, renewing driver's licenses, etc., can be completed online. NJMVC.gov

Visit the NJ Motor Vehicle Commission for more information:

<https://www.state.nj.us/mvc/press/archives/2020/031320.htm>

PPE Donation

NJ State Police is seeking donations of PPE. Anyone willing to donate equipment is asked to email: ppedonations@njp.org or go to covid19.nj.gov/ppedonations

Unsolicited Goods/Resources

I received an unsolicited offer about resources or donated goods from the private sector. Who should I contact? Forward emails to: [REDACTED]

NOTE: Do not provide this number/email to the public.

File a Complaint against a Business

<https://www.njconsumeraffairs.gov/Pages/Consumer-Complaints.aspx> or AskConsumerAffairs@dca.lps.state.nj.us

Food Assistance and SNAP

Individuals who receive NJ Supplemental Nutrition Assistance Program (NJ SNAP) benefits will receive an extra benefit payment and benefits will be higher in April to help address critical food needs related to the COVID-19 pandemic. To see if you are eligible for food assistance and to apply for NJ SNAP, go to the website: www.NJHelps.org

MISCELLANEOUS

I am a graduating student in Nursing/Pharmacy/Physician Assistant/Respiratory Therapy and I would like to apply for the temporary emergency license. What is the process?

Recent graduates of nursing, physician assistant, pharmacy, and respiratory care therapy programs who have not yet been able to take and pass their licensing exams will be granted temporary emergency licenses. The New Jersey Division of Consumer Affairs will begin accepting applications for the emergency graduate licensure program as of May 5, 2020. The emergency graduate licensure program is open to individuals applying for licensure within six months of graduating from the following programs:

- Accredited registered professional nursing (RN);
- Practical nursing (LPN);
- Physician assistant;
- Pharmacy education and training located in New Jersey; and
- Accredited respiratory care therapy education and training located in any state.

Individuals will not be eligible for the emergency graduate licensure program if they have failed the relevant licensing examination and will be dropped from the program if they fail the exam after receiving an emergency graduate license. With the exception of respiratory care therapists, graduates licensed through this program will be eligible to work only under supervision in an acute care facility licensed by the New Jersey Department of Health. Respiratory care specialists will also be authorized to work under supervision in field hospitals.

The program will end automatically at the conclusion of the COVID-19 state of emergency and public health emergency. The Division may choose to end the program earlier if it determines that it is no longer necessary. In that case, the Division would give licensees 90 days to pass their examination and 120 days to obtain standard licenses. The Division has waived application fees for the emergency temporary license. Graduates can apply for a temporary emergency graduate license online on the Division's website: <https://www.njconsumeraffairs.gov/COVID19/Pages/Emergency-Graduate-Licensure.aspx>

FOR STATE EMPLOYEES ONLY

NJ State employees should go to the Civil Service Commission to view the COVID-19 guidelines and review FAQs regarding time, working from home, sick leave, and other relevant issues

<https://www.nj.gov/csc/employees/covid.html>

From: Ruiz, Annmarie
Sent time: 05/24/2020 11:17:48 AM
To: Jankauskas, Dittymae; Jones, Tammy
Subject: FW: Reporting of Migrant Farms Worker Deaths
Attachments: FW: Reporting of Migrant Farms Worker Deaths

Sender: aruiz@co.gloucester.nj.us
Subject: FW: Reporting of Migrant Farms Worker Deaths
Message-Id:
To: djankauskas@co.gloucester.nj.us
To: tjones@co.gloucester.nj.us

From: Ruiz, Annmarie
Sent time: 05/24/2020 11:17:48 AM
To: Jankauskas, Dittymae; Jones, Tammy
Subject: FW: Reporting of Migrant Farms Worker Deaths

Megan Sheppard from Cumberland shared this with me as FYI.

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: Megan Sheppard
Date: 5/23/20 3:53 PM (GMT-05:00)
To: "Ruiz, Annmarie"
Subject: Fw: Reporting of Migrant Farms Worker Deaths

fyi.

From: Megan Sheppard
Sent: Saturday, May 23, 2020 3:49 PM
To: daniel.Lefkowitz@doh.nj.gov ; brett.nance@doh.nj.gov ; Taylor, Laura S ; Semple, Shereen ; Weller, Jamie
Cc: RDICKINSON@VINELANDCITY.ORG ; ELOPEZ@VINELANDCITY.ORG
Subject: Reporting of Migrant Farms Worker Deaths

Hello All,

I wasn't sure who to make this request to so please forward if need be. This article appeared in NJ Spotlight yesterday:
<https://www.njspotlight.com/2020/05/two-fatalities-reported-as-south-jersey-seasonal-farm-workers-with-covid-19-infections-grows-to-400/>

I was aware this reporter reached out to our PIO and the FQHC. Although his reporting is very inaccurate as he has our numbers totally screwed up, my ultimate concern is that it appears the state reported 2 migrant farm deaths in Cumberland County. Did this indeed happen? Knowing the other details are inaccurate, I wanted to verify this.

And if it did indeed get reported, I would like to ask where that information was pulled from and what the CDRSS numbers are. Even if a death is associated with a farm outbreak number, who is verifying that they are a migrant worker and not actually a citizen just working there?

Are migrant farm deaths now going to be reported to the media? If they are, health departments need to know where the state is pulling this type of data from, who's verifying that they are indeed a migrant worker vs a citizen, and the plan for reporting it publicly.

Thank you for looking into this for us.
Megan

CAUTION: This email originated from outside of the Gloucester County Email System. Do not click links or open attachments unless you recognize the sender and know the content is safe.

24FAED7333945D41BCF1D22EBCEC20EC@co.gloucester.nj.us.msg

From: Cerny, Lisa A.
Sent time: 05/15/2020 03:12:27 PM
To: Jones, Tammy
Subject: FW: TAMMY QUESTIONS
Attachments: FW: TAMMY QUESTIONS

Sender: lcerny@co.gloucester.nj.us
Subject: FW: TAMMY QUESTIONS
Message-Id: <4a18092fff8b479d9f9fc5f2a4fe82a6@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Cerny, Lisa A.
Sent time: 05/15/2020 03:12:27 PM
To: Jones, Tammy
Subject: FW: TAMMY QUESTIONS

Hi, you had some questions regarding FEMA and if migrant farm workers were eligible; see last paragraph
Thanks

From: Mc Farland Jr., Calvin D.
Sent: Friday, May 15, 2020 2:18 PM
To: Cerny, Lisa A.
Subject: TAMMY QUESTIONS

Hey Boss,
The last time we talked, Tammy had some questions. So I pulled this from the Guidance Information.
In terms of client eligibility, the manuals are mute on whether illegals farm workers are eligible or ineligible.
It only mentions that jurisdiction residents and transients within the jurisdiction are eligible to receive services.
Thanks
Cal

SPENDING PERIOD EXTENSIONS

The National Board may determine on an annual basis to extend the spending period when the receipt of annual funding is delayed due to the federal appropriations process or when additional appropriations bills are enacted later in the fiscal year. The National Board has determined that the spending period end-date options for Phases 37 and CARES can be selected from the following dates:

January 31, 2020	June 30, 2020	November 30, 2020	April 30, 2021
February 28, 2020	July 31, 2020	December 31, 2020	May 31, 2021
March 31, 2020	August 31, 2020	January 31, 2021	
April 30, 2020	September 30, 2020	February 28, 2021	
May 31, 2020	October 31, 2020	March 31, 2021	

NEW ELIGIBLE COSTS

LROs may use Phases 37 and CARES funding to purchase Personal Protective Equipment (PPE). For all service providers, the purchase of PPE specifically intended to prevent or mitigate the transmission of communicable diseases is permitted. PPE must fall within the guidelines of the CDC, FDA, or state and local health requirements, as applicable to each LRO. Additional factors regarding eligibility include:

- PPE expenditures are limited to 10% of an LRO's award (Phases 37 and CARES). If an LRO receives an award for both phases, then 10% may be used from each phase.
- PPE may be directly distributed to LRO staff and volunteers to conduct and deliver services and/or clients to receive services.
- EFSP funds cannot be used to purchase PPE for general distribution to the public or for use outside of an LRO's mission area.

While LROs can use funding to purchase PPE, funding cannot be used for COVID-19 testing.

Client Eligibility

The EFSP is a needs based program for which clients must qualify.

The National Board does not set client eligibility criteria. Local Boards may choose to set such criteria. If the Local Board does not set eligibility criteria, the LRO may use its existing criteria or set criteria for assistance under this award. Any criteria used must provide for assistance to needy individuals without discrimination (age, race, sex, religion, national origin, disability, economic status or sexual orientation), sensitivity to the transition from temporary shelter to permanent homes, attention to the specialized needs of homeless individuals with mental and physical disabilities and illness and to facilitate access for homeless individuals to other sources of services and benefits. In providing assistance under the EFSP, verification of proof of citizenship or qualified alien status of any applicant for assistance is not required.

Gloucester County Division of Health & Human Services
Division of Human & Disability Services
115 Budd Blvd. West Deptford, NJ 08096 (856) 384-6870



The County of Gloucester complies with all state and federal rules and regulations against discrimination in admission to, access to, or operations of its programs, services, and activities. In addition, County encourages participation of people with disabilities in its programs and activities and offers special services to all residents 60 years of age and older. Inquiries regarding compliance may be directed to the County's ADA Coordinator at (856) 384-6842/ New Jersey Relay Service 711.

From: Jones, Tammy
Sent time: 05/15/2020 03:37:17 PM
To: Doyle, Kathleen (Katie)
Subject: FW: TAMMY QUESTIONS
Attachments: FW: TAMMY QUESTIONS

Sender: tjones@co.gloucester.nj.us
Subject: FW: TAMMY QUESTIONS
Message-Id: <155f6244196941a283bb080747bc3153@co.gloucester.nj.us>
To: kdoyle@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/15/2020 03:37:16 PM
To: Doyle, Kathleen (Katie)
Subject: FW: TAMMY QUESTIONS

Hi Katie:
This is good news....yes?
See below-
Thanks,
Tammy

From: Cerny, Lisa A.
Sent: Friday, May 15, 2020 3:12 PM
To: Jones, Tammy
Subject: FW: TAMMY QUESTIONS

Hi, you had some questions regarding FEMA and if migrant farm workers were eligible; see last paragraph
Thanks

From: Mc Farland Jr., Calvin D. cmcfarland@co.gloucester.nj.us
Sent: Friday, May 15, 2020 2:18 PM
To: Cerny, Lisa A. lcerny@co.gloucester.nj.us
Subject: TAMMY QUESTIONS

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03C8DCD267E6CC40848E3D13DA11AE81@co.gloucester.nj.us.msg

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03C8DCD267E6CC40848E3D13DA11AE81@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/22/2020 08:34:49 AM
To: Bruner, Chad
Cc: Jankauskas, Dittymae
Subject: Fwd:

[REDACTED]
[REDACTED]

Begin forwarded message:

From: "Ruiz, Annmarie"
Date: May 21, 2020 at 12:33:22 PM EDT
To: Meghan Spinelli , "Jankauskas, Dittymae" , "Jones, Tammy"
Subject: RE:

Thank you, Meghan

-----Original Message-----

From: Meghan Spinelli
Sent: Thursday, May 21, 2020 10:25 AM
To: Ruiz, Annmarie ; Jankauskas, Dittymae ; Jones, Tammy
Subject:

Hello,

Here is where CCHN will be testing this upcoming week.

Wednesday –8am start

[REDACTED] Farm
[REDACTED].

15p
[REDACTED]

-----Original Message-----

From: Meghan Spinelli
Sent: Sunday, May 17, 2020 11:28 AM
To: Ruiz, Annmarie; Dittymae Jankauskas
Subject: Re: REQUEST: List of farms COVID testing

Hello,

I pass this along to my medical director I will have the information back to you by tomorrow afternoon .

We are testing everyone at the farm location .

The address that you get should match the address the patient gave us ?

Feel free to call me anytime with questions .

Thank you,
Meg

On May 17, 2020, at 9:44 AM, Ruiz, Annmarie wrote:

Thank you for the information. All farms tested should have a line list to assist in documenting onset, living location on farm, signs and symptoms, etc. I know the state is working with you on this request. Our agency would also need assistance with translation.

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: Meghan Spinelli

Date: 5/16/20 10:02 PM (GMT-05:00)

To: "Ruiz, Annmarie"

Subject: Re: REQUEST: List of farms COVID testing

Yes, we tested at [REDACTED] in [REDACTED] We completed 122 tests at that location .

We have handout in Spanish in covid for farms . I've been working with the owners in many different levels , arranging housing , helping setting up temperature checks before work, educational material for staff and all the what if's.

This week we do not have an Gloucester County Farms on the schedule . If you know anyone who is interested in setting up testing please give them my email or phone .

Thank you,

Meghan

856-562-5415

On May 16, 2020, at 9:00 PM, Ruiz, Annmarie wrote:

?Good evening Meghan,

I understand that COVID testing has begun in Gloucester County at migrant farms. Megan Sheppard, Cumberland, stated she obtained a list of farms that were tested.

Gloucester County would also appreciate a list of farms that were tested this past week and weeks moving forward.

It is also our understanding that CompleteCare will be providing education to the individuals tested. Is this correct?

Please email me the list from this past week at your earliest convenience.

Look forward to hearing from you.

Anmarie Ruiz

Sent from my Verizon, Samsung Galaxy smartphone

CAUTION: This email originated from outside of the Gloucester County Email System. Do not click links or open attachments unless you recognize the sender and know the content is safe.

From: Jones, Tammy
Sent time: 05/04/2020 11:21:45 PM
To: Kephart, Carla
Subject: Fwd: [EXTERNAL] NJDOH Release of Funds: Sharing this Funding Opportunity with the HealthEASE Network
Attachments: NJDOH_FY21_Diabetes RFA.pdf ATT00001.htm NJDOH_FY21_HDSP RFA.pdf ATT00002.htm

Hi Carla-

Perhaps forward on the our hospitals and FQHC's ?

Thanks!

Tammy

Begin forwarded message:

From: Dennis McGowan
Date: May 4, 2020 at 9:15:43 AM EDT
Subject: [EXTERNAL] NJDOH Release of Funds: Sharing this Funding Opportunity with the HealthEASE Network

Greeting Partners!

The New Jersey Department of Health – Diabetes, Heart Disease & Stroke Prevention and Control Programs are excited to announce the availability of Fiscal Year (FY) 2021 funds to identify potential organizations to adopt strategies that focus on diabetes and cardiovascular disease prevention and management.

The project period is 12 months (July 1, 2020 – June 30, 2021).

Diabetes: Approximately \$230,000 is available for awards. The anticipated award date is June 8, 2020. **Note that the Letter of Intent (LOI) is due by 3:00PM on May 8, 2020 to Tifanie Selby at tifanie.selby@doh.nj.gov.**

Heart Disease: Approximately \$459,000 is available for awards. The anticipated award date is June 8, 2020. **Note that the Letter of Intent (LOI) is due by 3:00PM on May 8, 2020 to Anne Dulcio at anne.dulcio@doh.nj.gov.**

If you have any questions, please contact Tifanie Selby at tifanie.selby@doh.nj.gov or Anne Dulcio at anne.dulcio@doh.nj.gov.

Best Regards,

Tifanie Selby, MPH

Project Officer

New Jersey Department of Health

tifanie.selby@doh.nj.gov

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**New Jersey Department of Health
 Division of Community Health Services
 Community Health and Wellness Unit
 Diabetes Prevention and Control Program**

Request for Applications

Dates to Remember	
Request for Applications Released	May 1, 2020
Letter of Intent to Apply Due	May 8, 2020
Bidder's Conference (via Webinar)	May 11, 2020
Application Due	May 26, 2020
Notification of Intent to Fund	June 8, 2020
Start Date	July 1, 2020



PLEASE READ:

1. New Jersey Department of Health funding is available for six (6) categories of projects.
2. Organizations are permitted to apply for multiple categorical projects if they meet all eligible criteria. If applying for more than one project, separate Schedules A-C must be completed for each.
3. Letters of Intent (LOI) to apply for funding are due on May 8, 2020 by 3:00 pm. Please send LOIs, via email to: Tifanie Selby, MPH
tifanie.selby@doh.nj.gov
4. Once submitted, applicants will receive an invitation for the Bidder's Conference on May 11, 2020

I. Executive Summary

The New Jersey Department of Health (NJDOH) - Diabetes Prevention and Control Program (DPCP) seeks to fund evidence-based strategies to prevent and manage type-2 diabetes in adult, high-burden populations/communities across the state, contributing to improved health outcomes. High burden populations are defined as groups that are disproportionately affected by diabetes, prediabetes, high blood pressure, or high blood cholesterol, due to socioeconomic or other characteristics, including inadequate access to care, poor quality of care or low income. The projected outcomes for these projects include:

- Increased access to and coverage of ADA-recognized/AADE-accredited diabetes self-management education and support (DSMES) programs for people with diabetes.
- Increased access to and coverage of the National Diabetes Prevention Program (DPP) lifestyle change efforts for people with prediabetes.
- Decreased proportion of people with type 2 diabetes with an A1C > 9.
- Increased number of people with prediabetes enrolled in a CDC-recognized lifestyle change program who have achieved 5-7% weight loss.

The project and budget periods are 12 months (July 1, 2020 – June 30, 2021). Approximately \$230,000 is available for awards. The anticipated award date is June 8, 2020.

Multiple awards are available for the following six (6) categorical projects (detailed descriptions can be found in Section III, Funding Opportunity Description):

- A. **Diabetes Self-Management Education Capacity Building**: **Three (3) awards are available to increase the availability of American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education and support (DSMES) programs by starting a new program at their site.**
Eligibility: Entities must demonstrate an ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$10,000 per award

- B. Diabetes Self-Management Education via Telehealth: **Three (3) awards are available** for current American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) programs to promote alternative locations for delivery of DSME using telehealth or distance learning strategies.
Eligibility: Eligible organizations must demonstrate their ability and capacity to deliver an ADA-recognized/ ADCES-accredited DSME program in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$10,000 per award
- C. Diabetes Self-Management Education for Community Pharmacists: **Three (3) awards are available** for community-based pharmacies to start a new American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) program for patients diagnosed with diabetes.
Eligibility: New Jersey community-based pharmacists/pharmacies with the ability to reach priority populations in at least one of the project target areas ((Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$10,000 each
- D. Electronic Health Records Survey*: **One (1) award is available** for one (1) healthcare organization to complete a statewide, hospital-based electronic health record (EHR) survey to assess appropriateness for identifying patients with prediabetes and capacity for referral to CDC-recognized lifestyle change programs. The selected applicant must demonstrate knowledge of, and experience with, a variety of electronic health record systems.
Eligibility: New Jersey healthcare systems or practices who have NOT previously received funding from the NJDOH Diabetes Prevention and Control Program between 2014-2019 for this type activity.
Award Amount: \$50,000
**Any applicant that applies for this award, MUST ALSO apply for the Heart Disease RFA, Letter A funding opportunity.*
- E. Diabetes Prevention Program Capacity Building: **Three (3) awards are available** for current suppliers of diabetes self-management education and supports (DSMES) programs recognized by the American Diabetes Association (ADA)– or accredited by the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)–, to start a new CDC-recognized diabetes Prevention Program (DPP).
Eligibility: New Jersey organizations currently offering ADA/ADCES DSME with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).
Award Amount: \$15,000 each
- F. Expanding Diabetes Prevention Programs: **Three (3) awards are available** for current suppliers of CDC-recognized (provisional, full, etc.) diabetes prevention programs (DPP), to expand the delivery of the program to include telehealth strategies to increase access to services in underserved areas.

Eligibility: Entities must demonstrate an ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$15,000 per award

II. Overview

The New Jersey Department of Health (NJDOH) - Diabetes Prevention and Control Program's (DPCP) approach to addressing diabetes in New Jersey is driven by population-based and evidence-based strategies to increase community-clinical linkages and clinical innovations, to support the prevention and management of diabetes. The overall goal of the DPCP is to reduce the burden of diabetes on New Jersey residents by implementing community-clinical linkages and health systems interventions that increase awareness of the disease, control disease-related complications, and increase quality improvement processes in health systems, in the delivery of services to residents with diabetes.

Funding for the proposed activities are supported by the "Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke" cooperative agreement (DP18-1815) issued by the U.S. Centers for Disease Control and Prevention (CDC), which is financed in part by 2018 Prevention and Public Health Funds. This 4.75-year grant is funded jointly by CDC's Division of Diabetes Translation and Division for Heart Disease and Stroke Prevention and supports state investments in implementing and evaluating evidence-based strategies to prevent and manage cardiovascular disease (CVD) and diabetes in high-burden populations/communities, contributing to improved health outcomes.

This RFA builds upon existing statewide implementation of cross-cutting approaches to promote health and prevent and control chronic diseases and their risk factors; along with recommendations set forth in the legislatively mandated Diabetes Action Plan. Recognizing the vital public health interest in reducing and more effectively treating chronic illnesses, the NJDOH will leverage healthcare systems and community-clinical linkages to focus efforts on addressing diabetes.

RFA Purpose

The purpose of this RFA is to select organizations to implement and evaluate evidence-based strategies to prevent and manage type 2 diabetes in high-burden populations/communities within New Jersey. The NJDOH targets communities that experience the highest prevalence of diabetes and lowest access to evidence-based programs to prevent and/or self-manage the disease. In New Jersey, prevalence rate estimates for obesity and diabetes are highest in the following counties: Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem.

Background

Diabetes is the 7th leading cause of death in the U.S.; the number one cause of kidney failure, lower-limb amputations and adult-onset blindness; and a leading cause of heart disease and stroke. A large body of evidence supports the effectiveness of DSMES in improving health outcomes (A1c, systolic blood pressure), lowering medication use, and decreasing hospitalizations and other health care costs for people with diabetes. However, DSMES utilization rates are low. In a study conducted by NJDOH staff, findings suggested that efforts to promote DSME should target participation barriers among patients who live in certain counties, have less education, who are without health care coverage, were diagnosed recently, visit a diabetes provider less often, or who identify as Hispanic or non-Hispanic other race (American Indian/Alaska Native, Asian, Native Hawaiian/Pacific Islander, other).

In New Jersey, diabetes was the sixth leading cause of death in 2017. According to the NJ Behavioral Risk Factor Surveillance System, age-adjusted diabetes prevalence estimates for the adult population in New Jersey increased from 8.1% in 2011 to 9.9% in 2017. The rising prevalence of diabetes is a public health concern, as diabetes is also known to be a major risk factor for heart disease and stroke as well as the leading cause of kidney failure, non-traumatic lower limb amputations, and new cases of blindness in the United States. According to published managed care data (CMS, 2016), it is suggested that a significant percentage of adults with diabetes have poorly controlled disease and are, therefore, at risk for the aforementioned complications. More specifically, the percentage of Medicaid individual-plan managed care enrollees during 2010-2011 who had poorly controlled diabetes ($A1c > 9$), ranged from 40% to 55% (CMS, 2016).

Many of the nation's leading health-care experts recommend a combination of clinical and community-based interventions to address the growing prevalence of chronic conditions such as diabetes and prediabetes. Diabetes self-management education and support (DSMES) is the cornerstone of care for all individuals with diabetes looking to achieve successful health-related outcomes. The Community Preventive Services Task Force recommends that DSMES be implemented in community gathering places based on evidence of effectiveness in improving glycemic control for adults with type 2 diabetes.

National standards for DSMES have been designed to define quality diabetes self-management education. These standards can be implemented in diverse settings to facilitate improvement in health care outcomes. Standards are continually reviewed and edited to reflect appropriateness, relevancy, and maintain a proven scientific basis. The DSMES process incorporates the needs, goals, and life experiences of the person with diabetes. The intent is to support informed decision-making, self-care behaviors, problem-solving and active collaboration with the diabetic patient's health care team to improve clinical outcomes, health status, and quality of life.

It is also important to highlight the public health significance of prediabetes. A CDC analyses of the 2009-2010 NHANES data suggests that only 11% of those with prediabetes were aware of their condition, with awareness being comparably low across all populations and levels of health care access. CDC also reports that 11% of adults with prediabetes, who do not make lifestyle changes, will go on to develop diabetes within a three-year period. Therefore, intervening with patients who have prediabetes to decrease the incidence of diabetes is critical to preventing the onset of the disease.

CDC recommends lifestyle intervention programs for the prevention of type 2 diabetes. Based on effective research by the National Institutes of Health, the National Diabetes Prevention Program is a lifestyle intervention program that helps participants learn and adopt healthy eating and physical activity habits proven to reduce the risk of developing Type 2 diabetes. The lifestyle change program is founded on the science of the Diabetes Prevention Program research study, and several translation studies that followed, which showed that making modest behavior changes helped participants with prediabetes lose 5% to 7% of their body weight and reduce their risk of developing type 2 diabetes by 58%. The program has been shown to be cost effective and can be cost saving. The 12-month group-based program consists of 16 one-hour, weekly sessions, followed by monthly sessions led by a trained lifestyle coach who facilitates a small group of people with similar goals. The program can be delivered in person or via telehealth and distance learning.

Telehealth is defined as the use of electronic information and telecommunication technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health and health administration. Technologies include video conferencing, the

internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications. Distance Learning programs are delivered 100% by trained Lifestyle Coaches via remote classroom or telehealth (i.e., conference or Skype) where the Lifestyle Coach is present in one location and participants are calling in or videoconferencing from another location is considered Distance Learning.

Healthy People 2020

This RFA addresses the following “Healthy People 2020” Diabetes Objectives:

- Increase the proportion of persons with diagnosed diabetes who receive formal diabetes education (D-14).
- Increase the proportion of persons at high risk for diabetes with prediabetes who report increasing their levels of physical activity (D-16.1), trying to lose weight (D-16.2), and reducing the amount of fat or calories in their diet (D-16.2).

Program Outcomes

The short-term outcomes of these projects are:

- Increased access to and coverage of ADA-recognized/AADE-accredited diabetes self-management education and support (DSMES) programs of people with diabetes.
- Increased access to and coverage for the National DPP lifestyle change program for people with prediabetes.

The long-term outcomes of this project are:

- Decreased proportion of people with diabetes with an A1C > 9.
- Increased number of people with prediabetes enrolled in a CDC-recognized lifestyle change program who have achieved 5-7% weight loss.

III. Funding Opportunity Description

DPCP is seeking to partner with organizations on the following projects:

- Diabetes Self-Management Education Capacity Building: **Three (3) awards** are available to increase the availability of diabetes self-management education and support (DSMES) programs. Applicants must complete an application to become an American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) program by starting a new program at their site. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as removing copays; identify convenient alternative locations; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured.

Eligibility: Special consideration will be given to those organizations that demonstrate their ability to reach populations most affected by diabetes in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$10,000 per award

Funding Restrictions: Funds cannot be used to pay for DSMES start-up costs or participants fees/copays; pay for personnel time to provide DSMES directly to individuals; or the purchase of equipment to support the delivery of DSMES via distance learning or telehealth.

- B. Diabetes Self-Management Education via Telehealth: **Three (3) awards** are available for current American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) to promote alternative locations for delivery of DSME using telehealth or distance learning strategies. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as removing copays; identify convenient alternative locations; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured.

Eligibility: Eligible organizations must demonstrate their ability and capacity to deliver an ADA-recognized/ ADCES-accredited DSME program in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$10,000 per award

Funding Restrictions: Funds cannot be used to pay for DSMES start-up costs or participant fees/copays; pay for personnel time to provide DSMES directly to individuals; or the purchase of equipment to support the delivery of DSMES via distance learning or telehealth.

- C. Diabetes Self-Management Education for Community Pharmacists: **Three (3) awards** are available for community-based pharmacies to start a new American Diabetes Association (ADA)-recognized or the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited diabetes self-management education (DSME) program for patients diagnosed with diabetes. Applicants must include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to: African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured.

Eligibility: New Jersey community-based pharmacists with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$10,000 each

Funding Restrictions: Funds cannot be used to pay a pharmacy or pharmacist to provide direct patient care services.

- D. Electronic Health Records Survey*: One (1) award is available for one (1) healthcare organization to complete a statewide, hospital-based electronic health record (EHR) survey to assess

appropriateness for identifying patients with prediabetes and capacity for referral to CDC-recognized lifestyle change programs. The selected applicant must demonstrate knowledge of, and experience with, a variety of electronic health record systems.

Award Amount: \$50,000

Funding Restrictions: Funds cannot be used to provide incentives for hospital participation.

**Any applicant that applies for this award, they MUST ALSO apply for the Heart Disease RFA, Letter A award.*

- E. Diabetes Prevention Program Capacity Building: **Three (3) awards** are available for current suppliers of diabetes self-management education and supports (DSMES) programs recognized by the American Diabetes Association (ADA)– or accredited by the Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)–, to adopt the CDC-recognized Diabetes Prevention Program (DPP). Applicants must review the CDC DPRP Standards and Operating Procedures and complete the capacity assessment (<https://www.cdc.gov/diabetes/prevention/pdf/capacity-assessment.pdf>) and submit the findings along with their application. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as providing transportation vouchers or childcare; providing food/farmers market vouchers; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos; Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured. Applicants **MUST** apply for DPP recognition status by CDC.

Eligibility: New Jersey organizations currently offering ADA/ADCES DSME with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$15,000 each

Funding Restrictions: Funds cannot be used to enroll participants in non-CDC recognized DPP; train master trainers; build new data entry systems for the collection and monitoring of program data; incentives*

**Incentives:* limited funds can be used to support incentives but must be approved by the NJDOH Project Officer prior to purchase.

- F. Expanding the Diabetes Prevention Program: **Three (3) awards** are available for current CDC-recognized (provisional, full, etc.) diabetes prevention programs (DPP) to expand the delivery of the program to include telehealth strategies to improve access to services in underserved areas. Applicants should carefully review the CDC DPRP Standards and Operating Procedures. Applicants should discuss the approaches that will be taken to remove barriers to participation for high burden populations such as providing transportation vouchers or childcare; providing food/farmers market vouchers; cover participant enrollment fees; etc. Applicants must also include the strategies that will be employed to engage and improve access for priority populations that include, but are not limited to, African Americans; Hispanics/Latinos;

Indigenous Americans; Asians; Low-Income; migrant, uninsured; and under-insured. Applicants MUST apply for DPP recognition status by CDC.

Eligibility: New Jersey organizations currently offering ADA/ADCES DSME with the ability to reach priority populations in at least one of the project target areas (Atlantic; Camden; Cumberland; Essex; Gloucester; Hudson; Middlesex; Passaic; and Salem counties).

Award Amount: \$15,000 each

Funding Restrictions: Participant materials, skype and zoom are all considered program. The sum total of these costs, together with any other program delivery costs, cannot exceed \$500/person. The cost of technologies like skype or zoom may be allocated across the number of enrolled participants (e.g., a skype license may cost \$200, which would result in a cost of \$20/person for a cohort of 10 participants.) That \$20 would be added to other delivery costs such as the coach salary and rental space to not exceed a total of \$500/person enrolled. Applicants may subcontract with a recognized online organization (e.g., a CDC-recognized DPP site could contract with a national online delivery organization like Omada and then offer participants a choice). Funds cannot be used to purchase equipment; enroll participants in non-CDC recognized DPP; train master trainers; build new data entry systems for the collection and monitoring of program data; nor to purchase incentives*

**Incentives:* Limited funds can be used to support incentives but must be approved by the NJDOH Project Officer prior to purchase.

Proof of Eligibility

Eligible applicants must be a municipal/county government, local health department, hospital, Federally Qualified Health Center (FQHC), university, or non-profit organization with 501(c)3 status located in, or currently providing services in, priority counties in New Jersey.

Memorandum of Understanding/Memorandum of Agreement (MOU/MOA) and Letters of Support (LOS) are required and will be a criterion used in evaluating the application. The MOU/MOA should describe the following elements:

- Identify senior organizational leaders within both agencies to provide leadership support and implementation oversight.
- Demonstrate a history of providing effective, culturally competent, and linguistically appropriate health-related services within your target area.

Applicants are required to submit financial documents, per each year of the grant cycle, in accordance to the NJDOH Terms and Conditions. Failure to provide required documentation by the date of application submission will result in the application being deemed non-responsive. Please attach the requested documents as a PDF file to your application through the NJDOH System for Administering Grants Electronically (SAGE):

- a. Valid Internal Revenue Services (IRS) 501(c) (3) tax exempt status.
- b. Annual Audit Report (most recent).
- c. Tax Clearance Certificate is to be submitted. The application for Tax Clearance can be obtained at <http://www.state.nj.us/treasury/taxation/busasst.shtml> (fee of \$75.00 or \$200.00).

- d. NJ Charities Registration- If your organization is registered with the NJ Charities Registration then each year a “Letter of Compliance” from the Division of Consumer Affairs must be obtained. All registered charities must renew their registration yearly. For more information contact and forms can be found at www.state.nj.us/lps/ca/charity/charfrm.htm

Funding Information

Funding in the first and future years is expressly dependent upon the availability of funds to the Department appropriated by the State Legislature from state or federal revenue or such funding sources as may be applicable. The Department shall not be held liable for any breach of any award because of the absence of available funding appropriations.

The method of payment will be cost reimbursement unless a waiver is submitted detailing the cash flow needs, and the waiver is accepted by the Department.

Availability of Funds

New Jersey State grant funds available for this initiative are contingent upon federal appropriations. Approximately \$230,000 is available for awards during the 12-month award (July 1, 2020–June 30, 2021). Funding under a grant is expressly dependent upon the availability of funds to the Department appropriated by federal revenue or such other funding sources as may be applicable. The Department shall not be held liable for any breach of this agreement because of the absence of available funding appropriations. The grant award will further be contingent upon the fiscal and programmatic completeness of your application, as well as the satisfactory fulfillment of the grant objectives.

Applicants may apply to more than one project. If applying for more than one project, separate Schedules A-C must be completed for each.

IV. Application and Submission Information

Applicants must submit a detailed project narrative, describing how the applicant plans to implement activities supporting the required objectives. DOH-DPCP will provide feedback and technical assistance to awardees to finalize work plan activities post-award. The narrative should not exceed 12 pages (single spaced, Calibri 12 point, 1-inch margins, and numbered pages). Content beyond 12 pages will not be reviewed.

The project narrative must include all the bolded headers outlined under this section. It should be succinct, self-explanatory and organized in the order outlined in this section, so that reviewers can understand the proposed project. The description should address activities to be conducted over the entire project period. Include a logic model and work plan to support your application.

If applying for more than one project, a complete and detailed project narrative must be submitted for each.

1. Project Abstract Summary (Maximum of 2 paragraphs) – The project abstract should be a self-contained, brief description of the proposed project to include the purpose and outcomes. This summary must not include any proprietary/confidential information.

2. Needs Assessment – For your target population, the applicant must describe the core information to understand the burden of diabetes in your county and how the proposed project will address diabetes and pre-diabetes.

- **Target Populations:** Applicants should ensure that data, including burden data, are used to identify strategies and/or communities within their counties that have poor environments and/or are disproportionately affected by diabetes. Disparities by race, ethnicity, gender identity, sexual orientation, geography, socioeconomic status, disability status, primary language, health literacy, and other relevant dimensions (e.g., tribal communities) should be considered. The applicant should address how they will be inclusive of specific populations that are disproportionately affected by diabetes.

3. Organizational Capacity – Applicants must describe their organizational capacity to achieve the project objectives. When applicants are describing organizational capacity, consideration should be given to:

- Minimizing duplication of effort.
- Coordinating efforts with other federally and privately funded programs within their service area to leverage resources and maximize reach and impact. The applicant should describe core project management to execute the award, including the roles and responsibilities of project staff.
- The applicant should specify who will have day-to-day responsibility for key tasks such as: leadership of the project; monitoring of the project’s on-going progress; preparation of reports; program evaluation; and communication with partners and DOH-DPCP.

The applicant should provide information about any contractual organization(s) that will have a significant role(s) in implementing program strategies and achieving project outcomes.

- The applicant should also describe how any consultants and/or partner organizations will contribute to achieving project outcomes.

The applicant must also demonstrate readiness to implement evidence-based strategies, including the ability of applicants to describe the following:

- Established partnerships with groups/organizations relevant to the RFA objectives.
- Prior experience working with health care providers to improve health outcomes (if appropriate).
- Proven ability to collect and use data to demonstrate impact.
- Experience with planning and implementing programs.

4. Project Objectives – The applicant must identify SMART objectives that address the needs of the intervention described in the funding category.

5. Methods/Strategies – The applicant must provide a clear and concise description of the project strategy or strategies the applicant intends to use to meet the required outcomes. As applicable, applicants should use and explicitly reference the CDC’s *Guide to Community Preventive Services (The Community Guide)* as a source of evidence-based program strategies whenever possible. In addition, applicants may propose additional program strategies to support the outcomes. For each project, discuss how your strategy will impact the following:

- Address social determinants of health to remove barriers to participation for high-burden populations.
- Increase access and participation in ADA-recognized/ Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited programs by people with diabetes.

- Decrease the proportion of people with diabetes with an A1C>9.
- A decrease in the proportion of New Jersey residents with diabetes with an A1C less than 9.
- Increase enrollment in CDC-recognized organizations delivering National Diabetes Prevention Program (DPP) lifestyle change programs.
- Increase the number of people with prediabetes enrolled in a CDC-recognized lifestyle change program who achieve a 5-7% weight loss.
- Increase participation in Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited programs by people with diabetes.
- Increase access to and coverage of Association of Diabetes Care & Education Specialists (ADCES) (formerly known as the American Association of Diabetes Educators)-accredited programs by people with diabetes.
- Increase the use of pharmacist patient care processes that promote medication management for people with diabetes.
- Increase access to and coverage of the DPP lifestyle change program for people with prediabetes.
- Increase community-clinical linkages that facilitate referrals and provide support to enroll and retain participants in NDPP.

6. Plan for Sustainability – The applicant must describe specific strategy/ strategies that can be utilized after the expiration of grant. Include strategies that will likely lead to continued programming and to build scope of future work.

7. Evaluation – Eligible applicants are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of this RFA. Measures of effectiveness must relate to the performance goals stated in the “Purpose” section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application. The plan must:

- Describe how evaluation findings will be used for continuous program and quality improvement.
- Describe how evaluation and performance measurement will contribute to the understanding of the advantages and challenges of working collaboratively to achieve positive diabetes health outcomes.
- Describe how efforts to increase participation in DSMES/DPP programs by people with or at risk for diabetes will be measured.
- Describe the type of evaluations to be conducted (i.e. process and/or outcome). Describe potentially available data sources.

Awardees will be required to collect and report outcome performance measures to DOH-DPCP quarterly.

8. Detailed Budget – Applicants must provide a detailed budget describing how potential funds will be allocated and expended. The budget should reflect work that will be completed during the planning phase and the development of a work plan to be executed during the implementation phase. If applying for more than one project, separate Schedules A-C must be completed for each.

V. Application Review Information

In scoring applications, eligible applications will be evaluated against the following criteria during review:

- 1. Project Abstract Summary (0 points)** – While the Abstract receives no points, it is a required element for evaluation by the RFA reviewers.
- 2. Needs Assessment (10 points)** – The extent to which the applicant has demonstrated an understanding of the burden of diabetes among its target residents, particularly the impact on disparate populations, and the challenges of and opportunities for promoting diabetes prevention and self-management programs.
- 3. Organizational Capacity (20 points)** – The extent to which the applicant has demonstrated readiness to implement strategies supporting the project objectives.
- 4. Project Objectives (30 points)** – Extent to which objectives are specific, measurable, achievable, realistic and time-bound (SMART); and the extent to which stated objectives will address the needs of disparate populations.
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Applications will be screened for completeness and eligibility as specified in this RFA. Only those proposals deemed to be eligible, complete and in compliance will be sent to the RFA review committee. An RFA review committee will review the proposals. Proposals will be rated on criteria, which appear in the “Review Criteria” section of this document. The DPCP reserves the right to render final decisions on the awarding of funds under this RFA.

- a. Phase I Review:** All eligible applications will be initially reviewed for completeness by the DPCP staff. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance to Phase II review. These applicants will be notified, via email, that the application did not meet eligibility requirements.
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- c. Phase III Review:** DPCP staff will review all recommendations and will make the final decisions for awards. In addition, the following factors may affect the funding decision:

- DOH may fund out of rank order to achieve geographic and/or programmatic diversity.

Applications must include:

1. A detailed budget and work plan with timetable. The timetable should reflect the planning and implementation phases. If applying for more than one project, separate budgets must be completed for each.
2. A letter of support from the agency head on agency letterhead.
3. Resume/s for all staff listed in the budget for this grant.
4. Any required documents such as agency Travel Policy, Salary Policy, Affirmative Action Policy, Copy of Interest Bearing Account, Proof of Non-profit Status (if applicable), NJ Charities Registration (if applicable), Consultant Agreements (if applicable), Plan for Sustainability, annual Audit Report, Statement of Total Gross Revenue, Application for Tax Clearance.

VI. Other Information

Use of Funds

Upon award, the recipient shall ensure that funds are immediately accessible and used for activities described in approved work plans. Funds must be used as follows:

- No more than 75% of the total award can be allocated for salary and fringe or consultant fees for dedicated staff. As a percentage of salary, the fringe rate cannot exceed 44.3%.
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Funds may be used to support:

- In state travel only and related expenses for project staff to carry out specified duties and to attend mandatory meetings and trainings.
- Costs associated with providing DPP to participants.

Funding Restrictions:

- Recipient may not use funds for purchasing vehicles.
- Recipient may not use funds for travel outside of the State of New Jersey.
- Recipient may not use funds for research.
- Recipient may not use funds for construction.
- Recipient may not use funds for interest on loans for the acquisition and/or modernization of an existing building.
- Recipient may only expend funds for reasonable program purposes, including personnel, travel, supplies and services.
- Recipient may not use funds for tuition reimbursement.

Anticipated Announcement and Award Dates:

- Successful applicants will anticipate notice of funding on or about June 8, 2020 with a start date of July 1, 2020.
- DOH encourages inquiries concerning this announcement. For programmatic technical assistance, contact:
Tifanie Selby, MPH
Project Officer, Diabetes Prevention and Control Program
Tifanie.Selby@doh.nj.gov



**New Jersey Department of Health
Division of Community Health Services
Community Health and Wellness Unit
Heart Disease & Stroke Prevention Program**

Request for Applications

Dates to Remember	
Request for Applications Released	May 1, 2020
Letter of Intent to Apply Due	May 8, 2020
Bidder's Conference (via Webinar)	May 11, 2020
Application Due	May 26, 2020
Notification of Intent to Fund	June 8, 2020
Start Date	July 1, 2020



PLEASE READ:

1. **New Jersey Department of Health funding is available for six (6) categories of projects.**
2. **Organizations are permitted to apply for multiple categorial projects if they meet all eligible criteria. If applying for more than one project, separate Schedules A-C must be completed for each.**
3. **Letters of Intent (LOI) to apply for funding are due on May 8, 2020 by 3:00 pm. Please send LOIs, via email to: Anne Dulcio, MPH**
anne.dulcio@doh.nj.gov
4. **Once submitted, applicants will receive an invitation for the Bidder’s Conference on May 11, 2020.**

I. EXECUTIVE SUMMARY

The New Jersey Department of Health- Heart Disease and Stroke Prevention Program (NJDOH- HDSPP) announces the availability of Fiscal Year (FY) 2021 funds in the amount of \$459,109 for organizations to adopt strategies that focus on cardiovascular disease prevention and management.

The project period is 12 months (July 1, 2020 – June 30, 2021). The anticipated award date is June 8, 2020. Multiple awards are available for the following six (6) projects (detailed descriptions can be found in Section III):

- A. Electronic Health Records Survey: **One (1) award** is available **at \$50,000** to complete a statewide, hospital-based electronic health record (EHR) survey to improve provider and patient health outcomes for the detection, treatment, management of undiagnosed hypertension, prediabetes, and capacity for referral to CDC-recognized lifestyle change programs. Eligibility: New Jersey healthcare systems or practices who have NOT previously received funding from the NJDOH Heart Disease & Stroke Prevention Program between 2014-2019 for this type activity. Eligible healthcare organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden Gloucester, Ocean and Essex County). **Any applicant that applies for this award, MUST ALSO apply for the Diabetes RFA, Letter D funding opportunity (Electronic Health Records Survey).*
- B. Quality Measurement of Healthcare Disparities: **One (1) award** is available **at \$65,000** to promote the adoption of evidence-based quality measurements at the provider level, using dashboards to monitor healthcare disparities and implement activities to eliminate the

identified disparities. Eligibility: New Jersey healthcare organizations with multisite adult primary care centers that have EHR capacity. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden Gloucester, Ocean and Essex counties).

- C. Promoting Team Base Care to Improve High Blood Pressure Control: **Two (2) awards** are available **at \$43,554.50 each** to support engagement of non-physician team members in hypertension and cholesterol management in clinical settings. Eligibility: New Jersey healthcare systems with physician practices, hospitals and federally qualified health centers. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden Gloucester, Ocean and Essex counties).
- D. Medication Therapy Management: **Two (2) awards** are available - **(1) at \$33,000** for continuing education **and (1) at \$50,000** for implementation activities to promote the adoption of medication therapy management (MTM) between pharmacist and physicians for the purpose of managing high blood pressure, high blood cholesterol, and lifestyle modifications in adult populations. Eligibility- New Jersey organization with a pharmacy subject-matter expert (PSME) who has NOT previously received funding from the NJDOH Heart Disease and Stroke Program between 2018-2020 for this strategy. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties).
- E. Increasing Patient Self- Measured Blood Pressure Monitoring: **Five (5) awards** are available – **(1) at \$44,000** and **(4) at \$10,000 each** to facilitate the use of self-measured blood pressure monitoring (SMBP) with clinical support among adults with hypertension. Eligibility: New Jersey healthcare organizations with adult primary care populations or community organizations affiliated with a healthcare system who have NOT previously received funding from the NJDOH Heart Disease and Stroke Program between 2018-2020 for this strategy. Eligible organizations must demonstrate reach in at least one of the following target areas (Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties).
- F. Improving Heart Disease Management for Women: **Three (3) awards** will be available **at \$30,000** each to improve health outcomes for women at risk for heart disease and stroke. Eligibility: Federal Qualified Health Center (FQHC) sites, primary care practices, regional planning collaboratives, and accountable care organizations. Eligible organizations must demonstrate reach in at least one of the following high burdened hypertensive target areas: Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties.

II. OVERVIEW

The Heart Disease and Stroke Prevention Program’s (HDSPP) goal is to reduce the burden of high blood pressure among New Jersey residents by implementing health systems interventions that increase awareness, promote reporting, and increase quality improvement processes.

In 2018, The New Jersey Department of Health was awarded a multi-year grant - “Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke” cooperative agreement (DP18-1815) issued by the U. S. Centers for Disease Control and Prevention

(CDC), to support state investments in implementing and evaluating evidence-based strategies to prevent and manage cardiovascular disease (CVD) and diabetes in high-burdened populations/communities, contributing to improved health outcomes.

This RFA builds upon existing statewide implementation of cross-cutting approaches to promote health and prevent and control chronic diseases and their risk factors. Recognizing the vital public health interest in reducing and more effectively treating chronic illnesses, the Department of Health will leverage healthcare systems and community-clinical linkages to focus efforts on addressing diabetes and cardiovascular disease simultaneously.

Program Purpose

The purpose of this grant is to promote the use of evidence-based strategies to prevent and manage cardiovascular disease in high burden populations/ communities within the state. This will be accomplished by providing funding to organizations to implement systems- level changes that contribute to improved health outcomes.

In New Jersey, prevalence rate estimates for hypertension are highest in the southern, rural counties of the state (Camden, Gloucester, Salem, Cumberland, Atlantic Cape May and Ocean) and the northern, urban county of Essex. These areas represent New Jersey's high burden populations for risk factors leading to heart disease and stroke.

Background

Heart disease is the leading cause of death, and stroke is the 5th leading cause of death, in the U.S. Cardiovascular Disease (CVD), including heart disease, stroke, and other vascular diseases, accounts for >800 000, or about 1 in 3, deaths/year, and around 1 in 5 who die from CVD are younger than 65 years. CVD is costly, with an estimated 1 in 7 health care dollars spent on CVD (about 15%). The economic burden placed on the health care system resulting from cardiovascular disease is staggering. Annual direct and overall costs resulting from CVD are estimated at \$273 billion and \$444 billion, respectively and are increasing every year. Primary risk factors such as hypertension (HTN)/high blood pressure (HBP) and diabetes are significant contributors of cardiovascular disease.

Hypertension is a primary risk factor for CVD. While control of hypertension, reflective of individual and system-level improvements, has been increasing, less than half of those with hypertension are controlled. Interventions to support patient engagement, prevention, and health system improvements need to be maximized to improve hypertension management. High blood cholesterol is another primary risk factor for CVD. Several modifiable health behaviors can lower cholesterol, including eating a healthy diet, losing weight, and being physically active. Behavior modification improvements and health systems advances are needed to reduce the need for treatment and close the gap in treatment across the population. Health system interventions may include use of team-based care and community health workers, electronic health record alignment with national guidelines, improved medication adherence, and interventions supporting better continuity of care across health care settings.

About 75 million American adults (29%) have HBP; only about half of American adults (52%) have their blood pressure under control. High blood pressure costs the nation \$46 billion each year in direct and indirect costs.

Among New Jersey residents, heart disease and stroke are the first and fifth leading causes of death respectively. In 2017, a total of 18,842 residents died from heart disease and 3,475 died from stroke.

HTN is a common chronic condition that increases the risk for heart disease and stroke. The CDC reports that reducing the average systolic blood pressure by only 12-13 mmHg could reduce deaths from cardiovascular disease by 25%. Despite this, only about half of the people with high blood pressure have the condition under control. In New Jersey, approximately 30% of adults report ever being told they had HTN.

In NJ, diabetes is the sixth leading cause of death. The number of adults who have diabetes has been increasing over time. Controlling diabetes decreases the risk for diabetes-related complications including end-stage renal disease and blindness. These data show the burden of these two chronic diseases continue to rise. Preventing and controlling HBP and diabetes require strategies that foster systems-level changes in health care systems.

Data Source: *Behavioral Risk Factor Survey 2017, Center for Health Statistics, New Jersey Department of Health*, <http://www.state.nj.us/health/chs/njbrfs/>

Healthy People 2020

This RFA addresses the following “Healthy People 2020” Cardiovascular Disease Objectives:

- HDS-2: Reduce coronary heart disease deaths.
- HDS-3: Reduce stroke deaths.
- HDS-7: Reduce the proportion of adults with high total blood cholesterol levels.
- HDS-8: Reduce the mean total blood cholesterol levels among adults.
- HDS-12: Increase the proportion of adults with hypertension whose blood pressure is under control.

Program Outcomes

The short-term outcomes of this project are:

- Increased reporting, monitoring, and tracking of clinical data for improved identification, management, and treatment of patients with high blood pressure and high blood cholesterol.
- Increased use of and adherence to evidence-based guidelines and policies related to team-based care for patients with high blood pressure and high blood cholesterol
- Increased community clinical links that support systematic referrals, self-management, and lifestyle change for patients with high blood pressure and high blood cholesterol

The long-term outcomes of this project are:

- Increased control among adults with known high blood pressure and high blood cholesterol

III. FUNDING OPPORTUNITY DESCRIPTION

HDSPP is seeking to partner with organizations on the following interventions:

A. Electronic Health Records Survey

One (1) award is available for one (1) healthcare organization to complete a statewide, hospital-based electronic health record (EHR) survey to improve provider and patient health outcomes for the detection, treatment, management of undiagnosed hypertension, prediabetes, and capacity for referral to CDC-recognized lifestyle change programs. The selected applicant must demonstrate knowledge of, and experience with, a variety of electronic health record systems. Eligibility: New Jersey healthcare

systems or practices who have NOT previously received funding from the NJDOH Heart Disease & Stroke Prevention Program between 2014-2019 for this type activity. One (1) award will be funded at \$50,000.

**Any applicant that applies for this award, MUST ALSO apply for the Diabetes RFA, Letter D award (Electronic Health Records Survey).*

B. Quality Measurement of Healthcare Disparities

One (1) healthcare organization with 3 or more sites that can demonstrate reach within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties to promote the adoption of evidence-based quality measurement at the provider level, using dashboards to monitor healthcare disparities and implement activities to eliminate the identified disparities. Successful applicants must demonstrate electronic health recording (EHR) capacity to develop quality measurement at the provider level. The projected result is to increase the number and percentage of clinics or providers that use standardized quality measures to track differences in BP control and cholesterol management in priority populations compared to the overall population. One (1) award will be funded at \$65,000.

C. Promoting Team Base Care to Improve High Blood Pressure Control

Two (2) healthcare organizations within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will support engagement of non-physician team members: nurses, nurse practitioners, pharmacists, nutritionists, physical therapists, social workers and community health workers in hypertension and cholesterol management in clinical settings. Team members within healthcare systems will assess their team base care model and identify areas to increase hypertension and cholesterol management. Team members will implement new or enhanced team base approaches to address these areas to increase blood pressure control and cholesterol management. Two (2) awards will be funded at \$43, 554.50 each.

D. Medication Therapy Management (MTM)

One (1) organization with a pharmacy subject-matter expert (PSME) will conduct a minimum of 3 trainings for pharmacists and primary care providers (a minimum of 15 participants per discipline each training) on Chronic Care Management with a MTM component within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties. This training would focus largely on MTM, both the service itself as well as logistical considerations such as billing and partnering with other providers. One hour of these six hours of training would focus specifically on the pathway for pharmacists to move towards CCM. One (1) award will be funded at \$33,000.

One (1) organization with a pharmacy subject-matter expert (PSME) will initiate a minimum of 4 MTM collaborative agreements and collect data to track specific MTM services offered and provided, impact of MTM on outcomes and satisfaction of the physician practice and pharmacy with the agreement and results for adult patients with diabetes, high blood pressure, high blood cholesterol within high burden areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties. The pharmacist and physicians will provide services such as pharmacist medication reviews, health education, health counseling using motivational interviewing, and follow-up calls at scheduled intervals. One (1) award will be funded at \$50,000.

The projected result of both projects is to increase the number and percentage of pharmacists engaged in the practice of MTM to promote medication self-management and lifestyle modification for high blood pressure and high blood cholesterol.

E. Increasing Patient Self- Measured Blood Pressure Monitoring (SMBP)

One (1) healthcare organization within a high burdened area including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will facilitate the use of SMBP with clinical support (web-based, telephone-based, or one-on-one counseling) among adults with hypertension. Organizations must use an evidence-based SMBP program and demonstrate EHR system capacity to administer web-based or telephonic support tools for patients. One (1) award will be funded at \$44,000.

