



Protecting Chicago: Phase III Re-Opening Metrics Final Update

June 26, 2020

(Analysis as of 6/24/2020)

CDPH COVID-19 Moving from Phase III to Phase IV June 3 2020 – June 26 2020

| | Stop: May need to delay moving ahead | Caution: Pause and monitor | Go: Cautious progress | Go: Continued progress | Go: Advanced progress |
|--|---|---|--|-------------------------------|---|
| Cases 7-day rolling daily average | Any sustained increase >14 days within phase | Increase 0-14 days | Stable or decrease 0-13 days w/o preceding increase | Stable or decrease 14-28 days | Stable or decrease >28 days and/or sustained <200 new cases per day (1 case per 10,000 persons) |
| Hospitalizations 7-day rolling daily average | | | | | |
| Deaths 7-day rolling daily average | | | | | |
| COVID Emergency department visits 7-day rolling daily average | | | | | |
| Positivity rate 7-day rolling daily average | >15% citywide | 13-15% | 10-13% | 7-10% | <7% |
| Hospital system capacity 7-day rolling daily average | >1280 non-ICU beds >480 ICU beds >360 ventilators | >1000 non-ICU beds >400 ICU beds >300 ventilators | <1000 non-ICU beds occupied by COVID patients <400 ICU beds occupied by COVID patients <300 ventilators occupied by COVID patients | | |
| Testing capacity 7-day rolling daily average | Unexplained decline in testing <4500 tests/day | Explained decline in testing <4500 tests/day | Stable testing >5% of residents per month (>4500 tests/day); or increase to >6500 diagnostic tests/day | | |
| Response capacity | N/A | N/A | Initiate case investigation within 24h of assignment for 50% of cases | 75% of cases | 90% of cases |