Four (4) community organizations affiliated with a healthcare system within a high burdened area including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will facilitate the use of SMBP with clinical support (web-based, telephone-based, or one-on-one counseling) among adults with hypertension. Organizations must use an evidence based SMBP program (i.e. HHA-BPSM or Y-BPSM) and demonstrate EHR system capacity to administer web-based or telephonic support tools for patients. Four (4) awards will be funded at \$10,000 each.

The projected result of both projects is to increase the number and percentage of patients within healthcare systems with policies or systems to encourage SMBP with clinical support.

F. Improving Heart Disease Management for Women

Three (3) Federal Qualified Health Center (FQHC) sites with healthcare systems within high burdened areas including Cumberland, Salem, Atlantic, Cape May, Camden, Gloucester, Ocean and Essex counties will conduct an in-depth analysis of protocols currently used for the detection and management of heart disease and identify possible gender disparities. Quality improvement activities will be implemented, monitored and tracked to improve health outcomes of women at risk for heart disease and stroke. Three (3) awards will be funded at \$30,000 each.

Proof of Eligibility

Eligible applicants must be a local health department, hospital, Federally Qualified Health Center (FQHC), university, or non-profit organization with 501(c)3 status located in, or currently providing services in, New Jersey.

Eligible applicants must also meet the following criteria:

- Applicants must provide evidence of their partnerships with healthcare providers. If formal agreements do not exist specifically for this purpose, then applicants must outline a specific plan and provide letters of support that demonstrate the agency capacity and healthcare providers' willingness to participate in this initiative.

Memorandum of Understanding/Memorandum of Agreement (MOU/MOA) and Letters of Support (LOS) are required and will be a criterion used in evaluating the application. The MOU/MOA should describe the following elements:

- Identify senior organizational leaders within both agencies to provide leadership support and implementation oversight.
- Demonstrate a history of providing effective, culturally competent, and linguistically appropriate health-related services within your target area.

Applicants are required to submit financial documents, per each year of the grant cycle, in accordance to the NJDOH Terms and Conditions. Failure to provide required documentation by the date of application submission will result in the application being deemed non-responsive. Please attach the requested documents as a PDF file to your application through the NJDOH System for Administering Grants Electronically (SAGE):

- a. Valid Internal Revenue Services (IRS) 501(c) (3) tax exempt status.
- b. Annual Audit Report (most current)
- c. Tax Clearance Certificate is to be submitted. Application for Tax Clearance can be obtained at <http://www.state.nj.us/treasury/taxation/busasst.shtml> (fee of \$75.00 or \$200.00).
- d. NJ Charities Registration- If your organization is registered with the NJ Charities Registration then each year a "Letter of Compliance" from the Division of Consumer Affairs must be obtained. All registered charities must renew their registration yearly. For more information contact and forms can be found at www.state.nj.us/lps/ca/charity/charfrm.htm

Funding Information

Funding in the first and future years is expressly dependent upon the availability of funds to the Department appropriated by the State Legislature from state or federal revenue or such funding sources as may be applicable. The Department shall not be held liable for any breach of any award because of the absence of available funding appropriations.

The method of payment will be cost reimbursement unless a waiver is submitted detailing the cash flow needs, and the waiver is accepted by the Department.

Availability of Funds

New Jersey State grant funds available for this initiative are contingent upon federal appropriations. Approximately \$459,109 is anticipated for the 12-month project period (July 1, 2020 – June 30, 2021). Funding under a grant is expressly dependent upon the availability of funds to the Department appropriated by federal revenue or such other funding sources as may be applicable. The Department shall not be held liable for any breach of this agreement because of the absence of available funding appropriations. The grant award will further be contingent upon the fiscal and programmatic completeness of your application, as well as the satisfactory fulfillment of the grant objectives.

Applicants may apply to more than one project. If applying for more than one project, separate Schedules A-C must be completed for each.

G. APPLICATION & SUBMISSION INFORMATION

This is a 12-month grant, with a project period of July 1, 2020–June 30, 2021.

Applicants must submit a detailed project narrative, describing how the applicant plans to implement activities supporting the required objectives. DOH-HDSP will provide feedback and technical assistance to awardees to finalize work plan activities post-award. The narrative should not exceed 12 pages (single spaced, Calibri 12 point, 1-inch margins, and numbered pages). Content beyond 12 pages will not be reviewed.

The project narrative must include all the bolded headers outlined under this section. It should be succinct, self-explanatory and organized in the order outlined in this section, so that reviewers can understand the proposed project. The description should address activities to be conducted over the entire project period. Include a logic model and work plan to justify your application.

If applying for more than one funding category, be sure to complete a detailed project narrative for each.

1. Project Abstract Summary (Maximum of 2 paragraphs) – The project abstract should be a self-contained, brief description of the proposed project to include the purpose and outcomes. This summary must not include any proprietary/confidential information.

2. Needs Assessment – For your target population, the applicant must describe the core information to understand the burden of cardiovascular disease in your county and how the proposed project will address high blood pressure with systems-level approaches.

- Target Populations: Applicants should ensure that data, including burden data, are used to identify strategies and/or communities within their counties that have poor environments and/or are disproportionately affected by cardiovascular disease. Disparities by race, ethnicity, gender identity, sexual orientation, geography, socioeconomic status, disability status, primary language, health literacy, and other relevant dimensions (e.g., tribal communities) should be considered.

3. Organizational Capacity – Applicants must describe their organizational capacity to achieve the project objectives. When applicants are describing organizational capacity, consideration should be given to:

- Minimizing duplication of effort.
- Coordinating efforts with other federally and privately funded programs within their county to leverage resources and maximize reach and impact. The applicant should describe core project management to execute the award, including the roles and responsibilities of project staff.
- The applicant should specify who will have day-to-day responsibility for key tasks such as: leadership of the project; monitoring of the project’s on-going progress; preparation of reports; program evaluation; and communication with partners and DOH-HDSPP.
- The applicant should provide information about any contractual organization(s) that will have a significant role(s) in implementing program strategies and achieving project outcomes.
- The applicant should also describe how any consultants and/or partners organizations will contribute to achieving project outcomes.
- The applicant must also demonstrate readiness to implement evidence-based strategies, including the ability of applicants to describe the following:
 - Established partnerships with groups/organizations relevant to the RFA objectives.
 - Prior experience working with health care providers to improve health outcomes (Categories B and C).
 - Proven ability to collect and use data to demonstrate impact.
 - Experience with planning and implementing programs.

4. Project Objectives – The applicant must identify SMART objectives that address the needs of the intervention described in the funding category.

5. Methods/Strategies – The applicant must provide a clear and concise description of the project strategy or strategies the applicant intends to use to meet the required outcomes. As applicable, applicants should use and explicitly reference *The Community Guide* as a source of evidence-based program strategies whenever possible. In addition, applicants may propose additional program strategies to support the outcomes. For each project, discuss how your strategy will impact the following:

- Increased reporting, monitoring, and tracking of clinical data for improved identification, management, and treatment of patients with high blood pressure and high blood cholesterol

- Increased use of and adherence to evidence-based guidelines and policies related to team-based care for patients with high blood pressure and high blood cholesterol
- Increased community clinical links that support systematic referrals, self-management, and lifestyle change for patients with high blood pressure and high blood cholesterol
- Increased medication adherence among patients with high blood pressure and high blood cholesterol
- Increased engagement in self-management among patients with high blood pressure and high blood cholesterol
- Increased participation in evidence-based lifestyle interventions among patients with high blood pressure and high blood cholesterol
- Increased control among adults with known high blood pressure and high blood cholesterol

6. Plan for Sustainability – The applicant must describe specific strategy/strategies that can be utilized after the expiration of grant. Include strategies that will likely lead to continued programming and to build scope of future work.

7. Evaluation – Eligible applicants are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of this RFA. Measures of effectiveness must relate to the performance goals stated in the “Purpose” section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application. The plan must:

- Describe how evaluation findings will be used for continuous program and quality improvement.
- Describe how evaluation and performance measurement will contribute to the understanding of the advantages and challenges of working collaboratively to achieve positive cardiovascular health outcomes.
- Describe the type of evaluations to be conducted (i.e. process and/or outcome). Describe potentially available data sources.

Awardees will be required to collect and report outcome performance measures to DOH-HDSPP quarterly.

8. Detailed Budget – Applicants must provide a detailed budget describing how potential funds will be allocated and expended. The budget should reflect work that will be completed during the planning phase and the development of a work plan to be executed during the implementation phase. If applying for more than one project, separate Schedules A-C must be completed for each.

H. APPLICATION REVIEW INFORMATION

In scoring applications, eligible applications will be evaluated against the following criteria during review:

1. Project Abstract Summary (0 points) – While the Abstract receives no points, it is a required element for evaluation by the RFA reviewers.

2. Needs Assessment (10 points) – The extent to which the applicant has demonstrated an understanding of (1) the burden of cardiovascular disease among its target residents, particularly the impact on disparate populations.

3. Organizational Capacity (20 points) – The extent to which the applicant has demonstrated readiness to implement strategies supporting the project objectives.

4. Project Objectives (30 points) – Extent to which objectives are specific, measurable, achievable, realistic and time-bound (SMART); and the extent to which stated objectives will address the needs disparate populations.

5. Methods/Strategies (15 points) – Extent to which interventions address target populations and are reflected in proposed plan.

6. Plan for Sustainability (5 points) – The extent to which the proposed plan is feasible, reasonable and achievable.

7. Evaluation (10 points) – The extent to which the applicant has described how the project will be measured and reported.

8. Detailed Budget (10 points) – Extent to which budget costs are specific and tied to project objectives and planned interventions as outlined in the “Project Objectives” section.

Review and Selection Process

Applications will be screened for completeness and eligibility as specified in this RFA. Only those proposals deemed to be eligible, complete and in compliance will be sent to the RFA review committee. An RFA review committee will review the proposals. Proposals will be rated on criteria, which appear in the “Review Criteria” section of this document. The HDSPP reserves the right to render final decisions on the awarding of funds under this RFA.

a. Phase I Review: All eligible applications will be initially reviewed for completeness by the DPCP staff. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance to Phase II review. These applicants will be notified, via email, that the application did not meet eligibility requirements.

b. Phase II Review: An objective review panel will evaluate complete and responsive applications according to the criteria listed in the criteria section of the RFA. Each application will be reviewed and scored by two (2) reviewers. Scored applications will be ranked by the entire review panel and award recommendations will be presented to DOH-HDSPP.

c. Phase III Review: HDSPP staff will review all recommendations and will make the final decisions for awards.

In addition, the following factors may affect the funding decision:

- DOH may fund out of rank order to achieve geographic and/or programmatic diversity.

Applications must include:

1. A detailed budget and work plan with timetable. The timetable should reflect the planning and implementation phases. If applying for more than one project, separate budgets must be completed for each.
2. A letter of support from the agency head.
3. Resume/s for all staff listed in the budget for this grant.
4. Any required documents such as agency Travel Policy, Salary Policy, Affirmative Action Policy, Copy of Interest Bearing Account, Proof of Non-profit Status (if applicable), NJ Charities Registration (if applicable), Consultant Agreements (if applicable), Plan for Sustainability, annual Audit Report, Statement of Total Gross Revenue, Application for Tax Clearance.

I. OTHER INFORMATION**Use of Funds**

Upon award, the recipient shall ensure that funds are immediately accessible and used for activities described in approved work plans. Funds must be used as follows:

- No more than 75% of the total award can be allocated for salary and fringe or consultant fees for dedicated staff. As a percentage of salary, the fringe rate cannot exceed 44.3%.
- No less than 25% of the total grant award must be used for programmatic funding.

Funds may be used to support:

- Equipment, supplies, or educational materials for promoting hypertension management (provider education, health communications, etc.).
- In state travel only and related expenses for project staff to carry out specified duties and to attend mandatory meetings and trainings.
- Costs associated with providing training for potential partners.

Funding Restrictions:

- Recipient may not use funds for purchasing vehicles.
- Recipient may not use funds for travel outside of the State of New Jersey.
- Recipient may not use funds for research.
- Recipient may not use funds for construction.
- Recipient may not use funds for interest on loans for the acquisition and/or modernization of an existing building.
- Recipient may only expend funds for reasonable program purposes, including personnel, travel, supplies and services.
- Recipient may not use funds for tuition reimbursement.

Anticipated Announcement and Award Dates:

- Successful applicants will anticipate notice of funding on or about June 8, 2020 with a start date July 1, 2020.
- DOH encourages inquiries concerning this announcement.

For programmatic technical assistance, contact:

Name: Anne Dulcio, MPH, CHES, CPH
Project Officer
Email: anne.dulcio@doh.nj.gov

From: Jones, Tammy
Sent time: 05/18/2020 07:09:30 PM
To: DeAngelo, Jack
Subject: Fwd: CompleteCare

Hi Jack:

Received this request (see below) from the CompleteCare folks who began the migrant farm worker testing-

Will connect with you tomorrow in follow up,

Thanks-

Tammy

Begin forwarded message:

From: Meghan Spinelli
Date: May 18, 2020 at 3:56:57 PM EDT
To: "Jones, Tammy"
Subject: Re: CompleteCare

Do you have any PPE you could spare us for testing ?

On May 18, 2020, at 10:27 AM, Jones, Tammy wrote:

Hi Meghan:

Annmarie Ruiz, our Health Officer here in Gloucester County has been trying to reach you-
If you are able, please contact us @ (856) 218 – 4136.

This in follow-up to your inquiry regarding the Covid-19 re-testing of migrant farm workers-
We would also like to speak with you in follow-up to the testing that has taken place at one
of our Gloucester County Farms.

Thanks,

Tammy

Tamarisk L Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

CAUTION: This email originated from outside of the Gloucester County Email System. Do not click links or open attachments unless you recognize the sender and know the content is safe.

A3E9D35A8086394EBAEA6F0CDD782579@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 06/09/2020 11:13:38 AM
To: Jankauskas, Dittymae
Subject: Fwd: Crew leader info to Sonthu
Attachments: Fwd: Crew leader info to Sonthu

Sender: tjones@co.gloucester.nj.us
Subject: Fwd: Crew leader info to Sonthu
Message-Id:
To: djankauskas@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 06/09/2020 11:13:37 AM
To: Jankauskas, Dittymae
Subject: Fwd: Crew leader info to Sonthu

FYI

If testing is conducted perhaps Sonthu can provide the contact info needed?

Begin forwarded message:

From: "Casella, Michelle"
Date: June 9, 2020 at 10:56:59 AM EDT
To: "Bianco, Thomas A." , "Hart, Stephen"
Cc: "Shirey, Michelle" , "Jones, Tammy" , "McNulty, Dennis P." , "Perna, William"
Subject: **Re: Crew leader info to Sonthu**

Thank you for including me Tom,

Michelle Infante-Casella

County Extension Department Head/Agricultural Agent/Professor

Rutgers Cooperative Extension of Gloucester County

254 County House Rd

Clarksboro, NJ 08020

<http://njaes.rutgers.edu>

<http://sare.rutgers.edu>

From: Bianco, Thomas A.
Sent: Tuesday, June 9, 2020 9:00:51 AM
To: 'Hart, Stephen'
Cc: Shirey, Michelle; Jones, Tammy; Casella, Michelle; McNulty, Dennis P.; Perna, William
Subject: RE: Crew leader info to Sonthu
6/9/20

Stephen

Thank you for this information and I am including Michelle Casella who handles the agricultural program in the county, the GC health department(Tammy Jones) and the GC EOC (Dennis McNulty).

If anyone calls the office regarding the Migrant Season Farm Worker Program or the Farm Worker Crew Leader registration and etc.; have them email Sonthu directly at: Sonthu.kem@dol.nj.gov

Thank you
tom

From: Hart, Stephen
Sent: Tuesday, June 09, 2020 8:55 AM
To: Bianco, Thomas A.
Cc: Shirey, Michelle ; Gallo, Eileen

Subject: FW: Crew leader info to Sonthu

FYI

STEPHEN O. HART, CSW

From: Hart, Stephen

Sent: Tuesday, June 9, 2020 8:54 AM

Subject: FW: Crew leader info to Sonthu

Good morning,

If anyone calls the office regarding the Migrant Season Farm Worker Program or the Farm Worker Crew Leader registration and etc.; have them email Sonthu directly at: Sonthu.kem@dol.nj.gov

STEPHEN O. HART, CSW

From: Demarco, Robert

Sent: Tuesday, June 9, 2020 7:55 AM

To: Hart, Stephen Stephen.Hart@dol.nj.gov>

Cc: Drew, Bernandette Bernandette.Drew@dol.nj.gov>; Albano, Kate Kate.Albano@dol.nj.gov>; Hershey, Stanley Stanley.Hershey@dol.nj.gov>

Subject: Crew leader info to Sonthu

Good morning Steve, going forward you can have anyone interested or inquiring about the Farm Worker Crew Leader registration program, etc., to have them email Sonthu directly at Sonthu.kem@dol.nj.gov

Thanks, Robert

CAUTION: This email originated from outside of the Gloucester County Email System. Do not click links or open attachments unless you recognize the sender and know the content is safe.

From: DiGiambattista, Bridget
Sent time: 05/20/2020 04:21:02 PM
tbianco@claytonnj.com; mayor@deptford-nj.org; darcher@eastgreenwichnj.com; csammons@elktonshipnj.gov; jbruno@franklintownship.com; jwallace@glassboro.org; mayorgshivery@greenwichtwp.com; lmanzo@harrisontwp.us; fminor@logan-twp.org; pscirrotto@mantuatownship.com; rdilucia@monroetownshipnj.org; mtcoop1@gmail.com; mayor@newfieldboro.org; gstevenson@paulsboronj.org; michael.razze@pitman.org; jmarino@southharrison-nj.org; tfromm@swedesboro-nj.us; arotella@twp.washington.nj.us; jdominy@boroughofwenonah.com; ddicarlo@westdeptford.com; rwelsh@westville-nj.com; jfloyd@woodbury.nj.us; Wpacker@bwhnj.com; Vmarino@woolwichtwp.org; smiller@claytonnj.com; cnewcomb@claytonnj.com;
To: twpclerk@deptford-nj.org; emcgill@eastgreenwichnj.com; dpine@elktonshipnj.gov; administrator@franklintownship.com; clerk@franklintownship.com; kcosgrove@glassboro.org; emalandro@glassboro.org; jgodfrey@greenwichtwp.com; lori_deputytreasurer@greenwichtwp.com; mlgravinese@harrisontwp.us; dmalloy@harrisontwp.us; jbileci@mantuatownship.com; achiselko@monroetownshipnj.org; jgunn@nationalparknj.com; tvancamp@newfieldboro.org; sjacobucci@paulsboronj.org; kvanscoy@paulsboronj.org; clerk@pitman.org; ckeen@southharrison-nj.org; lelder@swedesboro-nj.us; cciallella@twp.washington.nj.us; bmoore@twp.washington.nj.us; ksweeney@boroughofwenonah.com; ldehart@westdeptford.com; rgiles@westville-nj.com; fbrown@woodbury.nj.us; dfuss@woodbury.nj.us; Logan Twp- Linda Oswald; WoodburyHts-.Jane Pizzi; Woolwich Twp- Jane DiBella
Cc: Bianco, Thomas A.; Shirey, Michelle; Jones, Tammy; McNulty, Dennis P.; DeAngelo, Jack
Subject: GC OEM COVID-19 Situation Report # 69
Attachments: GC OEM COVID-19 Situation Report # 69

Sender: bdiagiambattista@co.gloucester.nj.us
Subject: GC OEM COVID-19 Situation Report # 69

Message-Id:

To: tbianco@claytonnj.com
To: mayor@deptford-nj.org
To: darcher@eastgreenwichnj.com
To: csammons@elktonshipnj.gov
To: jbruno@franklintownship.com
To: jwallace@glassboro.org
To: mayorgshivery@greenwichtwp.com
To: lmanzo@harrisontwp.us
To: fminor@logan-twp.org
To: pscirrotto@mantuatownship.com
To: rdilucia@monroetownshipnj.org
To: mtcoop1@gmail.com
To: mayor@newfieldboro.org
To: gstevenson@paulsboronj.org
To: michael.razze@pitman.org
To: jmarino@southharrison-nj.org
To: tfromm@swedesboro-nj.us
To: arotella@twp.washington.nj.us
To: jdominy@boroughofwenonah.com
To: ddicarlo@westdeptford.com
To: rwelsh@westville-nj.com
To: jfloyd@woodbury.nj.us
To: Wpacker@bwhnj.com
To: Vmarino@woolwichtwp.org
To: smiller@claytonnj.com
To: cnewcomb@claytonnj.com
To: twpclerk@deptford-nj.org
To: emcgill@eastgreenwichnj.com
To: dpine@elktonshipnj.gov
To: administrator@franklintownship.com
To: clerk@franklintownship.com
To: kcosgrove@glassboro.org
To: emalandro@glassboro.org
To: jgodfrey@greenwichtwp.com
To: lori_deputytreasurer@greenwichtwp.com
To: mlgravinese@harrisontwp.us
To: dmalloy@harrisontwp.us
To: loswald@logan-twp.org
To: jbileci@mantuatownship.com
To: achiselko@monroetownshipnj.org
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To: tvancamp@newfieldboro.org
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To: clerk@pitman.org
To: ckeen@southharrison-nj.org

To: lelder@swedesboro-nj.us
To: cciallella@twp.washington.nj.us
To: bmoore@twp.washington.nj.us
To: ksweeney@boroughofwenonah.com
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Cc: tbianco@co.gloucester.nj.us
Cc: mshirey@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us
Cc: dmcnulty@co.gloucester.nj.us
Cc: jdeangelo@co.gloucester.nj.us

From: DiGiambattista, Bridget
Sent time: 05/20/2020 04:21:02 PM
tbianco@claytonnj.com; mayor@deptford-nj.org; darcher@eastgreenwichnj.com; csammons@elktonshipnj.gov; jbruno@franklintownship.com; jwallace@glassboro.org; mayorgshivery@greenwichtwp.com; lmanzo@harrisonwp.us; fminor@logan-twp.org; pscirroto@mantuatownship.com; rdilucia@monroetownshipnj.org; mtcoop1@gmail.com; mayor@newfieldboro.org; gstevenson@paulsboronj.org; michael.razze@pitman.org; jmarino@southharrison-nj.org; tfromm@swedesboro-nj.us; arotella@twp.washington.nj.us; jdominy@boroughofwenonah.com; ddicarlo@westdeptford.com; rwelsh@westville-nj.com; jfloyd@woodbury.nj.us; Wpacker@bwhnj.com; Vmarino@woolwichtwp.org; smiller@claytonnj.com; cnewcomb@claytonnj.com;
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Cc: Bianco, Thomas A.; Shirey, Michelle; Jones, Tammy; McNulty, Dennis P.; DeAngelo, Jack
Subject: GC OEM COVID-19 Situation Report # 69
Attachments: COVID-19 Sit Rep 69.pdf

Good Afternoon Mayors & Administrators / Clerks:

Please find attached today's Situation Report. Items of significance are bolded.

Though not referenced in today's Report, we wish to share with you the # of scheduled appointments for COVID-19 testing that have been made by the Call-taking Staff here at the Emergency Operations Center: For tomorrow's Drive-Thru COVID-19 testing = (106) registered (both symptomatic & non-symptomatic county residents and First Responders); for Antibody Testing on Friday, 22 May = (350); for Antibody testing on Wednesday 17 May = (50) & for Antibody testing on Friday, 29 May = (350). Antibody testing is now being made available for all First Responders working in the county, as well as all county residents who wish to be tested. These are considerable efforts being extended by county personnel from a variety of Departments, and we are only limited by the # of test kits available to us.

Regards,

Thomas Bianco

Director Gloucester County

Department of Economic Development

856-384-6930 office

cell

tbianco@co.gloucester.nj.us



County of Gloucester
Office of Emergency Management
1200 N. Delsea Dr. Clayton, NJ 08312



SITUATION REPORT #69

Gloucester County Emergency Operations Center

Date | Time 5/20/2020 4:00 PM

Gloucester County Key Points

- The Gloucester County Department of Health and Human Services and Office of Emergency Management have announced (38) more positive COVID-19 cases in Gloucester County.
 - As of Wednesday, May 20, 2020 Gloucester County has conducted 9,703 total tests. Of these cases, 7,726 have come back negative and 6 are pending.
 - Gloucester County now has a total of 1,971 positive cases for COVID-19. A full breakdown of age, gender, and municipality for all of our cases is available at <http://www.gloucestercountynj.gov/alerts/>
 - Two (2) additional COVID-19 patents have died. Gloucester County's confirmed coronavirus related deaths are now at (128).
 - All flags within the Gloucester County CAD System (Pro Phoenix) designating COVID-19 Positive patients will remain in the system for the duration of the Public Health Emergency.
- Farmers and migrant workers in Gloucester County may be take advantage of on-farm testing services for this essential employee sector provided through Complete Care in Glassboro. All employees are being tested if they wish to participate. Testing is not mandatory. Farmers are waiting for the NJ State Department of Health to deliver a document (in process) for farm labor housing, transportation, sanitation and other COVID-19 related precautions for guidance on how to handle on-farm situations.
 - For questions regarding this subject matter, pleased contact Michele Infante-Casella, of the Rutgers University Agriculture Extension Service: Office # 856-224-8040; Mobile Ph. # 609-980-2089; minfante@njaes.rutgers.edu
- Long Term Care facilities and Group Homes continue to be the most impacted facilities within the County. Gloucester County Health and OEM have worked to ensure protective measures are implemented within each facility, and state and county provided PPE continues to be supplied to these entities to limit the spread and protect the staff and residents.
 - Fourteen (14) LTCs within Gloucester County have reported outbreaks.
 - NJ National Guard personnel have responded to the Deptford Center for Rehabilitation to assist with patient care and support/establish protective measures.
 - Gloucester County OEM has created an ESRI dashboard to monitor statistical data within each facility.

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Page 1

- LTC facilities will begin testing every employee and patient and will be required to test every 7 days. Due to this new regulation, an increase in positive cases is anticipated. NJ State Health has provided COVID-19 testing kits to Gloucester County OEM for several of our LTC facilities.
- Gloucester County Health announced the (7th) County COVID-19 testing will be conducted tomorrow, Thursday, May 21, 2020, at the RCSJ Campus.
- Gloucester County Health and OEM conducted COVID-19 anti-body testing.
 - Antibody testing was initiated on Tuesday May 18, 2020, and is available to all Gloucester County Residents. Subsequent Testing days are as follows:
 - Friday May 22, 2020- Rowan College of South Jersey (Full)
 - Wednesday May 27, 2020 Gloucester County Health Department (Full)
 - Friday May 29, 2020 Rowan College of South Jersey
 - Tuesday June 2, 2020 GC Fire Academy
 - Wednesday June 3, 2020 Gloucester County Health Department (Full)
 - Friday June 5, 2020 Rowan College of South Jersey
 - To schedule testing, please call the COVID-19 Hotline 856-218-4142 between 9:00 AM and 4:00 PM.
- Accurate Diagnostic Labs began utilizing the facilities established and maintained by Gloucester County Public Works and OEM at Rowan College at South Jersey (RCSJ), for COVID-19 testing of personnel from NJ Transit, NJ DOC, and NJ DHS, beginning this week, and doing so on Tuesdays and Friday.
- The Gloucester County EOC remains activated 8:00-4:30, Monday – Friday, and operating remotely during the weekends and off hours. The Emergency Operations Center can be reached by e-mail at gceoc@co.gloucester.nj.us , or phone at 856-307-4800.

State and Federal Announcements

- Governor Murphy announced that the State Attorney General and the State Office of Consumer Affairs have authorized all 18,000 licensed Pharmacists to administer COVID-19 tests. Murphy indicated no prescription will be required.
- Today, Governor Murphy announced his intentions for (20) thousand COVID-19 tests to be administered daily in the State. He also announced a partnership between Walmart and Quest laboratories, which will provide drive-up, self-administered swabs at seven (7) Walmarts Stores by Friday, May 22, 2020. There will be no tests administered inside the store, it is anticipated a two-day turn around for results.
- Governor Murphy issued Administrative Order No. 2020-13, establishing car and used car dealerships, motorcycle dealerships, boat dealerships, and bicycle shops to be added to the list of essential retail businesses in accordance with paragraph 6 of Executive Order No. 107. This order allows in-person sales at Auto Dealers, Motorcycle Dealers, and Bicycle shops, by appointment only, effective 6:00 AM today. Dealerships and bike shops who resume in-person sales must abide by the social distancing, safety, and sanitization requirements that are described in detail in the Administrative Order.

The Order states that businesses may permit customers to test drive vehicles, boats, or bicycles sold or leased by the business, provided that the individual is given access to the vehicle alone, or in the case of a boat, with an employee of the business but only when social distancing can be maintained, and the business appropriately cleans and sanitizes the vehicle, boat, or bicycle after such test drive if

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the customer does not purchase the item.

- Governor Murphy and New Jersey Motor Vehicle Commission Chief Administrator Sue Fulton announced additional extensions to driver license, registration, and inspection expiration dates in their continuing efforts to mitigate COVID-19 and safeguard public health.
- Effective immediately, the following documents, if expiring between March 13 and May 31, have been extended to July 31. Documents expiring June 30 are extended two months to August 31, and those expiring July 31 are extended to September 30.
 - All Standard driver licenses (including permits) and standard non-driver IDs
 - Privately owned and commercial vehicle registrations
 - Vehicle inspections
 - Purple Heart/Disabled Veteran placards
 - Temporary tags
- **Thomas Bianco, Director of GC Department of Economic Development, provided information from the New Jersey Department of Labor and Workforce Development (NJDOLE) who has begun notifying workers, who have exhausted their state unemployment benefits, of a 13-week extension they may be eligible for under the federal Pandemic Emergency Unemployment Compensation (PEUC) program.**
<https://www.insidernj.com/njdol-offers-extended-unemployment-benefits/>
- **The U.S. Department of Labor, OSHA has issued Guidance on Preparing Workplaces for COVID-19**
<https://www.osha.gov/Publications/OSHA3990.pdf>
- **New Jersey Executive Orders** https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html
- **New Jersey Administrative Orders** https://nj.gov/governor/news/ao/approved/ao_archive.shtml
- U.S. Small Business Administration (SBA) is offering low-interest federal disaster Loans (updated link) <https://www.sba.gov/page/coronavirus-covid-19-small-business-guidance-loan-resources>
- COVID-19/Novel Coronavirus Information for New Jersey Businesses <http://cv.business.nj.gov>
- CDC guidance on Criteria for Return to Work for Healthcare Personnel with Confirmed Suspected COVID- 19 (Interim Guidance). This applies to First Responder Community as well
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>
- COVID-19 Information for the First Responder Community
<https://www.dhs.gov/science-and-technology/covid-19-info-first-responders>

Local Emergency Management

Activated Municipal EOCs in County are shaded below: (Per E-Team)

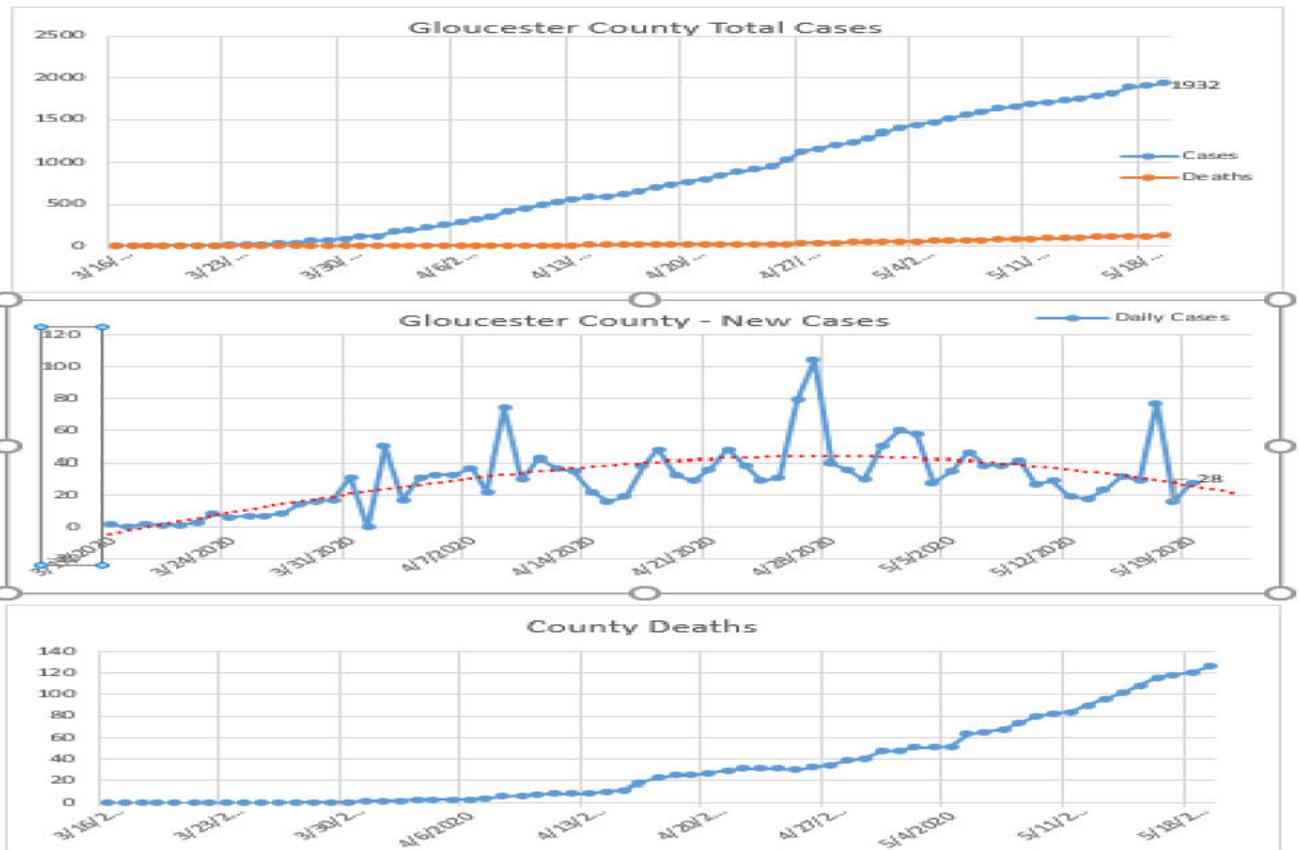
<i>Clayton</i>	<i>Deptford</i>	<i>East Greenwich</i>	<i>Elk</i>	<i>Franklin</i>	<i>Glassboro</i>	<i>Greenwich</i>
<i>Harrison</i>	<i>Logan</i>	<i>Mantua</i>	<i>Monroe</i>	<i>National park</i>	<i>Newfield</i>	<i>Paulsboro</i>
<i>Pitman</i>	<i>South Harrison</i>	<i>Swedesboro</i>	<i>Washington</i>	<i>Wenonah</i>	<i>West Deptford</i>	<i>Westville</i>
<i>Woodbury</i>	<i>Woodbury Heights</i>	<i>Woolwich</i>	<i>Rowan</i>	<i>RCSJ</i>	<i>Inspira Hospital</i>	<i>Jefferson Hospital</i>

Municipalities in County that declared a Local State of Emergency are shaded below: (Per E-Team)

Clayton	Deptford	East Greenwich	Elk	Franklin	Glassboro	Greenwich
Harrison	Logan	Mantua	Monroe	National park	Newfield	Paulsboro
Pitman	South Harrison	Swedesboro	Washington	Wenonah	West Deptford	Westville
Woodbury	Woodbury Heights	Woolwich	Rowan	RCSJ		

COVID-19 Statistics

Region	Total Cases	Total Deaths
Worldwide	4,931,057	324,240
United States	1,559,750	92,333
New Jersey	150,399	10,747
Gloucester County	1,971	128



From: Bianco, Thomas A.
Sent time: 05/21/2020 04:13:10 PM
tbianco@claytonnj.com; mayor@deptford-nj.org; darcher@eastgreenwichnj.com; csammons@elktonshipnj.gov; jbruno@franklintownship.com; jwallace@glassboro.org; mayorgshivery@greenwichtwp.com; lmanzo@harrisontwp.us; fminor@logan-twp.org; pscirrotto@mantuatownship.com; rdilucia@monroetownshipnj.org; mtcoop1@gmail.com; mayor@newfieldboro.org; gstevenson@paulsboronj.org; michael.razze@pitman.org; jmarino@southharrison-nj.org; tfromm@swedesboro-nj.us; arotella@twp.washington.nj.us; jdominy@boroughofwenonah.com; ddicarlo@westdeptford.com; rwelsh@westville-nj.com; jfloyd@woodbury.nj.us; Wpacker@bwhnj.com; Vmarino@woolwichtwp.org; smiller@claytonnj.com; cnewcomb@claytonnj.com;
To: twpclerk@deptford-nj.org; emcgill@eastgreenwichnj.com; dpine@elktonshipnj.gov; administrator@franklintownship.com; clerk@franklintownship.com; kcosgrove@glassboro.org; emalandro@glassboro.org; jgodfrey@greenwichtwp.com; lori_deputytreasurer@greenwichtwp.com; mlgravinese@harrisontwp.us; dmalley@harrisontwp.us; jbileci@mantuatownship.com; achiselko@monroetownshipnj.org; jgunn@nationalparknj.com; tvancamp@newfieldboro.org; sjacobucci@paulsboronj.org; kvanscoy@paulsboronj.org; clerk@pitman.org; ckeen@southharrison-nj.org; lelder@swedesboro-nj.us; cciallella@twp.washington.nj.us; bmoore@twp.washington.nj.us; ksweeney@boroughofwenonah.com; ldehart@westdeptford.com; rgiles@westville-nj.com; fbrown@woodbury.nj.us; dfuss@woodbury.nj.us; Logan Twp- Linda Oswald; WoodburyHts-.Jane Pizzi; Woolwich Twp- Jane DiBella
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Subject: GC OEM COVID-19 Situation Report #70
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Sender: bdiagiambattista@co.gloucester.nj.us
On-Behalf-Of: tbianco@co.gloucester.nj.us
Subject: GC OEM COVID-19 Situation Report #70
Message-Id: <61add5140d5341fbb77c535a59b60218@co.gloucester.nj.us>
To: tbianco@claytonnj.com
To: mayor@deptford-nj.org
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Cc: tbianco@co.gloucester.nj.us
Cc: mshirey@co.gloucester.nj.us
Cc: dmcnulty@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us
Cc: jdeangelo@co.gloucester.nj.us

From: Bianco, Thomas A.
Sent time: 05/21/2020 04:13:10 PM
tbianco@claytonnj.com; mayor@deptford-nj.org; darcher@eastgreenwichnj.com; csammons@elktonshipnj.gov; jbruno@franklintownship.com; jwallace@glassboro.org; mayorgshivery@greenwichtwp.com; lmanzo@harrisonwp.us; fminor@logan-twp.org; pscirroto@mantuatownship.com; rdilucia@monroetownshipnj.org; mtcoop1@gmail.com; mayor@newfieldboro.org; gstevenson@paulsboronj.org; michael.razze@pitman.org; jmarino@southharrison-nj.org; tfromm@swedesboro-nj.us; arotella@twp.washington.nj.us; jdominy@boroughofwenonah.com; ddicarlo@westdeptford.com; rwelsh@westville-nj.com; jfloyd@woodbury.nj.us; Wpacker@bwhnj.com; Vmarino@woolwichtwp.org; smiller@claytonnj.com; cnewcomb@claytonnj.com;
To: twpclerk@deptford-nj.org; emcgill@eastgreenwichnj.com; dpine@elktonshipnj.gov; administrator@franklintownship.com; clerk@franklintownship.com; kcosgrove@glassboro.org; emalandro@glassboro.org; jgodfrey@greenwichtwp.com; lori_deputytreasurer@greenwichtwp.com; mlgravinese@harrisonwp.us; dmalloy@harrisonwp.us; jbileci@mantuatownship.com; achiselko@monroetownshipnj.org; jgunn@nationalparknj.com; tvancamp@newfieldboro.org; sjacobucci@paulsboronj.org; kvanscoy@paulsboronj.org; clerk@pitman.org; keen@southharrison-nj.org; lelder@swedesboro-nj.us; cciallella@twp.washington.nj.us; bmoore@twp.washington.nj.us; ksweeney@boroughofwenonah.com; ldehart@westdeptford.com; rgiles@westville-nj.com; fbrown@woodbury.nj.us; dfuss@woodbury.nj.us; Logan Twp- Linda Oswald; WoodburyHts-.Jane Pizzi; Woolwich Twp- Jane DiBella
Cc: Bianco, Thomas A.; Shirey, Michelle; McNulty, Dennis P.; Jones, Tammy; DeAngelo, Jack
Subject: GC OEM COVID-19 Situation Report #70
Attachments: COVID-19 Sit Rep 70.pdf

Good Afternoon Mayors & Administrators / Clerks:

Attached, you'll find today's Situation Report for the Coronavirus Pandemic. As customary, items of continuing significance, as well as the statistical updates have been **bolded** for your reference.

Please visit the County's website for more detailed information on the Pandemic and the collective efforts of the county to chronicle the impacts and activities surrounding this Public Health Emergency.

Respectfully,

Thomas Bianco

Director Gloucester County

Department of Economic Development

856-384-6930 office

cell

tbianco@co.gloucester.nj.us



County of Gloucester
 Office of Emergency Management
 1200 N. Delsea Dr. Clayton, NJ 08312



SITUATION REPORT #70

Gloucester County Emergency Operations Center

Date | Time 5/21/2020 4:00 PM

Gloucester County Key Points

- The Gloucester County Department of Health and Human Services and Office of Emergency Management have announced (34) more positive COVID-19 cases in Gloucester County.
 - As of Thursday, May 21, 2020 Gloucester County has conducted 9,935 total tests. Of these cases, 7,923 have come back negative and 9 are pending, two cases have moved out of county.
 - Gloucester County now has a total of 2,003 positive cases for COVID-19. Today, Gloucester County has an additional 34 cases to report. A full breakdown of age, gender, and municipality for all of our cases is available at <http://www.gloucestercountynj.gov/alerts/>
 - One (1) additional COVID-19 patient has died. Gloucester County's confirmed coronavirus related deaths are now at (129).
 - All flags within the Gloucester County CAD System (Pro Phoenix) designating COVID-19 Positive patients will remain in the system for the duration of the Public Health Emergency.
- Gloucester County had an additional 1,432 unemployment claims filed, this is a 33% decrease from the prior week, and our lowest week since the pandemic started. The total number of unemployment claims filed in Gloucester County since March 16th is 30,306. In the state of NJ, 24% or 1 in 4 people are unemployed
- Farmers and migrant workers in Gloucester County may be take advantage of on-farm testing services for this essential employee sector provided through Complete Care in Glassboro. All employees are being tested if they wish to participate. Testing is not mandatory. Farmers are waiting for the NJ State Department of Health to deliver a document (in process) for farm labor housing, transportation, sanitation and other COVID-19 related precautions for guidance on how to handle on-farm situations.
 - For questions regarding this subject matter, please contact Michele Infante-Casella, of the Rutgers University Agriculture Extension Service: Office # 856-224-8040; Mobile Ph. # 609-980-2089; minfante@njaes.rutgers.edu
- Long Term Care facilities and Group Homes continue to be the most impacted facilities within the County. Gloucester County Health and OEM have worked to ensure protective measures are implemented within each facility, and state and county provided PPE continues to be supplied to these entities to limit the spread and protect the staff and residents.

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- Fourteen (14) LTCs within Gloucester County have reported outbreaks.
 - NJ National Guard personnel have responded to the Deptford Center for Rehabilitation to assist with patient care and support/establish protective measures.
- Gloucester County OEM has created an ESRI dashboard to monitor statistical data within each facility.
- LTC facilities will begin testing every employee and patient and will be required to test every 7 days. Due to this new regulation, an increase in positive cases is anticipated. NJ State Health has provided COVID-19 testing kits to Gloucester County OEM for several of our LTC facilities.
- **Gloucester County Health conducted the (7th) County COVID-19 testing today at the RCSJ Campus. 105 residents were scheduled, 94 were tested.**
- **Gloucester County Health and OEM conducted COVID-19 anti-body testing.**
 - **Antibody testing was initiated on Tuesday May 18, 2020, and is available to all Gloucester County Residents. Subsequent Testing days are as follows:**
 - **Friday May 22, 2020- Rowan College of South Jersey (Full)**
 - **Wednesday May 27, 2020 Gloucester County Health Department (Full)**
 - **Friday May 29, 2020 Rowan College of South Jersey (Full)**
 - **Tuesday June 2, 2020 GC Fire Academy**
 - **Wednesday June 3, 2020 Gloucester County Health Department**
 - **Friday June 5, 2020 Rowan College of South Jersey**
 - **To schedule testing, please call the COVID-19 Hotline 856-218-4142 between 9:00 AM and 4:00 PM, Monday thru Friday. You must had an appointment to receive a test.**
- Accurate Diagnostic Labs began utilizing the facilities established and maintained by Gloucester County Public Works and OEM at Rowan College at South Jersey (RCSJ), for COVID-19 testing of personnel from NJ Transit, NJ DOC, and NJ DHS, beginning this week, and doing so on Tuesdays and Friday.
- The Gloucester County EOC remains activated 8:00-4:30, Monday – Friday, and operating remotely during the weekends and off hours. The Emergency Operations Center can be reached by e-mail at gceoc@co.gloucester.nj.us , or phone at 856-307-4800.

State and Federal Announcements

- Governor Murphy announced that the State Attorney General and the State Office of Consumer Affairs have authorized all 18,000 licensed Pharmacists to administer COVID-19 tests. Murphy indicated no prescription will be required.
- Governor Murphy announced his intentions for (20) thousand COVID-19 tests to be administered daily in the State. He also announced a partnership between Walmart and Quest Diagnostics, which will provide drive-up, self-administered swabs at seven (7) Walmart’s Stores by Friday, May 22, 2020. There will be no tests administered inside the store, it is anticipated a two-day turn around for results.
- Executive Order No. 135, which suspended in-person requirements for receipt of a marriage license and marriage ceremonies, and for the receipt of working papers for minors. Under the executive order, individuals may use videoconferencing technology for the licensing process and the marriage ceremony. Additionally, minors seeking to certify their working papers with a school designated

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official will be permitted to do so through videoconference. The executive order permits in-person certification of working papers to continue, subject to social distancing, where offices are open.

- **New Jersey Department of Labor and Workforce Development (NJDOL) 13-week unemployment extension under the Federal Pandemic Emergency Unemployment Compensation (PEUC) program.**
<https://www.insidernj.com/njdol-offers-extended-unemployment-benefits/>
- The U.S. Department of Labor, OSHA has issued Guidance on Preparing Workplaces for COVID-19
<https://www.osha.gov/Publications/OSHA3990.pdf>
- **New Jersey Executive Orders** https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html
- **New Jersey Administrative Orders** https://nj.gov/governor/news/ao/approved/ao_archive.shtml
- U.S. Small Business Administration (SBA) is offering low-interest federal disaster Loans (updated link) <https://www.sba.gov/page/coronavirus-covid-19-small-business-guidance-loan-resources>
- COVID-19/Novel Coronavirus Information for New Jersey Businesses <http://cv.business.nj.gov>
- CDC guidance on Criteria for Return to Work for Healthcare Personnel with Confirmed Suspected COVID- 19 (Interim Guidance). This applies to First Responder Community as well
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>
- COVID-19 Information for the First Responder Community
<https://www.dhs.gov/science-and-technology/covid-19-info-first-responders>

Local Emergency Management

Activated Municipal EOCs in County are shaded below: (Per E-Team)

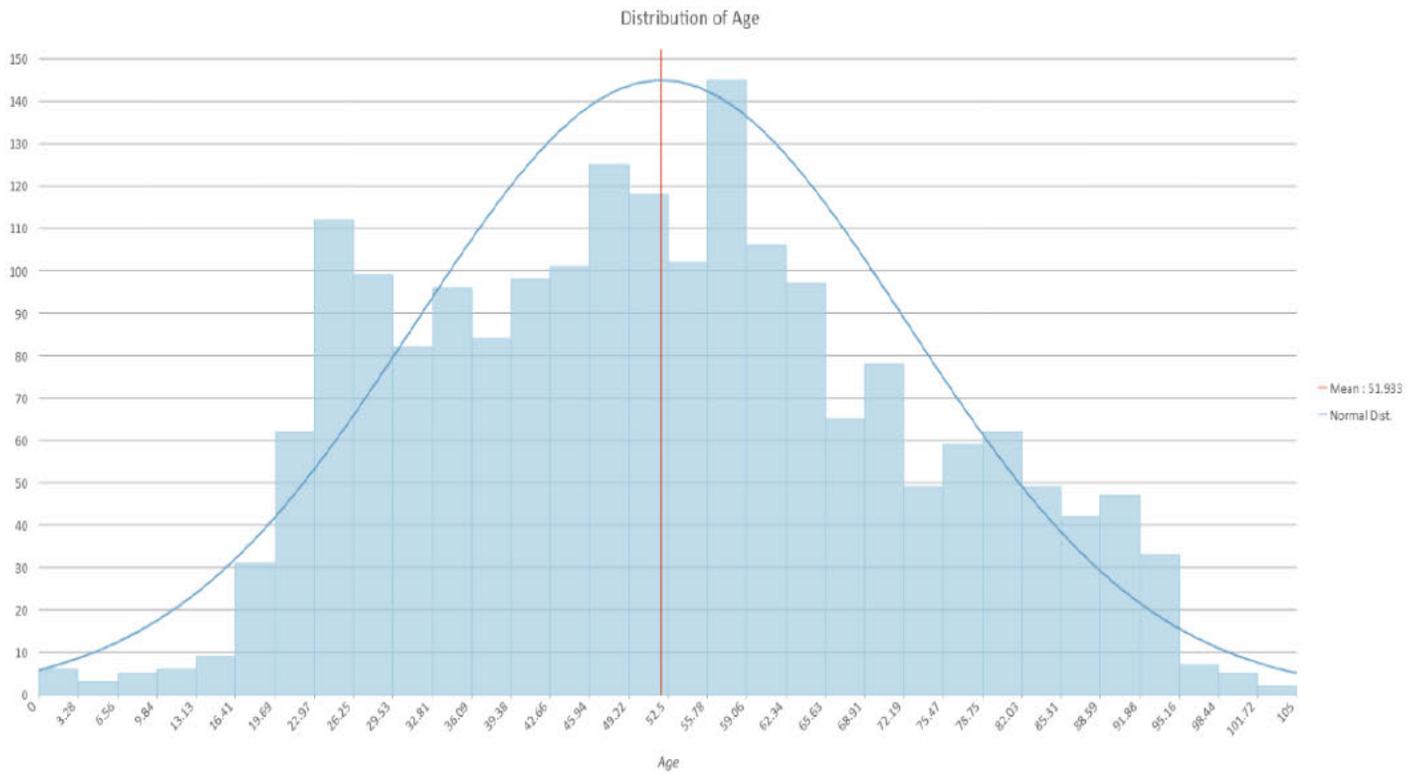
<i>Clayton</i>	<i>Deptford</i>	<i>East Greenwich</i>	<i>Elk</i>	<i>Franklin</i>	<i>Glassboro</i>	<i>Greenwich</i>
<i>Harrison</i>	<i>Logan</i>	<i>Mantua</i>	<i>Monroe</i>	<i>National park</i>	<i>Newfield</i>	<i>Paulsboro</i>
<i>Pitman</i>	<i>South Harrison</i>	<i>Swedesboro</i>	<i>Washington</i>	<i>Wenonah</i>	<i>West Deptford</i>	<i>Westville</i>
<i>Woodbury</i>	<i>Woodbury Heights</i>	<i>Woolwich</i>	<i>Rowan</i>	<i>RCSJ</i>	<i>Inspira Hospital</i>	<i>Jefferson Hospital</i>

Municipalities in County that declared a Local State of Emergency are shaded below: (Per E-Team)

<i>Clayton</i>	<i>Deptford</i>	<i>East Greenwich</i>	<i>Elk</i>	<i>Franklin</i>	<i>Glassboro</i>	<i>Greenwich</i>
<i>Harrison</i>	<i>Logan</i>	<i>Mantua</i>	<i>Monroe</i>	<i>National park</i>	<i>Newfield</i>	<i>Paulsboro</i>
<i>Pitman</i>	<i>South Harrison</i>	<i>Swedesboro</i>	<i>Washington</i>	<i>Wenonah</i>	<i>West Deptford</i>	<i>Westville</i>
<i>Woodbury</i>	<i>Woodbury Heights</i>	<i>Woolwich</i>	<i>Rowan</i>	<i>RCSJ</i>		

COVID-19 Statistics

Region	Total Cases	Total Deaths
Worldwide	5,014,943	328,462
United States	1,591,731	94,276
New Jersey	151,472	10,843
Gloucester County	2,003	129



From: Jean Calderon <jcalderon@chcinj.org>
Sent time: 05/05/2020 11:29:11 AM
To: Jones, Tammy; Meghan Spinelli <mspinelli@chcinj.org>; James Edwards <jedwards@chcinj.org>; Richie Elwell <relwell@chcinj.org>; Azizeh Salloum <asalloum@chcinj.org>
Subject: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing
Attachments: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

Sender: jcalderon@chcinj.org
Subject: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing
Message-Id: <6d2d0e709db8458d868c16770f528882@chcinj.org>
Recipient: tjones@co.gloucester.nj.us

From: Jean Calderon <jcalderon@chcinj.org>

Sent time: 05/05/2020 11:28:56 AM

To: Jones, Tammy; Meghan Spinelli <mspinelli@chcinj.org>; James Edwards <jedwards@chcinj.org>; Richie Elwell <relwell@chcinj.org>; Azizeh Salloum <asalloum@chcinj.org>

Subject: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

Meghan Spinelli – 856-562-5415

Jean Calderon – 856-391-1130

Tamarisk L. Jones, Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 -4130

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ED1C211A08D91A4CB52792CF8A1EADC8@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/05/2020 03:15:55 PM
To: Cerny, Lisa A.
Subject: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing
Attachments: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

Sender: tjones@co.gloucester.nj.us
Subject: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing
Message-Id:
To: lcerny@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/05/2020 03:15:55 PM
To: Cerny, Lisa A.
Subject: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

FYI

-----Original Appointment-----

From: Jones, Tammy

Sent: Tuesday, May 5, 2020 11:40 AM

To: Jean Calderon

Subject: Accepted: Gloucester Count Health Dept/CCHN - Migrant Workers Covid Testing

When: Wednesday, May 6, 2020 9:00 AM-10:00 AM (UTC-05:00) Eastern Time (US & Canada).

Where: 856-502-3904

7F9313AF16CCF641BAA279C291451297@co.gloucester.nj.us.msg

From: Jean Calderon <jcalderon@chcinj.org>
Sent time: 05/05/2020 04:53:12 PM
To: Richie Elwell <relwell@chcinj.org>; Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy; James Edwards <jedwards@chcinj.org>; Azizeh Salloum <asaloum@chcinj.org>
Cc: Admin Conference Room <AdminMeetingRoom@chcinj.org>; Jankauskas, Dittymae; Ruiz, Annmarie
Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing
Attachments: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing

Sender: jcalderon@chcinj.org
Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing
Message-Id:
Recipient: djankauskas@co.gloucester.nj.us

From: Jean Calderon <jcalderon@chcinj.org>

Sent time: 05/05/2020 04:52:55 PM

To: Richie Elwell <relwell@chcinj.org>; Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy; James Edwards <jedwards@chcinj.org>; Azizeh Salloum <asalloum@chcinj.org>

Cc: Admin Conference Room <AdminMeetingRoom@chcinj.org>; Jankauskas, Dittymae; Ruiz, Annmarie

Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing

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111A1F7B409C284C9D9C847ACE7FB008@co.gloucester.nj.us.msg

From: Jean Calderon <jcalderon@chcinj.org>
Sent time: 05/05/2020 04:53:23 PM
To: Richie Elwell <relwell@chcinj.org>; Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy; James Edwards <jedwards@chcinj.org>; Azizeh Salloum <asaloum@chcinj.org>
Cc: Admin Conference Room <AdminMeetingRoom@chcinj.org>; Jankauskas, Dittymae; Ruiz, Annmarie
Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing
Attachments: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing

Sender: jcalderon@chcinj.org
Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing
Message-Id:
Recipient: aruiz@co.gloucester.nj.us

From: Jean Calderon <jcalderon@chcinj.org>

Sent time: 05/05/2020 04:52:55 PM

To: Richie Elwell <relwell@chcinj.org>; Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy; James Edwards <jedwards@chcinj.org>; Azizeh Salloum <asalloum@chcinj.org>

Cc: Admin Conference Room <AdminMeetingRoom@chcinj.org>; Jankauskas, Dittymae; Ruiz, Annmarie

Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing

Meghan Spinelli – 856-562-5415

Jean Calderon – 856-391-1130

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204 East Holly Ave.

Sewell, NJ 08080

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2796AEBEFE56B74D8AEA3133EB5DB931@co.gloucester.nj.us.msg

From: Jean Calderon <jcalderon@chcinj.org>
Sent time: 05/05/2020 04:53:23 PM
To: Richie Elwell <relwell@chcinj.org>; Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy; James Edwards <jedwards@chcinj.org>; Azizeh Salloum <asaloum@chcinj.org>
Cc: Admin Conference Room <AdminMeetingRoom@chcinj.org>; Jankauskas, Dittymae; Ruiz, Annmarie
Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing
Attachments: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing

Sender: jcalderon@chcinj.org
Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Jean Calderon <jcalderon@chcinj.org>

Sent time: 05/05/2020 04:52:55 PM

To: Richie Elwell <relwell@chcinj.org>; Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy; James Edwards <jedwards@chcinj.org>; Azizeh Salloum <asalloum@chcinj.org>

Cc: Admin Conference Room <AdminMeetingRoom@chcinj.org>; Jankauskas, Dittymae; Ruiz, Annmarie

Subject: Gloucester County Health Dept/CCHN - Migrant Workers Covid Testing

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61FA808CC1F21B44AF67EBB17D5C7DB9@co.gloucester.nj.us.msg

From: Spence, Daniele
Sent time: 05/01/2020 10:49:49 AM
To: Jones, Tammy
Cc: Swanson, Amy
Subject: Health Question...

Hello Tammy- can you help Meghan? Or respond accordingly? Please copy me- thanks!

Daniele Spence
Confidential Aide to Freeholder Heather Simmons
Office- [REDACTED]
Mobile- [REDACTED]
[REDACTED]

-----Original Message-----

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]
Sent: Friday, May 1, 2020 8:00 AM
To: Spence, Daniele
Subject:

Hi Daniele ,

We at CompleteCare Is assisting the Migrant seasonal farmworkers with the COVID-19 I heard that there's a camp in Gloucester with a bunch of positive cases and I'm trying to figure out which Camp it is so that we can assist them with some education is there anyway you can find out if this information is true?

Thank you ,
Meghan

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51279233490A424EA5D76174D736AEC3@co.gloucester.nj.us.msg

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/12/2020 07:05:28 AM
To: Jones, Tammy; Doyle, Kathleen (Katie)
Subject: HELP
Attachments: HELP

Sender: mspinelli@chcinj.org
Subject: HELP
Message-Id:
Recipient: kdoyle@co.gloucester.nj.us

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/12/2020 07:04:18 AM
To: Jones, Tammy; Doyle, Kathleen (Katie)
Subject: HELP

Hello,

We have a H2A worker in a migrant camp in Gloucester who's has a fever and needs a place to stay until he can be tested and sent to AC. The farmer doesn't have somewhere for him to stay alone .

Could you assist me with this -
Meghan

From: Doyle, Kathleen (Katie) [mailto:kdoyle@co.gloucester.nj.us]

Sent: Wednesday, May 06, 2020 10:58 AM

To: Meghan Spinelli

Cc: Jones, Tammy

Subject: Contact information

Good Morning Meghan,

Attached please find the Gloucester County Division of Social Services, program contact phone numbers, being used during the COVID-19 public emergency.

Any questions feel free to reach out to me.

Thank you,

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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6A4AB8428A7C8C49BB07F6A1DE42B986@co.gloucester.nj.us.msg

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/12/2020 07:05:26 AM
To: Jones, Tammy; Doyle, Kathleen (Katie)
Subject: HELP
Attachments: HELP

Sender: mspinelli@chcinj.org
Subject: HELP
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/12/2020 07:04:18 AM
To: Jones, Tammy; Doyle, Kathleen (Katie)
Subject: HELP

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Could you assist me with this -
Meghan

From: Doyle, Kathleen (Katie) [mailto:kdoyle@co.gloucester.nj.us]

Sent: Wednesday, May 06, 2020 10:58 AM

To: Meghan Spinelli

Cc: Jones, Tammy

Subject: Contact information

Good Morning Meghan,

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Thank you,

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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BF73A6CBC2611C4DB070A8DD8D8CF913@co.gloucester.nj.us.msg

From: IAN SHEARN <ishearn@prodigy.net>
Sent time: 05/26/2020 10:12:30 AM
To: Jones, Tammy
Subject: Media query
Attachments: Media query

Sender: ishearn@prodigy.net
Subject: Media query
Message-Id: <1534560086.4916818.1590502344953@mail.yahoo.com>
Recipient: tjones@co.gloucester.nj.us

From: IAN SHEARN <ishearn@prodigy.net>
Sent time: 05/26/2020 10:12:24 AM
To: Jones, Tammy
Subject: Media query

Hi.

I am a reporter for NJ Spotlight. I have been writing stories about migrant workers, including the infections you had at one of your farms. I would like to talk to you about how your health department is doing under this strain, and what help the state DOH is providing. Are you up for that?

Ian T. Shearn

121 Meadowbrook Drive
Hillsborough, NJ 08844
c: 973.879.1150
f: 908.829.4805
Skype: iantshearn

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66300D8CAA19C141B8C00166A7F5B97C@co.gloucester.nj.us.msg

From: Ruiz, Annmarie
Sent time: 05/18/2020 09:37:49 AM
To: Semple, Shereen <Shereen.Semple@doh.nj.gov>
Cc: Jones, Tammy; Jankauskas, Dittymae
Subject: Media request pertaining to Migrant farm testing
Attachments: Media request pertaining to Migrant farm testing

Sender: aruiz@co.gloucester.nj.us
Subject: Media request pertaining to Migrant farm testing
Message-Id: <555d564a9dc14573981a42bbd83819fb@co.gloucester.nj.us>
To: Shereen.Semple@doh.nj.gov
Cc: tjones@co.gloucester.nj.us
Cc: djankauskas@co.gloucester.nj.us

From: Ruiz, Annmarie
Sent time: 05/18/2020 09:37:49 AM
To: Semple, Shereen <Shereen.Semple@doh.nj.gov>
Cc: Jones, Tammy; Jankauskas, Dittymae
Subject: Media request pertaining to Migrant farm testing

Shereen,

What is the information being released to the public/media pertaining to migrant farm testing? We received a call didnt know how to respond so sent to NJDOH communications.

Thank you
Annmarie

Sent from my Verizon, Samsung Galaxy smartphone

From: Jones, Tammy
Sent time: 05/27/2020 04:03:53 PM
To: O'Brien, Shannon
Cc: Bruner, Chad; Jankauskas, Dittymae
Subject: Media Request

Hi Shannon:

Input /Response suggestions from Health:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Thanks,

From: Bruner, Chad
Sent: Wednesday, May 27, 2020 2:44 PM
To: O'Brien, Shannon sobrien@co.gloucester.nj.us>; Coryell, Michelle mcoryell@co.gloucester.nj.us>; Jones, Tammy tjones@co.gloucester.nj.us>
Subject: RE: Media Request

[REDACTED]

From: O'Brien, Shannon sobrien@co.gloucester.nj.us>
Sent: Wednesday, May 27, 2020 2:42 PM
To: Coryell, Michelle mcoryell@co.gloucester.nj.us>; Bruner, Chad cbruner@co.gloucester.nj.us>; Jones, Tammy tjones@co.gloucester.nj.us>
Subject: Media Request

[REDACTED]

ccomegno@courierpostonline.com

609-533-0306

CF5D4F9D9863FC4995198C00C615497C@co.gloucester.nj.us.msg

From: O'Brien, Shannon
Sent time: 05/21/2020 03:37:34 PM
To: Bruner, Chad; Jones, Tammy; Michelle Coryell <mcoryell@njlegdistrict3.com>
Subject: MEDIA REQUEST: New York Times

Hello—

Tracy Tully from the New York Times called the health department to ask questions about SJ Migrant workers testing positive for COVID-19. I have not reached out to her personally yet because I know previously we weren't commenting and directing them to the state DOH media line.

Let me know if you'd like me to direct her there or return her call to see if she has specific questions.

Thank you!

Tracy Tully
908-487-8145

E1798382ED46C14385B4BCB83019E7E8@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/08/2020 05:00:09 PM
To: Ruiz, Annmarie
Subject: Migrant Farm Worker Testing
Attachments: Migrant Farm Worker Testing

Sender: tjones@co.gloucester.nj.us
Subject: Migrant Farm Worker Testing
Message-Id: <2ec23f0b-1bfd-4280-b169-e92d18ceb989@co.gloucester.nj.us>
To: aruiz@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/08/2020 05:00:08 PM
To: Ruiz, Annmarie
Subject: Migrant Farm Worker Testing

Hi Annmarie:

Gloucester County has been in discussion with Mayur Chheda to utilize his hotel

Located at:

Quality Inn & Suites

328 E. White Horse Pike

Galloway, NJ 08205

Hotel Fax: (609) 652 – 8885

Owner: Mayur Chheda

(856) 404-1222

mayur@infinityhotelgroup.com

Mr. Chheda has set aside a building for Gloucester County to house positive COVID-19 homeless residents.

He understands the need to keep everyone separate; those that are homeless and awaiting testing results, those that are homeless and Covid-19 positive, and those that are just on site being housed.

He does need to be assured payment, however. So the funding source will need to be clearly delineated up front.

Very importantly, we don't know how long this set aside for us will remain in place, especially once stay at home orders become lifted and people begin vacationing/traveling back to the shore area. But for now, this is what we have in place-

Tammy

From: Ruiz, Annmarie
Sent: Friday, May 8, 2020 12:46 PM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: FW: Migrant Farm Worker Testing

The state is requesting information regarding any partnerships we have with hotels or other facilities for isolation or quarantine in our area

From: Weller, Jamie Jamie.Weller@doh.nj.gov>
Sent: Friday, May 8, 2020 12:06 PM
To: Weller, Jamie Jamie.Weller@doh.nj.gov>
Cc: Semple, Shereen Shereen.Semple@doh.nj.gov>
Subject: Migrant Farm Worker Testing

Good morning,

As you know, the testing of migrant farm workers by FQHCs will be rolled out very soon. I was asked to reach out

822D53E9A4B9FF4D9A93F7A7D5563E1A@co.gloucester.nj.us.msg

to see if your county has any established partnerships with hotels or other facilities that could be used in case an isolation or quarantine site is needed. There are plans being actively worked on by the task force to identify a site that can be accessed regionally (through an ordering provider at the FQHC/in conjunction with health officer recommendation), however we are trying to ascertain what supports could be in available if needed very soon.

Again, we will get you the guidance document as soon as we have it to disseminate.

Thank you!

Jamie Weller, MSN, RN, CSN-NJ
Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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From: Jones, Tammy
Sent time: 05/06/2020 10:22:07 PM
To: Peter Kaprielyan <kaprielyanp@ihn.org>
Subject: Migrant Seasonal Farm Worker-FQHC testing
Attachments: Migrant Seasonal Farm Worker-FQHC testing

Sender: tjones@co.gloucester.nj.us
Subject: Migrant Seasonal Farm Worker-FQHC testing
Message-Id: <40c7526a-bc76-42ce-9717-2c12401b14bf@co.gloucester.nj.us>
To: kaprielyanp@ihn.org

From: Jones, Tammy
Sent time: 05/06/2020 10:22:06 PM
To: Peter Kaprielyan <kaprielyanp@ihn.org>
Subject: Migrant Seasonal Farm Worker-FQHC testing

Hi Peter:

Our Health Officer, Annmarie Ruiz shared the below update with our team this evening.

Will be certain to keep you in the loop with anything forthcoming-

Thanks,

Tammy

Begin forwarded message:

From: "Ruiz, Annmarie"
Date: May 6, 2020 at 9:44:13 PM EDT
To: "Jones, Tammy"
Subject: **FW: Migrant Seasonal Farm Worker-FQHC testing**

----- Original message -----

From: "Weller, Jamie"
Date: 5/6/20 7:33 PM (GMT-05:00)
To: "rdickinson (vinelandcity.org)" , "Ruiz, Annmarie" , "diamond_patricia (aclink.org)" , "msheppard (ccdoh.org)"
Cc: "Robert.dickinson.salemcountynj.gov" , "Semple, Shereen" , Amanda Medina-Forrester
Subject: Migrant Seasonal Farm Worker-FQHC testing

Good evening,

As you know, an interagency task force was created at the State level to address the unique needs of the migrant seasonal farm worker population. This task force is comprised of individuals in the NJ Departments of Health, Agriculture, Labor, Education, and Human Services. The group has created a guidance document that will be shared very soon. As soon as we have the guidance in OLPH, we will ensure all local health officers have access to it as well.

One strategy to address this vulnerable population relates to testing of migrant farmers. FQHCs will be performing pilot testing starting in the following counties: Salem, Gloucester, Atlantic, and Cumberland. OLPH does not have information about the progression of counties after the initial pilot. Testing is expected to begin in the coming days.

Understanding your role as the leads for communicable disease response in your jurisdictions, OLPH wished to share this information with you as soon as we were able. Once the guidance document is available for your review, we will offer an opportunity for you to ask questions and receive clarification. In addition, there will be a stakeholder call next week regarding this matter. Again, when the specific details are available, we will be sure to share them with you.

If you should have any immediate questions about this pilot, please feel free to reach out to me.

Thank you,

Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

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690BBA790BEA73429A9C4DCA98A5323E@co.gloucester.nj.us.msg

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/21/2020 10:25:00 AM
To: Ruiz, Annmarie; Jankauskas, Dittymae; Jones, Tammy
Attachments: Attachment-1

Sender: mspinelli@chcinj.org
Subject:
Message-Id:
Recipient: aruiz@co.gloucester.nj.us

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/21/2020 10:24:51 AM
To: Ruiz, Annmarie; Jankauskas, Dittymae; Jones, Tammy

Hello,

Here is where CCHN will be testing this upcoming week.

Wednesday -8am start

██████████ Farm

15p

-----Original Message-----

From: Meghan Spinelli
Sent: Sunday, May 17, 2020 11:28 AM
To: Ruiz, Annmarie; Dittymae Jankauskas
Subject: Re: REQUEST: List of farms COVID testing

Hello,

I pass this along to my medical director I will have the information back to you by tomorrow afternoon .

We are testing everyone at the farm location .

The address that you get should match the address the patient gave us ?

Feel free to call me anytime with questions .

Thank you,
Meg

> On May 17, 2020, at 9:44 AM, Ruiz, Annmarie wrote:

>

> Thank you for the information. All farms tested should have a line list to assist in documenting onset, living location on farm, signs and symptoms, etc. I know the state is working with you on this request. Our agency would also need assistance with translation.

>

> Sent from my Verizon, Samsung Galaxy smartphone

>

>

> ----- Original message -----

> From: Meghan Spinelli

> Date: 5/16/20 10:02 PM (GMT-05:00)

> To: "Ruiz, Annmarie"

> Subject: Re: REQUEST: List of farms COVID testing

>

> Yes, we tested at ██████████ in ██████████. We completed 122 tests at that location .

>

> We have handout in Spanish in covid for farms . I've been working with the owners in many different levels , arranging housing , helping setting up temperature checks before work, educational material for staff and all the what if's.

>

> This week we do not have an Gloucester County Farms on the schedule . If you know anyone who is interested in setting up testing please give them my email or phone .

>

>

> Thank you,

> Meghan

> 856-562-5415

>

>> On May 16, 2020, at 9:00 PM, Ruiz, Annmarie wrote:

0A088C35EE388244977A8BFA1BB1721E@co.gloucester.nj.us.msg

>>
>> ?Good evening Meghan,
>>
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>>
>> Gloucester County would also appreciate a list of farms that were tested this past week and weeks moving forward.
>>
>> It is also our understanding that CompleteCare will be providing education to the individuals tested. Is this correct?
>>
>> Please email me the list from this past week at your earliest convenience.
>>
>> Look forward to hearing from you.
>>
>> Annmarie Ruiz
>>
>>
>> Sent from my Verizon, Samsung Galaxy smartphone
>>
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0A088C35EE388244977A8BFA1BB1721E@co.gloucester.nj.us.msg

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/21/2020 10:26:02 AM
To: Ruiz, Annmarie; Jankauskas, Dittymae; Jones, Tammy
Attachments: Attachment-1

Sender: mspinelli@chcinj.org
Subject:
Message-Id:
Recipient: tjones@co.gloucester.nj.us

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5B28AAD1FE94B647A070A9CF01741FB9@co.gloucester.nj.us.msg

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Attachments: Attachment-1

Sender: mspinelli@chcinj.org
Subject:
Message-Id:
Recipient: djankauskas@co.gloucester.nj.us

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> 856-562-5415

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516E5EAE9436334B89AC845E6B199B4F@co.gloucester.nj.us.msg

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>> Annmarie Ruiz
>>
>>
>> Sent from my Verizon, Samsung Galaxy smartphone
>>
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From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/20/2020 05:12:12 PM
To: Jones, Tammy; Bianco, Thomas A.; McNulty, Dennis P.
Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Attachments: Official Guidance on Migrant Seasonal Farmworker Housing

Sender: minfante@njaes.rutgers.edu
Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/20/2020 05:11:08 PM
To: Jones, Tammy; Bianco, Thomas A.; McNulty, Dennis P.
Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Attachments: MSFWs-Guidance-FINAL-05.20.20-laid-out.pdf

FYI, released today and distributed to farmers and will be presented tonight on a webinar "Ask the Ag Agent" I host every Wednesday at 7:00PM

Guidance Document Distribution:

<https://plant-pest-advisory.rutgers.edu/migrant-and-seasonal-farmworker-and-e/>

Webinar:

<https://plant-pest-advisory.rutgers.edu/tonights-discussion-migrant-labor-guidance-document-released-and-more-topics-on-ask-the-ag-agent-topics/>

Thank you,

Michelle

Michelle Infante-Casella

Agricultural Agent/Professor

Rutgers Cooperative Extension of Gloucester County

254 County House Rd

Clarksboro, NJ 08020

<http://njaes.rutgers.edu>

<http://sare.rutgers.edu>

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*The New Jersey Department of Health is partnering with its sister agencies
New Jersey Department of Agriculture and
New Jersey Department of Labor and Workforce Development
to assist agricultural businesses and farm workers during the COVID-19 pandemic.*

INTERIM

CORONAVIRUS DISEASE 2019 (COVID-19)

GUIDANCE FOR MIGRANT AND SEASONAL FARMWORKERS, THEIR EMPLOYERS, AND HOUSING PROVIDERS

MAY 20, 2020



I. CONTEXT

- New Jersey’s Health Commissioner is responsible for executing public health emergency evaluation, prevention, and response for the State.
- Every person conducting business in New Jersey must cooperate fully with the Commissioner of Health in all matters concerning the state of emergency.
- Complications of COVID-19 infection may include the need to be hospitalized, receive mechanical ventilation, and death.
- Blacks and Hispanics, individuals who are over 65 years of age, and people with pre-existing medical conditions, such as diabetes, chronic lung or heart disease, or who have a compromised immune system (e.g., cancer or taking immunosuppressant medications), are at greater risk of severe COVID-19 complications.
- New Jersey’s farm operators and seasonal farm workers continue to provide a vital service to the public by fueling New Jersey’s food supply chain.
- Seasonal farm workers are at risk of exposure to COVID-19 because the harvest and processing of crops requires close contact with coworkers and because seasonal farm workers rely on group transportation and camp-style housing.
- Seasonal farm workers are at greater risk of contracting serious forms of COVID-19.
- Agricultural workers with chronic lung problems associated with exposure to pesticides and fungi found in crops may also be at higher risk of severe COVID-19 complications.

II. DEFINITIONS

- Coronaviruses are a large family of viruses that are common among people and many different species of animals.
- COVID-19 (coronavirus disease 2019) is the disease caused by novel (new) coronavirus that was first detected in humans in December 2019.
- Cohorting is the practice of isolating multiple laboratory-confirmed COVID-19 cases together as a group or quarantining close contacts of a particular case together as a group. Ideally, cases should be isolated individually and close contacts should be quarantined individually. However, some work and housing facilities do not have enough individual rooms to do so and must consider cohorting as an alternative.
- Isolation is the practice of keeping an ill person away from others.
- Quarantine is the practice of keeping those who are exposed and potentially harboring the illness away from those who are not exposed.
- Camp means any employer-provided housing, including a tent, trailer, house, townhouse or any other place housing seasonal farm workers.
- Transportation means any employer-provided vehicle used to transport seasonal farm workers.
- Employer means any individual, family member, corporation, partnership, joint venture, firm, company, or other legal entity, or any officers or agents, in immediate possession of any farm as owner or lessee, who is responsible for its management and conditions. This includes farm labor contractors also known as crew leaders.
- Seasonal farm worker means any person who is engaged in seasonal or temporary farm work and can be used interchangeably with the term “employee”, “worker”, “migrant seasonal farm worker” and “temporary farm worker.”

III. GUIDANCE

- This guidance outlines best practices to maintain the health and safety of seasonal farm workers and the health of the agricultural economy and New Jersey’s food supply chain.
- Implementation of these guidelines is essential for any employer and owner or operator of a seasonal farm labor camp to minimize the risk and potential exposure of COVID-19 throughout New Jersey.
- Please note that this guidance does not exempt any person from complying with any applicable laws.
- Please note the laws that serve to protect the health of seasonal farm workers:
 - ▶ Migrant and Seasonal Agricultural Worker Protection Act
 - ▶ Occupational Safety and Health Act of 1970 (OSHAct)
 - ▶ New Jersey State Seasonal Farm Labor Act, Drinking Water & Toilet Facilities Act, Crew Leader Registration Act & Seasonal Farm Workers Regulation
- **Employers should cooperate with the Local Health Department for infection control guidance and outbreak response, including additional transportation and housing needs, and should contact them with any questions or concerns.**
- All links to referenced guidance and resources are provided at the end of the document.

The following steps are to be taken to minimize the spread of COVID-19 during harvesting, picking, packing, and distribution of agricultural products as well as to minimize the spread of COVID-19 in shared housing and transportation.



1. WORK TIME

- a. Employer is to promote social distancing by requiring workers to remain at least six feet away from one another while working in the fields or any food farming production, processing, and cultivation.
- b. Employer is encouraged to stagger shifts, including staggering start times, to minimize the density of the workers in the fields and other work locations at the same time.
- c. If safe social distancing is not possible, the use of partition between work spaces (cloth, plastic, etc.) is recommended between each worker.



2. HOUSING

- a. Employer must protect their workers by following these CDC recommendations for congregate living if workers are provided housing by employer:
 - Beds are to be placed at least six feet apart.
 - ▶ If 6-feet apart is not possible, position beds at least 3 feet apart with a partition between beds – e.g., nailing string from wall-to-wall and hanging sheet, blanket, or shower curtain, or using appropriately sized dressers or cardboard boxes that can function as a barrier).
 - Bunkbeds are not recommended but if unavoidable, position bunk beds at least 6-feet apart with workers laying head to toe on each separate bunk bed.
 - ▶ If 6-feet apart is not possible, position beds at least 3 feet apart with a partition between beds – e.g., nailing string from wall-to-wall and hanging sheet, blanket, or shower curtain, or using appropriately sized dressers or cardboard boxes that can function as a barrier).
 - For all rooms, adequate ventilation must be provided in sleeping and living quarters with openable windows or door with properly fitted screens or a device supplying ventilation.
 - Employer is to also:
 - ▶ Provide tissues and trash bins.
 - ▶ Create a staggered bathing schedule to reduce the number of workers using bath facilities at the same time.
 - ▶ Ensure bathrooms and sinks always have soap, alcohol-based hand sanitizers, and disposable towels.
 - ▶ Create staggered mealtimes to reduce crowding in shared eating facilities.
 - ▶ Consider providing prepackaged meals with staggered pick-up times to limit large groups congregating in shared spaces.
 - ▶ Limit large group gatherings in congregate areas of the facilities so that they comply with current Executive and Administrative Orders.
- b. Housing must be regularly and thoroughly disinfected.
- c. Social distancing in housing is encouraged.
- d. Information about housing individuals who test positive for COVID-19 can be found in section 9.

←6ft→ 3. TRANSPORTATION

- a. Employer must implement social distancing while transporting workers to and from their residency and place of work.
 - Vehicles should be limited to 50% capacity, which may require additional trips to and from the worksite.
- b. If employer provides additional transportation, such as trips to town centers for personal errands, trips must be scheduled in advance and vehicles should be limited to 50% capacity.



4. CLEANING

- a. Employer is to ensure disinfection of high-touch areas, such as in communal areas and working and transportation vehicles, and frequently used equipment and supplies, in accordance with guidance from the U.S. Centers for Disease Control and Prevention (CDC).
- b. Employer is to use household cleaners and EPA-registered disinfectants as instructed.



5. WEARING PROTECTIVE GEAR

- a. Employer is to provide face coverings or masks for employees.
 - If such face covering is reusable, the employer is to provide workers access to regular washing of face covering.
 - If face masks are disposable, a regular supply must be made available and replaced as needed based on condition of mask.
- b. Employer is to educate workers on the mandatory requirement to wear face coverings for their protection and the protection of others.
- c. Workers must wear face coverings at all times, including during transportation, while working, and when in the presence of others.
- d. The only exception to face covering use is when an employee is eating or drinking, or where the employee's use of a face covering/mask is contraindicated for health reasons.



6. HANDWASHING AND PERSONAL HYGIENE PRACTICES

- a. Employer is to provide clean, private toilet facilities near working areas. Toilets must be supplied with adequate toilet paper.
- b. Employer is to provide hand-washing stations with soap and disposable drying materials for adequate handwashing near working areas.
 - In addition to hand washing stations, employer is to provide hand sanitizers with at least 60%-95% alcohol in various locations, such as in the field or in other farming operation centers, cooking and eating facilities, and sleeping areas.
- c. Employer is to schedule handwashing breaks every hour.
 - If soap and water are not available, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used.



7. COVID-19 EDUCATION ON INFECTION REDUCTION

- a. Education material will be provided by local and state agencies, such as the New Jersey Department of Health, local public health departments and local Federally Qualified Health Centers.
 - Employer is to collaborate with these agencies, to identify culturally, linguistically, and literacy-level appropriate posters and education materials for workers.
 - Employer should also make available information for those who are unable to read or write to ensure that all workers are aware of this information.
- b. Employer is to educate workers on hand hygiene, respiratory etiquette, and emergency response.
 - Workers should wash hands with soap and water for at least 20 seconds, and should similarly apply hand sanitizer for at least 20 seconds when hand washing is not possible.
 - Workers should not touch their eyes, noses, or mouths and should cover coughs and sneezes with elbow.
- c. Worksites are to display CDC hand hygiene posters and other “How to Protect Yourself and Others” materials in English, Spanish, and other languages as needed.



8. HEALTH SCREENING FOR COVID-19 SYMPTOMS

- a. Employer is to screen workers for symptoms, including temperature and symptom checks prior to work shifts.
- b. Symptoms of COVID-19 include cough, shortness of breath or difficulty breathing, OR at least two of these symptoms:
 - Fever
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
- c. **If any symptoms are shown, worker must immediately be connected to a physician. The physician will determine if a test is needed.**
- d. Pending medical attention and testing, employer is to confine workers with symptoms consistent with COVID-19 infection to individual rooms and have them avoid common areas.
- e. Employer is to contact FQHC directly to inquire about COVID-19 testing (including mobile testing) and primary care services, including telehealth.



9. WORKER WITH SUSPECTED OR CONFIRMED COVID-19

- a. Employer is to ensure that worker(s) who exhibit COVID-19 symptoms are transported separately from other workers.
 - Once worker(s) are suspected or diagnosed with COVID-19, the priority is to prevent the further spread to other workers.
- b. Employer or housing provider is to contact the local public health department in the jurisdiction where the individual's current housing is located with any suspected case.
- c. Worker is to be immediately assigned a separate bathroom or, if not possible, a separate toilet.
- d. Employer is to provide a separate living space, accessible kitchen, and bathroom that are away from others in the setting.
 - **If unable to effectively isolate the workers within the current living setting, alternate housing must be provided.**
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 - ▶ other symptoms are greatly improved and
 - ▶ at least 10 days have passed since symptoms first started.
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14. GUIDANCE EDUCATION:

- Employer is to place guidance in a visible place on a farm operation and in employer-provided housing.
- Along with posting the guidance, employer is to provide:
 - ▶ a list of local community-based and county-based COVID-19 testing sites to employees.
 - ▶ a list of local FQHCs that provide primary care services and COVID-19.
 - ▶ printed CDC guidance “If You Are Sick” for sick workers to follow.
- Employer is to discuss guidance completely with any seasonal farm worker employed by the farm operation in a language that employee can adequately comprehend.
- The guidance is available in English, Spanish, Haitian Creole, French, Cambodian, and simplified Chinese.



15. ADDITIONAL RESOURCES:

TESTING AND TREATMENT RESOURCES:

- List of Federally Qualified Health Centers (FQHCs): <https://nj.gov/health/fhs/primarycare/fqhc/index.shtml>
- Local Health Departments: www.nj.gov/health/lh/community/index.shtml
- COVID-19 testing sites: covid19.nj.gov
- Phone calls for general COVID-19 questions: 211 – multi-lingual staff will assist
- Phone calls for clinical COVID-19 questions: 1-800-962-1253 – multi-lingual staff will assist
- CDC guidance “If you are sick”: www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

GENERAL COVID-19 RESOURCES FROM THE STATE OF NEW JERSEY

- State of NJ COVID-19 Information Hub: covid19.nj.gov
- COVID-19 Fact Sheet in English and Spanish: https://nj.gov/health/cd/topics/covid2019_community.shtml
- New Jersey Department of Health Communicable Disease Services, Information for Communities and General Public: https://nj.gov/health/cd/topics/covid2019_community.shtml
- Resources for Undocumented/Uninsured Individuals: https://nj.gov/health/cd/topics/covid2019_community.shtml

PREVENTION RESOURCES

- CDC guidance for congregate living: www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html
- CDC hand hygiene posters and other “How to Protect Yourself and Others” materials: www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html
- Do The 5 Help Stop COVID-19: www.nj.gov/health/cd/documents/topics/NCOV/COVID19_infographic_do_the_5.pdf
- The Benefits of Cloth Masks to Stop the Spread (CDC): www.cdc.gov/coronavirus/2019-ncov/downloads/DIY-cloth-face-covering-instructions.pdf

CLEANING AND DISINFECTING RESOURCES

- CDC Guidance on Cleaning and Disinfecting: www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html and www.cdc.gov/coronavirus/2019-ncov/downloads/disinfecting-your-home.pdf
- EPA-registered disinfectants: www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

WORKER PROTECTION RESOURCES

- COVID-19 Employment-Related Retaliation Prohibition: www.myworkrights.nj.gov or email farms@dol.nj.gov
- Family First Coronavirus Response Act: www.dol.gov/agencies/whd/pandemic
- New Jersey Earned Sick Leave: www.mysickdays.nj.gov
- Federal H-2A requirements for the agricultural industry: www.dol.gov/agencies/whd/fact-sheets/26-H2A
- Migrant and Seasonal Agricultural Worker Protection Act (MSPA): www.dol.gov/sites/dolgov/files/WHD/legacy/files/whdfs49.pdf
- Occupational Safety and Health Act of 1970 (OSHAct): www.dol.gov/sites/dolgov/files/WHD/legacy/files/whdfs51.pdf
- New Jersey State Seasonal Farm Labor Act, Drinking Water & Toilet Facilities Act, Crew Leader Registration Act & Seasonal Farm Workers Regulation: www.nj.gov/labor/forms_pdfs/lasse/mw-126.pdf

RETURNING TO ESSENTIAL WORK

- Recovering from COVID-19 - Returning to essential work: www.nj.gov/health/cd/documents/topics/NCOV/COVID_infographic_recovery.pdf



Created: 5.20.20

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/20/2020 05:12:12 PM
To: Jones, Tammy; Bianco, Thomas A.; McNulty, Dennis P.
Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Attachments: Official Guidance on Migrant Seasonal Farmworker Housing

Sender: minfante@njaes.rutgers.edu
Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Message-Id:
Recipient: tbianco@co.gloucester.nj.us

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/20/2020 05:11:08 PM
To: Jones, Tammy; Bianco, Thomas A.; McNulty, Dennis P.
Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Attachments: MSFWs-Guidance-FINAL-05.20.20-laid-out.pdf

FYI, released today and distributed to farmers and will be presented tonight on a webinar "Ask the Ag Agent" I host every Wednesday at 7:00PM

Guidance Document Distribution:

<https://plant-pest-advisory.rutgers.edu/migrant-and-seasonal-farmworker-and-e/>

Webinar:

<https://plant-pest-advisory.rutgers.edu/tonights-discussion-migrant-labor-guidance-document-released-and-more-topics-on-ask-the-ag-agent-topics/>

Thank you,

Michelle

Michelle Infante-Casella

Agricultural Agent/Professor

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WHEN YOU NEED **US**

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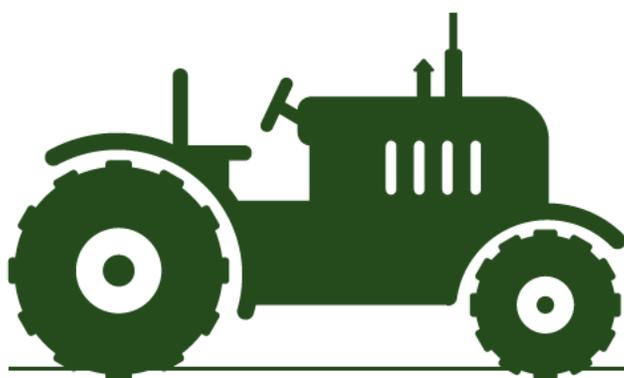
*The New Jersey Department of Health is partnering with its sister agencies
New Jersey Department of Agriculture and
New Jersey Department of Labor and Workforce Development
to assist agricultural businesses and farm workers during the COVID-19 pandemic.*

INTERIM

CORONAVIRUS DISEASE 2019 (COVID-19)

GUIDANCE FOR MIGRANT AND SEASONAL FARMWORKERS, THEIR EMPLOYERS, AND HOUSING PROVIDERS

MAY 20, 2020



I. CONTEXT

- New Jersey's Health Commissioner is responsible for executing public health emergency evaluation, prevention, and response for the State.
- Every person conducting business in New Jersey must cooperate fully with the Commissioner of Health in all matters concerning the state of emergency.
- Complications of COVID-19 infection may include the need to be hospitalized, receive mechanical ventilation, and death.
- Blacks and Hispanics, individuals who are over 65 years of age, and people with pre-existing medical conditions, such as diabetes, chronic lung or heart disease, or who have a compromised immune system (e.g., cancer or taking immunosuppressant medications), are at greater risk of severe COVID-19 complications.
- New Jersey's farm operators and seasonal farm workers continue to provide a vital service to the public by fueling New Jersey's food supply chain.
- Seasonal farm workers are at risk of exposure to COVID-19 because the harvest and processing of crops requires close contact with coworkers and because seasonal farm workers rely on group transportation and camp-style housing.
- Seasonal farm workers are at greater risk of contracting serious forms of COVID-19.
- Agricultural workers with chronic lung problems associated with exposure to pesticides and fungi found in crops may also be at higher risk of severe COVID-19 complications.

II. DEFINITIONS

- Coronaviruses are a large family of viruses that are common among people and many different species of animals.
- COVID-19 (coronavirus disease 2019) is the disease caused by novel (new) coronavirus that was first detected in humans in December 2019.
- Cohorting is the practice of isolating multiple laboratory-confirmed COVID-19 cases together as a group or quarantining close contacts of a particular case together as a group. Ideally, cases should be isolated individually and close contacts should be quarantined individually. However, some work and housing facilities do not have enough individual rooms to do so and must consider cohorting as an alternative.
- Isolation is the practice of keeping an ill person away from others.
- Quarantine is the practice of keeping those who are exposed and potentially harboring the illness away from those who are not exposed.
- Camp means any employer-provided housing, including a tent, trailer, house, townhouse or any other place housing seasonal farm workers.
- Transportation means any employer-provided vehicle used to transport seasonal farm workers.
- Employer means any individual, family member, corporation, partnership, joint venture, firm, company, or other legal entity, or any officers or agents, in immediate possession of any farm as owner or lessee, who is responsible for its management and conditions. This includes farm labor contractors also known as crew leaders.
- Seasonal farm worker means any person who is engaged in seasonal or temporary farm work and can be used interchangeably with the term “employee”, “worker”, “migrant seasonal farm worker” and “temporary farm worker.”

III. GUIDANCE

- This guidance outlines best practices to maintain the health and safety of seasonal farm workers and the health of the agricultural economy and New Jersey’s food supply chain.
- Implementation of these guidelines is essential for any employer and owner or operator of a seasonal farm labor camp to minimize the risk and potential exposure of COVID-19 throughout New Jersey.
- Please note that this guidance does not exempt any person from complying with any applicable laws.
- Please note the laws that serve to protect the health of seasonal farm workers:
 - ▶ Migrant and Seasonal Agricultural Worker Protection Act
 - ▶ Occupational Safety and Health Act of 1970 (OSHAct)
 - ▶ New Jersey State Seasonal Farm Labor Act, Drinking Water & Toilet Facilities Act, Crew Leader Registration Act & Seasonal Farm Workers Regulation
- **Employers should cooperate with the Local Health Department for infection control guidance and outbreak response, including additional transportation and housing needs, and should contact them with any questions or concerns.**
- All links to referenced guidance and resources are provided at the end of the document.

The following steps are to be taken to minimize the spread of COVID-19 during harvesting, picking, packing, and distribution of agricultural products as well as to minimize the spread of COVID-19 in shared housing and transportation.



1. WORK TIME

- a. Employer is to promote social distancing by requiring workers to remain at least six feet away from one another while working in the fields or any food farming production, processing, and cultivation.
- b. Employer is encouraged to stagger shifts, including staggering start times, to minimize the density of the workers in the fields and other work locations at the same time.
- c. If safe social distancing is not possible, the use of partition between work spaces (cloth, plastic, etc.) is recommended between each worker.



2. HOUSING

- a. Employer must protect their workers by following these CDC recommendations for congregate living if workers are provided housing by employer:
 - Beds are to be placed at least six feet apart.
 - ▶ If 6-feet apart is not possible, position beds at least 3 feet apart with a partition between beds – e.g., nailing string from wall-to-wall and hanging sheet, blanket, or shower curtain, or using appropriately sized dressers or cardboard boxes that can function as a barrier).
 - Bunkbeds are not recommended but if unavoidable, position bunk beds at least 6-feet apart with workers laying head to toe on each separate bunk bed.
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 - For all rooms, adequate ventilation must be provided in sleeping and living quarters with openable windows or door with properly fitted screens or a device supplying ventilation.
 - Employer is to also:
 - ▶ Provide tissues and trash bins.
 - ▶ Create a staggered bathing schedule to reduce the number of workers using bath facilities at the same time.
 - ▶ Ensure bathrooms and sinks always have soap, alcohol-based hand sanitizers, and disposable towels.
 - ▶ Create staggered mealtimes to reduce crowding in shared eating facilities.
 - ▶ Consider providing prepackaged meals with staggered pick-up times to limit large groups congregating in shared spaces.
 - ▶ Limit large group gatherings in congregate areas of the facilities so that they comply with current Executive and Administrative Orders.
- b. Housing must be regularly and thoroughly disinfected.
- c. Social distancing in housing is encouraged.
- d. Information about housing individuals who test positive for COVID-19 can be found in section 9.

←6ft→ 3. TRANSPORTATION

- a. Employer must implement social distancing while transporting workers to and from their residency and place of work.
 - Vehicles should be limited to 50% capacity, which may require additional trips to and from the worksite.
- b. If employer provides additional transportation, such as trips to town centers for personal errands, trips must be scheduled in advance and vehicles should be limited to 50% capacity.



4. CLEANING

- a. Employer is to ensure disinfection of high-touch areas, such as in communal areas and working and transportation vehicles, and frequently used equipment and supplies, in accordance with guidance from the U.S. Centers for Disease Control and Prevention (CDC).
- b. Employer is to use household cleaners and EPA-registered disinfectants as instructed.



5. WEARING PROTECTIVE GEAR

- a. Employer is to provide face coverings or masks for employees.
 - If such face covering is reusable, the employer is to provide workers access to regular washing of face covering.
 - If face masks are disposable, a regular supply must be made available and replaced as needed based on condition of mask.
- b. Employer is to educate workers on the mandatory requirement to wear face coverings for their protection and the protection of others.
- c. Workers must wear face coverings at all times, including during transportation, while working, and when in the presence of others.
- d. The only exception to face covering use is when an employee is eating or drinking, or where the employee's use of a face covering/mask is contraindicated for health reasons.



6. HANDWASHING AND PERSONAL HYGIENE PRACTICES

- a. Employer is to provide clean, private toilet facilities near working areas. Toilets must be supplied with adequate toilet paper.
- b. Employer is to provide hand-washing stations with soap and disposable drying materials for adequate handwashing near working areas.
 - In addition to hand washing stations, employer is to provide hand sanitizers with at least 60%-95% alcohol in various locations, such as in the field or in other farming operation centers, cooking and eating facilities, and sleeping areas.
- c. Employer is to schedule handwashing breaks every hour.
 - If soap and water are not available, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used.



7. COVID-19 EDUCATION ON INFECTION REDUCTION

- a. Education material will be provided by local and state agencies, such as the New Jersey Department of Health, local public health departments and local Federally Qualified Health Centers.
 - Employer is to collaborate with these agencies, to identify culturally, linguistically, and literacy-level appropriate posters and education materials for workers.
 - Employer should also make available information for those who are unable to read or write to ensure that all workers are aware of this information.
- b. Employer is to educate workers on hand hygiene, respiratory etiquette, and emergency response.
 - Workers should wash hands with soap and water for at least 20 seconds, and should similarly apply hand sanitizer for at least 20 seconds when hand washing is not possible.
 - Workers should not touch their eyes, noses, or mouths and should cover coughs and sneezes with elbow.
- c. Worksites are to display CDC hand hygiene posters and other “How to Protect Yourself and Others” materials in English, Spanish, and other languages as needed.



8. HEALTH SCREENING FOR COVID-19 SYMPTOMS

- a. Employer is to screen workers for symptoms, including temperature and symptom checks prior to work shifts.
- b. Symptoms of COVID-19 include cough, shortness of breath or difficulty breathing, OR at least two of these symptoms:
 - Fever
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
- c. **If any symptoms are shown, worker must immediately be connected to a physician. The physician will determine if a test is needed.**
- d. Pending medical attention and testing, employer is to confine workers with symptoms consistent with COVID-19 infection to individual rooms and have them avoid common areas.
- e. Employer is to contact FQHC directly to inquire about COVID-19 testing (including mobile testing) and primary care services, including telehealth.



9. WORKER WITH SUSPECTED OR CONFIRMED COVID-19

- a. Employer is to ensure that worker(s) who exhibit COVID-19 symptoms are transported separately from other workers.
 - Once worker(s) are suspected or diagnosed with COVID-19, the priority is to prevent the further spread to other workers.
- b. Employer or housing provider is to contact the local public health department in the jurisdiction where the individual's current housing is located with any suspected case.
- c. Worker is to be immediately assigned a separate bathroom or, if not possible, a separate toilet.
- d. Employer is to provide a separate living space, accessible kitchen, and bathroom that are away from others in the setting.
 - **If unable to effectively isolate the workers within the current living setting, alternate housing must be provided.**
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 - ▶ a list of local community-based and county-based COVID-19 testing sites to employees.
 - ▶ a list of local FQHCs that provide primary care services and COVID-19.
 - ▶ printed CDC guidance “If You Are Sick” for sick workers to follow.
- Employer is to discuss guidance completely with any seasonal farm worker employed by the farm operation in a language that employee can adequately comprehend.
- The guidance is available in English, Spanish, Haitian Creole, French, Cambodian, and simplified Chinese.



15. ADDITIONAL RESOURCES:

TESTING AND TREATMENT RESOURCES:

- List of Federally Qualified Health Centers (FQHCs): <https://nj.gov/health/fhs/primarycare/fqhc/index.shtml>
- Local Health Departments: www.nj.gov/health/lh/community/index.shtml
- COVID-19 testing sites: covid19.nj.gov
- Phone calls for general COVID-19 questions: **211** – multi-lingual staff will assist
- Phone calls for clinical COVID-19 questions: **1-800-962-1253** – multi-lingual staff will assist
- CDC guidance “If you are sick”: www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

GENERAL COVID-19 RESOURCES FROM THE STATE OF NEW JERSEY

- State of NJ COVID-19 Information Hub: covid19.nj.gov
- COVID-19 Fact Sheet in English and Spanish: https://nj.gov/health/cd/topics/covid2019_community.shtml
- New Jersey Department of Health Communicable Disease Services, Information for Communities and General Public: https://nj.gov/health/cd/topics/covid2019_community.shtml
- Resources for Undocumented/Uninsured Individuals: https://nj.gov/health/cd/topics/covid2019_community.shtml

PREVENTION RESOURCES

- CDC guidance for congregate living: www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html
- CDC hand hygiene posters and other “How to Protect Yourself and Others” materials: www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html
- Do The 5 Help Stop COVID-19: www.nj.gov/health/cd/documents/topics/NCOV/COVID19_infographic_do_the_5.pdf
- The Benefits of Cloth Masks to Stop the Spread (CDC): www.cdc.gov/coronavirus/2019-ncov/downloads/DIY-cloth-face-covering-instructions.pdf

CLEANING AND DISINFECTING RESOURCES

- CDC Guidance on Cleaning and Disinfecting: www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html and www.cdc.gov/coronavirus/2019-ncov/downloads/disinfecting-your-home.pdf
- EPA-registered disinfectants: www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

WORKER PROTECTION RESOURCES

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- Migrant and Seasonal Agricultural Worker Protection Act (MSPA): www.dol.gov/sites/dolgov/files/WHD/legacy/files/whdfs49.pdf
- Occupational Safety and Health Act of 1970 (OSHAct): www.dol.gov/sites/dolgov/files/WHD/legacy/files/whdfs51.pdf
- New Jersey State Seasonal Farm Labor Act, Drinking Water & Toilet Facilities Act, Crew Leader Registration Act & Seasonal Farm Workers Regulation: www.nj.gov/labor/forms_pdfs/lasse/mw-126.pdf

RETURNING TO ESSENTIAL WORK

- Recovering from COVID-19 - Returning to essential work: www.nj.gov/health/cd/documents/topics/NCOV/COVID_infographic_recovery.pdf



Created: 5.20.20

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/20/2020 05:12:12 PM
To: Jones, Tammy; Bianco, Thomas A.; McNulty, Dennis P.
Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Attachments: Official Guidance on Migrant Seasonal Farmworker Housing

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Subject: Official Guidance on Migrant Seasonal Farmworker Housing
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Recipient: dmcnulty@co.gloucester.nj.us

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Thank you,

Michelle

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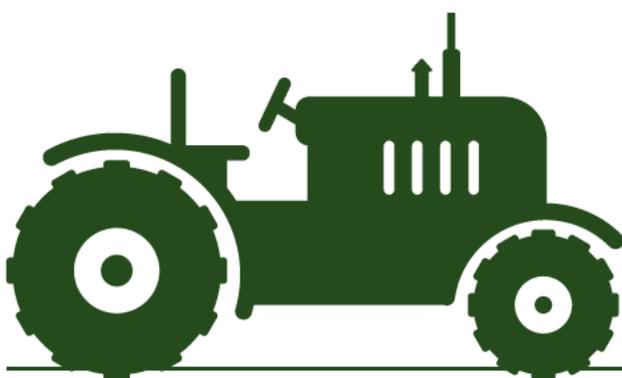
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INTERIM

CORONAVIRUS DISEASE 2019 (COVID-19)

GUIDANCE FOR MIGRANT AND SEASONAL FARMWORKERS, THEIR EMPLOYERS, AND HOUSING PROVIDERS

MAY 20, 2020



I. CONTEXT

- New Jersey’s Health Commissioner is responsible for executing public health emergency evaluation, prevention, and response for the State.
- Every person conducting business in New Jersey must cooperate fully with the Commissioner of Health in all matters concerning the state of emergency.
- Complications of COVID-19 infection may include the need to be hospitalized, receive mechanical ventilation, and death.
- Blacks and Hispanics, individuals who are over 65 years of age, and people with pre-existing medical conditions, such as diabetes, chronic lung or heart disease, or who have a compromised immune system (e.g., cancer or taking immunosuppressant medications), are at greater risk of severe COVID-19 complications.
- New Jersey’s farm operators and seasonal farm workers continue to provide a vital service to the public by fueling New Jersey’s food supply chain.
- Seasonal farm workers are at risk of exposure to COVID-19 because the harvest and processing of crops requires close contact with coworkers and because seasonal farm workers rely on group transportation and camp-style housing.
- Seasonal farm workers are at greater risk of contracting serious forms of COVID-19.
- Agricultural workers with chronic lung problems associated with exposure to pesticides and fungi found in crops may also be at higher risk of severe COVID-19 complications.

II. DEFINITIONS

- Coronaviruses are a large family of viruses that are common among people and many different species of animals.
- COVID-19 (coronavirus disease 2019) is the disease caused by novel (new) coronavirus that was first detected in humans in December 2019.
- Cohorting is the practice of isolating multiple laboratory-confirmed COVID-19 cases together as a group or quarantining close contacts of a particular case together as a group. Ideally, cases should be isolated individually and close contacts should be quarantined individually. However, some work and housing facilities do not have enough individual rooms to do so and must consider cohorting as an alternative.
- Isolation is the practice of keeping an ill person away from others.
- Quarantine is the practice of keeping those who are exposed and potentially harboring the illness away from those who are not exposed.
- Camp means any employer-provided housing, including a tent, trailer, house, townhouse or any other place housing seasonal farm workers.
- Transportation means any employer-provided vehicle used to transport seasonal farm workers.
- Employer means any individual, family member, corporation, partnership, joint venture, firm, company, or other legal entity, or any officers or agents, in immediate possession of any farm as owner or lessee, who is responsible for its management and conditions. This includes farm labor contractors also known as crew leaders.
- Seasonal farm worker means any person who is engaged in seasonal or temporary farm work and can be used interchangeably with the term “employee”, “worker”, “migrant seasonal farm worker” and “temporary farm worker.”

III. GUIDANCE

- This guidance outlines best practices to maintain the health and safety of seasonal farm workers and the health of the agricultural economy and New Jersey's food supply chain.
- Implementation of these guidelines is essential for any employer and owner or operator of a seasonal farm labor camp to minimize the risk and potential exposure of COVID-19 throughout New Jersey.
- Please note that this guidance does not exempt any person from complying with any applicable laws.
- Please note the laws that serve to protect the health of seasonal farm workers:
 - ▶ Migrant and Seasonal Agricultural Worker Protection Act
 - ▶ Occupational Safety and Health Act of 1970 (OSHAct)
 - ▶ New Jersey State Seasonal Farm Labor Act, Drinking Water & Toilet Facilities Act, Crew Leader Registration Act & Seasonal Farm Workers Regulation
- **Employers should cooperate with the Local Health Department for infection control guidance and outbreak response, including additional transportation and housing needs, and should contact them with any questions or concerns.**
- All links to referenced guidance and resources are provided at the end of the document.

The following steps are to be taken to minimize the spread of COVID-19 during harvesting, picking, packing, and distribution of agricultural products as well as to minimize the spread of COVID-19 in shared housing and transportation.



1. WORK TIME

- a. Employer is to promote social distancing by requiring workers to remain at least six feet away from one another while working in the fields or any food farming production, processing, and cultivation.
- b. Employer is encouraged to stagger shifts, including staggering start times, to minimize the density of the workers in the fields and other work locations at the same time.
- c. If safe social distancing is not possible, the use of partition between work spaces (cloth, plastic, etc.) is recommended between each worker.



2. HOUSING

- a. Employer must protect their workers by following these CDC recommendations for congregate living if workers are provided housing by employer:
 - Beds are to be placed at least six feet apart.
 - ▶ If 6-feet apart is not possible, position beds at least 3 feet apart with a partition between beds – e.g., nailing string from wall-to-wall and hanging sheet, blanket, or shower curtain, or using appropriately sized dressers or cardboard boxes that can function as a barrier).
 - Bunkbeds are not recommended but if unavoidable, position bunk beds at least 6-feet apart with workers laying head to toe on each separate bunk bed.
 - ▶ If 6-feet apart is not possible, position beds at least 3 feet apart with a partition between beds – e.g., nailing string from wall-to-wall and hanging sheet, blanket, or shower curtain, or using appropriately sized dressers or cardboard boxes that can function as a barrier).
 - For all rooms, adequate ventilation must be provided in sleeping and living quarters with openable windows or door with properly fitted screens or a device supplying ventilation.
 - Employer is to also:
 - ▶ Provide tissues and trash bins.
 - ▶ Create a staggered bathing schedule to reduce the number of workers using bath facilities at the same time.
 - ▶ Ensure bathrooms and sinks always have soap, alcohol-based hand sanitizers, and disposable towels.
 - ▶ Create staggered mealtimes to reduce crowding in shared eating facilities.
 - ▶ Consider providing prepackaged meals with staggered pick-up times to limit large groups congregating in shared spaces.
 - ▶ Limit large group gatherings in congregate areas of the facilities so that they comply with current Executive and Administrative Orders.
- b. Housing must be regularly and thoroughly disinfected.
- c. Social distancing in housing is encouraged.
- d. Information about housing individuals who test positive for COVID-19 can be found in section 9.

←6ft→ 3. TRANSPORTATION

- a. Employer must implement social distancing while transporting workers to and from their residency and place of work.
 - Vehicles should be limited to 50% capacity, which may require additional trips to and from the worksite.
- b. If employer provides additional transportation, such as trips to town centers for personal errands, trips must be scheduled in advance and vehicles should be limited to 50% capacity.



4. CLEANING

- a. Employer is to ensure disinfection of high-touch areas, such as in communal areas and working and transportation vehicles, and frequently used equipment and supplies, in accordance with guidance from the U.S. Centers for Disease Control and Prevention (CDC).
- b. Employer is to use household cleaners and EPA-registered disinfectants as instructed.



5. WEARING PROTECTIVE GEAR

- a. Employer is to provide face coverings or masks for employees.
 - If such face covering is reusable, the employer is to provide workers access to regular washing of face covering.
 - If face masks are disposable, a regular supply must be made available and replaced as needed based on condition of mask.
- b. Employer is to educate workers on the mandatory requirement to wear face coverings for their protection and the protection of others.
- c. Workers must wear face coverings at all times, including during transportation, while working, and when in the presence of others.
- d. The only exception to face covering use is when an employee is eating or drinking, or where the employee's use of a face covering/mask is contraindicated for health reasons.



6. HANDWASHING AND PERSONAL HYGIENE PRACTICES

- a. Employer is to provide clean, private toilet facilities near working areas. Toilets must be supplied with adequate toilet paper.
- b. Employer is to provide hand-washing stations with soap and disposable drying materials for adequate handwashing near working areas.
 - In addition to hand washing stations, employer is to provide hand sanitizers with at least 60%-95% alcohol in various locations, such as in the field or in other farming operation centers, cooking and eating facilities, and sleeping areas.
- c. Employer is to schedule handwashing breaks every hour.
 - If soap and water are not available, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used.



7. COVID-19 EDUCATION ON INFECTION REDUCTION

- a. Education material will be provided by local and state agencies, such as the New Jersey Department of Health, local public health departments and local Federally Qualified Health Centers.
 - Employer is to collaborate with these agencies, to identify culturally, linguistically, and literacy-level appropriate posters and education materials for workers.
 - Employer should also make available information for those who are unable to read or write to ensure that all workers are aware of this information.
- b. Employer is to educate workers on hand hygiene, respiratory etiquette, and emergency response.
 - Workers should wash hands with soap and water for at least 20 seconds, and should similarly apply hand sanitizer for at least 20 seconds when hand washing is not possible.
 - Workers should not touch their eyes, noses, or mouths and should cover coughs and sneezes with elbow.
- c. Worksites are to display CDC hand hygiene posters and other “How to Protect Yourself and Others” materials in English, Spanish, and other languages as needed.



8. HEALTH SCREENING FOR COVID-19 SYMPTOMS

- a. Employer is to screen workers for symptoms, including temperature and symptom checks prior to work shifts.
- b. Symptoms of COVID-19 include cough, shortness of breath or difficulty breathing, OR at least two of these symptoms:
 - Fever
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
- c. **If any symptoms are shown, worker must immediately be connected to a physician. The physician will determine if a test is needed.**
- d. Pending medical attention and testing, employer is to confine workers with symptoms consistent with COVID-19 infection to individual rooms and have them avoid common areas.
- e. Employer is to contact FQHC directly to inquire about COVID-19 testing (including mobile testing) and primary care services, including telehealth.



9. WORKER WITH SUSPECTED OR CONFIRMED COVID-19

- a. Employer is to ensure that worker(s) who exhibit COVID-19 symptoms are transported separately from other workers.
 - Once worker(s) are suspected or diagnosed with COVID-19, the priority is to prevent the further spread to other workers.
- b. Employer or housing provider is to contact the local public health department in the jurisdiction where the individual's current housing is located with any suspected case.
- c. Worker is to be immediately assigned a separate bathroom or, if not possible, a separate toilet.
- d. Employer is to provide a separate living space, accessible kitchen, and bathroom that are away from others in the setting.
 - **If unable to effectively isolate the workers within the current living setting, alternate housing must be provided.**
- e. Employer is to identify any workers who were in close contact with infected worker and screen and watch for symptoms.
- f. Employer is to ensure quarantined workers have enough food, supplies, and transportation to medical care.



10. COHORTING OF WORKERS

- a. Employers should cohort or group workers by their health status. This will reduce the spread of COVID-19 to healthy workers. Three cohorts or groupings based on COVID-19 test results are:
 - **Group 1:** Workers that are COVID-19 positive, whether they have symptoms or not, can be isolated together.
 - **Group 2:** Workers exposed to COVID-19, but do not show symptoms, tested negative or have not yet been tested, can be quarantined together away from positive cases.
 - **Group 3:** Workers not exposed to COVID-19 and not showing symptoms can remain together with no need of isolation or quarantine.
- b. Additional cohorting can be instituted to limit impacts of potential infections:
 - Employer may create groups of workers that house, transport, and work together, but stay apart from other groups of workers. Employers are encouraged, where feasible, to create these groups and encourage groups to remain separated during non-working hours.
 - Employers are also encouraged to keep migrant farm workers who live on the farm's labor camp, migrant workers who live in off-farm housing, and local workers separate from one another to limit potential spread to and from the farm and community.



11. COMMUNICATION PLAN BETWEEN HEALTHCARE PROVIDER AND CONFIRMED PATIENT

- a. Once a worker is confirmed to have COVID-19 by a healthcare provider, that worker is considered a patient of that healthcare provider.
- b. Employer is to allow frequent communication between healthcare provider and patient until the patient/worker fully recovers or has a negative COVID-19 testing.
- c. If needed, employer is to provide a phone or computer to allow for patient-healthcare provider communication.
- d. Patient/worker or employer is to notify healthcare provider immediately of any change in the patient's clinical status.
- e. Healthcare provider may also conduct remote telephone assessment to assure the living setting is appropriate for patient self-isolation.
- f. Costs related to testing and treatment for COVID-19 will not be charged to employer or worker.**
- g. Any hospitalization or isolation housing provided by the State of New Jersey will not be charged to employers or workers.**
- h. Temporary isolation housing for workers who test positive is available at the Field Medical Station located at Atlantic City Convention Center, 1 Convention Blvd, Atlantic City, NJ 08401. Referral from a healthcare provider is required.**



12. RETURN TO WORK

- a. **Worker who had COVID-19 symptoms in isolation can be released from isolation and return to work only under the following circumstances:**
- Workers with symptoms who test positive for COVID-19 must remain in isolation until after:
 - ▶ at least 3 full days (or 72 hours) have passed without a fever, without the use of fever-reducing medications AND
 - ▶ other symptoms are greatly improved and
 - ▶ at least 10 days have passed since symptoms first started.
 - Workers with laboratory-confirmed COVID-19 who have not had ANY symptoms may discontinue isolation when at least 10 days have passed since the date of their first positive COVID-19 diagnostic test and if they continue to have no symptoms.
 - If circumstances present where farm operations cannot be maintained due to the large number of positive workers, the following could be considered, however only as a last resort.
 - ▶ Allow asymptomatic positive staff to return to work as long as they can wear a face covering while conducting their assigned duties or they can remain socially distanced (6 feet or more) from others while performing their tasks.
 - ✓ A face covering must be worn any time interactions with other people occur.
 - ✓ The only exception to face covering use is when an employee is eating or drinking, or where the employee's use of a mask is contraindicated for health reasons.
 - ▶ If a large number of asymptomatic positive workers are present, consider having this group work together, if possible, and independent from those who are negative or not yet tested.
 - ▶ While not working, all isolation measures should be in place. This means they should not be sharing living quarters with others who are not positive.
 - ▶ Those with symptoms should be excluded from work without exception.
- b. After returning to work, employees must continue to maintain good personal hygiene including washing their hands frequently and for at least 20 seconds each time.



13. EMPLOYMENT-BASED PROTECTIONS FOR WORKERS

- a. **Once a worker is hired and put on payroll, that worker is considered to be an employee. Workers arriving to a farm are considered hired and reporting to work.**
- Eligibility for New Jersey Earned Sick Leave and/or earned sick leave under the Family First Coronavirus Response Act, referenced under c. and d. below, begins with the first moment of employment.
 - ▶ **This applies to all employees regardless of immigration/documentation status. I.e., H-2A employees and undocumented employees are equally covered.**
 - H-2A employers have additional obligations under federal law: H-2A employers must guarantee to offer each covered worker employment for a total number of hours equal to at least 75% of the workdays in the contract period – called the “three-fourths guarantee.” If during the total work contract period the employer does not offer sufficient workdays to the H-2A or corresponding workers to reach the total amount required to meet the three-fourths guarantee, the employer must pay such workers the amount they would have earned had they actually worked for the guaranteed number of workdays. Wages for the guaranteed 75% period will be calculated at no less than the rate stated in the work contract.
- b. **All workers in NJ are protected against COVID-19 Employment-Related Retaliation**
- An employer is prohibited from firing or otherwise punishing an employee who requests time off or takes time off from work, based on a medical professional's determination that the employee has, or is likely to have, COVID-19.
 - The law applies to all types of employees and regardless of documentation/immigration status.
 - Email farms@dol.nj.gov with your questions about this law or if you think you have been retaliated against.
- c. **Most workers will be eligible for Paid Sick Time if they contract COVID-19:**
- Under state law, all full-time, part-time and temporary NJ employees have the right to up to 40 hours of paid sick leave, earned at a rate of one hour for every 30 hours worked.
 - ▶ Employer can give the 40 hours upfront or let it accrue per 30 hours worked.
 - ▶ **Employer is encouraged to give the full 40 hours upfront and ensure that workers have access to the paid sick time if they contract with COVID-19.**
 - In addition, under the federal Families First Coronavirus Response Act, employers with fewer than 500 employees must provide up to 80 hours of job-protected emergency paid sick leave for employees to care for themselves or a loved one for coronavirus illness, symptoms, or quarantine. Full-time, part-time, and temporary workers, including day laborers, are covered under the law.

- ▶ **Employers who have more than 50 employees must provide up to 80 hours of paid sick leave. Farms with fewer than 50 employees can, but are encouraged not to, waive this requirement.**
- d. **Workers may be eligible for Workers Compensation if they get COVID-19 while working:**
 - If a person contracts the virus because he/she worked with someone who had the virus, or contracted the virus for any other work-related reason, that person could be eligible for workers' compensation and would file through their employer.



14. GUIDANCE EDUCATION:

- Employer is to place guidance in a visible place on a farm operation and in employer-provided housing.
- Along with posting the guidance, employer is to provide:
 - ▶ a list of local community-based and county-based COVID-19 testing sites to employees.
 - ▶ a list of local FQHCs that provide primary care services and COVID-19.
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Subject: Official Guidance on Migrant Seasonal Farmworker Housing
Attachments: Official Guidance on Migrant Seasonal Farmworker Housing

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To: djankauskas@co.gloucester.nj.us

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Thank you,

Michelle

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MAY 20, 2020



I. CONTEXT

- New Jersey’s Health Commissioner is responsible for executing public health emergency evaluation, prevention, and response for the State.
- Every person conducting business in New Jersey must cooperate fully with the Commissioner of Health in all matters concerning the state of emergency.
- Complications of COVID-19 infection may include the need to be hospitalized, receive mechanical ventilation, and death.
- Blacks and Hispanics, individuals who are over 65 years of age, and people with pre-existing medical conditions, such as diabetes, chronic lung or heart disease, or who have a compromised immune system (e.g., cancer or taking immunosuppressant medications), are at greater risk of severe COVID-19 complications.
- New Jersey’s farm operators and seasonal farm workers continue to provide a vital service to the public by fueling New Jersey’s food supply chain.
- Seasonal farm workers are at risk of exposure to COVID-19 because the harvest and processing of crops requires close contact with coworkers and because seasonal farm workers rely on group transportation and camp-style housing.
- Seasonal farm workers are at greater risk of contracting serious forms of COVID-19.
- Agricultural workers with chronic lung problems associated with exposure to pesticides and fungi found in crops may also be at higher risk of severe COVID-19 complications.

II. DEFINITIONS

- Coronaviruses are a large family of viruses that are common among people and many different species of animals.
- COVID-19 (coronavirus disease 2019) is the disease caused by novel (new) coronavirus that was first detected in humans in December 2019.
- Cohorting is the practice of isolating multiple laboratory-confirmed COVID-19 cases together as a group or quarantining close contacts of a particular case together as a group. Ideally, cases should be isolated individually and close contacts should be quarantined individually. However, some work and housing facilities do not have enough individual rooms to do so and must consider cohorting as an alternative.
- Isolation is the practice of keeping an ill person away from others.
- Quarantine is the practice of keeping those who are exposed and potentially harboring the illness away from those who are not exposed.
- Camp means any employer-provided housing, including a tent, trailer, house, townhouse or any other place housing seasonal farm workers.
- Transportation means any employer-provided vehicle used to transport seasonal farm workers.
- Employer means any individual, family member, corporation, partnership, joint venture, firm, company, or other legal entity, or any officers or agents, in immediate possession of any farm as owner or lessee, who is responsible for its management and conditions. This includes farm labor contractors also known as crew leaders.
- Seasonal farm worker means any person who is engaged in seasonal or temporary farm work and can be used interchangeably with the term “employee”, “worker”, “migrant seasonal farm worker” and “temporary farm worker.”

III. GUIDANCE

- This guidance outlines best practices to maintain the health and safety of seasonal farm workers and the health of the agricultural economy and New Jersey's food supply chain.
- Implementation of these guidelines is essential for any employer and owner or operator of a seasonal farm labor camp to minimize the risk and potential exposure of COVID-19 throughout New Jersey.
- Please note that this guidance does not exempt any person from complying with any applicable laws.
- Please note the laws that serve to protect the health of seasonal farm workers:
 - ▶ Migrant and Seasonal Agricultural Worker Protection Act
 - ▶ Occupational Safety and Health Act of 1970 (OSHAct)
 - ▶ New Jersey State Seasonal Farm Labor Act, Drinking Water & Toilet Facilities Act, Crew Leader Registration Act & Seasonal Farm Workers Regulation
- **Employers should cooperate with the Local Health Department for infection control guidance and outbreak response, including additional transportation and housing needs, and should contact them with any questions or concerns.**
- All links to referenced guidance and resources are provided at the end of the document.

The following steps are to be taken to minimize the spread of COVID-19 during harvesting, picking, packing, and distribution of agricultural products as well as to minimize the spread of COVID-19 in shared housing and transportation.



1. WORK TIME

- a. Employer is to promote social distancing by requiring workers to remain at least six feet away from one another while working in the fields or any food farming production, processing, and cultivation.
- b. Employer is encouraged to stagger shifts, including staggering start times, to minimize the density of the workers in the fields and other work locations at the same time.
- c. If safe social distancing is not possible, the use of partition between work spaces (cloth, plastic, etc.) is recommended between each worker.



2. HOUSING

- a. Employer must protect their workers by following these CDC recommendations for congregate living if workers are provided housing by employer:
 - Beds are to be placed at least six feet apart.
 - ▶ If 6-feet apart is not possible, position beds at least 3 feet apart with a partition between beds – e.g., nailing string from wall-to-wall and hanging sheet, blanket, or shower curtain, or using appropriately sized dressers or cardboard boxes that can function as a barrier).
 - Bunkbeds are not recommended but if unavoidable, position bunk beds at least 6-feet apart with workers laying head to toe on each separate bunk bed.
 - ▶ If 6-feet apart is not possible, position beds at least 3 feet apart with a partition between beds – e.g., nailing string from wall-to-wall and hanging sheet, blanket, or shower curtain, or using appropriately sized dressers or cardboard boxes that can function as a barrier).
 - For all rooms, adequate ventilation must be provided in sleeping and living quarters with openable windows or door with properly fitted screens or a device supplying ventilation.
 - Employer is to also:
 - ▶ Provide tissues and trash bins.
 - ▶ Create a staggered bathing schedule to reduce the number of workers using bath facilities at the same time.
 - ▶ Ensure bathrooms and sinks always have soap, alcohol-based hand sanitizers, and disposable towels.
 - ▶ Create staggered mealtimes to reduce crowding in shared eating facilities.
 - ▶ Consider providing prepackaged meals with staggered pick-up times to limit large groups congregating in shared spaces.
 - ▶ Limit large group gatherings in congregate areas of the facilities so that they comply with current Executive and Administrative Orders.
- b. Housing must be regularly and thoroughly disinfected.
- c. Social distancing in housing is encouraged.
- d. Information about housing individuals who test positive for COVID-19 can be found in section 9.

←6ft→ 3. TRANSPORTATION

- a. Employer must implement social distancing while transporting workers to and from their residency and place of work.
 - Vehicles should be limited to 50% capacity, which may require additional trips to and from the worksite.
- b. If employer provides additional transportation, such as trips to town centers for personal errands, trips must be scheduled in advance and vehicles should be limited to 50% capacity.



4. CLEANING

- a. Employer is to ensure disinfection of high-touch areas, such as in communal areas and working and transportation vehicles, and frequently used equipment and supplies, in accordance with guidance from the U.S. Centers for Disease Control and Prevention (CDC).
- b. Employer is to use household cleaners and EPA-registered disinfectants as instructed.



5. WEARING PROTECTIVE GEAR

- a. Employer is to provide face coverings or masks for employees.
 - If such face covering is reusable, the employer is to provide workers access to regular washing of face covering.
 - If face masks are disposable, a regular supply must be made available and replaced as needed based on condition of mask.
- b. Employer is to educate workers on the mandatory requirement to wear face coverings for their protection and the protection of others.
- c. Workers must wear face coverings at all times, including during transportation, while working, and when in the presence of others.
- d. The only exception to face covering use is when an employee is eating or drinking, or where the employee's use of a face covering/mask is contraindicated for health reasons.



6. HANDWASHING AND PERSONAL HYGIENE PRACTICES

- a. Employer is to provide clean, private toilet facilities near working areas. Toilets must be supplied with adequate toilet paper.
- b. Employer is to provide hand-washing stations with soap and disposable drying materials for adequate handwashing near working areas.
 - In addition to hand washing stations, employer is to provide hand sanitizers with at least 60%-95% alcohol in various locations, such as in the field or in other farming operation centers, cooking and eating facilities, and sleeping areas.
- c. Employer is to schedule handwashing breaks every hour.
 - If soap and water are not available, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used.



7. COVID-19 EDUCATION ON INFECTION REDUCTION

- a. Education material will be provided by local and state agencies, such as the New Jersey Department of Health, local public health departments and local Federally Qualified Health Centers.
 - Employer is to collaborate with these agencies, to identify culturally, linguistically, and literacy-level appropriate posters and education materials for workers.
 - Employer should also make available information for those who are unable to read or write to ensure that all workers are aware of this information.
- b. Employer is to educate workers on hand hygiene, respiratory etiquette, and emergency response.
 - Workers should wash hands with soap and water for at least 20 seconds, and should similarly apply hand sanitizer for at least 20 seconds when hand washing is not possible.
 - Workers should not touch their eyes, noses, or mouths and should cover coughs and sneezes with elbow.
- c. Worksites are to display CDC hand hygiene posters and other “How to Protect Yourself and Others” materials in English, Spanish, and other languages as needed.



8. HEALTH SCREENING FOR COVID-19 SYMPTOMS

- a. Employer is to screen workers for symptoms, including temperature and symptom checks prior to work shifts.
- b. Symptoms of COVID-19 include cough, shortness of breath or difficulty breathing, OR at least two of these symptoms:
 - Fever
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
- c. **If any symptoms are shown, worker must immediately be connected to a physician. The physician will determine if a test is needed.**
- d. Pending medical attention and testing, employer is to confine workers with symptoms consistent with COVID-19 infection to individual rooms and have them avoid common areas.
- e. Employer is to contact FQHC directly to inquire about COVID-19 testing (including mobile testing) and primary care services, including telehealth.



9. WORKER WITH SUSPECTED OR CONFIRMED COVID-19

- a. Employer is to ensure that worker(s) who exhibit COVID-19 symptoms are transported separately from other workers.
 - Once worker(s) are suspected or diagnosed with COVID-19, the priority is to prevent the further spread to other workers.
- b. Employer or housing provider is to contact the local public health department in the jurisdiction where the individual's current housing is located with any suspected case.
- c. Worker is to be immediately assigned a separate bathroom or, if not possible, a separate toilet.
- d. Employer is to provide a separate living space, accessible kitchen, and bathroom that are away from others in the setting.
 - **If unable to effectively isolate the workers within the current living setting, alternate housing must be provided.**
- e. Employer is to identify any workers who were in close contact with infected worker and screen and watch for symptoms.
- f. Employer is to ensure quarantined workers have enough food, supplies, and transportation to medical care.



10. COHORTING OF WORKERS

- a. Employers should cohort or group workers by their health status. This will reduce the spread of COVID-19 to healthy workers. Three cohorts or groupings based on COVID-19 test results are:
 - **Group 1:** Workers that are COVID-19 positive, whether they have symptoms or not, can be isolated together.
 - **Group 2:** Workers exposed to COVID-19, but do not show symptoms, tested negative or have not yet been tested, can be quarantined together away from positive cases.
 - **Group 3:** Workers not exposed to COVID-19 and not showing symptoms can remain together with no need of isolation or quarantine.
- b. Additional cohorting can be instituted to limit impacts of potential infections:
 - Employer may create groups of workers that house, transport, and work together, but stay apart from other groups of workers. Employers are encouraged, where feasible, to create these groups and encourage groups to remain separated during non-working hours.
 - Employers are also encouraged to keep migrant farm workers who live on the farm's labor camp, migrant workers who live in off-farm housing, and local workers separate from one another to limit potential spread to and from the farm and community.



11. COMMUNICATION PLAN BETWEEN HEALTHCARE PROVIDER AND CONFIRMED PATIENT

- a. Once a worker is confirmed to have COVID-19 by a healthcare provider, that worker is considered a patient of that healthcare provider.
- b. Employer is to allow frequent communication between healthcare provider and patient until the patient/worker fully recovers or has a negative COVID-19 testing.
- c. If needed, employer is to provide a phone or computer to allow for patient-healthcare provider communication.
- d. Patient/worker or employer is to notify healthcare provider immediately of any change in the patient's clinical status.
- e. Healthcare provider may also conduct remote telephone assessment to assure the living setting is appropriate for patient self-isolation.
- f. Costs related to testing and treatment for COVID-19 will not be charged to employer or worker.**
- g. Any hospitalization or isolation housing provided by the State of New Jersey will not be charged to employers or workers.**
- h. Temporary isolation housing for workers who test positive is available at the Field Medical Station located at Atlantic City Convention Center, 1 Convention Blvd, Atlantic City, NJ 08401. Referral from a healthcare provider is required.**



12. RETURN TO WORK

- a. **Worker who had COVID-19 symptoms in isolation can be released from isolation and return to work only under the following circumstances:**
- Workers with symptoms who test positive for COVID-19 must remain in isolation until after:
 - ▶ at least 3 full days (or 72 hours) have passed without a fever, without the use of fever-reducing medications AND
 - ▶ other symptoms are greatly improved and
 - ▶ at least 10 days have passed since symptoms first started.
 - Workers with laboratory-confirmed COVID-19 who have not had ANY symptoms may discontinue isolation when at least 10 days have passed since the date of their first positive COVID-19 diagnostic test and if they continue to have no symptoms.
 - If circumstances present where farm operations cannot be maintained due to the large number of positive workers, the following could be considered, however only as a last resort.
 - ▶ Allow asymptomatic positive staff to return to work as long as they can wear a face covering while conducting their assigned duties or they can remain socially distanced (6 feet or more) from others while performing their tasks.
 - ✓ A face covering must be worn any time interactions with other people occur.
 - ✓ The only exception to face covering use is when an employee is eating or drinking, or where the employee's use of a mask is contraindicated for health reasons.
 - ▶ If a large number of asymptomatic positive workers are present, consider having this group work together, if possible, and independent from those who are negative or not yet tested.
 - ▶ While not working, all isolation measures should be in place. This means they should not be sharing living quarters with others who are not positive.
 - ▶ Those with symptoms should be excluded from work without exception.
- b. After returning to work, employees must continue to maintain good personal hygiene including washing their hands frequently and for at least 20 seconds each time.



13. EMPLOYMENT-BASED PROTECTIONS FOR WORKERS

- a. **Once a worker is hired and put on payroll, that worker is considered to be an employee. Workers arriving to a farm are considered hired and reporting to work.**
- Eligibility for New Jersey Earned Sick Leave and/or earned sick leave under the Family First Coronavirus Response Act, referenced under c. and d. below, begins with the first moment of employment.
 - ▶ **This applies to all employees regardless of immigration/documentation status. I.e., H-2A employees and undocumented employees are equally covered.**
 - H-2A employers have additional obligations under federal law: H-2A employers must guarantee to offer each covered worker employment for a total number of hours equal to at least 75% of the workdays in the contract period – called the “three-fourths guarantee.” If during the total work contract period the employer does not offer sufficient workdays to the H-2A or corresponding workers to reach the total amount required to meet the three-fourths guarantee, the employer must pay such workers the amount they would have earned had they actually worked for the guaranteed number of workdays. Wages for the guaranteed 75% period will be calculated at no less than the rate stated in the work contract.
- b. **All workers in NJ are protected against COVID-19 Employment-Related Retaliation**
- An employer is prohibited from firing or otherwise punishing an employee who requests time off or takes time off from work, based on a medical professional's determination that the employee has, or is likely to have, COVID-19.
 - The law applies to all types of employees and regardless of documentation/immigration status.
 - Email farms@dol.nj.gov with your questions about this law or if you think you have been retaliated against.
- c. **Most workers will be eligible for Paid Sick Time if they contract COVID-19:**
- Under state law, all full-time, part-time and temporary NJ employees have the right to up to 40 hours of paid sick leave, earned at a rate of one hour for every 30 hours worked.
 - ▶ Employer can give the 40 hours upfront or let it accrue per 30 hours worked.
 - ▶ **Employer is encouraged to give the full 40 hours upfront and ensure that workers have access to the paid sick time if they contract with COVID-19.**
 - In addition, under the federal Families First Coronavirus Response Act, employers with fewer than 500 employees must provide up to 80 hours of job-protected emergency paid sick leave for employees to care for themselves or a loved one for coronavirus illness, symptoms, or quarantine. Full-time, part-time, and temporary workers, including day laborers, are covered under the law.

- ▶ **Employers who have more than 50 employees must provide up to 80 hours of paid sick leave. Farms with fewer than 50 employees can, but are encouraged not to, waive this requirement.**
- d. **Workers may be eligible for Workers Compensation if they get COVID-19 while working:**
 - If a person contracts the virus because he/she worked with someone who had the virus, or contracted the virus for any other work-related reason, that person could be eligible for workers' compensation and would file through their employer.



14. GUIDANCE EDUCATION:

- Employer is to place guidance in a visible place on a farm operation and in employer-provided housing.
- Along with posting the guidance, employer is to provide:
 - ▶ a list of local community-based and county-based COVID-19 testing sites to employees.
 - ▶ a list of local FQHCs that provide primary care services and COVID-19.
 - ▶ printed CDC guidance “If You Are Sick” for sick workers to follow.
- Employer is to discuss guidance completely with any seasonal farm worker employed by the farm operation in a language that employee can adequately comprehend.
- The guidance is available in English, Spanish, Haitian Creole, French, Cambodian, and simplified Chinese.



15. ADDITIONAL RESOURCES:

TESTING AND TREATMENT RESOURCES:

- List of Federally Qualified Health Centers (FQHCs): <https://nj.gov/health/fhs/primarycare/fqhc/index.shtml>
- Local Health Departments: www.nj.gov/health/lh/community/index.shtml
- COVID-19 testing sites: covid19.nj.gov
- Phone calls for general COVID-19 questions: **211** – multi-lingual staff will assist
- Phone calls for clinical COVID-19 questions: **1-800-962-1253** – multi-lingual staff will assist
- CDC guidance “If you are sick”: www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

GENERAL COVID-19 RESOURCES FROM THE STATE OF NEW JERSEY

- State of NJ COVID-19 Information Hub: covid19.nj.gov
- COVID-19 Fact Sheet in English and Spanish: https://nj.gov/health/cd/topics/covid2019_community.shtml
- New Jersey Department of Health Communicable Disease Services, Information for Communities and General Public: https://nj.gov/health/cd/topics/covid2019_community.shtml
- Resources for Undocumented/Uninsured Individuals: https://nj.gov/health/cd/topics/covid2019_community.shtml

PREVENTION RESOURCES

- CDC guidance for congregate living: www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html
- CDC hand hygiene posters and other “How to Protect Yourself and Others” materials: www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html
- Do The 5 Help Stop COVID-19: www.nj.gov/health/cd/documents/topics/NCOV/COVID19_infographic_do_the_5.pdf
- The Benefits of Cloth Masks to Stop the Spread (CDC): www.cdc.gov/coronavirus/2019-ncov/downloads/DIY-cloth-face-covering-instructions.pdf

CLEANING AND DISINFECTING RESOURCES

- CDC Guidance on Cleaning and Disinfecting: www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html and www.cdc.gov/coronavirus/2019-ncov/downloads/disinfecting-your-home.pdf
- EPA-registered disinfectants: www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

WORKER PROTECTION RESOURCES

- COVID-19 Employment-Related Retaliation Prohibition: www.myworkrights.nj.gov or email farms@dol.nj.gov
- Family First Coronavirus Response Act: www.dol.gov/agencies/whd/pandemic
- New Jersey Earned Sick Leave: www.mysickdays.nj.gov
- Federal H-2A requirements for the agricultural industry: www.dol.gov/agencies/whd/fact-sheets/26-H2A
- Migrant and Seasonal Agricultural Worker Protection Act (MSPA): www.dol.gov/sites/dolgov/files/WHD/legacy/files/whdfs49.pdf
- Occupational Safety and Health Act of 1970 (OSHAct): www.dol.gov/sites/dolgov/files/WHD/legacy/files/whdfs51.pdf
- New Jersey State Seasonal Farm Labor Act, Drinking Water & Toilet Facilities Act, Crew Leader Registration Act & Seasonal Farm Workers Regulation: www.nj.gov/labor/forms_pdfs/lasse/mw-126.pdf

RETURNING TO ESSENTIAL WORK

- Recovering from COVID-19 - Returning to essential work: www.nj.gov/health/cd/documents/topics/NCOV/COVID_infographic_recovery.pdf



Created: 5.20.20

From: John Donnadio <jdonnadio@njac.org>
Sent time: 05/07/2020 07:34:10 PM
Subject: Pending Legislation
Attachments: Pending Legislation

Sender: jdonnadio@njac.org
Subject: Pending Legislation
Message-Id:
Recipient: TJones@co.gloucester.nj.us

From: John Donnadio <jdonnadio@njac.org>

Sent time: 05/07/2020 07:34:02 PM

Subject: Pending Legislation

Attachments: A 3971 COVID Bonds Amends 050720.pdf S 2350 Furlough Amends 050720.docx S 2392 Property Tax Grace Period Amends 050720.docx

Good evening. Although we plan to provide a summary of the attached bills some time tomorrow, I thought you should have the opportunity to review the latest drafts as there has been several changes to all. In addition to A-3971, which we sent earlier today, the Senate Budget and Appropriations Committee amended S-2350, which is Senator Sweeney's furlough legislation. Additionally, the Committee was set to amend S-2392, but instead held the measure and will reconsider it on Tuesday. Although NJAC supports A-3971 and generally supports S-2350 as both measures are permissive and limited in their applications, S-2392 remains a concern. The Committee intends to adopt some of NJAC's recommended changes as included in the draft, and the bill is much more restrictive than prior measures that attempted to extend the grace period and the time in which municipalities pay counties, school districts, and fire districts, we're still struggling with the logic behind it. In short, the measure would provide very little, if any, property tax relief for homeowners who would be forced into making quarterly mortgage payments within a two month period and could potentially restrict the cash flow to all levels of government at a time in which all are struggling with unanticipated expenses and substantial revenue shortfalls. This is particularly troublesome for county governments, which as you know, have been at the forefront at providing essential services and protecting the public health, safety, and welfare of residents across the State. Additionally, not only would the bill authorize a town to unilaterally extend the property tax collection grace period, subject to the approval of the Director of DLGS, but it would also authorize a county to waive charging the mandatory interest for late payments due by a town, which will undoubtedly lead to acrimony between the two instead of having clear guidance on the matter. Please let me know if you have any thoughts or suggestions on any of the above bills, but NJAC intends to oppose S-2392 moving forward.

John G. Donnadio, Esq.

Executive Director

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These amendments make this bill identical to
Senate No. XXXX (pending intro)

ASSEMBLY COMMERCE AND ECONOMIC DEVELOPMENT
COMMITTEE

AMENDMENTS

to

ASSEMBLY, No. 3971

(Sponsored by Assemblymen BENSON and COUGHLIN)

REPLACE SECTION 1 TO READ:

1. a. (1) A local unit that requires moneys because of a loss of revenue, unanticipated expenses, or both, which are directly attributable to the COVID-19 pandemic may incur indebtedness, borrow money, and authorize and issue bonds, entitled "coronavirus relief bonds," in accordance with provisions governing refunding bonds under the "Local Bond Law," N.J.S.40A:2-1 et seq., except as otherwise provided in this act.

(2) A local unit shall authorize issuance of coronavirus relief bonds by adoption of a refunding bond ordinance in the manner prescribed for adoption of a bond ordinance, except that:

(a) no down payment shall be required; and

(b) Local Finance Board approval shall not be required, and the provisions of subsection c. of N.J.S.40A:2-53, and of N.J.S.40A:2-55, N.J.S.40A:2-56, and N.J.S.40A:2-57 shall not apply, unless:

(i) the local unit seeks to issue **'[debt] bonds in an amount'** that exceeds **'[20%] 30%'** of the local unit's prior year budget; or

(ii) the local unit seeks to issue bonds with a longer repayment term than otherwise permitted in this act.

(3) Coronavirus relief bonds shall be payable from, and secured by a pledge of, **'[unlimited]'** ad valorem taxes **'levied upon all the taxable property within the local unit without limitation as to rate or amount'**.

(4) In addition to the procedures for adoption of a bond ordinance required under N.J.S.40A:2-17, after introduction and first reading of a **'refunding'** bond ordinance authorizing the issuance of coronavirus relief bonds, and at least one week prior to the date for further consideration thereof, the local unit shall prominently display on the home page of the local unit's website the introduced **'refunding'** bond ordinance together with a summary

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thereof, the notice of the introduction thereof, and of the date, time, and place of further consideration for final passage.

(5) A ¹refunding¹ bond ordinance authorizing issuance of coronavirus relief bonds may provide for the capitalization of the interest thereon.

¹~~[(6)~~ A bond ordinance authorizing issuance of coronavirus relief bonds shall provide that bonds and notes issued under this act may be paid in full prior to full maturity without incurring a penalty for early repayment.¹

b. (1) Prior to authorizing the issuance of coronavirus relief bonds, a local unit shall ¹~~thoroughly investigate, and~~¹ apply for ¹~~[,]~~¹ financial assistance that may be available to the local unit from the federal government, the State, and other sources to address revenue shortfalls and expenditures due to the COVID-19 pandemic ¹if any¹.

(2) The total amount of coronavirus relief bonds that a local unit may issue shall not exceed, after subtracting all amounts of assistance ¹~~anticipated by, available to, or~~¹ provided to, the local unit from the federal government, the State, and other sources to address revenue shortfalls and expenditures due to the COVID-19 pandemic:

(a) the amount of lost or delayed tax and other revenues experienced by the local unit due to the public health hazard created by COVID-19 prior to the end of the 24th month next following the end of the Public Health Emergency and State of Emergency declared in the State of New Jersey due to the public health hazard created by COVID-19, and

(b) the amount of unanticipated expenses that are incurred by the local unit due to the public health hazard created by COVID-19 prior to the end of the 24th month next following the end of the Public Health Emergency and State of Emergency declared in the State of New Jersey due to the public health hazard created by COVID-19.

c. ¹~~The~~ In addition to the amount determined pursuant to paragraph (2) of subsection b. of this section, the¹ total amount of coronavirus relief bonds that a local unit may issue under subsection b. of this section shall not exceed an amount that ¹~~is~~¹ the lesser of:

(1) an amount that ¹~~will~~¹ ¹~~not~~¹ cause the local unit to exceed its net debt limitation under N.J.S.40A:2-6, unless otherwise permitted by subsection d. of N.J.S.40A:2-7 ¹~~;~~¹ or

(2) an amount that will not cause the local unit to exceed the maximum amount of tax anticipation notes the local unit may issue under N.J.S.40A:4-66¹.

d. (1) A local unit may use the proceeds from the sale and issuance of coronavirus relief bonds to address a revenue shortfall experienced by the local unit which is directly attributable to the

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COVID-19 pandemic and which occurred prior to the end of the 24th month next following the end of the Public Health Emergency and State of Emergency declared in the State of New Jersey due to the public health hazard created by COVID-19.

(2) A local unit may use the proceeds from the sale and issuance of coronavirus relief bonds to cover the costs of unanticipated expenses that are directly attributable to the COVID-19 pandemic, and which were incurred by the local unit prior to the end of the 24th month next following the end of the Public Health Emergency and State of Emergency declared in the State of New Jersey due to the public health hazard created by COVID-19.

e. A local unit may, in anticipation of the issuance of coronavirus relief bonds, borrow money and issue negotiable notes from time to time, at public or private sale and may, from time to time, renew these notes in accordance with the provisions of section 11 of P.L.2003, c.15 (C.40A:2-8.1), however, notwithstanding that provision of law, a note issued in anticipation of the issuance of coronavirus relief bonds may be issued for a period not exceeding two years.

f. ¹~~["A coronavirus"]~~ Coronavirus¹ relief ¹~~["bond"]~~ bonds¹, or ¹~~["a note"]~~ notes¹ in anticipation thereof, shall be initially issued ¹~~in one or more series~~¹ prior to the end of the 24th month next following the end of the Public Health Emergency and State of Emergency declared in the State of New Jersey due to the public health hazard created by COVID-19.

g. Final maturity of a coronavirus relief bond shall occur no more than ten years from the initial issuance of the bond ¹~~["or the initial issuance of a note in anticipation thereof"]~~¹, however, a local unit may apply to the Local Finance Board for a longer repayment term. If the local unit demonstrates a need for a longer repayment term to the satisfaction of the Local Finance Board, the board may authorize a longer repayment term. The maturity schedule may include a combination of notes and bonds ¹, and such bonds shall mature in amounts, each¹ as deemed appropriate by the local unit.

h. The Local Finance Board shall render a decision on an application for approval submitted to it pursuant to this act within 45 days of the submission of a complete application to the board, and failure of the board to do so shall result in an approval of the application.

i. The Division of Local Government Services may issue guidelines necessary or appropriate to implement the provisions of this act.

¹j. To the extent any provision governing refunding bonds under the "Local Bond Law," N.J.S.40A:2-1 et seq., conflicts with the provisions of this act, the provisions of this act shall govern.

k. A county improvement authority may exercise its purpose and power under sections 11 and 12 of P.L.1960, c.183 (C.40:37A-54 and C.40:37A-55) to pool loans for local governmental units within

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the county or any beneficiary county that are refunding bonds for the pooling of coronavirus relief bonds.¹

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SENATE BUDGET AND APPROPRIATIONS COMMITTEE

AMENDMENTS

to

SENATE, No. 2350

(Sponsored by Senators SWEENEY and POU)

REPLACE TITLE TO READ:

AN ACT concerning certain benefits ¹[and leave]¹ provided to workers, and amending and supplementing various parts of the statutory law.

REPLACE SECTION 2 TO READ:

2. Section 9 of P.L.1996, c.138 (C.18A:7F-9) is amended to read as follows:

9. a. In order to receive any State aid pursuant to P.L.2007, c.260 (C.18A:7F-43 et al.), a school district, charter school, renaissance school project, county vocational school district, or county special services school district shall comply with the rules and standards for the equalization of opportunity which have been or may hereafter be prescribed by law or formulated by the commissioner pursuant to law, including those implementing P.L.1996, c.138 (C.18A:7F-1 et al.) and P.L.2007, c.260 (C.18A:7F-43 et al.) or related to the core curriculum content standards required by P.L.2007, c.260 (C.18A:7F-43 et al.), and shall further comply with any directive issued by the commissioner pursuant to section 6 of P.L.1996, c.138 (C.18A:7F-6). The commissioner is hereby authorized to withhold all or part of a district's State aid for failure to comply with any rule, standard or directive. No State aid shall be paid to any district which has not provided public school facilities for at least 180 days during the preceding school year, but the commissioner, for good cause shown, may remit the penalty.

b. Notwithstanding the provisions of subsection a. of this section to the contrary, in the event that a school district is required to close the schools of the district for more than three consecutive school days due to a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer to institute a public health-related closure, the commissioner shall allow the district to apply to the 180-day requirement established pursuant to subsection a. of this section, one or more days of virtual or remote instruction provided to students on the day or days the schools of the district were

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closed if the program of virtual or remote instruction meets such criteria as may be established by the commissioner. A district that wants to use a program of virtual or remote instruction to meet the 180-day requirement in accordance with this subsection shall, with board of education approval, submit its proposed program of virtual or remote instruction to the commissioner within 30 days of the effective date of P.L.2020, c.27 and annually thereafter, provided however that if the school district is unable to complete and submit its proposed program within the 30-day period and the district is required to close its schools for a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer to institute a public health-related closure, the commissioner may retroactively approve the program.

A day of virtual or remote instruction, if instituted under a program approved by the commissioner, shall be considered the equivalent of a full day of school attendance for the purposes of meeting State and local graduation requirements, the awarding of course credit, and such other matters as determined by the commissioner.

If a program of virtual or remote instruction is implemented for the general education students the same educational opportunities shall be provided to students with disabilities. Special education and related services, including speech language services, counseling services, physical therapy, occupational therapy, and behavioral services, may be delivered to students with disabilities through the use of electronic communication or a virtual or online platform and as required by the student's Individualized Education Program (IEP), to the greatest extent practicable.

c. In the event that the State or local health department determines that it is advisable to close or mandates closure of the schools of a school district due to a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer to institute a public health-related closure, the superintendent of schools shall have the authority to implement the school district's program of virtual or remote instruction. The superintendent shall consult with the board of education prior to such decision if practicable. The superintendent shall ensure that students, parents, staff, and the board of education or boards of education are informed promptly of the superintendent's decision.

d. The commissioner shall define virtual and remote instruction and establish guidance for its use. The guidance shall provide school districts with information on:

(1) providing instruction to students who may not have access to a computer or to sufficient broadband, or to any technology required for virtual or remote instruction;

(2) the required length of a virtual or remote instruction day;

(3) the impact of virtual or remote instruction on the school lunch and school breakfast programs;

(4) the impact of virtual or remote instruction on the schedule for administering State assessments; and

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(5) such other topics as the commissioner deems necessary.

e. (1) Nothing in subsection b., c., or d. of this section shall be construed to limit, supersede or preempt the rights, privileges, compensation, remedies, and procedures afforded to public school employees or a collective bargaining unit under federal or State law or any provision of a collective bargaining agreement entered into by the school district. In the event of the closure of the schools of a school district due to a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer to institute a public health-related closure for a period longer than three consecutive school days, public school employees covered by a collective negotiations agreement shall be entitled to compensation, benefits, and emoluments as provided in the collective negotiations agreement as if the school facilities remained open for any purpose and for any time lost as a result of school closures or use of virtual or remote instruction, except that additional compensation, benefits, and emoluments may be negotiated for additional work performed.

(2) In the event of the closure of the schools of a school district due to a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer to institute a public health-related closure for a period longer than three consecutive school days, public school employees who are not covered by a collective negotiations agreement shall be entitled to any benefits, compensation, and emoluments to which they otherwise would be entitled as if they had performed the work for such benefits, compensation, and emoluments as if the school facilities remained open for any purpose and for any time lost as a result of school closures or use of virtual or remote instruction.

(3) If the schools of a school district are subject to a health-related closure for a period longer than three consecutive school days, which is the result of a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer, then the school district shall continue to make payments of benefits, compensation, and emoluments pursuant to the terms of a contract with a contracted service provider in effect on the date of the closure as if the services for such benefits, compensation, and emoluments had been provided, and as if the school facilities had remained open. Payments received by a contracted service provider pursuant to this paragraph shall be used to meet the payroll and fixed costs obligations of the contracted service provider¹, and employees of the contracted service provider shall be paid as if the school facilities had remained open and in full operation¹. ¹Upon request of the school district, the contracted service provider shall certify, and provide any supporting documentation to a school district as may be necessary to verify, that payments received have been used solely to meet the payroll and fixed costs of the contracted service provider. Any portion of those payments not used to meet the payroll and fixed costs shall be returned to the school district.¹ A school district shall make all reasonable efforts to

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renegotiate a contract in good faith subject to this paragraph and may direct contracted service providers, who are a party to a contract and receive payments from the school district under this paragraph, to provide services on behalf of the school district which may reasonably be provided and are within the general expertise or service provision of the original contract. Negotiations shall not include indirect costs such as fuel or tolls. As a condition of negotiations, a contracted service provider shall reveal to the school district whether the entity has insurance coverage for business interruption covering work stoppages. A school district shall not be liable for the payment of benefits, compensation, and emoluments pursuant to the terms of a contract with a contracted service provider under this paragraph for services which otherwise would not have been provided had the school facilities remained open. Nothing in this paragraph shall be construed to require a school district to make payments to a party in material breach of a contract with a contracted service provider if the breach was not due to a closure resulting from a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer.

(4) If the schools of a school district are subject to a health-related closure for a period longer than three consecutive school days, which is the result of a declared state of emergency, declared public health emergency, or a directive by the appropriate health agency or officer, the school district shall be obligated to make payments for benefits, compensation, and emoluments and all payments required pursuant to P.L.1968, c.243 (C.18A:6-51 et seq.), to an educational services commission, county special services school district, and a jointure commission, and under any shared services agreement and cooperative contract entered into with any other public entity. An educational services commission, county special services school district, and jointure commission shall continue to make payments of benefits, compensation, and emoluments pursuant to the terms of a contract with a contracted service provider or a shared services agreement in effect on the date of the closure as if the services for such benefits, compensation, and emoluments had been provided, and as if the school facilities had remained open. Payments received by a contracted service provider or public entity pursuant to this paragraph shall be used to meet the payroll and fixed costs obligations of the contracted service provider or public entity¹, and employees of the contracted service provider or public entity shall be paid as if the school facilities had remained open and in full operation¹. ¹Upon request of the school district, the educational services commission, county special services school district, and a jointure commission shall certify, and provide any supporting documentation to a school district as may be necessary to verify, that payments received have been used solely to meet the payroll and fixed costs of the contracted service provider or public entity. Any portion of those payments not used to meet the payroll and fixed costs shall be returned to the school district.¹ An educational services commission,

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county special services school district, jointure commission or any lead school district under a shared services agreement or cooperative contract, shall make all reasonable efforts to renegotiate a contract in good faith subject to this paragraph and may direct contracted service providers or public entities, who are a party to a contract and receive payments under this paragraph, to provide services which may reasonably be provided and are within the general expertise or service provision of the original contract. Negotiations shall not include indirect costs such as fuel or tolls. As a condition of negotiations, a contracted service provider or public entity shall reveal whether the entity has insurance coverage for business interruption covering work stoppages.

(5) The provisions ¹of paragraphs (1) through (4)¹ of this subsection e. shall not apply to any employee whose weekly hours of work are reduced, and to whom unemployment benefits are provided, pursuant to a shared work program approved pursuant to the provisions of P.L.2011, c.154 (C.43:21-20.3 et seq.). ¹A contracted service provider, educational services commission, county special services school district, or jointure commission shall notify any school district with which it has entered into a contract to provide services of its intent to reduce the hours of work of its employees pursuant to a shared work program approved pursuant to the provisions of P.L.2011, c.154 (C.43:21-20.3 et seq.). Notwithstanding the provisions of paragraph (3) of this subsection e., if a contracted service provider reduces the amount that it pays to its employees providing services to a school district, and that reduction is the result of a reduction of workhours of the those employees made pursuant to a shared work program approved pursuant to the provisions of P.L.2011, c.154 (C.43:21-20.3 et seq.), then the amount paid by the public school district to the contracted service provider shall be reduced by the same amount. Notwithstanding the provisions of paragraph (4) of this subsection e., if an educational services commission, county special services school district, or jointure commission reduces the amount that it pays to its employees providing services to a school district, and that reduction is the result of a reduction of workhours of the those employees made pursuant to a shared work program approved pursuant to the provisions of P.L.2011, c.154 (C.43:21-20.3 et seq.), then the amount paid by the public school district to the educational services commission, county special services school district, or jointure commission shall be reduced by the same amount.¹

f. For purposes of subsections b., c., d., and e. of this section, "school district" shall include a charter school and a renaissance school project.

(cf: P.L.2020, c.27, s.1)

OMIT SECTION 3 IN ITS ENTIRETY

REPLACE SECTION 4 TO READ:

¹[4.] 3.¹ R.S.43:21-3 is amended to read as follows:
43:21-3. Benefits.

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(a) Payment of benefits.

All benefits shall be promptly paid from the fund in accordance with such regulations as may be prescribed hereunder.

(b) Weekly benefits for unemployment.

(1) With respect to an individual's benefit year commencing on or after July 1, 1961 and before June 1, 2020¹, and after the time that federal financing of unemployment benefits in this State, pursuant to the "Coronavirus Aid, Relief, and Economic Security Act," Pub. Law 116-136, ceases¹, such individual, if eligible and unemployed (as defined in subsection (m) of R.S.43:21-19), shall be paid an amount (except as to final payment) equal to his weekly benefit rate less any remuneration, other than remuneration from self-employment paid to an individual who is receiving a self-employment assistance allowance, paid or payable to him for such week in excess of 20% of his weekly benefit rate (fractional part of a dollar omitted) or \$5.00, whichever is the greater; provided that such amount shall be computed to the next lower multiple of \$1.00 if not already a multiple thereof.

(2) With respect to an individual's benefit year commencing on or after June 1, 2020 ¹until the time that federal financing of unemployment benefits in this State, pursuant to the "Coronavirus Aid, Relief, and Economic Security Act," Pub. Law 116-136 ceases¹, such individual, if eligible and unemployed (as defined in subsection (m) of R.S.43:21-19), shall be paid an amount (except as to final payment) equal to his weekly benefit rate less any remuneration, other than remuneration from self-employment paid to an individual who is receiving a self-employment assistance allowance, paid or payable to him for such week in excess of 40% of his weekly benefit rate (fractional part of a dollar omitted) or \$5.00, whichever is the greater; provided that such amount shall be computed to the next lower multiple of \$1.00 if not already a multiple thereof.

(c) Weekly benefit rate.

(1) With respect to an individual whose benefit year commences after September 30, 1984, his weekly benefit rate under each determination shall be 60% of his average weekly wage, subject to a maximum of 56 $\frac{2}{3}$ % of the Statewide average weekly remuneration paid to workers by employers subject to this chapter (R.S.43:21-1 et seq.), as determined and promulgated by the Commissioner of Labor and Workforce Development; provided, however, that such individual's weekly benefit rate shall be computed to the next lower multiple of \$1.00 if not already a multiple thereof.

(2) Dependency benefits.

(A) With respect to an individual whose benefit year commences after September 30, 1984, the individual's weekly benefit rate as determined in paragraph (1) of this subsection (c) will be increased by 7% for the first dependent and 4% each for the next two dependents (up to a maximum of three dependents), computed to the next lower multiple of \$1.00 if not already a multiple thereof, except that the maximum weekly benefit rate payable for an individual claiming

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dependency benefits shall not exceed the maximum amount determined under paragraph (1) of this subsection (c).

(B) For the purposes of this paragraph (2), a dependent is defined as an individual's unemployed spouse or an unemployed unmarried child (including a stepchild or a legally adopted child) under the age of 19 or an unemployed unmarried child, who is attending an educational institution as defined in subsection (y) of R.S.43:21-19 on a full-time basis and is under the age of 22. If an individual's spouse is employed during the week the individual files an initial claim for benefits, this paragraph (2) shall not apply. If both spouses establish a claim for benefits in accordance with the provisions of this chapter (R.S.43:21-1 et seq.), only one shall be entitled to dependency benefits as provided in this paragraph (2).

(C) Any determination establishing dependency benefits under this paragraph (2) shall remain fixed for the duration of the individual's benefit year and shall not be increased or decreased unless it is determined by the division that the individual wrongfully claimed dependency benefits as a result of false or fraudulent representation.

(D) Notwithstanding the provisions of any other law, the division shall use every available administrative means to insure that dependency benefits are paid only to individuals who meet the requirements of this paragraph (2). These administrative actions may include, but shall not be limited to, the following:

(i) All married individuals claiming dependents under this paragraph (2) shall be required to provide the social security number of the individual's spouse. If the individual indicates that the spouse is unemployed, the division shall match the social security number of the spouse against available wage records to determine whether earnings were reported on the last quarterly earnings report filed by employers under R.S.43:21-14. If earnings were reported, the division shall contact in writing the last employer to determine whether the spouse is currently employed.

(ii) Where a child is claimed as a dependent by an individual under this paragraph (2), the individual shall be required to provide to the division the most recent federal income tax return filed by the individual to assist the division in verifying the claim.

(3) For the purposes of this subsection (c), the "Statewide average weekly remuneration paid to workers by employers" shall be computed and determined by the Commissioner of Labor and Workforce Development on or before September 1 of each year on the basis of one-fifty-second of the total remuneration reported for the preceding calendar year by employers subject to this chapter, divided by the average of the number of workers reported by such employers, and shall be effective as to benefit determinations in the calendar year following such computation and determination.

(d) Maximum total benefits.

(1) (A) (Deleted by amendment, P.L.2003, c.107).

(B) (i) With respect to an individual for whom benefits shall be payable for benefit years commencing on or after July 1, 1986, and

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before July 1, 2003 as provided in this section, the individual shall be entitled to receive a total amount of benefits equal to three-quarters of the individual's base weeks with all employers in the base year multiplied by the individual's weekly benefit rate; but the amount of benefits thus resulting under that determination shall be adjusted to the next lower multiple of \$1.00 if not already a multiple thereof. With respect to an individual for whom benefits shall be payable for benefit years commencing on or after July 1, 2003 as provided in this section, the individual shall be entitled to receive a total amount of benefits equal to the number of the individual's base weeks with all employers in the base year multiplied by the individual's weekly benefit rate; but the amount of benefits thus resulting under that determination shall be adjusted to the next lower multiple of \$1.00 if not already a multiple thereof.

(ii) Except as provided pursuant to paragraph (1) of subsection (c) of R.S.43:21-7, benefits paid to an individual for benefit years commencing on or after July 1, 1986 shall be charged against the accounts of the individual's base year employers in the following manner:

Each week of benefits paid to an eligible individual shall be charged against each base year employer's account in the same proportion that the wages paid by each employer to the individual during the base year bear to the wages paid by all employers to that individual during the base year.

(iii) (Deleted by amendment, P.L.1997, c.255.)

(2) No such individual shall be entitled to receive benefits under this chapter (R.S.43:21-1 et seq.) in excess of 26 times his weekly benefit rate in any benefit year under either of subsections (c) and (f) of R.S. 43:21-4. In the event that any individual qualifies for benefits under both of said subsections during any benefit year, the maximum total amount of benefits payable under said subsections combined to such individual during the benefit year shall be one and one-half times the maximum amount of benefits payable under one of said subsections.

(3) (Deleted by amendment, P.L.1984, c.24.)
(cf: P.L.2004, c.45, s.1)

REPLACE SECTION 5 TO READ:

¹[5.] 4.¹ R.S.43:21-4 is amended to read as follows:

43:21-4. Benefit eligibility conditions. An unemployed individual shall be eligible to receive benefits with respect to any week eligible only if:

(a) The individual has filed a claim at an unemployment insurance claims office and thereafter continues to report at an employment service office or unemployment insurance claims office, as directed by the division in accordance with such regulations as the division may prescribe, except that the division may, by regulation, waive or alter either or both of the requirements of this subsection as to individuals attached to regular jobs, and as to such other types of cases or situations

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with respect to which the division finds that compliance with such requirements would be oppressive, or would be inconsistent with the purpose of this act; provided that no such regulation shall conflict with subsection (a) of R.S.43:21-3.

(b) The individual has made a claim for benefits in accordance with the provisions of subsection (a) of R.S.43:21-6.

(c) (1) The individual is able to work, and is available for work, and has demonstrated to be actively seeking work, except as hereinafter provided in this subsection or in subsection (f) of this section.

(2) The director may modify the requirement of actively seeking work if such modification of this requirement is warranted by economic conditions.

(3) No individual, who is otherwise eligible, shall be deemed ineligible, or unavailable for work, because the individual is on vacation, without pay, during said week, if said vacation is not the result of the individual's own action as distinguished from any collective action of a collective bargaining agent or other action beyond the individual's control.

(4) (A) Subject to such limitations and conditions as the division may prescribe, an individual, who is otherwise eligible, shall not be deemed unavailable for work or ineligible because the individual is attending a training program approved for the individual by the division to enhance the individual's employment opportunities or because the individual failed or refused to accept work while attending such program.

(B) For the purpose of this paragraph (4), any training program shall be regarded as approved by the division for the individual if the program and the individual meet the following requirements:

(i) The training is for a labor demand occupation and is likely to enhance the individual's marketable skills and earning power, except that the training may be for an occupation other than a labor demand occupation if the individual is receiving short-time benefits pursuant to the provisions of P.L.2011, c.154 (C.43:21-20.3 et al.) and the training is necessary to prevent a likely loss of jobs;

(ii) The training is provided by a competent and reliable private or public entity approved by the Commissioner of Labor and Workforce Development pursuant to the provisions of section 8 of the "1992 New Jersey Employment and Workforce Development Act," P.L.1992, c.43 (C.34:15D-8);

(iii) The individual can reasonably be expected to complete the program, either during or after the period of benefits;

(iv) The training does not include on the job training or other training under which the individual is paid by an employer for work performed by the individual during the time that the individual receives benefits; and

(v) The individual enrolls in vocational training, remedial education or a combination of both on a full-time basis, except that the training or education may be on a part-time basis if the individual is receiving

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short-time benefits pursuant to the provisions of P.L.2011, c.154 (C.43:21-20.3 et al.).

(C) If the requirements of subparagraph (B) of this paragraph (4) are met, the division shall not withhold approval of the training program for the individual for any of the following reasons:

(i) The training includes remedial basic skills education necessary for the individual to successfully complete the vocational component of the training;

(ii) The training is provided in connection with a program under which the individual may obtain a college degree, including a post-graduate degree;

(iii) The length of the training period under the program; or

(iv) The lack of a prior guarantee of employment upon completion of the training.

(D) For the purpose of this paragraph (4), "labor demand occupation" means an occupation for which there is or is likely to be an excess of demand over supply for adequately trained workers, including, but not limited to, an occupation designated as a labor demand occupation by the Center for Occupational Employment Information pursuant to the provisions of subsection d. of section 27 of P.L.2005, c.354 (C.34:1A-86).

(5) An unemployed individual, who is otherwise eligible, shall not be deemed unavailable for work or ineligible solely by reason of the individual's attendance before a court in response to a summons for service on a jury.

(6) An unemployed individual, who is otherwise eligible, shall not be deemed unavailable for work or ineligible solely by reason of the individual's attendance at the funeral of an immediate family member, provided that the duration of the attendance does not extend beyond a two-day period.

For purposes of this paragraph, "immediate family member" includes any of the following individuals: father, mother, mother-in-law, father-in-law, grandmother, grandfather, grandchild, spouse, child, child placed by the Division of Youth and Family Services in the Department of Children and Families, sister or brother of the unemployed individual and any relatives of the unemployed individual residing in the unemployed individual's household.

(7) No individual, who is otherwise eligible, shall be deemed ineligible or unavailable for work with respect to any week because, during that week, the individual fails or refuses to accept work while the individual is participating on a full-time basis in self-employment assistance activities authorized by the division, whether or not the individual is receiving a self-employment allowance during that week.

(8) Any individual who is determined to be likely to exhaust regular benefits and need reemployment services based on information obtained by the worker profiling system shall not be eligible to receive benefits if the individual fails to participate in available reemployment services to which the individual is referred by the division or in similar services, unless the division determines that:

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(A) The individual has completed the reemployment services; or

(B) There is justifiable cause for the failure to participate, which shall include participation in employment and training, self-employment assistance activities or other activities authorized by the division to assist reemployment or enhance the marketable skills and earning power of the individual and which shall include any other circumstance indicated pursuant to this section in which an individual is not required to be available for and actively seeking work to receive benefits.

(9) An unemployed individual, who is otherwise eligible, shall not be deemed unavailable for work or ineligible solely by reason of the individual's work as a board worker for a county board of elections on an election day.

(10) An individual who is employed by a shared work employer and is otherwise eligible for benefits shall not be deemed ineligible for short-time benefits because the individual is unavailable for work with employers other than the shared work employer, so long as:

(A) The individual is able to work and is available to work the individual's normal full-time hours for the shared work employer; or

(B) The individual is attending a training program which is in compliance with the provisions of paragraph (4) of subsection (c) of this section and the agreements and certifications required pursuant to the provisions of section 2 of P.L.2011, c.154 (C.43:21-20.4).

(d) With respect to any benefit year commencing before January 1, 2002, the individual has been totally or partially unemployed for a waiting period of one week in the benefit year which includes that week. When benefits become payable with respect to the third consecutive week next following the waiting period, the individual shall be eligible to receive benefits as appropriate with respect to the waiting period. No week shall be counted as a week of unemployment for the purposes of this subsection:

(1) If benefits have been paid, or are payable with respect thereto; provided that the requirements of this paragraph shall be waived with respect to any benefits paid or payable for a waiting period as provided in this subsection;

(2) If it has constituted a waiting period week under the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.);

(3) Unless the individual fulfills the requirements of subsections (a) and (c) of this section;

(4) If with respect thereto, claimant was disqualified for benefits in accordance with the provisions of subsection (d) of R.S.43:21-5.

The waiting period provided by this subsection shall not apply to benefit years commencing on or after January 1, 2002. An individual whose total benefit amount was reduced by the application of the waiting period to a claim which occurred on or after January 1, 2002 and before the effective date of P.L.2002, c.13, shall be permitted to file a claim for the additional benefits attributable to the waiting period in the form and manner prescribed by the division, but not later than the

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180th day following the effective date of P.L.2002, c.13 unless the division determines that there is good cause for a later filing.

(e) (1) (Deleted by amendment, P.L.2001, c.17).

(2) (Deleted by amendment, P.L.2008, c.17).

(3) (Deleted by amendment, P.L.2008, c.17).

(4) With respect to benefit years commencing on or after January 7, 2001 and before June 1 2020, except as otherwise provided in paragraph (5) of this subsection, the individual has, during his base year as defined in subsection (c) of R.S.43:21-19:

(A) Established at least 20 base weeks as defined in paragraphs (2) and (3) of subsection (t) of R.S.43:21-19; or

(B) If the individual has not met the requirements of subparagraph (A) of this paragraph (4), earned remuneration not less than an amount 1,000 times the minimum wage in effect pursuant to section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year preceding the calendar year in which the benefit year commences, which amount shall be adjusted to the next higher multiple of \$100 if not already a multiple thereof.

(5) With respect to benefit years commencing on or after January 7, 2001 and before June 1, 2020¹, and after the time that federal financing of unemployment benefits in this State, pursuant to the "Coronavirus Aid, Relief, and Economic Security Act," Pub. Law 116-136, ceases¹, notwithstanding the provisions of paragraph (4) of this subsection, an unemployed individual claiming benefits on the basis of service performed in the production and harvesting of agricultural crops shall, subject to the limitations of subsection (i) of R.S.43:21-19, be eligible to receive benefits if during his base year, as defined in subsection (c) of R.S.43:21-19, the individual:

(A) Has established at least 20 base weeks as defined in paragraphs (2) and (3) of subsection (t) of R.S.43:21-19; or

(B) Has earned remuneration not less than an amount 1,000 times the minimum wage in effect pursuant to section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year preceding the calendar year in which the benefit year commences, which amount shall be adjusted to the next higher multiple of \$100 if not already a multiple thereof; or

(C) Has performed at least 770 hours of service in the production and harvesting of agricultural crops.

(6) With respect to benefit years commencing on or after June 1, 2020¹, until the time that federal financing of unemployment benefits in this State, pursuant to the "Coronavirus Aid, Relief, and Economic Security Act," Pub. Law 116-136 ceases¹, the individual, during his base year as defined in subsection (c) of R.S.43:21-19:

(A) Has established at least 20 base weeks as defined in ¹[paragraphs (2) and (3)] paragraph (4)¹ of subsection (t) of R.S.43:21-19; or

(B) Has, if the individual has not met the requirements of subparagraph (A) of this paragraph (6), earned remuneration not less than an amount 500 times the minimum wage in effect pursuant to

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section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year preceding the calendar year in which the benefit year commences, which amount shall be adjusted to the next higher multiple of \$100 if not already a multiple thereof; or

(C) Has, if the individual has not met the requirements of subparagraph (A) or subparagraph (B) of this paragraph (6), performed at least 770 hours of service in the production and harvesting of agricultural crops, subject to the limitations of subparagraph (I) of paragraph (1) of subsection (i) of R.S.43:21-19.

(7) The individual applying for benefits in any successive benefit year has earned at least six times his previous weekly benefit amount and has had four weeks of employment since the beginning of the immediately preceding benefit year. This provision shall be in addition to the earnings requirements specified in paragraph [(4) or] (5) or (6) of this subsection, as applicable.

(f) (1) The individual has suffered any accident or sickness not compensable under the workers' compensation law, R.S.34:15-1 et seq. and resulting in the individual's total disability to perform any work for remuneration, and would be eligible to receive benefits under this chapter (R.S.43:21-1 et seq.) (without regard to the maximum amount of benefits payable during any benefit year) except for the inability to work and has furnished notice and proof of claim to the division, in accordance with its rules and regulations, and payment is not precluded by the provisions of R.S.43:21-3(d); provided, however, that benefits paid under this subsection (f) shall be computed on the basis of only those base year wages earned by the claimant as a "covered individual," as defined in subsection (b) of section 3 of P.L.1948, c.110 (C.43:21-27); provided further that no benefits shall be payable under this subsection to any individual:

(A) For any period during which such individual is not under the care of a legally licensed physician, dentist, optometrist, podiatrist, practicing psychologist, advanced practice nurse, or chiropractor, who, when requested by the division, shall certify within the scope of the practitioner's practice, the disability of the individual, the probable duration thereof, and, where applicable, the medical facts within the practitioner's knowledge;

(B) (Deleted by amendment, P.L.1980, c.90.)

(C) For any period of disability due to willfully or intentionally self-inflicted injury, or to injuries sustained in the perpetration by the individual of a crime of the first, second or third degree;

(D) For any week with respect to which or a part of which the individual has received or is seeking benefits under any unemployment compensation or disability benefits law of any other state or of the United States; provided that if the appropriate agency of such other state or the United States finally determines that the individual is not entitled to such benefits, this disqualification shall not apply;

(E) For any week with respect to which or part of which the individual has received or is seeking disability benefits under the

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"Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.);

(F) For any period of disability commencing while such individual is a "covered individual," as defined in subsection (b) of section 3 of the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-27).

(2) The individual is taking family temporary disability leave to provide care for a family member with a serious health condition or to be with a child during the first 12 months after the child's birth or placement of the child for adoption or as a foster child with the individual, and the individual would be eligible to receive benefits under R.S.43:21-1 et seq. (without regard to the maximum amount of benefits payable during any benefit year) except for the individual's unavailability for work while taking the family temporary disability leave, and the individual has furnished notice and proof of claim to the division, in accordance with its rules and regulations, and payment is not precluded by the provisions of R.S.43:21-3(d) provided, however, that benefits paid under this subsection (f) shall be computed on the basis of only those base year wages earned by the claimant as a "covered individual," as defined in subsection (b) of section 3 of P.L.1948, c.110 (C.43:21-27); provided further that no benefits shall be payable under this subsection to any individual:

(A) For any week with respect to which or a part of which the individual has received or is seeking benefits under any unemployment compensation or disability benefits law of any other state or of the United States; provided that if the appropriate agency of such other state or the United States finally determines that the individual is not entitled to such benefits, this disqualification shall not apply;

(B) For any week with respect to which or part of which the individual has received or is seeking disability benefits for a disability of the individual under the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.);

(C) For any period of family temporary disability leave commencing while the individual is a "covered individual," as defined in subsection (b) of section 3 of the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-27); or

(D) For any period of family temporary disability leave for a serious health condition of a family member of the claimant during which the family member is not receiving inpatient care in a hospital, hospice, or residential medical care facility and is not subject to continuing medical treatment or continuing supervision by a health care provider, who, when requested by the division, shall certify within the scope of the provider's practice, the serious health condition of the family member, the probable duration thereof, and, where applicable, the medical facts within the provider's knowledge.

(3) Benefit payments under this subsection (f) shall be charged to and paid from the State disability benefits fund established by the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.), and shall not be charged to any employer account in

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computing any employer's experience rate for contributions payable under this chapter.

(g) Benefits based on service in employment defined in subparagraphs (B) and (C) of R.S.43:21-19 (i)(1) shall be payable in the same amount and on the terms and subject to the same conditions as benefits payable on the basis of other service subject to the "unemployment compensation law"; except that, notwithstanding any other provisions of the "unemployment compensation law":

(1) With respect to service performed after December 31, 1977, in an instructional, research, or principal administrative capacity for an educational institution, benefits shall not be paid based on such services for any week of unemployment commencing during the period between two successive academic years, or during a similar period between two regular terms, whether or not successive, or during a period of paid sabbatical leave provided for in the individual's contract, to any individual if such individual performs such services in the first of such academic years (or terms) and if there is a contract or a reasonable assurance that such individual will perform services in any such capacity for any educational institution in the second of such academic years or terms;

(2) With respect to weeks of unemployment beginning after September 3, 1982, on the basis of service performed in any other capacity for an educational institution, benefits shall not be paid on the basis of such services to any individual for any week which commences during a period between two successive academic years or terms if such individual performs such services in the first of such academic years or terms and there is a reasonable assurance that such individual will perform such services in the second of such academic years or terms, except that if benefits are denied to any individual under this paragraph (2) and the individual was not offered an opportunity to perform these services for the educational institution for the second of any academic years or terms, the individual shall be entitled to a retroactive payment of benefits for each week for which the individual filed a timely claim for benefits and for which benefits were denied solely by reason of this clause;

(3) With respect to those services described in paragraphs (1) and (2) above, benefits shall not be paid on the basis of such services to any individual for any week which commences during an established and customary vacation period or holiday recess if such individual performs such services in the period immediately before such vacation period or holiday recess, and there is a reasonable assurance that such individual will perform such services in the period immediately following such period or holiday recess;

(4) With respect to any services described in paragraphs (1) and (2) above, benefits shall not be paid as specified in paragraphs (1), (2), and (3) above to any individual who performed those services in an educational institution while in the employ of an educational service agency, and for this purpose the term "educational service agency" means a governmental agency or governmental entity which is

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established and operated exclusively for the purpose of providing those services to one or more educational institutions.

(5) With respect to services performed after the effective date of P.L. , c. (pending before the legislature as this bill), as used in this subsection:

“Established and customary vacation period or holiday recess” includes those breaks scheduled during fall, winter, and spring recesses when those vacation periods occur within a term or semester. “Established and customary vacation period or holiday recess” does not include the summer term or semester, unless, based on objective criteria including enrollment and staffing, the summer is not in fact a part of the academic year for a particular institution.

“Reasonable assurance” means a written, verbal, or implied agreement that the employee will perform services in the same capacity during the ensuing academic year or term as in the first academic year or term. A person shall not be deemed to be performing services “in the same capacity” unless those services are rendered under the same terms or conditions of employment in the ensuing year as in the first academic year or term.

An individual who is tenured or holds tenure track status is considered to have reasonable assurance, unless advised otherwise. For the purposes of this subsection, tenure track status means a probationary faculty employee having an opportunity to be reviewed for tenure.

A person is presumed not to have reasonable assurance under an offer that is conditioned on enrollment, funding, program changes, or other circumstances under the control of the employer. It is the employer's burden to provide sufficient documentation to overcome this presumption. Reasonable assurance shall be determined on a case-by-case basis considering the totality of circumstances rather than on the existence of any one factor. For an individual to be regarded as having reasonable assurance of employment, the totality of circumstances must show that it is highly probable that there is a job available for the employee in the following academic year or term. If any contingencies in the employment offer are within the employer's control, the claimant shall not be regarded as having a reasonable assurance of employment. Contingencies within the employer's control include, but are not limited to, enrollment, funding, including appropriations and the allocation of funding, program changes, final course offering, and facility availability.

(h) Benefits shall not be paid to any individual on the basis of any services, substantially all of which consist of participating in sports or athletic events or training or preparing to so participate, for any week which commences during the period between two successive sports seasons (or similar periods) if such individual performed such services in the first of such seasons (or similar periods) and there is a reasonable assurance that such individual will perform such services in the later of such seasons (or similar periods).

(i) (1) Benefits shall not be paid on the basis of services performed by an alien unless such alien is an individual who was lawfully admitted

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for permanent residence at the time the services were performed and was lawfully present for the purpose of performing the services or otherwise was permanently residing in the United States under color of law at the time the services were performed (including an alien who is lawfully present in the United States as a result of the application of the provisions of section 212(d)(5) (8 U.S.C. s.1182 (d)(5)) of the Immigration and Nationality Act (8 U.S.C. s.1101 et seq.)); provided that any modifications of the provisions of section 3304(a)(14) of the Federal Unemployment Tax Act (26 U.S.C. s. 3304 (a) (14)) [as provided by Pub.L.94-566], which specify other conditions or other effective dates than stated herein for the denial of benefits based on services performed by aliens and which modifications are required to be implemented under State law as a condition for full tax credit against the tax imposed by the Federal Unemployment Tax Act, shall be deemed applicable under the provisions of this section.

(2) Any data or information required of individuals applying for benefits to determine whether benefits are not payable to them because of their alien status shall be uniformly required from all applicants for benefits.

(3) In the case of an individual whose application for benefits would otherwise be approved, no determination that benefits to such individual are not payable because of alien status shall be made except upon a preponderance of the evidence.

(j) Notwithstanding any other provision of this chapter, the director may, to the extent that it may be deemed efficient and economical, provide for consolidated administration by one or more representatives or deputies of claims made pursuant to subsection (f) of this section with those made pursuant to Article III (State plan) of the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et al.). (cf: P.L.2019, c.37, s.5)

RENUMBER SECTION 6 AS SECTION 5

REPLACE SECTION 7 TO READ:

¹[7.] 6.¹ R.S.43:21-19 is amended to read as follows:

43:21-19. Definitions. As used in this chapter (R.S.43:21-1 et seq.), unless the context clearly requires otherwise:

(a) (1) "Annual payroll" means the total amount of wages paid during a calendar year (regardless of when earned) by an employer for employment.

(2) "Average annual payroll" means the average of the annual payrolls of any employer for the last three or five preceding calendar years, whichever average is higher, except that any year or years throughout which an employer has had no "annual payroll" because of military service shall be deleted from the reckoning; the "average annual payroll" in such case is to be determined on the basis of the prior three or five calendar years in each of which the employer had an "annual payroll" in the operation of his business, if the employer resumes his

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business within 12 months after separation, discharge or release from such service, under conditions other than dishonorable, and makes application to have his "average annual payroll" determined on the basis of such deletion within 12 months after he resumes his business; provided, however, that "average annual payroll" solely for the purposes of paragraph (3) of subsection (e) of R.S.43:21-7 means the average of the annual payrolls of any employer on which he paid contributions to the State disability benefits fund for the last three or five preceding calendar years, whichever average is higher; provided further that only those wages be included on which employer contributions have been paid on or before January 31 (or the next succeeding day if such January 31 is a Saturday or Sunday) immediately preceding the beginning of the 12-month period for which the employer's contribution rate is computed.

(b) "Benefits" means the money payments payable to an individual, as provided in this chapter (R.S.43:21-1 et seq.), with respect to his unemployment.

(c) (1) "Base year" with respect to benefit years commencing on or after July 1, 1986, shall mean the first four of the last five completed calendar quarters immediately preceding an individual's benefit year.

With respect to a benefit year commencing on or after July 1, 1995, if an individual does not have sufficient qualifying weeks or wages in his base year to qualify for benefits, the individual shall have the option of designating that his base year shall be the "alternative base year," which means the last four completed calendar quarters immediately preceding the individual's benefit year; except that, with respect to a benefit year commencing on or after October 1, 1995, if the individual also does not have sufficient qualifying weeks or wages in the last four completed calendar quarters immediately preceding his benefit year to qualify for benefits, "alternative base year" means the last three completed calendar quarters immediately preceding his benefit year and, of the calendar quarter in which the benefit year commences, the portion of the quarter which occurs before the commencing of the benefit year.

The division shall inform the individual of his options under this section as amended by P.L.1995, c.234. If information regarding weeks and wages for the calendar quarter or quarters immediately preceding the benefit year is not available to the division from the regular quarterly reports of wage information and the division is not able to obtain the information using other means pursuant to State or federal law, the division may base the determination of eligibility for benefits on the affidavit of an individual with respect to weeks and wages for that calendar quarter. The individual shall furnish payroll documentation, if available, in support of the affidavit. A determination of benefits based on an alternative base year shall be adjusted when the quarterly report of wage information from the employer is received if that information causes a change in the determination.

(2) With respect to a benefit year commencing on or after June 1, 1990 for an individual who immediately preceding the benefit year was

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subject to a disability compensable under the provisions of the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-25 et seq.), "base year" shall mean the first four of the last five completed calendar quarters immediately preceding the individual's period of disability, if the employment held by the individual immediately preceding the period of disability is no longer available at the conclusion of that period and the individual files a valid claim for unemployment benefits after the conclusion of that period. For the purposes of this paragraph, "period of disability" means the period defined as a period of disability by section 3 of the "Temporary Disability Benefits Law," P.L.1948, c.110 (C.43:21-27). An individual who files a claim under the provisions of this paragraph (2) shall not be regarded as having left work voluntarily for the purposes of subsection (a) of R.S.43:21-5.

(3) With respect to a benefit year commencing on or after June 1, 1990 for an individual who immediately preceding the benefit year was subject to a disability compensable under the provisions of the workers' compensation law (chapter 15 of Title 34 of the Revised Statutes), "base year" shall mean the first four of the last five completed calendar quarters immediately preceding the individual's period of disability, if the period of disability was not longer than two years, if the employment held by the individual immediately preceding the period of disability is no longer available at the conclusion of that period and if the individual files a valid claim for unemployment benefits after the conclusion of that period. For the purposes of this paragraph, "period of disability" means the period from the time at which the individual becomes unable to work because of the compensable disability until the time that the individual becomes able to resume work and continue work on a permanent basis. An individual who files a claim under the provisions of this paragraph (3) shall not be regarded as having left work voluntarily for the purposes of subsection (a) of R.S.43:21-5.

(d) "Benefit year" with respect to any individual means the 364 consecutive calendar days beginning with the day on, or as of, which he first files a valid claim for benefits, and thereafter beginning with the day on, or as of, which the individual next files a valid claim for benefits after the termination of his last preceding benefit year. Any claim for benefits made in accordance with subsection (a) of R.S.43:21-6 shall be deemed to be a "valid claim" for the purpose of this subsection if (1) he is unemployed for the week in which, or as of which, he files a claim for benefits; and (2) he has fulfilled the conditions imposed by subsection (e) of R.S.43:21-4.

(e) (1) "Division" means the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development, and any transaction or exercise of authority by the director of the division thereunder, or under this chapter (R.S.43:21-1 et seq.), shall be deemed to be performed by the division.

(2) "Controller" means the Office of the Assistant Commissioner for Finance and Controller of the Department of Labor and Workforce Development, established by the 1982 Reorganization Plan of the Department of Labor.

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(f) "Contributions" means the money payments to the State Unemployment Compensation Fund, required by R.S.43:21-7. "Payments in lieu of contributions" means the money payments to the State Unemployment Compensation Fund by employers electing or required to make payments in lieu of contributions, as provided in section 3 or section 4 of P.L.1971, c.346 (C.43:21-7.2 or 43:21-7.3).

(g) "Employing unit" means the State or any of its instrumentalities or any political subdivision thereof or any of its instrumentalities or any instrumentality of more than one of the foregoing or any instrumentality of any of the foregoing and one or more other states or political subdivisions or any individual or type of organization, any partnership, association, trust, estate, joint-stock company, insurance company or corporation, whether domestic or foreign, or the receiver, trustee in bankruptcy, trustee or successor thereof, or the legal representative of a deceased person, which has or subsequent to January 1, 1936, had in its employ one or more individuals performing services for it within this State. All individuals performing services within this State for any employing unit which maintains two or more separate establishments within this State shall be deemed to be employed by a single employing unit for all the purposes of this chapter (R.S.43:21-1 et seq.). Each individual employed to perform or to assist in performing the work of any agent or employee of an employing unit shall be deemed to be employed by such employing unit for all the purposes of this chapter (R.S.43:21-1 et seq.), whether such individual was hired or paid directly by such employing unit or by such agent or employee; provided the employing unit had actual or constructive knowledge of the work.

(h) "Employer" means:

(1) Any employing unit which in either the current or the preceding calendar year paid remuneration for employment in the amount of \$1,000.00 or more;

(2) Any employing unit (whether or not an employing unit at the time of acquisition) which acquired the organization, trade or business, or substantially all the assets thereof, of another which, at the time of such acquisition, was an employer subject to this chapter (R.S.43:21-1 et seq.);

(3) Any employing unit which acquired the organization, trade or business, or substantially all the assets thereof, of another employing unit and which, if treated as a single unit with such other employing unit, would be an employer under paragraph (1) of this subsection;

(4) Any employing unit which together with one or more other employing units is owned or controlled (by legally enforceable means or otherwise), directly or indirectly by the same interests, or which owns or controls one or more other employing units (by legally enforceable means or otherwise), and which, if treated as a single unit with such other employing unit or interest, would be an employer under paragraph (1) of this subsection;

(5) Any employing unit for which service in employment as defined in R.S.43:21-19 (i) (1) (B) (i) is performed after December 31, 1971;

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and as defined in R.S.43:21-19 (i) (1) (B) (ii) is performed after December 31, 1977;

(6) Any employing unit for which service in employment as defined in R.S.43:21-19 (i) (1)[(c)] (C) is performed after December 31, 1971 and which in either the current or the preceding calendar year paid remuneration for employment in the amount of \$1,000.00 or more;

(7) Any employing unit not an employer by reason of any other paragraph of this subsection (h) for which, within either the current or preceding calendar year, service is or was performed with respect to which such employing unit is liable for any federal tax against which credit may be taken for contributions required to be paid into a state unemployment fund; or which, as a condition for approval of the "unemployment compensation law" for full tax credit against the tax imposed by the Federal Unemployment Tax Act, is required pursuant to such act to be an employer under this chapter (R.S.43:21-1 et seq.);

(8) (Deleted by amendment; P.L.1977, c.307.)

(9) (Deleted by amendment; P.L.1977, c.307.)

(10) (Deleted by amendment; P.L.1977, c.307.)

(11) Any employing unit subject to the provisions of the Federal Unemployment Tax Act within either the current or the preceding calendar year, except for employment hereinafter excluded under paragraph (7) of subsection (i) of this section;

(12) Any employing unit for which agricultural labor in employment as defined in R.S.43:21-19 (i) (1) (I) is performed after December 31, 1977;

(13) Any employing unit for which domestic service in employment as defined in R.S.43:21-19 (i) (1) (J) is performed after December 31, 1977;

(14) Any employing unit which having become an employer under the "unemployment compensation law" (R.S.43:21-1 et seq.), has not under R.S.43:21-8 ceased to be an employer; or for the effective period of its election pursuant to R.S.43:21-8, any other employing unit which has elected to become fully subject to this chapter (R.S.43:21-1 et seq.).

(i) (1) "Employment" means:

(A) Any service performed prior to January 1, 1972, which was employment as defined in the "unemployment compensation law" (R.S.43:21-1 et seq.) prior to such date, and, subject to the other provisions of this subsection, service performed on or after January 1, 1972, including service in interstate commerce, performed for remuneration or under any contract of hire, written or oral, express or implied.

(B) (i) Service performed after December 31, 1971 by an individual in the employ of this State or any of its instrumentalities or in the employ of this State and one or more other states or their instrumentalities for a hospital or institution of higher education located in this State, if such service is not excluded from "employment" under paragraph (D) below.

(ii) Service performed after December 31, 1977, in the employ of this State or any of its instrumentalities or any political subdivision

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thereof or any of its instrumentalities or any instrumentality of more than one of the foregoing or any instrumentality of the foregoing and one or more other states or political subdivisions, if such service is not excluded from "employment" under paragraph (D) below.

(C) Service performed after December 31, 1971 by an individual in the employ of a religious, charitable, educational, or other organization, which is excluded from "employment" as defined in the Federal Unemployment Tax Act, solely by reason of section 3306 (c)(8) of that act, if such service is not excluded from "employment" under paragraph (D) below.

(D) For the purposes of paragraphs (B) and (C), the term "employment" does not apply to services performed

(i) In the employ of (I) a church or convention or association of churches, or (II) an organization, or school which is operated primarily for religious purposes and which is operated, supervised, controlled or principally supported by a church or convention or association of churches;

(ii) By a duly ordained, commissioned, or licensed minister of a church in the exercise of his ministry or by a member of a religious order in the exercise of duties required by such order;

(iii) Prior to January 1, 1978, in the employ of a school which is not an institution of higher education, and after December 31, 1977, in the employ of a governmental entity referred to in R.S.43:21-19 (i) (1) (B), if such service is performed by an individual in the exercise of duties

(aa) as an elected official;

(bb) as a member of a legislative body, or a member of the judiciary, of a state or political subdivision;

(cc) as a member of the State National Guard or Air National Guard;

(dd) as an employee serving on a temporary basis in case of fire, storm, snow, earthquake, flood or similar emergency;

(ee) in a position which, under or pursuant to the laws of this State, is designated as a major nontenured policy making or advisory position, or a policy making or advisory position, the performance of the duties of which ordinarily does not require more than eight hours per week; or

(iv) By an individual receiving rehabilitation or remunerative work in a facility conducted for the purpose of carrying out a program of rehabilitation of individuals whose earning capacity is impaired by age or physical or mental deficiency or injury or providing remunerative work for individuals who because of their impaired physical or mental capacity cannot be readily absorbed in the competitive labor market;

(v) By an individual receiving work-relief or work-training as part of an unemployment work-relief or work-training program assisted in whole or in part by any federal agency or an agency of a state or political subdivision thereof; or

(vi) Prior to January 1, 1978, for a hospital in a State prison or other State correctional institution by an inmate of the prison or correctional

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institution and after December 31, 1977, by an inmate of a custodial or penal institution.

(E) The term "employment" shall include the services of an individual who is a citizen of the United States, performed outside the United States after December 31, 1971 (except in Canada and in the case of the Virgin Islands, after December 31, 1971) and prior to January 1 of the year following the year in which the U.S. Secretary of Labor approves the unemployment compensation law of the Virgin Islands, under section 3304 (a) of the Internal Revenue Code of 1986 (26 U.S.C. s.3304 (a)) in the employ of an American employer (other than the service which is deemed employment under the provisions of R.S.43:21-19 (i) (2) or (5) or the parallel provisions of another state's unemployment compensation law), if

(i) The American employer's principal place of business in the United States is located in this State; or

(ii) The American employer has no place of business in the United States, but (I) the American employer is an individual who is a resident of this State; or (II) the American employer is a corporation which is organized under the laws of this State; or (III) the American employer is a partnership or trust and the number of partners or trustees who are residents of this State is greater than the number who are residents of another state; or

(iii) None of the criteria of divisions (i) and (ii) of this subparagraph (E) is met but the American employer has elected to become an employer subject to the "unemployment compensation law" (R.S.43:21-1 et seq.) in this State, or the American employer having failed to elect to become an employer in any state, the individual has filed a claim for benefits, based on such service, under the law of this State;

(iv) An "American employer," for the purposes of this subparagraph (E), means (I) an individual who is a resident of the United States; or (II) a partnership, if two-thirds or more of the partners are residents of the United States; or (III) a trust, if all the trustees are residents of the United States; or (IV) a corporation organized under the laws of the United States or of any state.

(F) Notwithstanding R.S.43:21-19 (i) (2), all service performed after January 1, 1972 by an officer or member of the crew of an American vessel or American aircraft on or in connection with such vessel or aircraft, if the operating office from which the operations of such vessel or aircraft operating within, or within and without, the United States are ordinarily and regularly supervised, managed, directed, and controlled, is within this State.

(G) Notwithstanding any other provision of this subsection, service in this State with respect to which the taxes required to be paid under any federal law imposing a tax against which credit may be taken for contributions required to be paid into a state unemployment fund or which as a condition for full tax credit against the tax imposed by the Federal Unemployment Tax Act is required to be covered under the "unemployment compensation law" (R.S.43:21-1 et seq.).

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(H) The term "United States" when used in a geographical sense in subsection R.S.43:21-19 (i) includes the states, the District of Columbia, the Commonwealth of Puerto Rico and, effective on the day after the day on which the U.S. Secretary of Labor approves for the first time under section 3304 (a) of the Internal Revenue Code of 1986 (26 U.S.C. s.3304 (a)) an unemployment compensation law submitted to the Secretary by the Virgin Islands for such approval, the Virgin Islands.

(I) (i) Service performed after December 31, 1977 in agricultural labor in a calendar year for an entity which is an employer as defined in the "unemployment compensation law," (R.S.43:21-1 et seq.) as of January 1 of such year; or for an employing unit which

(aa) during any calendar quarter in either the current or the preceding calendar year paid remuneration in cash of \$20,000.00 or more for individuals employed in agricultural labor, or

(bb) for some portion of a day in each of 20 different calendar weeks, whether or not such weeks were consecutive, in either the current or the preceding calendar year, employed in agricultural labor 10 or more individuals, regardless of whether they were employed at the same moment in time.

(ii) for the purposes of this subsection any individual who is a member of a crew furnished by a crew leader to perform service in agricultural labor for any other entity shall be treated as an employee of such crew leader

(aa) if such crew leader holds a certification of registration under the Migrant and Seasonal Agricultural Worker Protection Act, [Pub.L.97-470] (29 U.S.C. s.1801 et seq.), or P.L.1971, c.192 (C.34:8A-7 et seq.); or substantially all the members of such crew operate or maintain tractors, mechanized harvesting or cropdusting equipment, or any other mechanized equipment, which is provided by such crew leader; and

(bb) if such individual is not an employee of such other person for whom services were performed.

(iii) For the purposes of subparagraph (I) (i) in the case of any individual who is furnished by a crew leader to perform service in agricultural labor or any other entity and who is not treated as an employee of such crew leader under (I) (ii)

(aa) such other entity and not the crew leader shall be treated as the employer of such individual; and

(bb) such other entity shall be treated as having paid cash remuneration to such individual in an amount equal to the amount of cash remuneration paid to such individual by the crew leader (either on his own behalf or on behalf of such other entity) for the service in agricultural labor performed for such other entity.

(iv) For the purpose of subparagraph (I)(ii), the term "crew leader" means an individual who

(aa) furnishes individuals to perform service in agricultural labor for any other entity;

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(bb) pays (either on his own behalf or on behalf of such other entity) the individuals so furnished by him for the service in agricultural labor performed by them; and

(cc) has not entered into a written agreement with such other entity under which such individual is designated as an employee of such other entity.

(J) Domestic service after December 31, 1977 performed in the private home of an employing unit which paid cash remuneration of \$1,000.00 or more to one or more individuals for such domestic service in any calendar quarter in the current or preceding calendar year.

(2) The term "employment" shall include an individual's entire service performed within or both within and without this State if:

(A) The service is localized in this State; or

(B) The service is not localized in any state but some of the service is performed in this State, and (i) the base of operations, or, if there is no base of operations, then the place from which such service is directed or controlled, is in this State; or (ii) the base of operations or place from which such service is directed or controlled is not in any state in which some part of the service is performed, but the individual's residence is in this State.

(3) Services performed within this State but not covered under paragraph (2) of this subsection shall be deemed to be employment subject to this chapter (R.S.43:21-1 et seq.) if contributions are not required and paid with respect to such services under an unemployment compensation law of any other state or of the federal government.

(4) Services not covered under paragraph (2) of this subsection and performed entirely without this State, with respect to no part of which contributions are required and paid under an unemployment compensation law of any other state or of the federal government, shall be deemed to be employment subject to this chapter (R.S.43:21-1 et seq.) if the individual performing such services is a resident of this State and the employing unit for whom such services are performed files with the division an election that the entire service of such individual shall be deemed to be employment subject to this chapter (R.S.43:21-1 et seq.).

(5) Service shall be deemed to be localized within a state if:

(A) The service is performed entirely within such state; or

(B) The service is performed both within and without such state, but the service performed without such state is incidental to the individual's service within the state; for example, is temporary or transitory in nature or consists of isolated transactions.

(6) Services performed by an individual for remuneration shall be deemed to be employment subject to this chapter (R.S.43:21-1 et seq.) unless and until it is shown to the satisfaction of the division that:

(A) Such individual has been and will continue to be free from control or direction over the performance of such service, both under his contract of service and in fact; and

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(B) Such service is either outside the usual course of the business for which such service is performed, or that such service is performed outside of all the places of business of the enterprise for which such service is performed; and

(C) Such individual is customarily engaged in an independently established trade, occupation, profession or business.

(7) Provided that such services are also exempt under the Federal Unemployment Tax Act, as amended, or that contributions with respect to such services are not required to be paid into a state unemployment fund as a condition for a tax offset credit against the tax imposed by the Federal Unemployment Tax Act, as amended, the term "employment" shall not include:

(A) Agricultural labor performed prior to January 1, 1978; and after December 31, 1977, only if performed in a calendar year for an entity which is not an employer as defined in the "unemployment compensation law," (R.S.43:21-1 et seq.) as of January 1 of such calendar year; or unless performed for an employing unit which

(i) during a calendar quarter in either the current or the preceding calendar year paid remuneration in cash of \$20,000.00 or more to individuals employed in agricultural labor, or

(ii) for some portion of a day in each of 20 different calendar weeks, whether or not such weeks were consecutive, in either the current or the preceding calendar year, employed in agricultural labor 10 or more individuals, regardless of whether they were employed at the same moment in time;

(B) Domestic service in a private home performed prior to January 1, 1978; and after December 31, 1977, unless performed in the private home of an employing unit which paid cash remuneration of \$1,000.00 or more to one or more individuals for such domestic service in any calendar quarter in the current or preceding calendar year;

(C) Service performed by an individual in the employ of his son, daughter or spouse, and service performed by a child under the age of 18 in the employ of his father or mother;

(D) Service performed prior to January 1, 1978, in the employ of this State or of any political subdivision thereof or of any instrumentality of this State or its political subdivisions, except as provided in R.S.43:21-19 (i) (1) (B) above, and service in the employ of the South Jersey Port Corporation or its successors;

(E) Service performed in the employ of any other state or its political subdivisions or of an instrumentality of any other state or states or their political subdivisions to the extent that such instrumentality is with respect to such service exempt under the Constitution of the United States from the tax imposed under the Federal Unemployment Tax Act, as amended, except as provided in R.S.43:21-19 (i) (1) (B) above;

(F) Service performed in the employ of the United States Government or of any instrumentality of the United States exempt under the Constitution of the United States from the contributions imposed by the "unemployment compensation law," except that to the extent that the Congress of the United States shall permit states to require any

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instrumentalities of the United States to make payments into an unemployment fund under a state unemployment compensation law, all of the provisions of this act shall be applicable to such instrumentalities, and to service performed for such instrumentalities, in the same manner, to the same extent and on the same terms as to all other employers, employing units, individuals and services; provided that if this State shall not be certified for any year by the Secretary of Labor of the United States under section 3304 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.3304), the payments required of such instrumentalities with respect to such year shall be refunded by the division from the fund in the same manner and within the same period as is provided in R.S.43:21-14 (f) with respect to contributions erroneously paid to or collected by the division;

(G) Services performed in the employ of fraternal beneficiary societies, orders, or associations operating under the lodge system or for the exclusive benefit of the members of a fraternity itself operating under the lodge system and providing for the payment of life, sick, accident, or other benefits to the members of such society, order, or association, or their dependents;

(H) Services performed as a member of the board of directors, a board of trustees, a board of managers, or a committee of any bank, building and loan, or savings and loan association, incorporated or organized under the laws of this State or of the United States, where such services do not constitute the principal employment of the individual;

(I) Service with respect to which unemployment insurance is payable under an unemployment insurance program established by an Act of Congress;

(J) Service performed by agents of mutual fund brokers or dealers in the sale of mutual funds or other securities, by agents of insurance companies, exclusive of industrial insurance agents or by agents of investment companies, if the compensation to such agents for such services is wholly on a commission basis;

(K) Services performed by real estate salesmen or brokers who are compensated wholly on a commission basis;

(L) Services performed in the employ of any veterans' organization chartered by Act of Congress or of any auxiliary thereof, no part of the net earnings of which organization, or auxiliary thereof, inures to the benefit of any private shareholder or individual;

(M) Service performed for or in behalf of the owner or operator of any theater, ballroom, amusement hall or other place of entertainment, not in excess of 10 weeks in any calendar year for the same owner or operator, by any leader or musician of a band or orchestra, commonly called a "name band," entertainer, vaudeville artist, actor, actress, singer or other entertainer;

(N) Services performed after January 1, 1973 by an individual for a labor union organization, known and recognized as a union local, as a member of a committee or committees reimbursed by the union local for time lost from regular employment, or as a part-time officer of a

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union local and the remuneration for such services is less than \$1,000.00 in a calendar year;

(O) Services performed in the sale or distribution of merchandise by home-to-home salespersons or in-the-home demonstrators whose remuneration consists wholly of commissions or commissions and bonuses;

(P) Service performed in the employ of a foreign government, including service as a consular, nondiplomatic representative, or other officer or employee;

(Q) Service performed in the employ of an instrumentality wholly owned by a foreign government if (i) the service is of a character similar to that performed in foreign countries by employees of the United States Government or of an instrumentality thereof, and (ii) the division finds that the United States Secretary of State has certified to the United States Secretary of the Treasury that the foreign government, with respect to whose instrumentality exemption is claimed, grants an equivalent exemption with respect to similar services performed in the foreign country by employees of the United States Government and of instrumentalities thereof;

(R) Service in the employ of an international organization entitled to enjoy the privileges, exemptions and immunities under the International Organizations Immunities Act (22 U.S.C. s.288 et seq.);

(S) Service covered by an election duly approved by an agency charged with the administration of any other state or federal unemployment compensation or employment security law, in accordance with an arrangement pursuant to R.S.43:21-21 during the effective period of such election;

(T) Service performed in the employ of a school, college, or university if such service is performed (i) by a student enrolled at such school, college, or university on a full-time basis in an educational program or completing such educational program leading to a degree at any of the severally recognized levels, or (ii) by the spouse of such a student, if such spouse is advised at the time such spouse commences to perform such service that (I) the employment of such spouse to perform such service is provided under a program to provide financial assistance to such student by such school, college, or university, and (II) such employment will not be covered by any program of unemployment insurance;

(U) Service performed by an individual who is enrolled at a nonprofit or public educational institution which normally maintains a regular faculty and curriculum and normally has a regularly organized body of students in attendance at the place where its educational activities are carried on, as a student in a full-time program, taken for credit at such institution, which combines academic instruction with work experience, if such service is an integral part of such program, and such institution has so certified to the employer, except that this subparagraph shall not apply to service performed in a program established for or on behalf of an employer or group of employers;

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(V) Service performed in the employ of a hospital, if such service is performed by a patient of the hospital; service performed as a student nurse in the employ of a hospital or a nurses' training school by an individual who is enrolled and regularly attending classes in a nurses' training school approved under the laws of this State;

(W) Services performed after the effective date of this amendatory act by agents of mutual benefit associations if the compensation to such agents for such services is wholly on a commission basis;

(X) Services performed by operators of motor vehicles weighing 18,000 pounds or more, licensed for commercial use and used for the highway movement of motor freight, who own their equipment or who lease or finance the purchase of their equipment through an entity which is not owned or controlled directly or indirectly by the entity for which the services were performed and who were compensated by receiving a percentage of the gross revenue generated by the transportation move or by a schedule of payment based on the distance and weight of the transportation move;

(Y) (Deleted by amendment, P.L.2009, c.211.)

(Z) Services performed, using facilities provided by a travel agent, by a person, commonly known as an outside travel agent, who acts as an independent contractor, is paid on a commission basis, sets his own work schedule and receives no benefits, sick leave, vacation or other leave from the travel agent owning the facilities.

(8) If one-half or more of the services in any pay period performed by an individual for an employing unit constitutes employment, all the services of such individual shall be deemed to be employment; but if more than one-half of the service in any pay period performed by an individual for an employing unit does not constitute employment, then none of the service of such individual shall be deemed to be employment. As used in this paragraph, the term "pay period" means a period of not more than 31 consecutive days for which a payment for service is ordinarily made by an employing unit to individuals in its employ.

(9) Services performed by the owner of a limousine franchise (franchisee) shall not be deemed to be employment subject to the "unemployment compensation law," R.S.43:21-1 et seq., with regard to the franchisor if:

(A) The limousine franchisee is incorporated;

(B) The franchisee is subject to regulation by the Interstate Commerce Commission;

(C) The limousine franchise exists pursuant to a written franchise arrangement between the franchisee and the franchisor as defined by section 3 of P.L.1971, c.356 (C.56:10-3); and

(D) The franchisee registers with the Department of Labor and Workforce Development and receives an employer registration number.

(10) Services performed by a legal transcriber, or certified court reporter certified pursuant to P.L.1940, c.175 (C.45:15B-1 et seq.), shall not be deemed to be employment subject to the "unemployment compensation law," R.S.43:21-1 et seq., if those services are provided

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to a third party by the transcriber or reporter who is referred to the third party pursuant to an agreement with another legal transcriber or legal transcription service, or certified court reporter or court reporting service, on a freelance basis, compensation for which is based upon a fee per transcript page, flat attendance fee, or other flat minimum fee, or combination thereof, set forth in the agreement.

For purposes of this paragraph (10): "legal transcription service" and "legal transcribing" mean making use, by audio, video or voice recording, of a verbatim record of court proceedings, depositions, other judicial proceedings, meetings of boards, agencies, corporations, or other bodies or groups, and causing that record to be printed in readable form or produced on a computer screen in readable form; and "legal transcriber" means a person who engages in "legal transcribing."

(j) "Employment office" means a free public employment office, or branch thereof operated by this State or maintained as a part of a State-controlled system of public employment offices.

(k) (Deleted by amendment, P.L.1984, c.24.)

(l) "State" includes, in addition to the states of the United States of America, the District of Columbia, the Virgin Islands and Puerto Rico.

(m) "Unemployment."

(1) An individual shall be deemed "unemployed" for any week during which:

(A) The individual is not engaged in full-time work and with respect to which his remuneration is less than his weekly benefit rate, including any week during which he is on vacation without pay; provided such vacation is not the result of the individual's voluntary action, except that for benefit years commencing on or after July 1, 1984, an officer of a corporation, or a person who has more than a 5% equitable or debt interest in the corporation, whose claim for benefits is based on wages with that corporation shall not be deemed to be unemployed in any week during the individual's term of office or ownership in the corporation; or

(B) The individual is eligible for and receiving a self-employment assistance allowance pursuant to the requirements of P.L.1995, c.394 (C.43:21-67 et al.).

(2) The term "remuneration" with respect to any individual for benefit years commencing on or after July 1, 1961, and as used in this subsection, shall include only that part of the same which in any week exceeds 20% of his weekly benefit rate (fractional parts of a dollar omitted) or \$5.00, whichever is the larger, and shall not include any moneys paid to an individual by a county board of elections for work as a board worker on an election day.

(3) An individual's week of unemployment shall be deemed to commence only after the individual has filed a claim at an unemployment insurance claims office, except as the division may by regulation otherwise prescribe.

(n) "Unemployment compensation administration fund" means the unemployment compensation administration fund established by this

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chapter (R.S.43:21-1 et seq.), from which administrative expenses under this chapter (R.S.43:21-1 et seq.) shall be paid.

(o) "Wages" means remuneration paid by employers for employment. If a worker receives gratuities regularly in the course of his employment from other than his employer, his "wages" shall also include the gratuities so received, if reported in writing to his employer in accordance with regulations of the division, and if not so reported, his "wages" shall be determined in accordance with the minimum wage rates prescribed under any labor law or regulation of this State or of the United States, or the amount of remuneration actually received by the employee from his employer, whichever is the higher.

(p) "Remuneration" means all compensation for personal services, including commission and bonuses and the cash value of all compensation in any medium other than cash.

(q) "Week" means for benefit years commencing on or after October 1, 1984, the calendar week ending at midnight Saturday, or as the division may by regulation prescribe.

(r) "Calendar quarter" means the period of three consecutive calendar months ending March 31, June 30, September 30, or December 31.

(s) "Investment company" means any company as defined in subsection a. of section 1 of P.L.1938, c.322 (C.17:16A-1).

(t) (1) (Deleted by amendment, P.L.2001, c.17).

(2) ["Base week," commencing on or after January 1, 1996 and before January 1, 2001, means:

(A) Any calendar week during which the individual earned in employment from an employer remuneration not less than an amount which is 20% of the Statewide average weekly remuneration defined in subsection (c) of R.S.43:21-3 which amount shall be adjusted to the next higher multiple of \$1.00 if not already a multiple thereof, except that if in any calendar week an individual subject to this subparagraph (A) is in employment with more than one employer, the individual may in that calendar week establish a base week with respect to each of the employers from whom the individual earns remuneration equal to not less than the amount defined in this subparagraph (A) during that week; or

(B) If the individual does not establish in his base year 20 or more base weeks as defined in subparagraph (A) of this paragraph (2), any calendar week of an individual's base year during which the individual earned in employment from an employer remuneration not less than an amount 20 times the minimum wage in effect pursuant to section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year preceding the calendar year in which the benefit year commences, which amount shall be adjusted to the next higher multiple of \$1.00 if not already a multiple thereof, except that if in any calendar week an individual subject to this subparagraph (B) is in employment with more than one employer, the individual may in that calendar week establish a base week with respect to each of the employers from whom the

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individual earns remuneration not less than the amount defined in this subparagraph (B) during that week.] ~~(Deleted by amendment, P.L. , c.)(pending before the Legislature as this bill)~~

(3) "Base week," commencing on or after January 1, 2001 and before January 1, 2020¹, and after the time that federal financing of unemployment benefits in this State, pursuant to the "Coronavirus Aid, Relief, and Economic Security Act," Pub. Law 116-136, ceases¹, means any calendar week during which the individual earned in employment from an employer remuneration not less than an amount 20 times the minimum wage in effect pursuant to section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year preceding the calendar year in which the benefit year commences, which amount shall be adjusted to the next higher multiple of \$1.00 if not already a multiple thereof, except that if in any calendar week an individual subject to this paragraph (3) is in employment with more than one employer, the individual may in that calendar week establish a base week with respect to each of the employers from whom the individual earns remuneration equal to not less than the amount defined in this paragraph (3) during that week.

(4) "Base week," commencing on or after January 1, 2020¹until the time that federal financing of unemployment benefits in this State, pursuant to the "Coronavirus Aid, Relief, and Economic Security Act," Pub. Law 116-136 ceases¹, means any calendar week during which the individual earned in employment from an employer remuneration not less than an amount 10 times the minimum wage in effect pursuant to section 5 of P.L.1966, c.113 (C.34:11-56a4) on October 1 of the calendar year preceding the calendar year in which the benefit year commences, which amount shall be adjusted to the next higher multiple of \$1.00 if not already a multiple thereof, except that if in any calendar week an individual subject to this paragraph (4) is in employment with more than one employer, the individual may in that calendar week establish a base week with respect to each of the employers from whom the individual earns remuneration equal to not less than the amount defined in this paragraph (4) during that week.

(u) "Average weekly wage" means the amount derived by dividing an individual's total wages received during his base year base weeks (as defined in subsection (t) of this section) from that most recent base year employer with whom he has established at least 20 base weeks, by the number of base weeks in which such wages were earned. In the event that such claimant had no employer in his base year with whom he had established at least 20 base weeks, then such individual's average weekly wage shall be computed as if all of his base week wages were received from one employer and as if all his base weeks of employment had been performed in the employ of one employer.

For the purpose of computing the average weekly wage, the monetary alternative in subparagraph (B) of paragraph [(2)] (4) of subsection (e) of R.S.43:21-4 shall only apply in those instances where the individual did not have at least 20 base weeks in the base year. For

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benefit years commencing on or after July 1, 1986, "average weekly wage" means the amount derived by dividing an individual's total base year wages by the number of base weeks worked by the individual during the base year; provided that for the purpose of computing the average weekly wage, the maximum number of base weeks used in the divisor shall be 52.

(v) "Initial determination" means, subject to the provisions of R.S.43:21-6(b)(2) and (3), a determination of benefit rights as measured by an eligible individual's base year employment with a single employer covering all periods of employment with that employer during the base year.

(w) "Last date of employment" means the last calendar day in the base year of an individual on which he performed services in employment for a given employer.

(x) "Most recent base year employer" means that employer with whom the individual most recently, in point of time, performed service in employment in the base year.

(y) (1) "Educational institution" means any public or other nonprofit institution (including an institution of higher education):

(A) In which participants, trainees, or students are offered an organized course of study or training designed to transfer to them knowledge, skills, information, doctrines, attitudes or abilities from, by or under the guidance of an instructor or teacher;

(B) Which is approved, licensed or issued a permit to operate as a school by the State Department of Education or other government agency that is authorized within the State to approve, license or issue a permit for the operation of a school; and

(C) Which offers courses of study or training which may be academic, technical, trade, or preparation for gainful employment in a recognized occupation.

(2) "Institution of higher education" means an educational institution which:

(A) Admits as regular students only individuals having a certificate of graduation from a high school, or the recognized equivalent of such a certificate;

(B) Is legally authorized in this State to provide a program of education beyond high school;

(C) Provides an educational program for which it awards a bachelor's or higher degree, or provides a program which is acceptable for full credit toward such a degree, a program of post-graduate or post-doctoral studies, or a program of training to prepare students for gainful employment in a recognized occupation; and

(D) Is a public or other nonprofit institution.

Notwithstanding any of the foregoing provisions of this subsection, all colleges and universities in this State are institutions of higher education for purposes of this section.

(z) "Hospital" means an institution which has been licensed, certified or approved under the law of this State as a hospital.

(cf: P.L.2017, c.230, s.1)

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REPLACE SECTION 8 TO READ:

¹[8.] 7.1 (New section) Sections ¹[8] 7.1 through ¹[11] 10.1 of this act shall be known and may be cited as the “Employee Job-Sharing Furlough Protection Act.”

RENUMBER SECTION 9 AS SECTION 8

REPLACE SECTION 10 TO READ:

¹[10.] 9.1 (New section) A public employee enrolled in a State-administered retirement system or fund, and the employer of that employee, shall be required to make contributions to the system or fund during the period that the employee is on a furlough pursuant to section ¹[9] 8.1 of this act, P.L. , c. (C.) (pending before the Legislature as this bill) and P.L.2011, c.154 (C.43:21-20.3 et seq.). The contributions shall be based on the base salary or compensation, as defined by the retirement system or fund, that would have been paid to the employee if the employee had not been on furlough. The employee’s service credit as a member of the system or fund shall include the period of furlough. For all purposes under the retirement system or fund, the period of furlough and the base salary or compensation upon which contribution were made during the period of furlough shall be recognized by the retirement system or fund. The seniority rights and health benefits coverage of an employee who participates in this furlough program shall continue and shall not be adversely affected by participation. The employer shall enter into a written agreement with any collective bargaining agent representing the employees regarding the terms of the program, including terms regarding attendance in training programs while receiving short-time benefits, and provide certification, and the copy, of the agreement to the division as required by P.L.2011, c.154 (C.43:21-20.3 et seq.). This section shall not be construed to conflict with any applicable provisions of federal law.

RENUMBER SECTION 11 AS SECTION 10

OMIT SECTIONS 12, 13 AND 14 IN THEIR ENTIRETY

REPLACE SECTION 15 TO READ:

¹[15.] 11.1 This act shall take effect immediately¹], provided that:

a. in the case of any employer who becomes subject to the provisions of P.L.1989, c.261 (C.34:11B-1 et seq.) because of the provisions of paragraph (5) of subsection f. of section 3 of P.L.1989, c.261 (C.34:11B-3), the provisions of P.L.1989, c.261 (C.34:11B-1 et seq.) shall apply to the employer only with respect to periods of family leave which take place, in full or in part, after the effective date of this act; and

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b. in the case of any employer who becomes subject to the provisions of section 24 of P.L.2019, c.37 (C.43:21-55.2) because of the changes made in that section by P.L. , c. (C.)(pending before the Legislature as this bill) the provisions of section 24 of P.L.2019, c.37 (C.43:21-55.2) shall apply to the employer only with respect to periods of disability for family temporary disability leave which take place, in full or in part, after the effective date of this act]¹.

REPLACE SYNOPSIS TO READ:

Concerns benefits ¹[and leave]¹ provided to workers.

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SENATE BUDGET AND APPROPRIATIONS COMMITTEE

AMENDMENTS

to

SENATE, No. 2392

(Sponsored by Senator SARLO)

REPLACE SECTION 1 TO READ:

1. (New section) a. Notwithstanding the provisions of any law, rule, or regulation to the contrary, whenever a public health emergency, pursuant to the “Emergency Health Powers Act,” P.L.2005, c.222 (C.26:13-1 et seq.), or a state of emergency, pursuant to P.L.1942, c.251 (C.App.A.9-33 et seq.), or both, has been declared by the Governor and is in effect, the Director of the Division of Local Government Services in the Department of Community Affairs shall have the power to extend any deadline under the “Local Budget Law,” N.J.S.40A:4-1 et seq., the “Local Fiscal Affairs Law,” N.J.S.40A:5-1 et seq., the “Local Authorities Fiscal Control Law,” P.L.1983, c.313 (C.40A:5A-1 et seq.), under chapter 4 of Title 54 of the Revised Statutes with respect to the issuance of any tax bill except for the quarterly property tax installment dates pursuant to R.S.54:4-66 or section 2 of P.L.1994, c.72 (C.54:4-66.1), and under chapter 5 of Title 54 of the Revised Statutes with respect to a municipal tax sale. The Director of the Division of Local Government Services shall have the power to permit municipalities to institute an extended grace period pursuant to R.S.54:4-67¹, for the first \$10,000 determined to be due and required to be paid for the property tax quarter.¹ not to extend beyond the first calendar day of the next calendar month immediately following the quarterly property tax installment date and under conditions the director may specify, as well as to extend the dates for the payment of taxes by a municipality due to a county, a school district, or any other taxing district under chapter 4 of Title 54 of the Revised Statutes or any other law¹, which extension shall be equal to the number of days of the extended grace period pursuant to R.S.54:4-67 provided under this subsection¹. The Director of the Division of Local Government Services, in consultation with the Director of the Division of Taxation in the Department of the Treasury, shall have the power to extend any other deadline established in chapter 1, chapter 3, chapter 4, or chapter 5 of Title 54 of the Revised Statutes if the Director of the Division of Local Government Services determines that the extension is necessary to minimize and mitigate additional hardships, loss, or suffering to the State and its political subdivisions.

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A municipality, county, or any other agency or political subdivision of this State shall not enact or enforce any order, rule, regulation, ordinance, or resolution that, in any way, conflicts with any of the provisions of this section.

b. ¹Notwithstanding any provision of subsection b. of R.S.54:4-67 to the contrary, at any time when the governing body of a municipality extends the interest-free period for the collection of property taxes for a given quarter, pursuant to subsection a. of this section, the governing body, after adoption of a resolution extending the interest-free period, shall provide a notice to all taxpayers in accordance with this subsection, prior to the date taxes are next due, stating the new deadline date for the extended grace period. To satisfy the notice requirement in this subsection, the governing body shall post the notice on its municipal bulletin board; post the notice on its municipal Internet website; publish the notice in its official newspaper; and either issue the notice by regular mail or by both a telephonic system and one of the following alternatives: electronic mail, text messaging system, or any other digital platform used by the municipality to disseminate information to municipal residents electronically.

c.¹ In the event that, pursuant to subsection a. of this section, the Director of the Division of Local Government Services orders an extension of the dates for the payment of taxes by a municipality due to a county, a school district, or any other taxing district under chapter 4 of Title 54 of the Revised Statutes or any other law, the director shall require a municipality to pay a percentage of the total installment of taxes due to a county, school district, or any other taxing district by the original statutory date for full payment of the installment. In determining the percentage to be paid by the municipality by the original statutory installment due date, the director shall consider the amount of property taxes collected by the municipality, the fiscal condition of the municipality, the fiscal condition of ¹of a county, school, or¹ any ¹other¹ taxing district subject to the director's order of extension pursuant to subsection a. of this section, and any other budgetary, fiscal, or economic factors the director finds appropriate to make the determination. The director shall consult with the Commissioner of Education when considering the fiscal condition of a school district pursuant to this subsection.

¹[c.] d.¹ Notwithstanding the provisions of any law, rule, or regulation to the contrary, whenever a public health emergency, pursuant to the "Emergency Health Powers Act," P.L.2005, c.222 (C.26:13-1 et seq.), or a state of emergency, pursuant to P.L.1942, c.251 (C.App.A.9-33 et seq.), or both, has been declared by the Governor and is in effect, the Director of the Division of Local Government Services may extend any deadline under the "Municipal Land Use Law," P.L.1975, c.291 (C.40:55D-1 et seq.) by adopting an emergency rule pursuant to subsection (c) of section 4 of P.L.1968, c.410 (C.52:14B-4), if the director determines that there exists an imminent peril to the public health, safety, or welfare.

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REPLACE SECTION 8 TO READ:

8. (New section) a. ¹[Notwithstanding any provision of P.L.1975, c.231 (C.10:4-6 et seq.) or] Consistent with section 1 of P.L.2020, c.11 (C.10:4-12.1) and notwithstanding¹ any other law, rule, or regulation to the contrary, whenever a public health emergency, pursuant to the "Emergency Health Powers Act," P.L.2005, c.222 (C.26:13-1 et seq.), or a state of emergency, pursuant to P.L.1942, c.251 (C.App.A.9-33 et seq.), or both, ¹or a state of local disaster emergency¹ has been declared by the Governor and is in effect, a local public body may conduct a public meeting remotely by electronic means, provided that reasonable public notice and provision for public input is made under the circumstances.

b. The Director of the Division of Local Government Services in the Department of Community Affairs shall adopt, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), rules and regulations concerning the conduct of remote public meetings during a public health emergency or state of emergency that are necessary to implement the provisions of subsection a. of this section, which shall include minimum procedures to be followed to provide reasonable public notice and allowance for public input. The director may adopt an emergency rule pursuant to subsection (c) of section 4 of P.L.1968, c.410 (C.52:14B-4) to implement this section.

c. "Local public body" means any "public body," as that term is defined in section 3 of P.L.1975, c. 231 (C.10:4-8), with territorial jurisdiction equal to or less than a county.

"Public meeting" means that same as that term is defined in section 3 of P.L.1975, c. 231 (C.10:4-8)

REPLACE SECTION 9 TO READ:

9. Section 2 of P.L.1995, c.325 (C.40A:5-44) is amended to read as follows:

2. As used in this act:

"Association" means an organization whose members are issuers.

"Cardholder" means the person or organization named on the face of a credit card or debit card to whom or for whose benefit the credit card or debit card is issued by an issuer.

"Card based payment" means a monetary obligation tendered by the user of a credit card or debit card.

"Card payment system" means a technical procedure by which obligations owed a local unit or court may be paid by credit card or debit card.

"Credit card" means any instrument or device linked to an established line of credit, whether known as a credit card, charge card, credit plate, or by any other name, issued with or without fee by an issuer for the use of the cardholder in satisfying outstanding financial obligations, obtaining money, goods, services or anything else of value on credit.

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"Debit card" means any instrument or device, whether known as a debit card, automated teller machine card, or by any other name, issued with or without fee by an issuer for the use of the cardholder in obtaining money, goods, services or anything else of value through the electronic authorization of a financial institution to debit the cardholder's account.

"Director" means the Director of the Division of Local Government Services in the Department of Community Affairs.

"Electronic funds transfer" means any transfer of funds, other than a transaction originated by check, draft, or similar paper instrument, that is initiated through an electronic terminal, telephone, or computer or magnetic tape for the purpose of ordering, instructing or authorizing a financial institution to debit or credit an account, and includes an in-person funds transfer and an online funds transfer.

"Electronic funds transfer system" means a technical procedure by which obligations owed to or collected by the Supreme Court, the Superior Court, Tax Court or a local unit may be paid by an electronic transaction between the financial institution of the person or organization owing the obligation and the financial institution of the governmental entity.

"In-person funds transfer" means any transfer of funds through a service that accepts a payment made in-person, by any method, and then transmits those funds to a payee by electronic funds transfer ¹, but shall not include a service that requires a local unit to maintain, and funds to be transmitted to, an account that is not a designated depository of the local unit pursuant to N.J.S.40A:5-14¹.

"Issuer" means the business organization or financial institution which issues a credit card or debit card, or its duly authorized agent.

"Local unit" means any unit of government subject to the provisions of chapter 5 or 5A of Title 40A of the New Jersey Statutes, and the constituent parts of those units, including but not limited to independent local authorities, public libraries, municipal courts and joint municipal courts.

"Online funds transfer" means any Internet-based transfer of funds through an Internet-based payment system ¹, but shall not include a service that requires a local unit to maintain, and funds to be transmitted to, an account that is not a designated depository of the local unit pursuant to N.J.S.40A:5-14¹.

"Service charge" means a fee charged by the Supreme Court, the Superior Court, Tax Court or local unit in excess of the total obligation owed by a person or organization to offset processing charges or discount fees for the use of a card payment system or an electronic funds transfer system.

(cf: P.L.1995, c.325, s.2)

REPLACE SECTION 10 TO READ:

10. R.S.54:4-67 is amended to read as follows:

54:4-67. a. (1) The governing body of each municipality may by resolution fix the rate of discount to be allowed for the payment of taxes

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or assessments previous to the date on which they would become delinquent. The rate so fixed shall not exceed 6% per annum, shall be allowed only in case of payment made on or before the thirtieth day previous to the date on which the taxes or assessments would become delinquent, after subtracting the amount of applicable property tax credit as defined in section 1 of P.L.2018, c.11 (C.54:4-66.6). No such discount shall apply to the purchaser of a total property tax levy pursuant to section 16 of P.L.1997, c.99 (C.54:5-113.5). The governing body may also fix the rate of interest to be charged for the nonpayment of taxes, assessments, or other municipal liens or charges, unless otherwise provided by law, on or before the date when they would become delinquent, and may provide that no interest shall be charged if payment of any installment is made within the tenth calendar day following the date upon which the same became payable. ¹[The governing body may, by resolution, extend this interest-free period up to a maximum of 30 days during a period in which a public health emergency, pursuant to the "Emergency Health Powers Act," P.L.2005, c.222 (C.26:13-1 et seq.), or a state of emergency, pursuant to P.L.1942, c.251 (C.app.A.9-33 et seq.), or both, has been declared by the Governor and is in effect.]¹ The rate so fixed shall not exceed 8% per annum on the first \$1,500.00 of the delinquency and 18% per annum on any amount in excess of \$1,500.00, to be calculated from the date the tax was payable until the date that actual payment to the tax collector is made.

(2) Notwithstanding the provisions of paragraph (1) of this subsection regarding delinquent payments, in the case of a municipality that has experienced a flood, hurricane, superstorm, tornado, or other natural disaster, interest shall not be charged by the municipality to a delinquent taxpayer if:

(a) a state of emergency has been declared as a result thereof by the Governor less than 30 days prior to the date upon which a property tax installment payment is payable pursuant to R.S.54:4-66 or section 2 of P.L.1994, c.72 (C.54:4-66.1), as appropriate, and

(b) the governing body of the municipality adopts a resolution providing that interest shall not be charged to a delinquent taxpayer if payment of the property tax installment, plus any available property tax credit as defined in section 1 of P.L.2018, c.11 (C.54:4-66.6), is made on or before the first day of the next calendar month from the date upon which it became payable.

(3) The municipal clerk shall notify the Director of the Division of Local Government Services in the Department of Community Affairs of its adoption of a resolution effectuating the provisions of paragraph (2) of this subsection not later than the third business day next following the municipal governing body's adoption of the resolution. If the municipality is under State supervision pursuant to the provisions of Article 4 of the "Local Government Supervision Act (1947)," P.L.1947, c.151 (C.52:27BB-54 et seq.), is subject to the provisions of the "Municipal Rehabilitation and Economic Recovery Act," P.L.2002, c.43 (C.52:27BBB-1 et al.), or is otherwise subject to a memorandum

of understanding or similar agreement with the division as a condition of receiving supplemental State aid, the resolution shall not be effective unless it is approved by the director.

(4) (a) As used in this paragraph:

"Eligible resident" means either:

(i) an employee of a federal government agency who is furloughed because of a shutdown and receives unemployment benefits during the shutdown or who works during a shutdown but is not paid because of the shutdown; or

(ii) a contractor whose pay is received through a contract with a federal government agency but whose payment is delayed or diminished because of a shutdown, provided that the contractor receives unemployment benefits during the shutdown.

"Shutdown" means any period in which there is more than a 24-hour lapse in appropriations for any federal government agency as a result of a failure to enact a regular appropriations bill or continuing resolution due to an impasse between the President and the Congress of the United States or between the two Houses of Congress.

(b) Notwithstanding the provisions of paragraph (1) of this subsection regarding delinquent payments, a municipality shall not charge interest to a delinquent taxpayer who is an eligible resident or who resides with a spouse, partner in a civil union, or domestic partner who is an eligible resident, if:

(i) a shutdown remains in effect for more than 21 days and either ends less than 14 days prior to the date upon which a property tax installment payment is payable pursuant to R.S.54:4-66 or section 2 of P.L.1994, c.72 (C.54:4-66.1), as appropriate, or remains in effect on the date that the property tax installment payment is due and payable; and

(ii) the governing body of the municipality in which the delinquent taxpayer resides adopts a resolution providing that interest shall not be charged to such a delinquent taxpayer if payment of the property tax installment, less any available property tax credit as defined in section 1 of P.L.2018, c.11 (C.54:4-66.6), is made on or before the date upon which the next property tax installment payment is payable.

(c) Interest shall not be charged pursuant to this paragraph only if a delinquent property taxpayer provides to the municipality proof that the delinquent property taxpayer's pay, or the pay of the delinquent property taxpayer's spouse, partner in a civil union, or domestic partner, is derived from a federal government agency that is affected by a shutdown. In the case of a federal employee, that proof shall be demonstrated by a pay stub showing employment by a federal government agency that is affected by a shutdown. In the case of a contractor, the resolution adopted by the governing body of the municipality pursuant to subparagraph (b) of this paragraph shall establish the criteria necessary to verify that the contractor's pay is received through a contract with a federal agency that is affected by a shutdown.

(d) The municipal clerk shall notify the Director of the Division of Local Government Services in the Department of Community Affairs

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of the municipality's adoption of a resolution effectuating the provisions of part (ii) of subparagraph (b) of this paragraph not later than the third business day next following the adoption of the resolution. If the municipality is under State supervision pursuant to the provisions of Article 4 of the "Local Government Supervision Act (1947)," P.L.1947, c.151 (C.52:27BB-54 et seq.), is subject to the provisions of the "Municipal Rehabilitation and Economic Recovery Act," P.L.2002, c.43 (C.52:27BBB-1 et al.), or is otherwise subject to a memorandum of understanding or similar agreement with the division as a condition of receiving supplemental State aid, the resolution shall not be effective unless it is approved by the director.

b. ¹[In any year when the governing body changes the rate of interest to be charged for delinquent taxes, assessments or other municipal charges, or to be charged for the end of the year penalty, the governing body, after adoption of a resolution changing the rate of interest, shall provide a notice to all taxpayers, prior to the date taxes are next due or with the tax bill, stating the new rate or rates to be charged ~~[and] , the date that the new rate or rates take effect, and, if the new rate or rates of interest are not to be effective for the remainder of the tax year, the property tax quarter or quarters for which the change in the rate or rates shall apply.~~ The notice may be separate from the tax bill. No change in the rate of interest or the end of year penalty shall take effect until the required notice has been provided in accordance with this subsection. To satisfy the notice requirement in this subsection, the governing body may use regular mail, or may use two of the following alternatives: electronic mail, text messaging system, telephonic system, or any other digital platform used by the municipality to disseminate information to municipal residents electronically.] At any time when the governing body changes the rate of interest to be charged for delinquent taxes, assessments, or other municipal charges, or to be charged for the end of the year penalty, pursuant to subsection a. of this section, the governing body, after adoption of a resolution changing the rate of interest, shall provide a notice to all taxpayers, prior to the date taxes are next due or with the tax bill, stating the new rate or rates to be charged, the date that the new rate or rates take effect, and, if the new rate or rates of interest are not to be effective for the remainder of the tax year, the property tax quarter or quarters for which the change in the rate or rates shall apply. The notice may be separate from the tax bill. A change in the rate of interest or the end of year penalty shall not take effect until the required notice has been provided in accordance with this subsection. To satisfy the notice requirement in this subsection, the governing body shall post the notice on its municipal bulletin board; post the notice on its municipal Internet webpage; publish the notice in its official newspaper; and issue the notice by one of the following alternatives: electronic mail, text messaging system, telephonic system, or any other digital platform used by the municipality to disseminate information to municipal residents electronically.¹

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c. In municipalities that have sold their property tax levy pursuant to section 16 of P.L.1997, c.99 (C.54:5-113.5), the rate of interest to be charged for the nonpayment of taxes, assessments or other municipal liens or charges shall be the same interest or delinquency rate or rates otherwise charged by the municipality, to be calculated from the date the tax was payable until the date of actual payment to the tax collector. The purchaser of the total property tax levy shall be paid only those amounts attributable to properties included in the total property tax levy purchase and actually collected by the tax collector and which amounts shall not include any delinquent interest collected by the municipal tax collector prior to the time that the total property tax levy purchaser makes the levy payment to the municipality.

d. Whenever the time period for a property tax installment payment has been extended pursuant to the provisions of subsection a. of this section, the Director of the Division of Local Government Services in the Department of Community Affairs may, by temporary order, extend the dates for payment of taxes by a municipality due to a county pursuant to R.S.54:4-74, any school district pursuant to R.S.54:4-75, and any other taxing district as provided by law.

"Delinquency" means the sum of all taxes and municipal charges due on a specific real property, less the amount of applicable property tax credit as defined in section 1 of P.L.2018, c.11 (C.54:4-66.6), covering any number of quarters or years. The property shall remain delinquent, as defined herein, until such time as all unpaid taxes, including subsequent taxes and liens, together with interest thereon shall have been fully paid and satisfied and all applicable property tax credit, as defined in section 1 of P.L.2018, c.11 (C.54:4-66.6), has been credited. The delinquency shall remain notwithstanding the issuance of a certificate of sale pursuant to R.S.54:5-32 and R.S.54:5-46, the payment of delinquent tax by the purchaser of the total property tax levy pursuant to section 16 of P.L.1997, c.99 (C.54:5-113.5) and for the purposes of satisfying the requirements for filing any tax appeal with the county board of taxation or the State tax court. The governing body may also fix a penalty to be charged to a taxpayer with a delinquency in excess of \$10,000 who fails to pay that delinquency as billed, less the amount of applicable property tax credit as defined in section 1 of P.L.2018, c.11 (C.54:4-66.6), prior to the end of the fiscal year. If any fiscal year delinquency in excess of \$10,000 is paid by the holder of an outstanding tax sale certificate or a total property tax levy purchaser, the holder or purchaser, as appropriate, shall be entitled to receive the amount of the penalty as part of the amount required to redeem such certificate of sale providing the payment is made by the tax lien holder or tax levy purchaser prior to the end of the fiscal year. If the holder of the outstanding tax sale certificate or the levy purchaser, as appropriate, does not make the payment in full prior to the end of the fiscal year, then the holder or purchaser shall be entitled to a pro rata share of the delinquency penalty upon redemption, and the balance of the penalty shall inure to the benefit of the municipality. The penalty so fixed shall

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not exceed 6% of the amount of the delinquency with respect to each most recent fiscal year only.

(cf: P.L.2019, c.491, s.1)

REPLACE SECTION 11 TO READ:

11. R.S.54:4-76 is amended to read as follows:

54:4-76. a. The governing body of the municipality or the county shall cause the county tax due, as calculated pursuant to R.S.54:4-74, and other county taxes levied, school tax due, as calculated pursuant to R.S.54:4-75, taxes due to other taxing districts, and State taxes to be paid as and when due for payment. If there shall not be sufficient funds in the treasury available for such payments, the governing body shall immediately borrow sufficient money and pay such taxes due. The board of chosen freeholders of each county may by resolution fix the rate of discount to be allowed for the payment to the county treasurer of county taxes previous to the date on which they will become due for payment. The rate so fixed shall not exceed six [per centum] percent per [annum] year, and shall be allowed only in case of payment on or before the thirtieth day previous to the date on which said taxes will become due for payment to the county treasurer. On any part of the taxes payable to the county treasurer and on any part of the taxes payable to the State by the county treasurer, which shall remain unpaid after the time within which they are required to be paid by this chapter, the taxing district or county in arrears shall pay to the county or State, as the case may be, interest at the rate of six [per centum] percent per [annum] year upon the delayed payment.

b. Notwithstanding the provisions of subsection a. of this section, the board of chosen freeholders of a county may, by resolution, waive the interest that a municipality is required to pay to the county pursuant ¹to¹ that subsection on any unpaid property taxes due and owing to the county by a municipality if the municipality adopted an extended interest-free period pursuant to ¹[paragraph (1) of subsection a. of R.S.54:4-67] subsection a. of section 1 of P.L. , c. (C.) (pending before the Legislature as this bill),¹ and a public health emergency, pursuant to the “Emergency Health Powers Act,” P.L.2005, c.222 (C.26:13-1 et seq.), or a state of emergency, pursuant to P.L.1942, c.251 ¹[(C.app.A.9-33 et seq.)] (C.App.A.9-33 et seq.)¹ , or both, has been declared by the Governor and is in effect. A waiver adopted by a county pursuant to this subsection shall expire 30 days after the end of the municipality’s extended interest-free period.

(cf: P.L.2013, c.261, s.5)

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From: McNichol, Michele
Sent time: 05/21/2020 03:32:14 PM
To: O'Brien, Shannon
Cc: Jones, Tammy; Jankauskas, Dittymae
Subject: Phone message
Attachments: Phone message

Sender: mmcniccho@co.gloucester.nj.us
Subject: Phone message
Message-Id: <8a8d77e93482435c8955f28050d78fee@co.gloucester.nj.us>
To: sobrien@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us
Cc: djankauskas@co.gloucester.nj.us

From: McNichol, Michele
Sent time: 05/21/2020 03:32:14 PM
To: O'Brien, Shannon
Cc: Jones, Tammy; Jankauskas, Dittymae
Subject: Phone message

Hi Shannon,
Can you please call Tracy Tully from the New York Times. 908-487-8145
She is asking about S.J. migrant workers testing positive for COVID-19.
Thanks,
Michele

From: Ruiz, Annmarie
Sent time: 05/21/2020 12:33:22 PM
To: Meghan Spinelli <mspinelli@chcinj.org>; Jankauskas, Dittymae; Jones, Tammy
Subject: RE:
Attachments: RE:

Sender: aruiz@co.gloucester.nj.us
Subject: RE:
Message-Id:
To: mspinelli@chcinj.org
To: djankauskas@co.gloucester.nj.us
To: tjones@co.gloucester.nj.us

F9569AD64A9F674B903A7134EA2AFE22@co.gloucester.nj.us.msg

>
> This week we do not have an Gloucester County Farms on the schedule . If you know anyone who is
> interested in setting up testing please give them my email or phone .
>
>
> Thank you,
> Meghan
> 856-562-5415
>
>> On May 16, 2020, at 9:00 PM, Ruiz, Annmarie wrote:
>>
>> ?Good evening Meghan,
>>
>> I understand that COVID testing has begun in Gloucester County at migrant farms. Megan
>> Sheppard, Cumberland, stated she obtained a list of farms that were tested.
>>
>> Gloucester County would also appreciate a list of farms that were tested this past week and
>> weeks moving forward.
>>
>> It is also our understanding that CompleteCare will be providing education to the individuals
>> tested. Is this correct?
>>
>> Please email me the list from this past week at your earliest convenience.
>>
>> Look forward to hearing from you.
>>
>> Annmarie Ruiz
>>
>>
>> Sent from my Verizon, Samsung Galaxy smartphone
>>
> CAUTION: This email originated from outside of the Gloucester County Email System. Do not click
> links or open attachments unless you recognize the sender and know the content is safe.
>
>

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/07/2020 06:35:42 AM
To: Jones, Tammy
Subject: Re: [EXT] Migrant Seasonal Farm Worker-FQHC testing
Attachments: Re: [EXT] Migrant Seasonal Farm Worker-FQHC testing

Sender: kaprielyanp@ihn.org
Subject: Re: [EXT] Migrant Seasonal Farm Worker-FQHC testing
Message-Id: <92c18256-e01f-4e4e-9e17-3fb2035637db@ihn.org>
Recipient: tjones@co.gloucester.nj.us

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/07/2020 06:35:37 AM
To: Jones, Tammy
Subject: Re: [EXT] Migrant Seasonal Farm Worker-FQHC testing

Thank you, Tammy - this is very helpful information- Peter

Sent from my iPhone

> On May 6, 2020, at 10:22 PM, Jones, Tammy wrote:

>
> This email DID NOT originate from within Inspira Health. Please STOP and THINK before opening attachments, clicking on links, or providing any information.

>

>

> Hi Peter:

>

> Our Health Officer, Annmarie Ruiz shared the below update with our team this evening.

>

> Will be certain to keep you in the loop with anything forthcoming-

>

> Thanks,

>

> Tammy

>

> Begin forwarded message:

>

> From: "Ruiz, Annmarie"

> Date: May 6, 2020 at 9:44:13 PM EDT

> To: "Jones, Tammy"

> Subject: FW: Migrant Seasonal Farm Worker-FQHC testing

>

>

> ----- Original message -----

> From: "Weller, Jamie"

> Date: 5/6/20 7:33 PM (GMT-05:00)

> To: "rdickinson (vinelandcity.org)" , "Ruiz, Annmarie" , "diamond_patricia (aclink.org)" , "msheppard (ccdoh.org)"

> Cc: "Robert.dickinson.salemcountynj.gov" , "Semple, Shereen" , Amanda Medina-Forrester

> Subject: Migrant Seasonal Farm Worker-FQHC testing

>

> Good evening,

>

> As you know, an interagency task force was created at the State level to address the unique needs of the migrant seasonal farm worker population. This task force is comprised of individuals in the NJ Departments of Health, Agriculture, Labor, Education, and Human Services. The group has created a guidance document that will be shared very soon. As soon as we have the guidance in OLPH, we will ensure all local health officers have access to it as well.

> One strategy to address this vulnerable population relates to testing of migrant farmers. FQHCs will be performing pilot testing starting in the following counties: Salem, Gloucester, Atlantic, and Cumberland. OLPH does not have information about the progression of counties after the initial pilot. Testing is expected to begin in the coming days.

> Understanding your role as the leads for communicable disease response in your jurisdictions, OLPH wished to share this information with you as soon as we were able. Once the guidance document is available for your review, we will offer an opportunity for you to ask questions and receive clarification. In addition, there will be a stakeholder call next week regarding this matter. Again, when the specific details are available, we will be sure to share them with you.

> If you should have any immediate questions about this pilot, please feel free to reach out to me.

> Thank you,

> Jamie Weller, MSN, RN, CSN-NJ

> Public Health Nurse Consultant

> NJ Department of Health - Office of Local Public Health

> PO Box 360

> Trenton, NJ 08625-0360

> Phone: (609) 571 - 8321

> Website: [https://urldefense.proofpoint.com/v2/url?u=https-](https://urldefense.proofpoint.com/v2/url?u=https-3A_www.nj.gov_health_lh_&d=DwIFAg&c=4KMPUUpXSo_GzzNawiXccmZW42qm_UVtlqj7ZBw2LkY&r=c39S_qLntloQf3G)

> 3A_www.nj.gov_health_lh_&d=DwIFAg&c=4KMPUUpXSo_GzzNawiXccmZW42qm_UVtlqj7ZBw2LkY&r=c39S_qLntloQf3G

y3brnZyWG7IuKVGggtZtleXwtbss&m=u4R3dnry81QCOSLOKIZvRs8_IDKHWPpWtBakaxcjfX8&s=tVCv48wghput02dx19uuXh-Da4L0YZcFbunwKHknS5U&e=

>

> [cid:image001.png@01D623DC.FD473D50]

>

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>

We are testing everyone at the farm location .

The address that you get should match the address the patient gave us ?

Feel free to call me anytime with questions .

Thank you,
Meg

On May 17, 2020, at 9:44 AM, Ruiz, Annmarie aruiz@co.gloucester.nj.us> wrote:

Thank you for the information. All farms tested should have a line list to assist in documenting onset, living location on farm, signs and symptoms, etc. I know the state is working with you on this request. Our agency would also need assistance with translation.

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: Meghan Spinelli mspinelli@chcinj.org>

Date: 5/16/20 10:02 PM (GMT-05:00)

To: "Ruiz, Annmarie" aruiz@co.gloucester.nj.us>

Subject: Re: REQUEST: List of farms COVID testing

Yes, we tested at [REDACTED] in [REDACTED]. We completed 122 tests at that location .

We have handout in Spanish in covid for farms . I've been working with the owners in many different levels , arranging housing , helping setting up temperature checks before work, educational material for staff and all the what if's.

This week we do not have an Gloucester County Farms on the schedule . If you know anyone who is interested in setting up testing please give them my email or phone .

Thank you,

Meghan

856-562-5415

On May 16, 2020, at 9:00 PM, Ruiz, Annmarie aruiz@co.gloucester.nj.us> wrote:

?Good evening Meghan,

I understand that COVID testing has begun in Gloucester County at migrant farms. Megan Sheppard, Cumberland, stated she obtained a list of farms that were tested.

Gloucester County would also appreciate a list of farms that were tested this past week and weeks moving forward.

It is also our understanding that CompleteCare will be providing education to the individuals tested. Is this correct?

Please email me the list from this past week at your earliest convenience.

Look forward to hearing from you.

Annmarie Ruiz

Sent from my Verizon, Samsung Galaxy smartphone

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3A0D9AB68982D74EB4267B9479618375@co.gloucester.nj.us.msg

From: Jankauskas, Dittymae
Sent time: 05/01/2020 08:44:54 AM
To: Jones, Tammy
Subject: RE: CompleteCare
Attachments: RE: CompleteCare

Sender: djankauskas@co.gloucester.nj.us
Subject: RE: CompleteCare
Message-Id: <1bbe206fcd67468e92fdff72932dc0ff@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Jankauskas, Dittymae
Sent time: 05/01/2020 08:44:54 AM
To: Jones, Tammy
Subject: RE: CompleteCare

Call me when you have a minute

Thanks

Ditty Mae Jankauskas RN, MSN, CRNP
Director of Public Health Nursing
Gloucester County Department of Health
204 E Holly Ave
Sewell, NJ 08080
(856) 218-4135
FAX (856) 218-4109

This transmission is confidential and may be legally privileged. If you are not the intended recipient, please notify the sender by return e-mail and delete this message from your system. The County of Gloucester reserves the right to monitor e-mail communication. No contract may be concluded on behalf of the County of Gloucester by e-mail. If the content of the e-mail does not relate to the business of the County of Gloucester, then we do not endorse it and will accept no liability.

-----Original Message-----

From: Jones, Tammy
Sent: Friday, May 01, 2020 8:11 AM
To: Ruiz, Annmarie ; Jankauskas, Dittymae
Subject: CompleteCare

FYI -

Thoughts...?

-----Original Message-----

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]
Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy
Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

We are going to bring going out and visiting the migrant camps to provide testing information along with educational material . Could you share with me the health department testing info so I can pass it on .

Hope I you are doing well during this difficult time. Thank you for everything!

Thank you ,
Meghan

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77A0237022A207489D8C2C5ABFD966542@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/01/2020 02:32:57 PM
To: Casella, Michelle
Subject: RE: CompleteCare
Attachments: RE: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: RE: CompleteCare
Message-Id: <922336a169a04a88aa4b27c87da26c5c@co.gloucester.nj.us>
To: minfante@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/01/2020 02:32:57 PM
To: Casella, Michelle
Subject: RE: CompleteCare

We appreciate it so much Michelle-
Thank you for getting back to me!
Tammy

From: Casella, Michelle
Sent: Friday, May 1, 2020 2:32 PM
To: Jones, Tammy
Subject: Re: CompleteCare
Hi Tammy,

No, we have no reports from farmers of any workers having illness at this time. No one has reported any that we are aware of. Not all workers have arrived to the farms right now. I would say about 50% are here now and more will come just before the bulk of the harvests begin. If I find out any information, I will reach out to you Tammy.

Hope you are well,
Michelle

From: Jones, Tammy
Sent: Friday, May 1, 2020 9:16 AM
To: Casella, Michelle
Subject: FW: CompleteCare
Hi Michelle:

Hoping you don't mind my reaching out to bother you?!

Health received the below e-mail.

Are you aware of any farms reporting concerns of Covid-19 positive cases, with their migrant workers?
We are not showing any specific farm.
Or, are there any farm communities that need additional support/information which Meghan and Complete Care are willing to offer?

Just double-checking with you before reaching back out to Meghan in follow-up (below).

Thanks!

Tammy

-----Original Message-----

From: Meghan Spinelli [<mailto:mspinelli@chcini.org>]
Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy [tjones@co.gloucester.nj.us]
Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

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Thank you ,
Meghan

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From: Jones, Tammy
Sent time: 05/01/2020 02:41:48 PM
To: Casella, Michelle
Subject: RE: CompleteCare
Attachments: RE: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: RE: CompleteCare
Message-Id:
To: minfante@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/01/2020 02:41:48 PM
To: Casella, Michelle
Subject: RE: CompleteCare

Never a worry Michelle-
I appreciate you getting back to me!
And the plan work comes at a good time....thank you for your diligence and foresight in working on it!
Will definitely be interested in what you come up with...and appreciate you sharing with us here @ Health!
Will be in touch,
Tammy

From: Casella, Michelle
Sent: Friday, May 1, 2020 2:37 PM
To: Jones, Tammy
Subject: Re: CompleteCare

Hi Tammy,

Sorry it took so long, had 2 webinars today and didn't get a chance to check county email.

We are working (we have 2 ag agents, and my husband is on the committee for NJ Farm Bureau) with the NJ Dept. of Ag, the NJ Dept. of Labor and the NJ Dept of Health to develop a plan farmers with labor camps to address COVID preparedness for farms. PA and NC have official plans for farm workers with their state departments of health. Ours will most likely be similar. I will send the document to you as soon as we receive it.

Thank you,
Michelle

From: Jones, Tammy
Sent: Friday, May 1, 2020 2:32:57 PM
To: Casella, Michelle
Subject: RE: CompleteCare

We appreciate it so much Michelle-
Thank you for getting back to me!
Tammy

From: Casella, Michelle
Sent: Friday, May 1, 2020 2:32 PM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: Re: CompleteCare

Hi Tammy,

No, we have no reports from farmers of any workers having illness at this time. No one has reported any that we are aware of. Not all workers have arrived to the farms right now. I would say about 50% are here now and more will come just before the bulk of the harvests begin. If I find out any information, I will reach out to you Tammy.

Hope you are well,
Michelle

From: Jones, Tammy
Sent: Friday, May 1, 2020 9:16 AM
To: Casella, Michelle
Subject: FW: CompleteCare
Hi Michelle:

Hoping you don't mind my reaching out to bother you?!

Health received the below e-mail.

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We are not showing any specific farm.
Or, are there any farm communities that need additional support/information which Meghan and Complete Care are willing to offer?

Just double-checking with you before reaching back out to Meghan in follow-up (below).

Thanks!

Tammy

-----Original Message-----

From: Meghan Spinelli [<mailto:mspinelli@chcini.org>]

Sent: Friday, May 1, 2020 8:07 AM

To: Jones, Tammy tjones@co.gloucester.nj.us>

Subject: CompleteCare

Good morning,

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Thank you ,
Meghan

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F59C24D0666D7E42A3352FF841ABCE87@co.gloucester.nj.us.msg

From: Casella, Michelle
Sent time: 05/01/2020 02:37:07 PM
To: Jones, Tammy
Subject: Re: CompleteCare
Attachments: Re: CompleteCare

Sender: minfante@co.gloucester.nj.us
Subject: Re: CompleteCare
Message-Id: <01b961cfbec3472790a08c5ad18a057f@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Casella, Michelle
Sent time: 05/01/2020 02:37:07 PM
To: Jones, Tammy
Subject: Re: CompleteCare

Hi Tammy,

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We are working (we have 2 ag agents, and my husband is on the committee for NJ Farm Bureau) with the NJ Dept. of Ag, the NJ Dept. of Labor and the NJ Dept of Health to develop a plan farmers with labor camps to address COVID preparedness for farms. PA and NC have official plans for farm workers with their state departments of health. Ours will most likely be similar. I will send the document to you as soon as we receive it.

Thank you,
Michelle

From: Jones, Tammy
Sent: Friday, May 1, 2020 2:32:57 PM
To: Casella, Michelle
Subject: RE: CompleteCare
We appreciate it so much Michelle-
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Tammy

From: Casella, Michelle
Sent: Friday, May 1, 2020 2:32 PM
To: Jones, Tammy
Subject: Re: CompleteCare

Hi Tammy,

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Subject: FW: CompleteCare
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Just double-checking with you before reaching back out to Meghan in follow-up (below).

Thanks!

Tammy

-----Original Message-----

From: Meghan Spinelli [<mailto:mspinelli@cheinj.org>]
Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy [tjones@co.gloucester.nj.us]
Subject: CompleteCare

Good morning,

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Hope I you are doing well during this difficult time. Thank you for everything!

Thank you ,
Meghan

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48E52F73E5ED474582D29DDDD30361968@co.gloucester.nj.us.msg

From: Casella, Michelle
Sent time: 05/01/2020 02:32:24 PM
To: Jones, Tammy
Subject: Re: CompleteCare
Attachments: Re: CompleteCare

Sender: minfante@co.gloucester.nj.us
Subject: Re: CompleteCare
Message-Id:
To: tjones@co.gloucester.nj.us

From: Casella, Michelle
Sent time: 05/01/2020 02:32:23 PM
To: Jones, Tammy
Subject: Re: CompleteCare

Hi Tammy,

No, we have no reports from farmers of any workers having illness at this time. No one has reported any that we are aware of. Not all workers have arrived to the farms right now. I would say about 50% are here now and more will come just before the bulk of the harvests begin. If I find out any information, I will reach out to you Tammy.

Hope you are well,
Michelle

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Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy
Subject: CompleteCare

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BE76E00499E6CA4A919E00D4780C6B2E@co.gloucester.nj.us.msg

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/04/2020 02:37:21 PM
To: Jones, Tammy
Subject: RE: CompleteCare
Attachments: RE: CompleteCare

Sender: mspinelli@chcinj.org
Subject: RE: CompleteCare
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/04/2020 02:37:13 PM
To: Jones, Tammy
Subject: RE: CompleteCare

Hello,

I wanted to inform you that we would like to start providing Covid testing on the migrant camps early next week. Could we setup a call with your Department? I feel it would be best to keep you in the loop with the CompleteCare plans.

Thank you,
Meghan

From: Jones, Tammy [mailto:tjones@co.gloucester.nj.us]
Sent: Friday, May 01, 2020 3:05 PM
To: Meghan Spinelli
Cc: Spence, Daniele
Subject: CompleteCare

Hi Meghan:

I am in receipt of your correspondence below and do thank you for reaching out to us at the Gloucester County Department of Health.

At this time, this Department is not aware of any farm experiencing a number of positive Covid-19 cases. We additionally reached out to our point of contact at Rutgers Cooperative Extension to see if their office has received any reports from farmers of any workers having illness at this time.

That office also indicated that none have been reported thus far.

If we learn anything more and further support or assistance is needed, we will certainly reach out; as we truly appreciate you reaching out to provided added education and assistance!

Wishing you well –
Tamarisk L. Jones

Director
Gloucester County Department of Health
204 East Holly Ave.
Sewell, NJ 08080
(856) 218 - 4130

-----Original Message-----

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]
Sent: Friday, May 1, 2020 8:07 AM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: CompleteCare

Good morning,

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Thank you ,
Meghan

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0E397DC192ECF34E9A05A353A99DA135@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/04/2020 02:40:38 PM
To: Meghan Spinelli <mspinelli@chcinj.org>
Cc: Ruiz, Annmarie; Jankauskas, Dittymae
Subject: RE: CompleteCare
Attachments: RE: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: RE: CompleteCare
Message-Id: <22dad454dae244718814664de4d61efe@co.gloucester.nj.us>
To: mspinelli@chcinj.org
Cc: aruiz@co.gloucester.nj.us
Cc: djankauskas@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/04/2020 02:40:38 PM
To: Meghan Spinelli <mspinelli@chcinj.org>
Cc: Ruiz, Annmarie; Jankauskas, Dittymae
Subject: RE: CompleteCare

Hi Meghan:

What date/time would you like to hold the call?

We appreciate you reaching out and would be interested in discussing further with you.

Thanks,

Tammy

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 -4130

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]

Sent: Monday, May 4, 2020 2:37 PM

To: Jones, Tammy

Subject: RE: CompleteCare

Hello,

I wanted to inform you that we would like to start providing Covid testing on the migrant camps early next week. Could we setup a call with your Department? I feel it would be best to keep you in the loop with the CompleteCare plans.

Thank you,

Meghan

From: Jones, Tammy [mailto:tjones@co.gloucester.nj.us]

Sent: Friday, May 01, 2020 3:05 PM

To: Meghan Spinelli

Cc: Spence, Daniele

Subject: CompleteCare

Hi Meghan:

I am in receipt of your correspondence below and do thank you for reaching out to us at the Gloucester County Department of Health.

At this time, this Department is not aware of any farm experiencing a number of positive Covid-19 cases.

We additionally reached out to our point of contact at Rutgers Cooperative Extension to see if their office has received any reports from farmers of any workers having illness at this time.

That office also indicated that none have been reported thus far.

If we learn anything more and further support or assistance is needed, we will certainly reach out; as we truly appreciate you reaching out to provided added education and assistance!

Wishing you well –

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 - 4130

-----Original Message-----

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]

Sent: Friday, May 1, 2020 8:07 AM

To: Jones, Tammy [mailto:tjones@co.gloucester.nj.us]

Subject: CompleteCare

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Meghan

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1BF08C90B93DC440A6227EE5E4FEE5FE@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/04/2020 04:47:58 PM
To: Meghan Spinelli <mspinelli@chcinj.org>
Subject: RE: CompleteCare
Attachments: RE: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: RE: CompleteCare
Message-Id:
To: mspinelli@chcinj.org

From: Jones, Tammy
Sent time: 05/04/2020 04:47:58 PM
To: Meghan Spinelli <mspinelli@chcinj.org>
Subject: RE: CompleteCare

Hi Meghan:

Yes, Wednesday, May 6th @ 9:00 am works for our team here at Health.

Let us know if there is a specific number you'd like us to call into.

Thanks,

Tammy

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 - 4130

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]

Sent: Monday, May 4, 2020 2:48 PM

To: Jones, Tammy

Subject: Re: CompleteCare

Hello,

How is Wednesday at 9am?

On May 4, 2020, at 2:40 PM, Jones, Tammy tjones@co.gloucester.nj.us> wrote:

Hi Meghan:

What date/time would you like to hold the call?

We appreciate you reaching out and would be interested in discussing further with you.

Thanks,

Tammy

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 -4130

From: Meghan Spinelli [mailto:mspinelli@chcinj.org]

Sent: Monday, May 4, 2020 2:37 PM

To: Jones, Tammy tjones@co.gloucester.nj.us>

Subject: RE: CompleteCare

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CompleteCare plans.

Thank you,

Meghan

From: Jones, Tammy [mailto:tjones@co.gloucester.nj.us]

Sent: Friday, May 01, 2020 3:05 PM

To: Meghan Spinelli

Cc: Spence, Daniele

Subject: CompleteCare

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25D80AF6E3E3284C9C855A13990C77B4@co.gloucester.nj.us.msg

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204 East Holly Ave.

Sewell, NJ 08080

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To: Jones, Tammy tjones@co.gloucester.nj.us>

Subject: CompleteCare

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From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/04/2020 02:47:52 PM
To: Jones, Tammy
Subject: Re: CompleteCare
Attachments: Re: CompleteCare

Sender: mspinelli@chcinj.org
Subject: Re: CompleteCare
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/04/2020 02:47:43 PM
To: Jones, Tammy
Subject: Re: CompleteCare

Hello,

How is Wednesday at 9am?

On May 4, 2020, at 2:40 PM, Jones, Tammy wrote:

Hi Meghan:

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Director

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Sent: Monday, May 4, 2020 2:37 PM

To: Jones, Tammy

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Thank you,

Meghan

From: Jones, Tammy [mailto:tjones@co.gloucester.nj.us]

Sent: Friday, May 01, 2020 3:05 PM

To: Meghan Spinelli

Cc: Spence, Daniele

Subject: CompleteCare

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Sent: Friday, May 1, 2020 8:07 AM

To: Jones, Tammy tjones@co.gloucester.nj.us>

60ACC703090B2640B338BE52E1F1C388@co.gloucester.nj.us.msg

Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

We are going to bring going out and visiting the migrant camps to provide testing information along with educational material . Could you share with me the health department testing info so I can pass it on .

Hope I you are doing well during this difficult time. Thank you for everything!

Thank you ,
Meghan

CAUTION: This email originated from outside of the Gloucester County Email System. Do not click links or open attachments unless you recognize the sender and know the content is safe.

60ACC703090B2640B338BE52E1F1C388@co.gloucester.nj.us.msg

From: Doyle, Kathleen (Katie)
Sent time: 05/06/2020 09:52:46 AM
To: Jones, Tammy
Subject: RE: CompleteCare
Attachments: RE: CompleteCare

Sender: kdoyle@co.gloucester.nj.us
Subject: RE: CompleteCare
Message-Id:
To: tjones@co.gloucester.nj.us

From: Doyle, Kathleen (Katie)
Sent time: 05/06/2020 09:52:46 AM
To: Jones, Tammy
Subject: RE: CompleteCare

OK, I will send her Social Services contact information.

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

This transmission is confidential and may be legally privileged. If you are not the intended recipient, please notify the sender by return e-mail and delete this message from your system. The County of Gloucester reserves the right to monitor e-mail communication. No contract may be concluded on behalf of the County of Gloucester by e-mail. If the content of this e-mail does not relate to the business of the County of Gloucester, then we do not endorse it and will accept no liability."

From: Jones, Tammy
Sent: Wednesday, May 6, 2020 9:52 AM
To: Doyle, Kathleen (Katie)
Subject: CompleteCare

Katie:

The individual from Complete Care that set things up today
Was Meghan Spinelli...
mspinelli@chcinj.org

From: Meghan Spinelli [<mailto:mspinelli@chcinj.org>]
Sent: Monday, May 4, 2020 2:37 PM
To: Jones, Tammy [tjones@co.gloucester.nj.us]
Subject: RE: CompleteCare

Hello,

I wanted to inform you that we would like to start providing Covid testing on the migrant camps early next week. Could we setup a call with your Department? I feel it would be best to keep you in the loop with the CompleteCare plans.

Thank you,
Meghan

From: Jones, Tammy [<mailto:tjones@co.gloucester.nj.us>]
Sent: Friday, May 01, 2020 3:05 PM
To: Meghan Spinelli
Cc: Spence, Daniele
Subject: CompleteCare

Hi Meghan:

I am in receipt of your correspondence below and do thank you for reaching out to us at the Gloucester County Department of Health.

At this time, this Department is not aware of any farm experiencing a number of positive Covid-19 cases. We additionally reached out to our point of contact at Rutgers Cooperative Extension to see if their office has received any reports from farmers of any workers having illness at this time.

That office also indicated that none have been reported thus far.

If we learn anything more and further support or assistance is needed, we will certainly reach out; as we truly appreciate you reaching out to provided added education and assistance!

Wishing you well –

Tamarisk L. Jones
Director

Gloucester County Department of Health
204 East Holly Ave.
Sewell, NJ 08080
(856) 218 - 4130

-----Original Message-----

From: Meghan Spinelli [<mailto:mspinelli@chcinj.org>]
Sent: Friday, May 1, 2020 8:07 AM

1A671A7CB8A87D49B91A3C7088ED4CB9@co.gloucester.nj.us.msg

To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: CompleteCare

Good morning,

I was on a call the other day with the state health department that indicated that Gloucester County had a farm that had a number of positive covid cases . I was seeing if you could share that information with me so that completecare can help educate these migrants seasonal farm workers on the COVID-19 it is a huge part of our mission.

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Hope I you are doing well during this difficult time. Thank you for everything!

Thank you ,
Meghan

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1A671A7CB8A87D49B91A3C7088ED4CB9@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/06/2020 09:56:50 AM
To: Doyle, Kathleen (Katie)
Subject: Re: CompleteCare
Attachments: Re: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: Re: CompleteCare
Message-Id:
To: kdoyle@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/06/2020 09:56:49 AM
To: Doyle, Kathleen (Katie)
Subject: Re: CompleteCare

Really appreciate it Katie!

On May 6, 2020, at 9:52 AM, Doyle, Kathleen (Katie) wrote:

OK, I will send her Social Services contact information.

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Jones, Tammy

Sent: Wednesday, May 6, 2020 9:52 AM

To: Doyle, Kathleen (Katie)

Subject: CompleteCare

Katie:

The individual from Complete Care that set things up today

Was Meghan Spinelli....

mspinelli@chcinj.org

From: Meghan Spinelli [<mailto:mspinelli@chcinj.org>]

Sent: Monday, May 4, 2020 2:37 PM

To: Jones, Tammy [tjones@co.gloucester.nj.us]

Subject: RE: CompleteCare

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Thank you,

Meghan

From: Jones, Tammy [<mailto:tjones@co.gloucester.nj.us>]

Sent: Friday, May 01, 2020 3:05 PM

To: Meghan Spinelli

Cc: Spence, Daniele

Subject: CompleteCare

Hi Meghan:

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That office also indicated that none have been reported thus far.

If we learn anything more and further support or assistance is needed, we will certainly reach out; as we truly

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Wishing you well –

Tamarisk L. Jones

Director

Gloucester County Department of Health
204 East Holly Ave.
Sewell, NJ 08080
(856) 218 - 4130

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Sent: Friday, May 1, 2020 8:07 AM

To: Jones, Tammy tjones@co.gloucester.nj.us>

Subject: CompleteCare

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Thank you ,
Meghan

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From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/18/2020 03:56:57 PM
To: Jones, Tammy
Subject: Re: CompleteCare
Attachments: Re: CompleteCare

Sender: mspinelli@chcinj.org
Subject: Re: CompleteCare
Message-Id: <46a4262d-88df-4d08-a94d-1b46537c0b43@chcinj.org>
Recipient: tjones@co.gloucester.nj.us

From: Meghan Spinelli <mspinelli@chcinj.org>
Sent time: 05/18/2020 03:26:03 PM
To: Jones, Tammy
Subject: Re: CompleteCare

Do you have any PPE you could spare us for testing ?

On May 18, 2020, at 10:27 AM, Jones, Tammy wrote:

Hi Meghan:

Annmari Ruiz, our Health Officer here in Gloucester County has been trying to reach you- If you are able, please contact us @ (856) 218 – 4136.

This in follow-up to your inquiry regarding the Covid-19 re-testing of migrant farm workers- We would also like to speak with you in follow-up to the testing that has taken place at one of our Gloucester County Farms.

Thanks,

Tammy

Tamarisk L Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

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9E3D3F3A145D4E4E81924120BCB499E1@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/18/2020 07:08:03 PM
To: Meghan Spinelli <mspinelli@chcinj.org>
Subject: Re: CompleteCare
Attachments: Re: CompleteCare

Sender: tjones@co.gloucester.nj.us
Subject: Re: CompleteCare
Message-Id: <7a8ce8b7-9c6d-429e-99d9-6af8fe24d822@co.gloucester.nj.us>
To: mspinelli@chcinj.org

From: Jones, Tammy
Sent time: 05/18/2020 07:08:03 PM
To: Meghan Spinelli <mspinelli@chcinj.org>
Subject: Re: CompleteCare

Hi Meghan:

We do not have any testing PPE at Health.

Will check with our OEM leads tomorrow morning-

Thx,

Tammy

On May 18, 2020, at 3:56 PM, Meghan Spinelli wrote:

Do you have any PPE you could spare us for testing ?

On May 18, 2020, at 10:27 AM, Jones, Tammy wrote:

Hi Meghan:

Annmarie Ruiz, our Health Officer here in Gloucester County has been trying to reach you-
If you are able, please contact us @ (856) 218 – 4136.

This in follow-up to your inquiry regarding the Covid-19 re-testing of migrant farm workers-
We would also like to speak with you in follow-up to the testing that has taken place at one
of our Gloucester County Farms.

Thanks,

Tammy

Tamarisk L Jones

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

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9E057CB9AC36BE45BA171E162FBC6EC5@co.gloucester.nj.us.msg

From: Bianco, Thomas A.
Sent time: 05/06/2020 02:35:55 PM
To: Kaprielyan, Peter <kaprielyanp@ihn.org>; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: tbianco@co.gloucester.nj.us

Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Message-Id: <8c90c7969ce0430ead70e892bc772741@co.gloucester.nj.us>

To: kaprielyanp@ihn.org

To: tjones@co.gloucester.nj.us

Cc: dmcnulty@co.gloucester.nj.us

Cc: jdeangelo@co.gloucester.nj.us

Cc: mshirey@co.gloucester.nj.us

Cc: minfante@co.gloucester.nj.us

From: Bianco, Thomas A.
Sent time: 05/06/2020 02:35:54 PM
To: Kaprielyan, Peter <kaprielyanp@ihn.org>; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

5/6/20

Peter

I am including Dennis McNulty and Jack DeAngelo from the EOC on this email. I am also including Michelle Casella who works with the agriculture community in Gloucester County and I am also including Michelle Shirey from the GC WDB because we work with that population of workers to make sure they are aware of all of the resources that are available.

Tom

From: Kaprielyan, Peter
Sent: Wednesday, May 06, 2020 2:19 PM
To: Bianco, Thomas A. ; Jones, Tammy
Subject: Concerns about the health of migrant workers in Gloucester County and region

Tammy – greetings. Tom Bianco and I were discussing an unrelated issue and I mentioned that one our newest concerns is the health of migrant workers community in the greater South Jersey region. While we continue to conduct surge planning, which is based on “community spread,” one of the greatest unknowns is how the migrant community will be impacted. This is especially timely as we understand that the growing season and migrant influx is now in play and will continue for the next couple of months. To this extent, I would be interested in learning about any plans or considerations by of the County in addressing this issue. If helpful, I would be happy to set up a call to discuss this issue further. I appreciate your thoughts - Peter

Peter A. Kaprielyan

Vice President, Government and External Relations

Inspira Health

Corporate Office Mullica Hill

165 Bridgeton Pike | Mullica Hill, NJ 08062

Office: (856) 641-6602 | Fax: (856) 575-5178

Mobile: (609) 636-6508



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From: Jones, Tammy
Sent time: 05/06/2020 04:56:59 PM
To: Kaprielyan, Peter <kaprielyanp@ihn.org>
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: tjones@co.gloucester.nj.us
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Message-Id:
To: kaprielyanp@ihn.org

From: Jones, Tammy
Sent time: 05/06/2020 04:56:59 PM
To: Kaprielyan, Peter <kaprielyanp@ihn.org>
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Hi Peter:

Always good to hear from you!

Yes, our office was contacted today by Complete Care who are involved with on-site testing they want to get underway, Along with the provision of needed education for these individuals. Their focus was originally in Salem County. However, since A number of the migrant workers cross over into Gloucester County farm communities to work, they reached out to our office as well.

Cumberland County will also be another area that will become involved going forward.

At this time, they are working to develop a plan to address the many needs that will arise should confirmed cases avail.

We will be certain to involve you in future conversations. In fact, this was raised with State Health as well, who may reach out to you directly.

In the meantime, as further discussions unfold, please be assured, we will include you all.

More to come- Will be in touch

Thanks,

Tammy

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 - 4130

From: Kaprielyan, Peter [mailto:kaprielyanp@ihn.org]

Sent: Wednesday, May 6, 2020 2:19 PM

To: Bianco, Thomas A. ; Jones, Tammy

Subject: Concerns about the health of migrant workers in Gloucester County and region

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From: Kaprielyan, Peter <kaprielyan@ihn.org>
Sent time: 05/06/2020 05:02:08 PM
To: Jones, Tammy
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyan@ihn.org
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Message-Id:
Recipient: tjones@co.gloucester.nj.us

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/06/2020 05:02:04 PM
To: Jones, Tammy
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Thanks, Tammy!
Peter A. Kaprielyan
Vice President, Government and External Relations
Inspira Health
Corporate Office Mullica Hill
165 Bridgeton Pike | Mullica Hill, NJ 08062
Office: (856) 641-6602 | Fax: (856) 575-5178
Mobile: (609) 636-6508



From: Jones, Tammy
Sent: Wednesday, May 6, 2020 4:57 PM
To: Kaprielyan, Peter
Subject: [EXT] RE: Concerns about the health of migrant workers in Gloucester County and region

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Hi Peter:

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In the meantime, as further discussions unfold, please be assured, we will include you all.

More to come- Will be in touch

Thanks,

Tammy

Director

Gloucester County Department of Health

204 East Holly Ave.

Sewell, NJ 08080

(856) 218 - 4130

From: Kaprielyan, Peter [<mailto:kaprielyanp@ihn.org>]
Sent: Wednesday, May 6, 2020 2:19 PM
To: Bianco, Thomas A. tbianco@co.gloucester.nj.us; Jones, Tammy tjones@co.gloucester.nj.us
Subject: Concerns about the health of migrant workers in Gloucester County and region

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2692C90A914A51469E7AA378FBC768CA@co.gloucester.nj.us.msg

From: Kaprielyan, Peter <kaprielyan@ihn.org>
Sent time: 05/06/2020 05:34:30 PM
To: Bianco, Thomas A.; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyan@ihn.org

Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Message-Id:

Recipient: mshirey@co.gloucester.nj.us

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Sent time: 05/06/2020 05:34:20 PM
To: Bianco, Thomas A.; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Thanks, Tom
Peter A. Kaprielyan
Vice President, Government and External Relations
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Corporate Office Mullica Hill
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Mobile: (609) 636-6508



From: Bianco, Thomas A.
Sent: Wednesday, May 6, 2020 2:36 PM
To: Kaprielyan, Peter ; Jones, Tammy
Cc: McNulty, Dennis P. ; DeAngelo, Jack ; Shirey, Michelle ; Casella, Michelle
Subject: [EXT] RE: Concerns about the health of migrant workers in Gloucester County and region

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5/6/20
Peter

I am including Dennis McNulty and Jack DeAngelo from the EOC on this email. I am also including Michelle Casella who works with the agriculture community in Gloucester County and I am also including Michelle Shirey from the GC WDB because we work with that population of workers to make sure they are aware of all of the resources that are available.

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Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyan@ihn.org

Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Message-Id:

Recipient: jdeangelo@co.gloucester.nj.us

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/06/2020 05:34:20 PM
To: Bianco, Thomas A.; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

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Peter A. Kaprielyan
Vice President, Government and External Relations
Inspira Health
Corporate Office Mullica Hill
165 Bridgeton Pike | Mullica Hill, NJ 08062
Office: (856) 641-6602 | Fax: (856) 575-5178
Mobile: (609) 636-6508



From: Bianco, Thomas A.
Sent: Wednesday, May 6, 2020 2:36 PM
To: Kaprielyan, Peter ; Jones, Tammy
Cc: McNulty, Dennis P. ; DeAngelo, Jack ; Shirey, Michelle ; Casella, Michelle
Subject: [EXT] RE: Concerns about the health of migrant workers in Gloucester County and region

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5/6/20
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To: Bianco, Thomas A. <tbianco@co.gloucester.nj.us>; Jones, Tammy <tjones@co.gloucester.nj.us>
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Mobile: (609) 636-6508



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Sent time: 05/06/2020 05:34:31 PM
To: Bianco, Thomas A.; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyan@ihn.org

Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Message-Id:

Recipient: dmcnulty@co.gloucester.nj.us

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent time: 05/06/2020 05:34:20 PM
To: Bianco, Thomas A.; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Thanks, Tom
Peter A. Kaprielyan
Vice President, Government and External Relations
Inspira Health
Corporate Office Mullica Hill
165 Bridgeton Pike | Mullica Hill, NJ 08062
Office: (856) 641-6602 | Fax: (856) 575-5178
Mobile: (609) 636-6508



From: Bianco, Thomas A.
Sent: Wednesday, May 6, 2020 2:36 PM
To: Kaprielyan, Peter ; Jones, Tammy
Cc: McNulty, Dennis P. ; DeAngelo, Jack ; Shirey, Michelle ; Casella, Michelle
Subject: [EXT] RE: Concerns about the health of migrant workers in Gloucester County and region

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5/6/20
Peter

I am including Dennis McNulty and Jack DeAngelo from the EOC on this email. I am also including Michelle Casella who works with the agriculture community in Gloucester County and I am also including Michelle Shirey from the GC WDB because we work with that population of workers to make sure they are aware of all of the resources that are available.

Tom

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
Sent: Wednesday, May 06, 2020 2:19 PM
To: Bianco, Thomas A. <tbianco@co.gloucester.nj.us>; Jones, Tammy <tjones@co.gloucester.nj.us>
Subject: Concerns about the health of migrant workers in Gloucester County and region

Tammy – greetings. Tom Bianco and I were discussing an unrelated issue and I mentioned that one our newest concerns is the health of migrant workers community in the greater South Jersey region. While we continue to conduct surge planning, which is based on “community spread,” one of the greatest unknowns is how the migrant community will be impacted. This is especially timely as we understand that the growing season and migrant influx is now in play and will continue for the next couple of months. To this extent, I would be interested in learning about any plans or considerations by of the County in addressing this issue. If helpful, I would be happy to set up a call to discuss this issue further. I appreciate your thoughts - Peter

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From: Kaprielyan, Peter <kaprielyan@ihn.org>
Sent time: 05/06/2020 05:34:31 PM
To: Bianco, Thomas A.; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyan@ihn.org
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region
Message-Id:
Recipient: minfante@co.gloucester.nj.us

From: Kaprielyan, Peter <kaprielyanp@ihn.org>
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Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyan@ihn.org

Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Message-Id:

Recipient: tjones@co.gloucester.nj.us

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Peter A. Kaprielyan
Vice President, Government and External Relations
Inspira Health
Corporate Office Mullica Hill
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Attachments: RE: Concerns about the health of migrant workers in Gloucester County and region

Sender: kaprielyan@ihn.org

Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

Message-Id:

Recipient: tbianco@co.gloucester.nj.us

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Sent time: 05/06/2020 05:34:20 PM
To: Bianco, Thomas A.; Jones, Tammy
Cc: McNulty, Dennis P.; DeAngelo, Jack; Shirey, Michelle; Casella, Michelle
Subject: RE: Concerns about the health of migrant workers in Gloucester County and region

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From: Bianco, Thomas A.
Sent time: 06/09/2020 09:00:51 AM
To: Hart, Stephen <Stephen.Hart@dol.nj.gov>
Cc: Shirey, Michelle; Jones, Tammy; Casella, Michelle; McNulty, Dennis P.; Perna, William
Subject: RE: Crew leader info to Sonthu
Attachments: RE: Crew leader info to Sonthu

Sender: tbianco@co.gloucester.nj.us
Subject: RE: Crew leader info to Sonthu
Message-Id:
To: Stephen.Hart@dol.nj.gov
Cc: mshirey@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us
Cc: minfante@co.gloucester.nj.us
Cc: dmcnulty@co.gloucester.nj.us
Cc: bperna@co.gloucester.nj.us

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Sent time: 06/09/2020 09:00:51 AM
To: Hart, Stephen <Stephen.Hart@dol.nj.gov>
Cc: Shirey, Michelle; Jones, Tammy; Casella, Michelle; McNulty, Dennis P.; Perna, William
Subject: RE: Crew leader info to Sonthu

6/9/20

Stephen

Thank you for this information and I am including Michelle Casella who handles the agricultural program in the county, the GC health department(Tammy Jones) and the GC EOC (Dennis McNulty).

If anyone calls the office regarding the Migrant Season Farm Worker Program or the Farm Worker Crew Leader registration and etc.; have them email Sonthu directly at: Sonthu.kem@dol.nj.gov

Thank you

tom

From: Hart, Stephen
Sent: Tuesday, June 09, 2020 8:55 AM
To: Bianco, Thomas A.
Cc: Shirey, Michelle ; Gallo, Eileen
Subject: FW: Crew leader info to Sonthu

FYI

STEPHEN O. HART, CSW

From: Hart, Stephen
Sent: Tuesday, June 9, 2020 8:54 AM
Subject: FW: Crew leader info to Sonthu

Good morning,

If anyone calls the office regarding the Migrant Season Farm Worker Program or the Farm Worker Crew Leader registration and etc.; have them email Sonthu directly at: Sonthu.kem@dol.nj.gov

STEPHEN O. HART, CSW

From: Demarco, Robert
Sent: Tuesday, June 9, 2020 7:55 AM
To: Hart, Stephen Stephen.Hart@dol.nj.gov>
Cc: Drew, Bernandette Bernandette.Drew@dol.nj.gov>; Albano, Kate Kate.Albano@dol.nj.gov>; Hershey, Stanley Stanley.Hershey@dol.nj.gov>
Subject: Crew leader info to Sonthu

Good morning Steve, going forward you can have anyone interested or inquiring about the Farm Worker Crew Leader registration program, etc., to have them email Sonthu directly at Sonthu.kem@dol.nj.gov

Thanks, Robert

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From: Casella, Michelle
Sent time: 06/09/2020 10:56:59 AM
To: Bianco, Thomas A.; Hart, Stephen <Stephen.Hart@dol.nj.gov>
Cc: Shirey, Michelle; Jones, Tammy; McNulty, Dennis P.; Perna, William
Subject: Re: Crew leader info to Sonthu
Attachments: Re: Crew leader info to Sonthu

Sender: minfante@co.gloucester.nj.us
Subject: Re: Crew leader info to Sonthu
Message-Id: <9847669e07174fa4af9bf3f8c8611e47@co.gloucester.nj.us>
To: tbianco@co.gloucester.nj.us
To: Stephen.Hart@dol.nj.gov
Cc: mshirey@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us
Cc: dmcnulty@co.gloucester.nj.us
Cc: bperna@co.gloucester.nj.us
Bcc: benc@njfb.org

From: Casella, Michelle
Sent time: 06/09/2020 10:56:59 AM
To: Bianco, Thomas A.; Hart, Stephen <Stephen.Hart@dol.nj.gov>
Cc: Shirey, Michelle; Jones, Tammy; McNulty, Dennis P.; Perna, William
BCc: benc@njfb.org
Subject: Re: Crew leader info to Sonthu

Thank you for including me Tom,

Michelle Infante-Casella

County Extension Department Head/Agricultural Agent/Professor
Rutgers Cooperative Extension of Gloucester County
254 County House Rd
Clarksboro, NJ 08020
<http://njaes.rutgers.edu>
<http://sare.rutgers.edu>

From: Bianco, Thomas A.
Sent: Tuesday, June 9, 2020 9:00:51 AM
To: 'Hart, Stephen'
Cc: Shirey, Michelle; Jones, Tammy; Casella, Michelle; McNulty, Dennis P.; Perna, William
Subject: RE: Crew leader info to Sonthu
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ED3630116C82DC478B982A0A0ABDCB3C@co.gloucester.nj.us.msg

From: Casella, Michelle
Sent time: 05/14/2020 03:57:34 PM
To: Bianco, Thomas A.; McNulty, Dennis P.
Cc: Jones, Tammy
Subject: Re: Farm workers infected
Attachments: Re: Farm workers infected

Sender: minfante@co.gloucester.nj.us
Subject: Re: Farm workers infected
Message-Id: <6ce1a43a0b264c858f187df6a04d9cb3@co.gloucester.nj.us>
To: tbianco@co.gloucester.nj.us
To: dmcnulty@co.gloucester.nj.us
Cc: tjones@co.gloucester.nj.us

From: Casella, Michelle
Sent time: 05/14/2020 03:57:34 PM
To: Bianco, Thomas A.; McNulty, Dennis P.
Cc: Jones, Tammy
Subject: Re: Farm workers infected

Hi Tom,

Yes saw these. Thanks for sending. I found one farm in another county had over 90% of their workers testing positive with only 2 showing illness and only 4 testing negative. All else seemed healthy even if testing positive. We still do not know what this means. If you test positive and are not sick, do you still develop antibodies? Do you have no chance of becoming ill again with COVID-19? I don't think we have these answers conclusively. We are still waiting for the NJ Dept. of Health to release their regs for farmworker housing. I taught an online class last night to our farmers to discuss PA regs for migrant housing that may be similar, but who knows? We have not seen even a draft from NJ. Very disappointing.

Be well,
Michelle

From: Bianco, Thomas A.
Sent: Thursday, May 14, 2020 9:33:13 AM
To: McNulty, Dennis P.
Cc: Jones, Tammy; Casella, Michelle
Subject: Farm workers infected

More Than Half of a South Jersey Farm's Workers Infected With COVID-19, DOH Reports

<https://www.njspotlight.com/2020/05/more-than-half-of-a-south-jersey-farms-workers-infected-with-covid-19-doh-reports/>
<https://www.nj.com/opinion/2020/05/act-to-halt-covid-19-among-nj-farmworkers-editorial.html>

Thomas Bianco
Director Gloucester County
Department of Economic Development
856-384-6930 office
[REDACTED] cell
tbianco@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/16/2020 11:59:17 AM
To: Jones, Jay
Cc: DeAngelo, Jack; Jankauskas, Dittymae
Subject: Re: Farms
Attachments: Re: Farms

Sender: tjones@co.gloucester.nj.us
Subject: Re: Farms
Message-Id:
To: jjones@co.gloucester.nj.us
Cc: jdeangelo@co.gloucester.nj.us
Cc: djankauskas@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/16/2020 11:59:16 AM
To: Jones, Jay
Cc: DeAngelo, Jack; Jankauskas, Dittymae
Subject: Re: Farms

Hi Jay:

As we understand it, Testing of migrant farm workers is taking place/beginning to take place on all farms.

We are still waiting on the State regarding plan work to ensure once tested, confirmed cases can be isolated-

More to come on that,

Thanks-

Tammy

On May 16, 2020, at 10:19 AM, Jones, Jay wrote:

Today we have two farms entered for positive patients, not sure if the tests are permitted but just a thought of offering out to the farms. Perhaps mobile testing / regional testing?

Jay Jones

Deputy Chief Gloucester County Hazmat Response Unit
Pro Phoenix
Department of Emergency Response

856-589-0911 (24 / 7)
856-307-7915 (Direct Line)
[REDACTED] (Mobile)

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From: Jones, Jay
Sent time: 05/16/2020 12:00:41 PM
To: Jones, Tammy
Cc: DeAngelo, Jack; Jankauskas, Dittymae
Subject: Re: Farms
Attachments: Re: Farms

Sender: jjones@co.gloucester.nj.us
Subject: Re: Farms
Message-Id: <85c984d8-b058-4b32-bd04-34666928d254@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us
Cc: jdeangelo@co.gloucester.nj.us
Cc: djankauskas@co.gloucester.nj.us

From: Jones, Jay
Sent time: 05/16/2020 12:00:41 PM
To: Jones, Tammy
Cc: DeAngelo, Jack; Jankauskas, Dittymae
Subject: Re: Farms

Thank you!

Sent from my iPhone

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From: Jones, Tammy
Sent time: 06/03/2020 12:31:34 PM
To: Knight, Margaret <margaret.knight@bassett.org>
Subject: RE: field investigation request-produce farm
Attachments: RE: field investigation request-produce farm

Sender: tjones@co.gloucester.nj.us
Subject: RE: field investigation request-produce farm
Message-Id: <165d12786d5d4b9b8e0f9957cb5f89c6@co.gloucester.nj.us>
To: margaret.knight@bassett.org

From: Jones, Tammy
Sent time: 06/03/2020 12:31:34 PM
To: Knight, Margaret <margaret.knight@bassett.org>
Subject: RE: field investigation request-produce farm

Hello Ms. Knight:

I am in receipt of your e-mail correspondence below.

I've asked our Health Officer, Annmarie Ruiz, to follow-up directly with you to obtain some additional information so that we can assist you further.

She will be in touch shortly,

Thanks,

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave

Sewell, NJ 08080

(856) 218 - 4130

From: Knight, Margaret [mailto:margaret.knight@bassett.org]

Sent: Wednesday, June 3, 2020 12:24 PM

To: Jones, Tammy

Subject: field investigation request-produce farm

Dear Ms. Jones,

I am inquiring from the Northeast Center for Occupational Health and Safety about the COVID-19 outbreak at the produce farm in Gloucester County. We developed a model, predicating the spread of COVID-19 in farmworker housing, and a copy of the field investigation would be extremely helpful.

Thank you for your help,

Margaret Knight

Bassett Healthcare Network

Northeast Center for Occupational Health and Safety (NEC)

607-437-8348

Please consider the environment before printing this e-mail.

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Thank you.

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Sent time: 06/03/2020 12:41:01 PM
To: Jones, Tammy
Subject: RE: field investigation request-produce farm
Attachments: RE: field investigation request-produce farm

Sender: margaret.knight@bassett.org
Subject: RE: field investigation request-produce farm
Message-Id: <1cef21285c441143a6d4920f1d3cdac55beca7@exmb13a.bassett.org>
Recipient: tjones@co.gloucester.nj.us

From: Knight, Margaret <margaret.knight@bassett.org>
Sent time: 06/03/2020 12:40:25 PM
To: Jones, Tammy
Subject: RE: field investigation request-produce farm

Thank you!

Margaret Knight
Bassett Healthcare Network
Northeast Center for Occupational Health and Safety (NEC)
607-437-8348

From: Jones, Tammy
Sent: Wednesday, June 03, 2020 12:32 PM
To: Knight, Margaret
Subject: [EXTERNAL] RE: field investigation request-produce farm

Hello Ms. Knight:

I am in receipt of your e-mail correspondence below.

I've asked our Health Officer, Annmarie Ruiz, to follow-up directly with you to obtain some additional information so that we can assist you further.

She will be in touch shortly,

Thanks,

Tamarisk L. Jones

Director

Gloucester County Department of Health

204 East Holly Ave

Sewell, NJ 08080

(856) 218 - 4130

From: Knight, Margaret [<mailto:margaret.knight@bassett.org>]

Sent: Wednesday, June 3, 2020 12:24 PM

To: Jones, Tammy tjones@co.gloucester.nj.us

Subject: field investigation request-produce farm

Dear Ms. Jones,

I am inquiring from the Northeast Center for Occupational Health and Safety about the COVID-19 outbreak at the produce farm in Gloucester County. We developed a model, predicating the spread of COVID-19 in farmworker housing, and a copy of the field investigation would be extremely helpful.

Thank you for your help,

Margaret Knight

Bassett Healthcare Network

Northeast Center for Occupational Health and Safety (NEC)

607-437-8348

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Thank you.

From: Jones, Tammy
Sent time: 05/11/2020 01:10:30 PM
To: Ruiz, Annmarie
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers
Attachments: RE: FQHC testing of Migrant Seasonal Farm Workers

Sender: tjones@co.gloucester.nj.us
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers
Message-Id: <3506c25d8e2b474083fb8e038b3ff04e@co.gloucester.nj.us>
To: aruiz@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/11/2020 01:10:29 PM
To: Ruiz, Annmarie
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers

Thanks Annmarie-
Did you ask where they will be housed?
Will it be the Atlantic County field hospital , as Ditty suggested?
Thanks,
Tammy

From: Ruiz, Annmarie
Sent: Monday, May 11, 2020 1:03 PM
To: Jankauskas, Dittymae ; Jones, Tammy
Subject: FW: FQHC testing of Migrant Seasonal Farm Workers

fyi

From: Weller, Jamie Jamie.Weller@doh.nj.gov>
Sent: Monday, May 11, 2020 10:01 AM
To: Weller, Jamie Jamie.Weller@doh.nj.gov>
Cc: Semple, Shereen Shereen.Semple@doh.nj.gov>
Subject: FQHC testing of Migrant Seasonal Farm Workers

Good morning,

OLPH was informed testing of migrant farmers by FQHCs will begin this week at farms in Salem, Cumberland, and Gloucester Counties. The guidance document is in the final stage of approval. As soon as we have it, we will be sure to disseminate it to you.

Thanks,

Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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From: Jones, Tammy
Sent time: 05/11/2020 01:16:31 PM
To: Ruiz, Annmarie
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers
Attachments: RE: FQHC testing of Migrant Seasonal Farm Workers

Sender: tjones@co.gloucester.nj.us
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers
Message-Id: <398e9821f3534d7cb4441a133f498552@co.gloucester.nj.us>
To: aruiz@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/11/2020 01:16:31 PM
To: Ruiz, Annmarie
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers

Sorry, yes, I am just reading it!

From: Ruiz, Annmarie
Sent: Monday, May 11, 2020 1:13 PM
To: Jones, Tammy
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers

Yes I just sent you another email that mentions the FMC in Atlantic City

From: Jones, Tammy
Sent: Monday, May 11, 2020 1:10 PM
To: Ruiz, Annmarie aruiz@co.gloucester.nj.us
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers

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Did you ask where they will be housed?

Will it be the Atlantic County field hospital , as Ditty suggested?

Thanks,

Tammy

From: Ruiz, Annmarie
Sent: Monday, May 11, 2020 1:03 PM
To: Jankauskas, Dittymae djankauskas@co.gloucester.nj.us; Jones, Tammy tjones@co.gloucester.nj.us
Subject: FW: FQHC testing of Migrant Seasonal Farm Workers
fyi

From: Weller, Jamie Jamie.Weller@doh.nj.gov
Sent: Monday, May 11, 2020 10:01 AM
To: Weller, Jamie Jamie.Weller@doh.nj.gov
Cc: Semple, Shereen Shereen.Semple@doh.nj.gov
Subject: FQHC testing of Migrant Seasonal Farm Workers

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Jamie Weller, MSN, RN, CSN-NJ

Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

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Sender: aruiz@co.gloucester.nj.us
Subject: RE: FQHC testing of Migrant Seasonal Farm Workers
Message-Id:
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To: Weller, Jamie Jamie.Weller@doh.nj.gov>
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From: Doyle, Kathleen (Katie)
Sent time: 05/12/2020 07:27:21 AM
To: Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy
Subject: RE: HELP
Attachments: RE: HELP

Sender: kdoyle@co.gloucester.nj.us
Subject: RE: HELP
Message-Id: <3cd91eab088b42a5a99d83330272e45d@co.gloucester.nj.us>
To: mspinelli@chcinj.org
To: tjones@co.gloucester.nj.us

From: Doyle, Kathleen (Katie)
Sent time: 05/12/2020 07:27:20 AM
To: Meghan Spinelli <mspinelli@chcinj.org>; Jones, Tammy
Subject: RE: HELP

Megan,

We can evaluate for our services. I believe the H2A workers are not citizens and therefore will not qualify. The Hotel in Galloway will require payment before he will accept any placements.

Please advise me of a contact phone number for this worker and we will reach out.

Thank you,

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Meghan Spinelli
Sent: Tuesday, May 12, 2020 7:04 AM
To: Jones, Tammy ; Doyle, Kathleen (Katie)
Subject: HELP

Hello,

We have a H2A worker in a migrant camp in Gloucester who's has a fever and needs a place to stay until he can be tested and sent to AC. The farmer doesn't have somewhere for him to stay alone .

Could you assist me with this -

Meghan

From: Doyle, Kathleen (Katie) [<mailto:kdoyle@co.gloucester.nj.us>]
Sent: Wednesday, May 06, 2020 10:58 AM
To: Meghan Spinelli
Cc: Jones, Tammy
Subject: Contact information

Good Morning Meghan,

Attached please find the Gloucester County Division of Social Services, program contact phone numbers, being used during the COVID-19 public emergency.

Any questions feel free to reach out to me.

Thank you,

Kathleen Doyle

Director

Gloucester County Division of Social Services

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From: Jones, Tammy
Sent time: 05/12/2020 09:24:17 AM
To: Doyle, Kathleen (Katie)
Subject: RE: HELP
Attachments: RE: HELP

Sender: tjones@co.gloucester.nj.us
Subject: RE: HELP
Message-Id: <5bcdcc96e66f439ca13760c1fc3bc667@co.gloucester.nj.us>
To: kdoyle@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/12/2020 09:24:17 AM
To: Doyle, Kathleen (Katie)
Subject: RE: HELP

Thank you for reaching out to him so quickly Katie!
So glad he is able to isolate the ill individual on site-

From: Doyle, Kathleen (Katie)
Sent: Tuesday, May 12, 2020 8:16 AM
To: Jones, Tammy
Subject: FW: HELP

I called the Farmer [REDACTED]. He stated they are checking the workers temp every day and this worker had a temperature this morning. He has space to isolate this worker from the other workers. The worker is scheduled to be tested tomorrow for COVID-19. This worker is not a citizen and therefore not eligible to apply for EA through Social Services.

[REDACTED] stated he has 6 different buildings to separate workers. He is basically waiting for guidance from the State regarding their "plan".

Kathleen Doyle

Director

Gloucester County Division of Social Services

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From: Doyle, Kathleen (Katie)
Sent: Tuesday, May 12, 2020 8:07 AM
To: 'Meghan Spinelli' mspinelli@chcinj.org
Subject: RE: HELP

I spoke with [REDACTED] the Farm owner. The worker is not a citizen and therefore not eligible to apply for Emergency Assistance through Social Services. He has the worker quarantined away from the other workers pending testing.

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Meghan Spinelli mspinelli@chcinj.org
Sent: Tuesday, May 12, 2020 7:30 AM
To: Doyle, Kathleen (Katie) kdoyle@co.gloucester.nj.us
Subject: Re: HELP

Here is the owner [REDACTED] whom I have been in contact with .
[REDACTED]

On May 12, 2020, at 7:26 AM, Doyle, Kathleen (Katie) kdoyle@co.gloucester.nj.us> wrote:

Megan,

We can evaluate for our services. I believe the H2A workers are not citizens and therefore will not qualify. The Hotel in Galloway will require payment before he will accept any placements.

Please advise me of a contact phone number for this worker and we will reach out.

Thank you,
Kathleen Doyle
Director

Gloucester County Division of Social Services
(856)256-2106

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From: Meghan Spinelli mspinelli@chcinj.org>

Sent: Tuesday, May 12, 2020 7:04 AM

To: Jones, Tammy tjones@co.gloucester.nj.us>; Doyle, Kathleen (Katie) kdoyle@co.gloucester.nj.us>

Subject: HELP

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Could you assist me with this -

Meghan

From: Doyle, Kathleen (Katie) [<mailto:kdoyle@co.gloucester.nj.us>]

Sent: Wednesday, May 06, 2020 10:58 AM

To: Meghan Spinelli

Cc: Jones, Tammy

Subject: Contact information

Good Morning Meghan,

Attached please find the Gloucester County Division of Social Services, program contact phone numbers, being used during the COVID-19 public emergency.

Any questions feel free to reach out to me.

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Kathleen Doyle

Director

Gloucester County Division of Social Services
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From: DeAngelo, Jack
Sent time: 05/08/2020 08:36:42 AM
To: tbianco <tbianco@claytonnj.com>; McNulty, Dennis P.; Jones, Tammy
Subject: RE: May 7, 2020 COVID-19 Update
Attachments: RE: May 7, 2020 COVID-19 Update

Sender: jdeangelo@co.gloucester.nj.us
Subject: RE: May 7, 2020 COVID-19 Update
Message-Id:
To: tbianco@claytonnj.com
To: dmcnulty@co.gloucester.nj.us
To: tjones@co.gloucester.nj.us

From: DeAngelo, Jack
Sent time: 05/08/2020 08:36:42 AM
To: tbianco <tbianco@claytonnj.com>; McNulty, Dennis P.; Jones, Tammy
Subject: RE: May 7, 2020 COVID-19 Update
Attachments: SKM_308e20050718020.pdf

The send button does get confusing at times!!

I did also reach out to NJSP regarding this last night. Attached is the list of locations that the Nation Guard plan to start. I did ask how there were selected and Deptford Center (That has a request in E-Team) was not selected, but he was not sure. Point to note on the list is Salem County has a location of migrant workers. This might be something that we can follow up on and see if there is a possibility of and MOU. Also we do have a building that was donated to us in Newfield that we might be able to set-up for migrant workers with COVID-19. Sure ideas to further talk about.

Thanks,
Jack

From: tbianco [mailto:tbianco@claytonnj.com]
Sent: Friday, May 8, 2020 8:18 AM
To: McNulty, Dennis P. ; Jones, Tammy ; DeAngelo, Jack
Subject: Fwd: May 7, 2020 COVID-19 Update

Sent from my iPhone

Begin forwarded message:

From: "Michael F. Cerra" mcerra@njlm.org>
Date: May 8, 2020 at 8:14:05 AM EDT
To: "Michael F. Cerra" mcerra@njlm.org>
Cc: "Michael J. Darcy, CAE" mdarcy@njlm.org>
Subject: **May 7, 2020 COVID-19 Update**

My apologies for the delay. I simply failed to hit the send button last night
Re: May 7, 2020 COVID-19 Update

To: NJLM Executive Board and Past Presidents
Bcc: NJCM, NJUMA and NJCM

Today the Governor announced that there were 1,827 additional positive results since yesterday, and 254 deaths. That brings the statewide totals to 133,635 positive results and 8,801 COVID-19 related deaths. Yesterday, there were 325 new hospitalization and 460 hospital discharges. The state hit a milestone yesterday with less than 5,000 people hospitalized with COVID-19. The numbers continue to trend down.

The Governor announced a plan to have student nurses at long term care facilities. In addition, this weekend New Jersey National Guard will be deployed to long term care facilities to provide assistance.

Superintendent of State Police Patrick Callahan issued [Administrative Order 2020-12](#) clarifying that recreational and entertainment activities prohibited by [Executive Order 107](#) are also prohibited from taking place at essential retail businesses brick and mortar premise, or within facilities of public, private and parochial preschool programs, or elementary and secondary schools closed to students under Executive Order 107.

It was also noted the recreational horseback riding is prohibited under the existing executive orders.

On the briefing call earlier yesterday a question was raised regarding the criteria to open up small businesses. It was noted that there are currently internal discussions and should have something in a couple of weeks. Businesses should expect to have proper protocols in place so there is no employee –customer interaction, spacing at check-outs, and possible capacity limits of 50% of fire code.

Michael F. Cerra | Assistant Executive Director &
Director, Government Affairs

New Jersey State League of Municipalities

222 West State Street, Trenton, NJ 08608

609-695-3481 extension 120

NJ Municipalities – 2019 MarCom Gold Winner

Website – 2018 Hermes Gold Winner



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3EC5B0B131D9F7459408D9AC529C37DC@co.gloucester.nj.us.msg

From: Bruner, Chad
Sent time: 05/26/2020 10:19:58 AM
To: Jones, Tammy; O'Brien, Shannon
Cc: Coryell, Michelle
Subject: RE: Media query

[REDACTED]

From: Jones, Tammy
Sent: Tuesday, May 26, 2020 10:19 AM
To: O'Brien, Shannon
Cc: Bruner, Chad
Subject: FW: Media query

[REDACTED]

Thanks for your help-
Tammy

From: IAN SHEARN [<mailto:ishearn@prodigy.net>]
Sent: Tuesday, May 26, 2020 10:12 AM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: Media query

Hi.

I am a reporter for NJ Spotlight. I have been writing stories about migrant workers, including the infections you had at one of your farms. I would like to talk to you about how your health department is doing under this strain, and what help the state DOH is providing. Are you up for that?

Ian T. Shearn

121 Meadowbrook Drive
Hillsborough, NJ 08844
c: 973.879.1150
f: 908.829.4805
Skype: iantshearn

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From: O'Brien, Shannon
Sent time: 05/26/2020 10:20:33 AM
To: Bruner, Chad; Jones, Tammy
Cc: Coryell, Michelle
Subject: Re: Media query

Yes, I will direct to state #. Thank you!

From: "Bruner, Chad"
Date: Tuesday, May 26, 2020 at 10:19 AM
To: "Jones, Tammy" , "O'Brien, Shannon"
Cc: "Coryell, Michelle"
Subject: RE: Media query

[REDACTED]

From: Jones, Tammy
Sent: Tuesday, May 26, 2020 10:19 AM
To: O'Brien, Shannon
Cc: Bruner, Chad
Subject: FW: Media query

[REDACTED]

Thanks for your help-
Tammy

From: IAN SHEARN [<mailto:ishearn@prodigy.net>]
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f: 908.829.4805
Skype: iantshearn

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From: O'Brien, Shannon
Sent time: 05/26/2020 10:46:10 AM
To: Bruner, Chad; Jones, Tammy
Cc: Coryell, Michelle
Subject: Re: Media query

[REDACTED]

From: "Bruner, Chad"
Date: Tuesday, May 26, 2020 at 10:19 AM
To: "Jones, Tammy" , "O'Brien, Shannon"
Cc: "Coryell, Michelle"
Subject: RE: Media query
This is another state issue for them to deal with.

From: Jones, Tammy
Sent: Tuesday, May 26, 2020 10:19 AM
To: O'Brien, Shannon
Cc: Bruner, Chad
Subject: FW: Media query

[REDACTED]

Thanks for your help-
Tammy

From: IAN SHEARN [<mailto:ishearn@prodigy.net>]
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c: 973.879.1150
f: 908.829.4805
Skype: iantshearn

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From: Jones, Tammy
Sent time: 05/27/2020 03:19:55 PM
To: O'Brien, Shannon
Cc: Bruner, Chad; Jankauskas, Dittymae
Subject: RE: Media query

Thanks Shannon-
I apologize, I don't believe I got back to you on this!
Yes, I agree
We do not comment on our cases.
(We do contact trace/investigate all confirmed cases)
Let us know if you need anything more.
Thanks,
Tammy

From: O'Brien, Shannon
Sent: Tuesday, May 26, 2020 10:46 AM
To: Bruner, Chad ; Jones, Tammy
Cc: Coryell, Michelle
Subject: Re: Media query

From: "Bruner, Chad" cbruner@co.gloucester.nj.us>
Date: Tuesday, May 26, 2020 at 10:19 AM
To: "Jones, Tammy" tjones@co.gloucester.nj.us>, "O'Brien, Shannon" sobrien@co.gloucester.nj.us>
Cc: "Coryell, Michelle" mcoryell@co.gloucester.nj.us>
Subject: RE: Media query

From: Jones, Tammy tjones@co.gloucester.nj.us>
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To: O'Brien, Shannon sobrien@co.gloucester.nj.us>
Cc: Bruner, Chad cbruner@co.gloucester.nj.us>
Subject: FW: Media query

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Tammy

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Subject: Media query

Hi.

I am a reporter for NJ Spotlight. I have been writing stories about migrant workers, including the infections you had at one of your farms. I would like to talk to you about how your health department is doing under this strain, and what help the state DOH is providing. Are you up for that?

Ian T. Shearn

121 Meadowbrook Drive
Hillsborough, NJ 08844
c: 973.879.1150
f: 908.829.4805
Skype: iantshearn

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From: Jones, Tammy
Sent time: 05/27/2020 03:39:27 PM
To: Ruiz, Annmarie; Jankauskas, Dittymae
Cc: Baylor, Michelle
Subject: RE: Media Request
Attachments: RE: Media Request

Sender: tjones@co.gloucester.nj.us
Subject: RE: Media Request
Message-Id: <3f640f2b24fc46b98337b3242a67c21d@co.gloucester.nj.us>
To: aruiz@co.gloucester.nj.us
To: djankauskas@co.gloucester.nj.us
Cc: mbaylor@co.gloucester.nj.us

From: Bruner, Chad
Sent time: 05/21/2020 03:54:26 PM
To: O'Brien, Shannon; Jones, Tammy; Michelle Coryell <mcoryell@njlegdistrict3.com>
Subject: Re: MEDIA REQUEST: New York Times

From: O'Brien, Shannon
Sent: Thursday, May 21, 2020 3:37:34 PM
To: Bruner, Chad; Jones, Tammy; Michelle Coryell
Subject: MEDIA REQUEST: New York Times

Hello—

Tracy Tully from the New York Times called the health department to ask questions about SJ Migrant workers testing positive for COVID-19. I have not reached out to her personally yet because I know previously we weren't commenting and directing them to the state DOH media line.

Let me know if you'd like me to direct her there or return her call to see if she has specific questions.

Thank you!

Tracy Tully

908-487-8145

EF798F22B8612241AA1A986B2A0DFE43@co.gloucester.nj.us.msg

From: Michelle Coryell <mcoryell@njlegdistrict3.com>
Sent time: 05/21/2020 04:08:23 PM
To: Bruner, Chad; O'Brien, Shannon; Jones, Tammy
Subject: Re: MEDIA REQUEST: New York Times
Attachments: Re: MEDIA REQUEST: New York Times

Sender: mcoryell@njlegdistrict3.com
Subject: Re: MEDIA REQUEST: New York Times
Message-Id: <20200521200829.6139988.40674.968569@njlegdistrict3.com>
Recipient: tjones@co.gloucester.nj.us

From: Michelle Coryell <mcoryell@njlegdistrict3.com>
Sent time: 05/21/2020 04:08:20 PM
To: Bruner, Chad; O'Brien, Shannon; Jones, Tammy
Subject: Re: MEDIA REQUEST: New York Times

Original Message

From: Bruner, Chad
Sent: Thursday, May 21, 2020 3:54 PM
To: O'Brien, Shannon; Jones, Tammy; Michelle Coryell
Subject: Re: MEDIA REQUEST: New York Times

From: O'Brien, Shannon
Sent: Thursday, May 21, 2020 3:37:34 PM
To: Bruner, Chad; Jones, Tammy; Michelle Coryell
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6E2972FCE6231E499F63ACA6D5277161@co.gloucester.nj.us.msg

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Attachments: Re: MEDIA REQUEST: New York Times

Sender: mcoryell@njlegdistrict3.com
Subject: Re: MEDIA REQUEST: New York Times
Message-Id: <20200521200829.6139988.40674.968569@njlegdistrict3.com>
Recipient: sobrien@co.gloucester.nj.us

From: Michelle Coryell <mcoryell@njlegdistrict3.com>
Sent time: 05/21/2020 04:08:20 PM
To: Bruner, Chad; O'Brien, Shannon; Jones, Tammy
Subject: Re: MEDIA REQUEST: New York Times

Original Message

From: Bruner, Chad
Sent: Thursday, May 21, 2020 3:54 PM
To: O'Brien, Shannon; Jones, Tammy; Michelle Coryell
Subject: Re: MEDIA REQUEST: New York Times

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Sent: Thursday, May 21, 2020 3:37:34 PM
To: Bruner, Chad; Jones, Tammy; Michelle Coryell
Subject: MEDIA REQUEST: New York Times

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0F79B450D3F1B04E8F8202D41F7B10D00@co.gloucester.nj.us.msg

From: Michelle Coryell <mcoryell@njlegdistrict3.com>
Sent time: 05/21/2020 04:08:20 PM
To: Bruner, Chad; O'Brien, Shannon; Jones, Tammy
Subject: Re: MEDIA REQUEST: New York Times

[REDACTED]

[REDACTED]

[REDACTED]

From: Bruner, Chad
Sent: Thursday, May 21, 2020 3:54 PM
To: O'Brien, Shannon; Jones, Tammy; Michelle Coryell
Subject: Re: MEDIA REQUEST: New York Times

[REDACTED]

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FF8D618C6204ED44A1DFADD0EF3DF0ED@co.gloucester.nj.us.msg

From: Jankauskas, Dittymae
Sent time: 05/27/2020 03:59:35 PM
To: Jones, Tammy; Ruiz, Annmarie
Cc: Baylor, Michelle
Subject: RE: Media Request
Attachments: RE: Media Request

Sender: djankauskas@co.gloucester.nj.us
Subject: RE: Media Request
Message-Id: <0976da1fc6db45898ce0e8b8981cc0ac@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us
To: aruiz@co.gloucester.nj.us
Cc: mbaylor@co.gloucester.nj.us

Where are all the new cases coming from?

Why is there an increase in cases if people are asked to stay home and wear masks?

Let me know how you'd like to proceed.

ccomegno@courierpostonline.com

609-533-0306

From: Bruner, Chad
Sent time: 05/27/2020 04:10:33 PM
To: Jones, Tammy; O'Brien, Shannon
Cc: Jankauskas, Dittymae
Subject: RE: Media Request

From: Jones, Tammy
Sent: Wednesday, May 27, 2020 4:04 PM
To: O'Brien, Shannon
Cc: Bruner, Chad ; Jankauskas, Dittymae
Subject: Media Request
Hi Shannon:
Input /Response suggestions from Health:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

From: Bruner, Chad
Sent: Wednesday, May 27, 2020 2:44 PM
To: O'Brien, Shannon sobrien@co.gloucester.nj.us>; Coryell, Michelle mcoryell@co.gloucester.nj.us>; Jones, Tammy tjones@co.gloucester.nj.us>
Subject: RE: Media Request

[REDACTED]

From: O'Brien, Shannon sobrien@co.gloucester.nj.us>
Sent: Wednesday, May 27, 2020 2:42 PM
To: Coryell, Michelle mcoryell@co.gloucester.nj.us>; Bruner, Chad cbruner@co.gloucester.nj.us>; Jones, Tammy tjones@co.gloucester.nj.us>
Subject: Media Request

[REDACTED]

ccomegno@courierpostonline.com
609-533-0306

From: Doyle, Kathleen (Katie)
Sent time: 05/08/2020 04:07:43 PM
To: Jones, Tammy
Subject: RE: Migrant Farm Worker Testing
Attachments: RE: Migrant Farm Worker Testing

Sender: kdoyle@co.gloucester.nj.us
Subject: RE: Migrant Farm Worker Testing
Message-Id: <3cd84a6c52ef4600adf42f1ed5023057@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Doyle, Kathleen (Katie)
Sent time: 05/08/2020 04:07:43 PM
To: Jones, Tammy
Subject: RE: Migrant Farm Worker Testing

I think it would be fine. He is willing to take any business. My only concern is once the stay at home order is lifted, he will want to go back to regular occupancy. This migrant farm worker issue could go on past that.

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

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From: Jones, Tammy
Sent: Friday, May 8, 2020 4:02 PM
To: Doyle, Kathleen (Katie)
Subject: FW: Migrant Farm Worker Testing

Hi Katie:

Would it be appropriate to list / send in response to the below state inquiry:
Gloucester County has been in discussion with Mayur Chheda to utilize his hotel
Located at:

Quality Inn & Suites
328 E. White Horse Pike
Galloway, NJ 08205
Hotel Fax: (609) 652 – 8885
Owner: Mayur Chheda
(856) 404-1222

mayur@infinityhotelgroup.com

Mr. Chheda has set aside a building for Gloucester County to house positive COVID-19 homeless residents.

He understands the need to keep everyone separate; those that are homeless and awaiting testing results,

Those that are homeless and Covid-19 positive, and those that are just on site being housed.

He does need to be assured payment, however. So the funding source will need to be clearly delineated up front.

Thanks for your input Katie-

As I know we have been asked to let State Health know today-

Much appreciated,

Tammy

From: Ruiz, Annmarie
Sent: Friday, May 8, 2020 12:46 PM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: FW: Migrant Farm Worker Testing

The state is requesting information regarding any partnerships we have with hotels or other facilities for isolation or quarantine in our area

From: Weller, Jamie Jamie.Weller@doh.nj.gov>
Sent: Friday, May 8, 2020 12:06 PM
To: Weller, Jamie Jamie.Weller@doh.nj.gov>
Cc: Semple, Shereen Shereen.Semple@doh.nj.gov>
Subject: Migrant Farm Worker Testing

Good morning,

As you know, the testing of migrant farm workers by FQHCs will be rolled out very soon. I was asked to reach out to see if your county has any established partnerships with hotels or other facilities that could be used in case an isolation or quarantine site is needed. There are plans being actively worked on by the task force to identify a site that can be accessed regionally (through an ordering provider at the FQHC/in conjunction with health officer recommendation), however we are trying to ascertain what supports could be in available if needed very soon.

Again, we will get you the guidance document as soon as we have it to disseminate.

Thank you!

Jamie Weller, MSN, RN, CSN-NJ
Public Health Nurse Consultant

NJ Department of Health - Office of Local Public Health

PO Box 360

Trenton, NJ 08625-0360

Phone: (609) 571 - 8321

Website: <https://www.nj.gov/health/lh/>



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From: Jones, Tammy
Sent time: 05/08/2020 04:54:50 PM
To: Doyle, Kathleen (Katie)
Subject: Re: Migrant Farm Worker Testing
Attachments: Re: Migrant Farm Worker Testing

Sender: tjones@co.gloucester.nj.us
Subject: Re: Migrant Farm Worker Testing
Message-Id: <8a13c61a-b033-489a-91b7-274573a27491@co.gloucester.nj.us>
To: kdoyle@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/08/2020 04:54:50 PM
To: Doyle, Kathleen (Katie)
Subject: Re: Migrant Farm Worker Testing
Attachments: image001.png

Thanks Katie!
And I guess as things change, we will have to update the State...

On May 8, 2020, at 4:07 PM, Doyle, Kathleen (Katie) wrote:

I think it would be fine. He is willing to take any business. My only concern is once the stay at home order is lifted, he will want to go back to regular occupancy. This migrant farm worker issue could go on past that.

Kathleen Doyle

Director

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Much appreciated,
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From: Ruiz, Annmarie
Sent: Friday, May 8, 2020 12:46 PM
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Subject: FW: Migrant Farm Worker Testing

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Thank you!

Jamie Weller, MSN, RN, CSN-NJ

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8BD0F9FEED7D8E478E6A962A06FBEC6F@co.gloucester.nj.us.msg



From: Doyle, Kathleen (Katie)
Sent time: 05/08/2020 05:01:57 PM
To: Jones, Tammy
Subject: RE: Migrant Farm Worker Testing
Attachments: RE: Migrant Farm Worker Testing

Sender: kdoyle@co.gloucester.nj.us
Subject: RE: Migrant Farm Worker Testing
Message-Id: <96582911d15f4aefbc54bcc877f1f16e@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Doyle, Kathleen (Katie)
Sent time: 05/08/2020 05:01:56 PM
To: Jones, Tammy
Subject: RE: Migrant Farm Worker Testing

Sounds good! Thanks
Kathleen Doyle
Director

Gloucester County Division of Social Services
(856)256-2106

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From: Jones, Tammy
Sent time: 05/22/2020 07:10:13 PM
To: Black, Craig
Subject: Re: Quest
Attachments: Re: Quest

Sender: tjones@co.gloucester.nj.us
Subject: Re: Quest
Message-Id:
To: cblack@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/22/2020 07:10:13 PM
To: Black, Craig
Subject: Re: Quest

Wow- we would never have thought there are that many working farms in Gloucester County Craig!

Our reason for asking is so we can reach out to those that have migrant workers involved throughout the growing season.

So we are looking for contact info (Owner name and phone number)
and Farm name and addresses.

Whatever you have readily and easily available would help!
We don't want to create extra work for you and your staff!!

Thank you in advance for anything you might be able to provide us!

Enjoy the extended Memorial Day weekend ahead!

Tammy

On May 22, 2020, at 4:21 PM, Black, Craig wrote:

Tammy,

We can certainly get the names and addresses. We have the contact information but that would have to be pulled from each file. It is close to 4,000 farms. Once my interns get back in here – that is certainly something they could do – or I will have our inspectors start on it now.

We do a mailing every year so we can generate that list of names and addresses – I will get on it Tuesday when we get back.

Let me know if you want phone numbers and we'll start to get the info together.

Craig

From: Jones, Tammy
Sent: Friday, May 22, 2020 4:15 PM
To: Black, Craig
Subject: Quest

Craig:

Is there any way to get a list of Farm's and contact names /numbers of owners...in Gloucester County?

We are looking for this information as testing takes place which requires follow up by our Health Department.

Hoping we can get ahead of things by reaching out prior to testing getting underway-

Thanks for any help you might be able to provide-

Thanks!

Enjoy the Memorial Day Weekend-

Tammy

From: Black, Craig
Sent time: 05/26/2020 09:24:39 AM
To: Jones, Tammy
Subject: RE: Quest
Attachments: RE: Quest

Sender: cblack@co.gloucester.nj.us
Subject: RE: Quest
Message-Id: <36c8d7dab2434401b0bb9081dbd4997f@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Black, Craig
Sent time: 05/26/2020 09:24:38 AM
To: Jones, Tammy
Subject: RE: Quest

Tammy,

We have started a spreadsheet – I will have my inspectors start this afternoon to go through and put phone numbers down – for those we have –and we will send you the spreadsheet after we finish each town.

Craig

From: Jones, Tammy
Sent: Friday, May 22, 2020 7:10 PM
To: Black, Craig
Subject: Re: Quest

Wow- we would never have thought there are that many working farms in Gloucester County Craig!
Our reason for asking is so we can reach out to those that have migrant workers involved throughout the growing season. So we are looking for contact info (Owner name and phone number) and Farm name and addresses.
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Thanks!

Enjoy the Memorial Day Weekend-

Tammy

From: Jones, Tammy
Sent time: 05/26/2020 09:29:32 AM
To: Black, Craig
Subject: RE: Quest
Attachments: RE: Quest

Sender: tjones@co.gloucester.nj.us
Subject: RE: Quest
Message-Id: <9ecdd4a3b99a4b8d96a4951d9339e6ee@co.gloucester.nj.us>
To: cblack@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/26/2020 09:29:31 AM
To: Black, Craig
Subject: RE: Quest

Thank you so much Craig!
This will prove so helpful to us-
Tammy

From: Black, Craig
Sent: Tuesday, May 26, 2020 9:25 AM
To: Jones, Tammy
Subject: RE: Quest

Tammy,
We have started a spreadsheet – I will have my inspectors start this afternoon to go through and put phone numbers down – for those we have –and we will send you the spreadsheet after we finish each town.
Craig

From: Jones, Tammy
Sent: Friday, May 22, 2020 7:10 PM
To: Black, Craig cblack@co.gloucester.nj.us>
Subject: Re: Quest

Wow- we would never have thought there are that many working farms in Gloucester County Craig!
Our reason for asking is so we can reach out to those that have migrant workers involved throughout the growing season. So we are looking for contact info (Owner name and phone number) and Farm name and addresses.
Whatever you have readily and easily available would help!
We don't want to create extra work for you and your staff!!
Thank you in advance for anything you might be able to provide us!
Enjoy the extended Memorial Day weekend ahead!
Tammy

On May 22, 2020, at 4:21 PM, Black, Craig cblack@co.gloucester.nj.us> wrote:

Tammy,
We can certainly get the names and addresses. We have the contact information but that would have to be pulled from each file. It is close to 4,000 farms. Once my interns get back in here – that is certainly something they could do – or I will have our inspectors start on it now.
We do a mailing every year so we can generate that list of names and addresses – I will get on it Tuesday when we get back.
Let me know if you want phone numbers and we'll start to get the info together.
Craig

From: Jones, Tammy
Sent: Friday, May 22, 2020 4:15 PM
To: Black, Craig cblack@co.gloucester.nj.us>
Subject: Quest

Craig:
Is there any way to get a list of Farm's and contact names /numbers of owners...in Gloucester County?
We are looking for this information as testing takes place which requires follow up by our Health Department.
Hoping we can get ahead of things by reaching out prior to testing getting underway-
Thanks for any help you might be able to provide-
Thanks!
Enjoy the Memorial Day Weekend-
Tammy

From: Doyle, Kathleen (Katie)
Sent time: 05/15/2020 03:45:08 PM
To: Jones, Tammy
Subject: RE: TAMMY QUESTIONS
Attachments: RE: TAMMY QUESTIONS

Sender: kdoyle@co.gloucester.nj.us
Subject: RE: TAMMY QUESTIONS
Message-Id: <450811c6348346f98934d47d450d6571@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Doyle, Kathleen (Katie)
Sent time: 05/15/2020 03:45:07 PM
To: Jones, Tammy
Subject: RE: TAMMY QUESTIONS

Yes very good news. So we will need Calvin to notify, whoever is awarded the CARES funding, they can pay for migrant farm workers.
Mr. Cheda, Galloway Twp Motel, will no longer take COVID-19 positive.

Kathleen Doyle

Director

Gloucester County Division of Social Services

(856)256-2106

This transmission is confidential and may be legally privileged. If you are not the intended recipient, please notify the sender by return e-mail and delete this message from your system. The County of Gloucester reserves the right to monitor e-mail communication. No contract may be concluded on behalf of the County of Gloucester by e-mail. If the content of this e-mail does not relate to the business of the County of Gloucester, then we do not endorse it and will accept no liability.

From: Jones, Tammy
Sent: Friday, May 15, 2020 3:37 PM
To: Doyle, Kathleen (Katie)
Subject: FW: TAMMY QUESTIONS

Hi Katie:
This is good news....yes?
See below-
Thanks,
Tammy

From: Cerny, Lisa A.
Sent: Friday, May 15, 2020 3:12 PM
To: Jones, Tammy tjones@co.gloucester.nj.us>
Subject: FW: TAMMY QUESTIONS

Hi, you had some questions regarding FEMA and if migrant farm workers were eligible; see last paragraph
Thanks

From: Mc Farland Jr., Calvin D. cmcfarland@co.gloucester.nj.us>
Sent: Friday, May 15, 2020 2:18 PM
To: Cerny, Lisa A. lcerny@co.gloucester.nj.us>
Subject: TAMMY QUESTIONS

Hey Boss,
The last time we talked, Tammy had some questions. So I pulled this from the Guidance Information.
In terms of client eligibility, the manuals are mute on whether illegals farm workers are eligible or ineligible.
It only mentions that jurisdiction residents and transients within the jurisdiction are eligible to receive services.
Thanks
Cal

E4F0F552308E5C4EA3CE5BBAE15B973E@co.gloucester.nj.us.msg

SPENDING PERIOD EXTENSIONS

The National Board may determine on an annual basis to extend the spending period when the receipt of annual funding is delayed due to the federal appropriations process or when additional appropriations bills are enacted later in the fiscal year. The National Board has determined that the spending period end-date options for Phases 37 and CARES can be selected from the following dates:

January 31, 2020
February 28, 2020
March 31, 2020
April 30, 2020
May 31, 2020

June 30, 2020
July 31, 2020
August 31, 2020
September 30, 2020
October 31, 2020

November 30, 2020
December 31, 2020
January 31, 2021
February 28, 2021
March 31, 2021

April 30, 2021
May 31, 2021

NEW ELIGIBLE COSTS

LROs may use Phases 37 and CARES funding to purchase Personal Protective Equipment (PPE). For all service providers, the purchase of PPE specifically intended to prevent or mitigate the transmission of communicable diseases is permitted. PPE must fall within the guidelines of the CDC, FDA, or state and local health requirements, as applicable to each LRO. Additional factors regarding eligibility include:

- PPE expenditures are limited to 10% of an LRO's award (Phases 37 and CARES). If an LRO receives an award for both phases, then 10% may be used from each phase.
- PPE may be directly distributed to LRO staff and volunteers to conduct and deliver services and/or clients to receive services.
- EFSP funds cannot be used to purchase PPE for general distribution to the public or for use outside of an LRO's mission area.

While LROs can use funding to purchase PPE, funding cannot be used for COVID-19 testing.

Client Eligibility

The EFSP is a needs based program for which clients must qualify.

The National Board does not set client eligibility criteria. Local Boards may choose to set such criteria. If the Local Board does not set eligibility criteria, the LRO may use its existing criteria or set criteria for assistance under this award. Any criteria used must provide for assistance to needy individuals without discrimination (age, race, sex, religion, national origin, disability, economic status or sexual orientation), sensitivity to the transition from temporary shelter to permanent homes, attention to the specialized needs of homeless individuals with mental and physical disabilities and illness and to facilitate access for homeless individuals to other sources of services and benefits. In providing assistance under the EFSP, verification of proof of citizenship or qualified alien status of any applicant for assistance is not required.

Gloucester County Division of Health & Human Services
Division of Human & Disability Services
115 Budd Blvd. West Deptford, NJ 08096 (856) 384-6870



The County of Gloucester complies with all state and federal rules and regulations against discrimination in admission to, access to, operations of its programs, services, and activities. In addition, County encourages participation of people with disabilities in its programs and activities and offers special services to all residents 60 years of age and older. Inquiries regarding compliance may be directed to the County's ADA Coordinator at (856) 384-6842/ New Jersey Relay Service 711.

From: Jones, Tammy
Sent time: 05/15/2020 03:50:26 PM
To: Doyle, Kathleen (Katie)
Subject: RE: TAMMY QUESTIONS
Attachments: RE: TAMMY QUESTIONS

Sender: tjones@co.gloucester.nj.us
Subject: RE: TAMMY QUESTIONS
Message-Id:
To: kdoyle@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/15/2020 03:50:26 PM
To: Doyle, Kathleen (Katie)
Subject: RE: TAMMY QUESTIONS

Thanks Katie – a shame we are losing Mr. Cheda's facility...but understandable with the shore opening up.
Will reach out to Calvin in follow-up to the administration of CARES funding –
I appreciate it!
Tammy

From: Doyle, Kathleen (Katie)
Sent: Friday, May 15, 2020 3:45 PM
To: Jones, Tammy
Subject: RE: TAMMY QUESTIONS

Yes very good news. So we will need Calvin to notify, whoever is awarded the CARES funding, they can pay for migrant farm workers.
Mr. Cheda, Galloway Twp Motel, will no longer take COVID-19 positive.

Kathleen Doyle
Director

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Tammy

From: Cerny, Lisa A.
Sent: Friday, May 15, 2020 3:12 PM
To: Jones, Tammy tjones@co.gloucester.nj.us
Subject: FW: TAMMY QUESTIONS

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Thanks

From: Mc Farland Jr., Calvin D. cmcfarland@co.gloucester.nj.us
Sent: Friday, May 15, 2020 2:18 PM
To: Cerny, Lisa A. lcerny@co.gloucester.nj.us
Subject: TAMMY QUESTIONS

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It only mentions that jurisdiction residents and transients within the jurisdiction are eligible to receive services.
Thanks
Cal

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From: Cerny, Lisa A.
Sent time: 05/06/2020 11:32:02 AM
To: Jones, Tammy; Mc Farland Jr., Calvin D.
Subject: RE: Update_Migrant Farms
Attachments: RE: Update_Migrant Farms

Sender: lcerny@co.gloucester.nj.us
Subject: RE: Update_Migrant Farms
Message-Id:
To: tjones@co.gloucester.nj.us
To: cmcfarland@co.gloucester.nj.us

From: Cerny, Lisa A.
Sent time: 05/06/2020 11:32:01 AM
To: Jones, Tammy; Mc Farland Jr., Calvin D.
Subject: RE: Update_Migrant Farms

Hi, there is a hotel navigator/aggregator through NJDFD (Elisa Neira is the lead) that can only be accessed through the state as per Joe Gelata (NJDHS/OEM) . They are slowly working their way south. Also, heard NJDOH is using the field hospital at Secaucus as a step down unit for COVID positive cases. Would be interesting to see if they would use AC Field hospital in the same way or set aside some beds?

From: Jones, Tammy
Sent: Wednesday, May 6, 2020 11:22 AM
To: Cerny, Lisa A. ; Mc Farland Jr., Calvin D.
Subject: Update_Migrant Farms

Hi Lisa and Calvin:

Health was on a conference call this morning with Complete Care (Curtis Edwards, Jean Calderon, Meghan Sphinelli) They mentioned after speaking with State Health, they will be Covid-19 testing migrant farm workers as early as next week and Stated they were reaching out, as we might be interested in being kept in the loop surrounding their plan.

[REDACTED]. A lot of their questions surrounded whether or not we had homeless sheltering in place, where it was, how these clients might access, etc..

I called over to Katie Doyle who was able to join us on line. She was clear about the fact that if the individuals qualify for her programs, they could be placed. The issue becomes if any illegals; she was not clear about any funding that would cover placements for the timelines needed. Perhaps FEMA monies might... but we stated we would have to investigate that further...but certainly the hotels owners will want to be timely paid, if they are putting up anyone. They will also need access to PPE's....and transportation...

[REDACTED]. Something CompleteCare will consider in their plan work. They also stated they would have a conversation with the Commissioner of Health in regards to the concerns attached and funding needs. Complete Care is also wanting to address the educational needs of the workers -

[REDACTED]
We at Health also reached out to EOC (Jack DeAngelo; Dennis McNulty; Joe Ward; Jimmy DeMore; Tom Bianco etc.) to let them know the direction the State seems to be going with migrant farms.

Let us know if you need anything more.

Thanks,
Tammy

[REDACTED]

From: Jones, Tammy
Sent time: 05/06/2020 11:33:23 AM
To: Cerny, Lisa A.
Subject: RE: Update_Migrant Farms
Attachments: RE: Update_Migrant Farms

Sender: tjones@co.gloucester.nj.us
Subject: RE: Update_Migrant Farms
Message-Id: <87ba88da7ad049fdaed51b34c80607a3@co.gloucester.nj.us>
To: lcerny@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/06/2020 11:33:23 AM
To: Cerny, Lisa A.
Subject: RE: Update_Migrant Farms

[REDACTED]

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Let us know if you need anything more.

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Tammy

From: Cerny, Lisa A.
Sent time: 05/06/2020 11:38:14 AM
To: Jones, Tammy
Subject: RE: Update_Migrant Farms
Attachments: RE: Update_Migrant Farms

Sender: lcerny@co.gloucester.nj.us
Subject: RE: Update_Migrant Farms
Message-Id: <964d772bbe514576ac884f8dc5ede808@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

Tammy

From: Mahmoud, Kathleen
Sent time: 05/18/2020 09:57:15 AM
To: Jones, Tammy
Subject: Re: Woodbury Group
Attachments: Re: Woodbury Group

Sender: kmahmoud@co.gloucester.nj.us
Subject: Re: Woodbury Group
Message-Id:
To: tjones@co.gloucester.nj.us

From: Mahmoud, Kathleen
Sent time: 05/18/2020 09:57:14 AM
To: Jones, Tammy
Subject: Re: Woodbury Group

Evergreen Family Success Center

Yamilex Diaz

Site Manager
Evergreen Family Success Center
Hispanic Family Center of Southern New Jersey, Inc.
21 Delaware Street
Woodbury, New Jersey 08096
Phone: (856) 848-7150 Ext:418
Email: ydiaz@hispanicfamilycenter.com

Kathleen Mahmoud MS, RDN
WIC Program Coordinator
Gloucester County Dept. of Health
204 East Holly Ave.
Sewell, NJ 08080
856-218-4110

From: Jones, Tammy
Sent: Saturday, May 16, 2020 8:33:40 PM
To: Mahmoud, Kathleen
Subject: Woodbury Group
Kathleen-

I know you all work with a group in Woodbury that are bilingual-
Do you have a contact name and number?
We may need some help speaking with migrant workers who are testing positive for Covid-19.
Need to be able to conduct contact tracing and education.

Or, would Susana be willing to help?

Thanks!
Tammy

From: Jones, Tammy
Sent time: 05/18/2020 12:28:08 PM
To: Mahmoud, Kathleen
Subject: RE: Woodbury Group
Attachments: RE: Woodbury Group

Sender: tjones@co.gloucester.nj.us
Subject: RE: Woodbury Group
Message-Id: <898389369af54e38a5d23c6ed382068e@co.gloucester.nj.us>
To: kmahmoud@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/18/2020 12:28:07 PM
To: Mahmoud, Kathleen
Subject: RE: Woodbury Group

Very helpful-
Thanks

From: Mahmoud, Kathleen
Sent: Monday, May 18, 2020 9:57 AM
To: Jones, Tammy
Subject: Re: Woodbury Group
Evergreen Family Success Center

Yamilex Diaz
Site Manager
Evergreen Family Success Center
Hispanic Family Center of Southern New Jersey, Inc.
21 Delaware Street
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Phone: (856) 848-7150 Ext:418
Email: ydiaz@hispanicfamilycenter.com
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From: Jones, Tammy
Sent time: 05/18/2020 12:26:17 PM
To: Mahmoud, Kathleen
Subject: RE: Woodbury Group
Attachments: RE: Woodbury Group

Sender: tjones@co.gloucester.nj.us
Subject: RE: Woodbury Group
Message-Id: <0ed2a51eb74b4efc8bb40e147cd2055c@co.gloucester.nj.us>
To: kmahmoud@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/18/2020 12:26:17 PM
To: Mahmoud, Kathleen
Subject: RE: Woodbury Group

Not sure as of yet....

Thank you for responding Kathleen!

We are trying to locate other resources to support this going forward-

Would only follow back up with you to request their support if indeed we cannot find anyone else

From: Mahmoud, Kathleen
Sent: Monday, May 18, 2020 10:44 AM
To: Jones, Tammy
Subject: Re: Woodbury Group

Susana is taking off 5/22 through 5/29 to move to a new home.

Our workload here at WIC has not declined, rather, certifications and services are requiring more time to complete. In addition, our caseload is ticking upward due to the economic decline.

Do you have a fair idea of the amount of time you would need Susana or Yolanda for help with translating, and when?

Kathleen Mahmoud MS, RDN
WIC Program Coordinator
Gloucester County Dept. of Health
204 East Holly Ave.
Sewell, NJ 08080
856-218-4110

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Thanks!
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From: Mahmoud, Kathleen
Sent time: 05/18/2020 02:51:42 PM
To: Jones, Tammy
Subject: Re: Woodbury Group
Attachments: Re: Woodbury Group

Sender: kmahmoud@co.gloucester.nj.us
Subject: Re: Woodbury Group
Message-Id: <2209462ed70541558897ebee508fbb27@co.gloucester.nj.us>
To: tjones@co.gloucester.nj.us

From: Mahmoud, Kathleen
Sent time: 05/18/2020 02:51:42 PM
To: Jones, Tammy
Subject: Re: Woodbury Group

We are here, should you need us :-)

Kathleen Mahmoud MS, RDN
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Gloucester County Dept. of Health
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Sewell, NJ 08080
856-218-4110

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Subject: RE: Woodbury Group
Very helpful-
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Yamilex Diaz
Site Manager
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Phone: (856) 848-7150 Ext:418
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From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:42 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: jgarozzo@co.gloucester.nj.us

36188E5B13E1DB4381EA483D85646B31@co.gloucester.nj.us.msg

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
To: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; **Cc:** Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella
County Extension Department Head/Agricultural Agent/Professor
Rutgers Cooperative Extension of Gloucester County
254 County House Rd
Clarksboro, NJ 08020
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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.

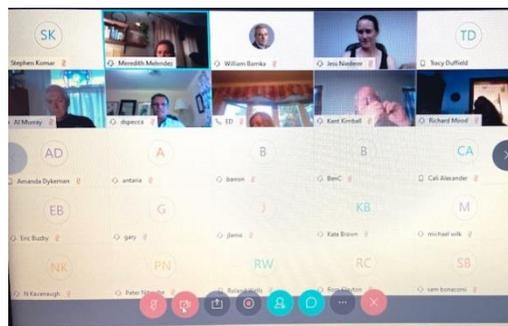


Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papatomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Sommerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘Assessing Bud and Fruit Damage in Peach’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development
 Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:42 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
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Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

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From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
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We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

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Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

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General updates

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Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.



Agricultural and Natural Resource Update:*Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor*Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papathomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Somerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘Assessing Bud and Fruit Damage in Peach’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development

Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:42 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: cbruner@co.gloucester.nj.us

658130817907A44B92BD654C8CA9C7E9@co.gloucester.nj.us.msg

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
To: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn;
Cc: Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella
County Extension Department Head/Agricultural Agent/Professor
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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

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The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

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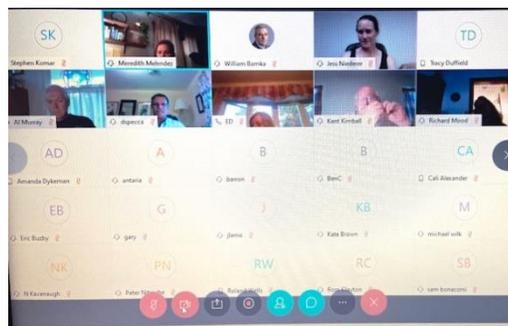


Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papathomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. 'Killer' hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Somerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘Assessing Bud and Fruit Damage in Peach’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development
 Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:43 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: tbianco@co.gloucester.nj.us

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella

County Extension Department Head/Agricultural Agent/Professor
Rutgers Cooperative Extension of Gloucester County
254 County House Rd
Clarksboro, NJ 08020

<http://njaes.rutgers.edu>
<http://sare.rutgers.edu>

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WHEN YOU NEED **US**

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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

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Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

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- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papatomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. 'Killer' hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Somerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘*Assessing Bud and Fruit Damage in Peach*’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development

Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:43 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: jmedany@co.gloucester.nj.us

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella
County Extension Department Head/Agricultural Agent/Professor
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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.

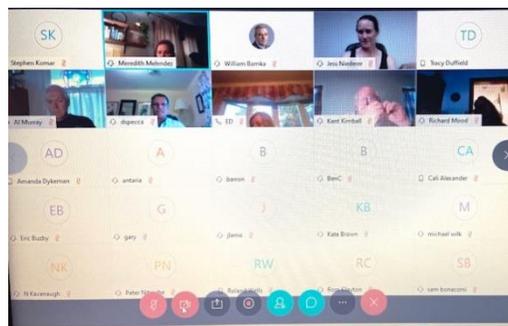


Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

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**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papatomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Somerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘*Assessing Bud and Fruit Damage in Peach*’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counsellor a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development
 Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:43 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: mcoryell@co.gloucester.nj.us

C7B37C40998B2048A01AAFF6A6DB6C656@co.gloucester.nj.us.msg

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella

County Extension Department Head/Agricultural Agent/Professor
Rutgers Cooperative Extension of Gloucester County
254 County House Rd
Clarksboro, NJ 08020

<http://njaes.rutgers.edu>
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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.

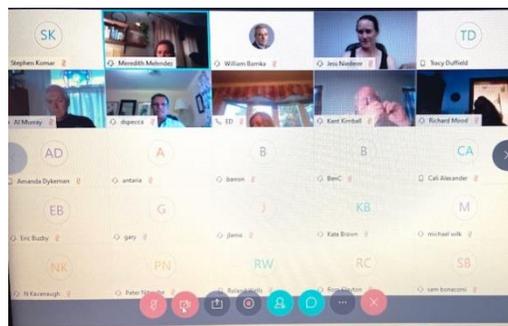


Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
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Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Sommerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘*Assessing Bud and Fruit Damage in Peach*’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development

Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:43 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: jlavender@co.gloucester.nj.us
Recipient: jgarozzo@co.gloucester.nj.us, Forwarded: jlavender@co.gloucester.nj.us

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella

County Extension Department Head/Agricultural Agent/Professor
Rutgers Cooperative Extension of Gloucester County
254 County House Rd
Clarksboro, NJ 08020

<http://njaes.rutgers.edu>

<http://sare.rutgers.edu>

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WE **R** HERE WHEN YOU NEED US

May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.

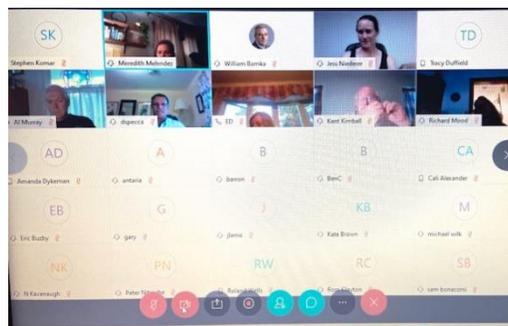


Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

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Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
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- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. 'Killer' hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
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- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
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Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘Assessing Bud and Fruit Damage in Peach’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counsellor a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development
 Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:44 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: tjones@co.gloucester.nj.us

1D9983C3C80B941188B331163BC4E787@co.gloucester.nj.us.msg

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella

County Extension Department Head/Agricultural Agent/Professor
Rutgers Cooperative Extension of Gloucester County
254 County House Rd
Clarksboro, NJ 08020

<http://njaes.rutgers.edu>
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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.

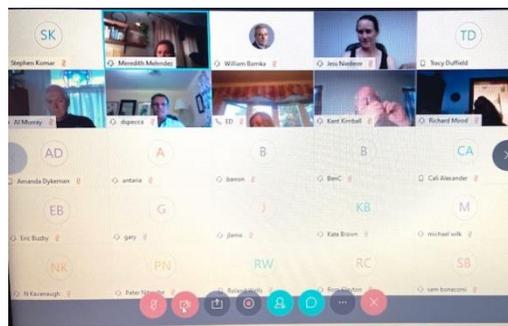


Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papathomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
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- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Somerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
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- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
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- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘*Assessing Bud and Fruit Damage in Peach*’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development

Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:43 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: mmetz@co.gloucester.nj.us

6B90C6A9B55CB44973AC0078A8BCA51@co.gloucester.nj.us.msg

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella
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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.

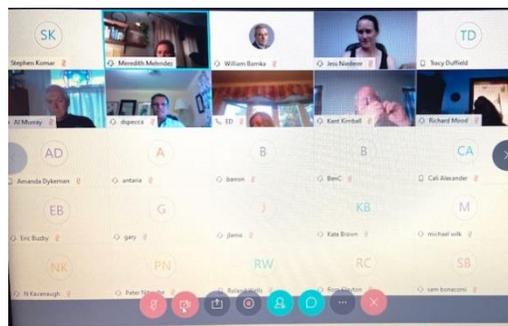


Agricultural and Natural Resource Update:***Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor***Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papathomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
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- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

- Infante-Casella, M. 2020. NJMVC Further Extends Driver License, Registration, and Inspection Expiration Dates Due to COVID-19. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 19, 2020. <https://plant-pest-advisory.rutgers.edu/njmvc-further-extends-driver-license-registration-and-inspection-expiration-dates-due-to-covid-19/>

- Infante-Casella, M. 2020. Reasons to Add Soil Around the Transplant/Planting Hole on Plastic Mulch. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/reasons-to-add-soil-around-the-transplant-planting-hole-on-plastic-mulch/>
- Infante-Casella, M. 2020. Labor Will Be Hot Topic For 7:00PM Wednesday Night Webinar – “Ask the Ag Agent”. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 12, 2020. <https://plant-pest-advisory.rutgers.edu/labor-will-be-hot-topic-for-700pm-wednesday-night-webinar-ask-the-ag-agent/>
- Infante-Casella, M. and W. Bamka. 2020. Spread the Word: “Killer” Hornet NOT Found in the Northeastern U.S. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/spread-the-word-killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and S. Komar. 2020. Sourcing Local NJ Farm Products and Concerns of Food Insecurity. Rutgers Cooperative Extension Plant and Pest Advisory Newsletter, May 8, 2020. <https://plant-pest-advisory.rutgers.edu/sourcing-local-nj-farm-products-and-concerns-of-food-insecurity/>

Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘*Assessing Bud and Fruit Damage in Peach*’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard’s excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development
 Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:43 PM
To: Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
Cc: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shoanne Seijas <shoanne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: Rutgers Cooperative Extension of Gloucester County - May Program Report

Sender: minfante@njaes.rutgers.edu
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Message-Id:
Recipient: tsuydam@co.gloucester.nj.us

47B7AEEC37A839489F84FF8CA03B3473@co.gloucester.nj.us.msg

From: Michelle Infante-Casella <minfante@njaes.rutgers.edu>
Sent time: 05/27/2020 04:02:35 PM
Bruner, Chad; Jones, Tammy; Lavender, James - Freeholder; DiMarco, Frank J. - Freeholder; Coryell, Michelle; Brian Schilling <brischi@sebs.rutgers.edu>; Kathleen Howell <khowell@njaes.rutgers.edu>; Cindy Rovins <cindy.rovins@rutgers.edu>; Garozzo, Jean; Bianco, Thomas A.; Nick Polanin <polanin@njaes.rutgers.edu>; Rachel Lyons <lyons@njaes.rutgers.edu>; Kathleen Morgan <morgan@njaes.rutgers.edu>; O'Brien, Shannon
To: Luanne Hughes, MS, RDN <luhughes@njaes.rutgers.edu>; Hemantkumar Gohil <hlg50@njaes.rutgers.edu>; Suydam, Tammy; Metz, MaryAnn; **Cc:** Medany, Joan; Davis, Deborah A.; Katelyn Waldeck <katelyn.waldeck@rutgers.edu>; Quilty, Brian; Leeanne Savoca <lsavoca@njaes.rutgers.edu>; Shianne Seijas <shianne.seijas@foodcorps.org>
Subject: Rutgers Cooperative Extension of Gloucester County - May Program Report
Attachments: May 2020 RCE of GC Monthly Report.pdf

Dear Gloucester County Freeholders, County Administration and Rutgers Cooperative Extension Administration, Please see our attached May 2020 Program Report from our 3 Extension Program areas of Agriculture and Natural Resources, 4-H Youth Development and Family and Community Health Sciences.

During the pandemic, RCE of GC personnel have continued conducting business with clientele and all citizens of Gloucester County in new and improved ways to reach more persons than before using technology and innovative means of communication.

We appreciate the continued support and cooperation with county departments, volunteers, stakeholders and our university partners to best meet the needs of citizens.

Be well,
Michelle

Michelle Infante-Casella

County Extension Department Head/Agricultural Agent/Professor
Rutgers Cooperative Extension of Gloucester County
254 County House Rd
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May 2020 Monthly Program Report: Rutgers Cooperative Extension of Gloucester County
254 County House Rd, Clarksboro, NJ 08020 Phone: 856-224-8040

<https://gloucester.njaes.rutgers.edu/>

Agriculture & Natural Resources, 4-H Youth Development, Family & Community Health Sciences

If there are any questions or comments to this report, please contact the program area personnel.

General updates

RCE of Gloucester County Office Status:

On May 18th Michelle Infante-Casella was reappointed the position of County Extension Department Head by Brian Schilling, Rutgers Cooperative Extension Director. Michelle has resumed Department Head duties and will be the liaison between Rutgers and County Administration.

Monday-Friday RCE of Gloucester County has county staff members in the office to cover calls and mail 8:00AM – 4:00PM. Joan Medany (Agricultural Secretary) Tammy Suydam (4-H Program Assistant) and Debbie Davis (4-H Secretary) are working in the office. MaryAnn Mack (4-H Program Assistant) continues to remain on leave. There is no public entry into the building. Other staff are telecommuting right now and are available via phone or email.

Campus Services:

Rutgers Soil Testing Lab (STL) and Plant Diagnostic Lab (PDL) were reopened on a limited basis to comply with COVID-19 social distancing directives and are only accepting samples by mail. See the PDL website (<https://njaes.rutgers.edu/plant-diagnostic-lab/>) for current instructions for submitting samples. Check the STL website (<https://njaes.rutgers.edu/soil-testing-lab/>) for updates, submission forms and guidelines for commercial growers and home gardeners.

Gloucester County Board of Agriculture (*Main Advisory Council to Rutgers Cooperative Extension*):

The GCBA Directors meet every 4th Monday of the month in the evening. Beginning in March, the GCBA began meeting virtually on conference calls/webinars. On May 21, at the request of the NJ Department of Agriculture, GCBA President, Penni Heritage drove to Trenton to pick up 2,000 cloth, washable face masks for farmers and farmworkers in Gloucester County. President Heritage and Directors of the GCBA are getting the word out on the availability of these free masks provided by the NJ Office of Emergency Management to all County Board of Agriculture Presidents in New Jersey specifically for farmers and farmworkers.

The GCBA tentatively scheduled their annual business meeting and awards dinner for Friday, November 6th. The 2020 awardees are: James Rambo (Farmer and Elk Twp. Committeeman), Distinguished Service to Agriculture and Robert DeBaun (longtime produce buyer and farmer advocate), Special Service to Agriculture. More information to come on this event. The GCBA Directors will not meet in July or August. Monthly meetings resume in September.

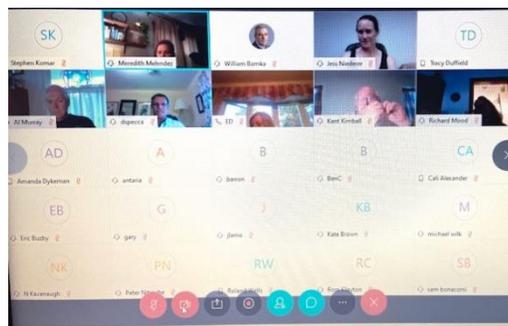


Agricultural and Natural Resource Update:*Submitted by, Michelle Infante-Casella, CEDH/Agricultural Agent/Professor*Cell: 609-980-2089 or minfante@njaes.rutgers.edu or minfante@co.gloucester.nj.us**Administrative:**

- Since March, Agent Infante-Casella has represented RCE of Gloucester County on the weekly RCE Administrative weekly COVID-19 update Zoom meetings as liaison between Rutgers and Gloucester County Administration.
- Agent Infante-Casella participates on regular Gloucester County Office of Emergency Management Operations Center calls for COVID-19 updates. She also provides information for the agricultural industry for the report, as the ESF-11 designee to OEM, Economic Development, Health Department, Freeholder Lavender's Office and County Administration.

Teaching:

- Agent Infante-Casella lead and partnered with Agricultural Agents, Bill Bamka, Stephen Komar and Meredith Melendez to host a weekly farmer forum webinar titled, "Ask the Ag Agent" for 8 weeks in April and May. The last session was held on 5/27/20. Topics discussed were ag-related issues about production, marketing, regulations and any other topics farmers wish to discuss. Hot topic that were addressed included farm labor guidance from the NJ Department of Health, changes on farms with marketing due to COVID-19, farm product sales disruptions due to issues with distribution channels, meat and dairy processing issues and seasonal farm production discussions. In this 8-week period, 258 farmers and agricultural agency representatives attended the online-series.
- A weekly "On-Farm Direct Marketing" webinar series was hosted by Agents Infante-Casella, Bamka, Komar, Melendez and Kline to help educate famers selling directly to the public during the pandemic. Four sessions in May were presented with the last session being a farmer panel discussing changes on their farms. Farmers included Tracy Duffield – Duffield's Farm Market, Dave Specca – Specca You-Pick Farm, and Jess Niederer – Chickadee Creek Organic farm. In May, 145 farmers attended this online series and recorded sessions are posted on the [Rutgers On-Farm Food Safety webpage](#).
- A 2-part "Hemp Production Boot Camp" originally scheduled for late March was moved to an online forum on May 7th and May 14th at 7:00PM. Hemp production and CBD products continue to be of major interest in NJ. Presenters included Agricultural Agents, Bill Bamka and Stephen Komar. Agent Infante-Casella assisted in hosting the 2-part series by answering questions, from producers and processors interested in hemp, in the chat box during both sessions. Attendance for the hemp boot camp was 81 participants.
- On Monday, May 11th Agent Infante-Casella presented a 1-hour lecture titled, "Vegetable Gardening for Fun, Food and Stress Relief" for the RCE "[Earth Day at Home](#)" Webinar Series to 405 participants. Recorded presentations for this event series can be viewed on this site using the code: EarthDay2020.
- On May 8th, a livestock producer forum was held with 38 participants to discuss the challenges and opportunities for livestock marketing in response to Covid-19. Rutgers Agricultural Agents, NJDA staff, producers and others interested participated in a direct marketing of livestock and value-added meat and poultry products. Agent Infante-Casella assisted with questions in the chat box during the online session.

**Extension Outreach:**

- Agent Infante-Casella responded to 18 farmer clientele inquiries in May related to vegetable pests, vegetable production, labor regulations, PPE supply sources, NJDEP water allocations for irrigation, farmer vehicle certificates, NJMVC procedures and soil testing.

- Agent Infante-Casella answered 8 home horticulture questions related to weed identification and control, lawn reseeding, lawn fertilization, and vegetable plant/seed availability.
- Agent Infante-Casella was invited to present information about agritourism to the “New Agriculture for a New Generation” program led by Lia Papatomas, Director of Operations for the Rutgers/Greece Project with educational partners at the American Farm School in Thessaloniki, Greece. For more information see: <https://greece.rutgers.edu/> and <https://www.generationag.org/>. Virtual presentations to be scheduled in June.
- 22 Facebook posts were provided in May on the [Rutgers Agriculture and Natural Resources page](#) and the [Gloucester County board of Agriculture page](#) to advertise online events, post timely information and inform the public and farm community on programs related to COVID-19. For posts please see Facebook pages.
- Agent Infante-Casella co-wrote an article about the Asian Giant Hornet, sensationalized by the media to be called the “Murder Hornet”. The article was to ease fears of residents. To date, 26 Gloucester County residents have sent videos/photos of hornets to be identified by Agent Infante-Casella. No samples were or were ever anticipated to be Asian Giant Hornets.

Media Interviews/Articles Published:

- Murder Hornets' and Your Home: Here's How Concerned You Should Really Be? Interview with writer [Kristine Gill](#). Realtor.com. May 11, 2020. <https://www.realtor.com/advice/home-improvement/murder-hornets-home/>
- Infante-Casella, M. and S. Komar 2020. Sourcing Local NJ Farm Products, Concerns of Food Insecurity. Morning Ag Clips, May 7, 2020. <https://www.morningagclips.com/sourcing-local-nj-farm-products-concerns-of-food-insecurity/>
- Infante-Casella, M. and D. Fonseca. 2020. No sign of ‘murder hornets’ in New Jersey: Will they come here? Interview with Dino Flammia, NJ 101.5 radio website and newscast. May 7, 2020. <https://nj1015.com/no-sign-of-murder-hornets-in-new-jersey-will-they-come-here/>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ hornet NOT found in the Northeastern U.S. Morning Ag Clips, May 6, 2020. <https://www.morningagclips.com/killer-hornet-not-found-in-the-northeastern-u-s/>
- Infante-Casella, M. and W. Bamka. 2020. Killer Hornet Nowhere to be Seen in New Jersey or Neighboring States. Tap into Somerville, online news, May 6, 2020. <https://www.tapinto.net/towns/somerville/articles/killer-hornet-nowhere-to-be-seen-in-new-jersey-or-neighboring-states>
- Infante-Casella, M. and W. Bamka. 2020. ‘Killer’ Hornets Aren’t Here, Experts at Rutgers Say. Interview with Jerry DeMarco, May 6, 2020. <https://dailyvoice.com/new-jersey/middlesex/news/killer-hornets-arent-here-experts-at-rutgers-say/787609/>
- Asian giant ‘murder hornets’ buzz into U.S. Could they get to Philly area? Interview with writer, Frank Kummer. Philadelphia Inquirer. May 6, 2020. <https://www.inquirer.com/science/climate/murder-hornets-honeybees-philadelphia-south-jersey-rutgers-20200506.html>
- Infante-Casella, M. 2020. U.S. fresh produce, milk disruptions & N.J. farm outlook WMBC-TV Hometown Video with Avni Lall, May 2, 2020. <https://youtu.be/xhtEDp9Yypl>
- Infante-Casella, M. 2020. Are coronavirus gardens the new 'victory gardens'? Vegetable planting on rise in Garden State. Interview for article with Melanie Anzidei. May 1, 2020. <https://www.northjersey.com/story/news/coronavirus/2020/05/01/gardening-rise-nj-during-coronavirus-crisis/3052824001/>
- Infante-Casella, M. 2020. The Importance of Gardening During COVID-19 Pandemic. Gardener News – May 2020 edition. https://issuu.com/gardenernews/docs/gardenernews_may_2020?fr=sYmEwYTEwOTg5NQ
- Infante-Casella, M. 2020. Growing Herbs in the Garden to Spice It Up. Newtown Press, May 2020 issue. <https://newtownpress.com/2020/04/30/growing-herbs-in-the-garden-to-spice-it-up/>

Rutgers Plant and Pest Advisory Newsletter Articles (For the Agricultural Industry):

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Submitted by, Hemant Gohil, Agricultural Agent/Assistant Professor
gohil@njaes.rutgers.edu or hgohil@gloucester.co.us; Ph.: 856-418-6538 (mobile)

- Cooler days during the first half of the May helped slow down the otherwise ahead-of-the season fruit crops. However, few nights of sub-freezing temperatures during the second week of May caused extra damage to the already frost-mangled orchards. Agent Gohil worked with NJ Department of Agriculture and NJ Department of Environmental Protection to get the Open Burn Permit for the active frost protection.
- Agent Gohil shared the frost Mitigation strategies with fruit growers through Rutgers Plant and Pest Advisory article at <https://plant-pest-advisory.rutgers.edu/frost-protection-in-orchards-what-should-you-monitor/>. Strawberries were in short supply at this Memorial Day, thanks to thin crop/frost damage. On a positive note, several farm markets reported normal business, as vary consumer avoids going into big stores for their greens.
- On May 12th, at the Tree Fruit Twilight (Webex) meeting Agent Gohil presented on the topic of ‘*Assessing Bud and Fruit Damage in Peach*’. He also conducted a survey to assess damage in other parts of the State. The results will be shared with Farm Service Agencies.
- On May 13th Agent Gohil attended NJ Peach Promotion Council meeting and reported on outreach and research efforts. The NJPPC approved \$5,000 to Agent Gohil to continue Peach Variety Evaluation work at Rutgers Agriculture Research and Extension Center.
- On May 14th, Agent Gohil invited Wine Marketing expert, Doniella Winchell of THE OHIO STATE WINE GROWERS ASSOCIATION, to share her observations on novel strategies THE OHIO wineries were using as they opened for the business. In her zoom meeting titled ‘Getting back to Winery Business’ she shared creative ways to market wines during current covid-19 situation.
- On May 20th, agent Gohil organized the statewide online *Wine Grape Twilight meeting - I*. The virtual/web-based meeting tool, Webex is very user-friendly and has now been regularly used to deliver educational material (Total 43 participants). Due to the frost damage in vineyards, canopy management and subsequent pesticide spray coverage could be a challenge. Agent Gohil invited Viticulture Specialist, Dr. Cain Hickey of Penn State to present on ‘Intensive Review of Fruit Zone Management’.
- Agent Gohil continue to share the useful information from local (GC MEDB), State (e.g. Governors orders with regard to retail operations and New Labor housing regulations) and federal (e.g. updates on Payroll Protection Program or Financial Aids to farm community and information sessions) agencies to fruit and wine Industry.
- On April 28th Agent Gohil trained Master Gardeners of Essex County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (25 participants). On April 30th Agent Gohil trained Master Gardeners of Camden County on the topic of ‘Growing Tree Fruits in the Backyard’ thru Webex online platform (22 participants).
- Agent Gohil counselled to a county-based grower on challenges and opportunists of growing wine grape. Also, counselled a prospective farmer on the types of crops and agriculture business possibilities in Gloucester County and the farm tag requirement.

- Assisted upcoming vineyard near Turnersville, for purchasing certified planting material from a Long Island based vineyard's excess inventory and provided information on performing detailed inspection of grapevines before planting.
- Assisting a County based grower with Identification of cause of declining blueberry bushes, with the help of Rutgers blueberry experts.
- Counseled a home gardener on pruning 30-year-old declining pink dogwood tree; and Identified Fire Blight disease in Pear trees and recommended mitigation practices for next few years.
- Agent Gohil used the USDA-NRCS tool, Soil Web Survey, to perform detail assessment of a prospective vineyard site in a 35-acre wooded lot in north jersey. Report included, soil physical and chemical properties, soil natural pH, air and water drainage problems. The signing of contact for that piece of property was conditional based on this report.

4-H Youth Development

Submitted by: Tammy Suydam, 4-H Program Assistant (tsuydam@co.gloucester.nj.us)



- (73) Gloucester County 4-H members are in their final week of participating in a State 4-H Animal Science Contest. This 7-week online learning opportunity featured weekly activities for club members utilizing the RCE NJ 4-H Animal Science Resource Blog. Club members completed tasks to earn points, and the top earning clubs will receive mini-grants to pay for materials or equipment, transportation, curriculum, guest speakers, field trips, entry/registration fees for educational workshops, or other items needed to advance their understanding of animal science. Although the contest has come to a close, all activities are available for others to take advantage of this online learning resource at <https://4hanimalscience.rutgers.edu/>.
- As a member of the NJ State 4-H Animal Science Task Force, on May 8 Tammy Suydam virtually met with colleagues from around the state on to extensively discuss the current needs of 4-H members enrolled in the Animal Science project areas. Current focus areas and work include:
 - The development of a virtual fair platform for members to participate in due to the current limitations of in-person contact and events.
 - A collaborative approach to 4-H market animal sales to accommodate all members enrolled in the market animal project areas, as well as animal classes/shows as part of a virtual county or state level fair.
 - A collaborative effort for virtual shows versus by county; with a new approach of working together to provide a better experience for all members.
 - Converting local level to make traditional clinics and summer programs accessible through virtual technologies.
- To further utilize the power of collaboration, the North East region has convened temporary 4-H working groups to address specific challenges. 4-H Program Assistant, Tammy Suydam, was invited to join the Animal Science Horse Working Group along with a mix of state and regional specialists, agents, and county staff from NJ, PA, NH, NY, and VT. The first regional conversation and idea sharing session held on May 19 was found to be very useful, and also generated a compilation of great 4-H Horse Club resources to be used within our 4-H county equine program.
- On May 21, the NJ State 4-H State Horse Show Committee virtually convened to discuss organizing educational programming and clinics that will prepare 4-H Horse Club members for a better show experience in the future. The result - a Virtual 4-H Horse Camp is being planned for July 13 -16 and will include clinicians and educational speakers on a range of equine related topics; registration details will be announced early June.
- On May 26, the winners of the first ever Virtual NJ State 4-H Equine Presentations were announced. All members previously registered to compete at the 2020 in-person Equine Presentation Competition were invited to tape and submit their presentation to be judged using the same scoring methods as the live event.

Gloucester County 4-H was well represented with (6) members placing, including earning 1st place in the Junior Individual Presentation, Senior Individual Presentation, and Senior Public Speaking categories. Congratulations to senior 4-H members Morgan Wordelmann and Skylar Cooper, who now qualify to take part in the NJ State 4-H Communications team for regional and national level event opportunities.

- On the evening of May 27, (2) Gloucester County 4-H senior members will compete in the Annual Equestrian of the Year contest. Interviews and speeches will be conducted by a panel of judges and staff via Zoom. The EOY contest is an ambassador program which encourages 4-H'ers to become well-rounded individuals with a comprehensive background in the horse field. Emphasis is placed on participation in the educational equine events such as Horse Bowl, Horse Judging and Hippology; public speaking skills through county, state and the Equine Presentation contests; county-level teen leadership programs; community service projects; and other equine related activities.

FCHS Update

Submitted by: Luanne Hughes, MS, RDN: FCHS Educator (hughes@njaes.rutgers.edu)

FCHS Outreach: Current Status – As a result of changes to operating status that went into effect in March, FCHS faculty and staff and FoodCorps service member continue to telecommute and provide service to our clientele. Following is an overview of outreach and service:

- **Food Access:** FCHS continues to work with state, county, and local entities to identify opportunities and implement strategies to improve food access in our communities. Working with the New Jersey Voluntary Organizations Active in Disaster (NJVOAD) Food Distribution and Feeding Workgroup, we are engaged in collaborative discussions that identify opportunities and needs for improving food access and food security during the pandemic. Areas of emphasis include:
 - Regularly updating existing food pantry/food distribution directories to include changing hours of operation, food drive/drop-off, and pop-up distribution sites.
 - Luanne is now serving on the Gloucester County VOAD.
 - Providing a platform for those running New Jersey's food banks, pantries and feeding programs to share information and collaborate.
 - Recognizing breakdowns occurring in the food supply chain, due to manufacturing/ distribution/transit interruptions, site closures, and/or worker strikes, illness or fears of going to work, and identifying opportunities, solutions, and supports.
 - Coordinating connections with New Jersey food manufacturers to request donations and/or to inquire about the disposition of raw ingredients/food product they might not be able to process, ship, etc., due to any disruptions in operations.
- **Virtual Outreach:**
 - FCHS Educator Luanne Hughes and colleague Alex DelCollo (Salem County) were awarded a \$1,500 Rutgers University Online Learning Competitive Grant to expand FCHS Teacher Institute programming from in-person to virtual format. Production will begin in July. FCHS Teacher Institutes have been a highly successful outreach program in Gloucester County for 5 years. We are excited to expand the program into virtual format to assist teachers in more effectively meeting their ongoing training needs. This is especially important now, given new CDC school operation guidelines. <https://districtadministration.com/cdc-schools-reopen-safety-guidleines-coroavirus-covid/>
 - The FCHS virtual wellness program, *The Family Foodie Presents*, launched on May 8th. Over 1,100 consumers participated in the program, either via the live or recorded segment. Our next session is planned for May 28th. <https://www.facebook.com/FCHSGloucesterCounty/>
 - Segment 3 of *FCHS Wellness Wednesdays* airs today at 2:00. Each week, an average of 40-50 consumers participate in this virtual learning opportunity. *Sitting: The Silent Killer* is our next session, scheduled for June 3rd. <https://njaes.rutgers.edu/online-event-series/wellness-wednesdays.php>.

- FCHS staff LeeAnne Savoca, Brian Quilty, and Katelyn Waldeck just finished designing online courses to launch virtual SNAP-Ed programming, which is being offered to partner agencies throughout the county.
- **Social Media:** FCHS has increased our social media presence to provide additional support to the public on topics related to COVID-19: handwashing, social distancing, stress and anxiety reduction, healthy eating, available grants, and consumer/business financial support programs. Our Facebook page has reached 400 likes and weekly We are now working with partners to offer Face Book live “quarantine pantry” cooking lessons that target healthy, low-cost ingredients, make connections to food distribution sites, and provide support materials to county agencies. Posts are averaging a reach of 500-1,000 consumers and 75 engagements, and our first Facebook live broadcast reached over 1,100 people.
- **Virtual Outreach Applied Research Project:** FCHS Educator Luanne Hughes’s applied research projects to identify preferred outreach modalities and strategies of Extension clientele have expanded to target New Jersey, not just Southern NJ. For our first project, we are surveying key target audiences: schools, faith-based organizations, small retailer store owners, and social service/food access organizations to identify wellness needs and virtual capabilities of their clientele. We expect this data to impact current and future programming. Our immediate need is to ensure that consumers have access to food, nutrition, and wellness resources to support their health during quarantine and social distancing. Moving forward, we anticipate the information we gather will enable us to direct more outreach using virtual and social media models. For our second project, we are identifying best practices for virtual outreach with limited-resource audiences to facilitate the development of a SNAP-Ed social media and outreach campaign.
- **Worksite Wellness:** Wellness programs improve employee health behaviors, reduce elevated chronic disease risk factors, reduce employer health care costs, decrease absenteeism, improve employee recruitment and retention, and reduce stress. Studies show an 11% increase in employee productivity and a 1.8-day reduction in absenteeism per employee upon the introduction of a wellness program. In response to new employer models where staff is working from home, we have expanded our virtual worksite wellness program to incorporate mindfulness and stress-reducing activities, along with nutrition and physical activity. Our free *Get Moving Get Healthy New Jersey Workforce* program is available to all Gloucester County businesses and residents. FCHS educator Luanne Hughes is working with local businesses to provide training and guidance on COVID-19 employee safety. This includes instruction on proper handwashing, sanitizing, and recommendations for onsite portable handwashing stations, PPD, and stress reduction techniques.
- **RCE Gardening Initiative:** Luanne Hughes is working on the FCHS Department committee to support a new statewide consumer gardening initiative for New Jersey residents. The focus of FCHS work is to guide consumers on using the garden for healthier meals, exercise, stress reduction, and as a tool for family learning and bonding. This is a joint project with the 4- H and ANR Departments.
- **SNAP-Ed:** Luanne Hughes is currently working on the FY21 SNAP-Ed grant proposal, which is due in July. Our emphasis for next year’s grant includes food access, as well as environmental and systems strategies to improve nutrition and physical activity. All FCHS staff continue to work remotely from home and we continue to work virtually and remotely with all partner organizations. It is our goal to continue FCHS, FoodCorps, and SNAP-Ed outreach in Gloucester County.
- **FMNP (Senior Produce) Vouchers:** FCHS is working with Social Services to provide support materials to seniors who will receive FMNP vouchers in June. We will provide recipes, nutrition and wellness materials, virtual lessons, and text message wellness tips to registered seniors.



From: Morina, Linda
Sent time: 05/12/2020 02:08:10 PM
To: Jankauskas, Dittymae; Jones, Tammy; Baylor, Michelle; Ruiz, Annmarie
Cc: Jones, Andrea M.; Grant, Elizabeth; Chell,Jill; Hudock, Jenny L.; Dawson, Denise; Magenta,Tammy
Subject: Testing Migrant works
Attachments: Testing Migrant works

Sender: lmorina@co.gloucester.nj.us
Subject: Testing Migrant works
Message-Id: <297f3980879d4679a1b1979bb96521ef@co.gloucester.nj.us>
To: djankauskas@co.gloucester.nj.us
To: tjones@co.gloucester.nj.us
To: mbaylor@co.gloucester.nj.us
To: aruiz@co.gloucester.nj.us
Cc: amjones@co.gloucester.nj.us
Cc: egrant@co.gloucester.nj.us
Cc: jchell@co.gloucester.nj.us
Cc: vhudock@co.gloucester.nj.us
Cc: ddawson@co.gloucester.nj.us
Cc: tmagenta@co.gloucester.nj.us

From: Morina, Linda
Sent time: 05/12/2020 02:08:10 PM
To: Jankauskas, Dittymae; Jones, Tammy; Baylor, Michelle; Ruiz, Annmarie
Cc: Jones, Andrea M.; Grant, Elizabeth; Chell,Jill; Hudock, Jenny L.; Dawson, Denise; Magenta,Tammy
Subject: Testing Migrant works

We just got a call from Anna Belle Fernandez, director at SJ Family Medicine Center and along with Complete Care. They are offering testing for migrant workers, they will go directly out to the farms. They then follow up with them two days later. She wanted to speak to someone to speak about coordinating.

Her contact number is 609-569-4255.

Linda Morina Rn BSN

Public Health Nurse

Gloucester County Department of Health & Human Services

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Sewell, NJ 08080

856-218-4149

Fax: 856-218-4145

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870E66B850723340806A71F94944F545@co.gloucester.nj.us.msg

From: Jones, Tammy
Sent time: 05/16/2020 08:33:41 PM
To: Mahmoud, Kathleen
Subject: Woodbury Group
Attachments: Woodbury Group

Sender: tjones@co.gloucester.nj.us
Subject: Woodbury Group
Message-Id: <205d12dd-27ae-4e6b-9b8e-9cc1f6f8bc11@co.gloucester.nj.us>
To: kmahmoud@co.gloucester.nj.us

From: Jones, Tammy
Sent time: 05/16/2020 08:33:40 PM
To: Mahmoud, Kathleen
Subject: Woodbury Group

Kathleen-

I know you all work with a group in Woodbury that are bilingual-
Do you have a contact name and number?

We may need some help speaking with migrant workers who are testing positive for Covid-19.
Need to be able to conduct contact tracing and education.

Or, would Susana be willing to help?

Thanks!
Tammy

F12B5CE7EEC2D646A4D732811CFA62C4@co.gloucester.nj.us.msg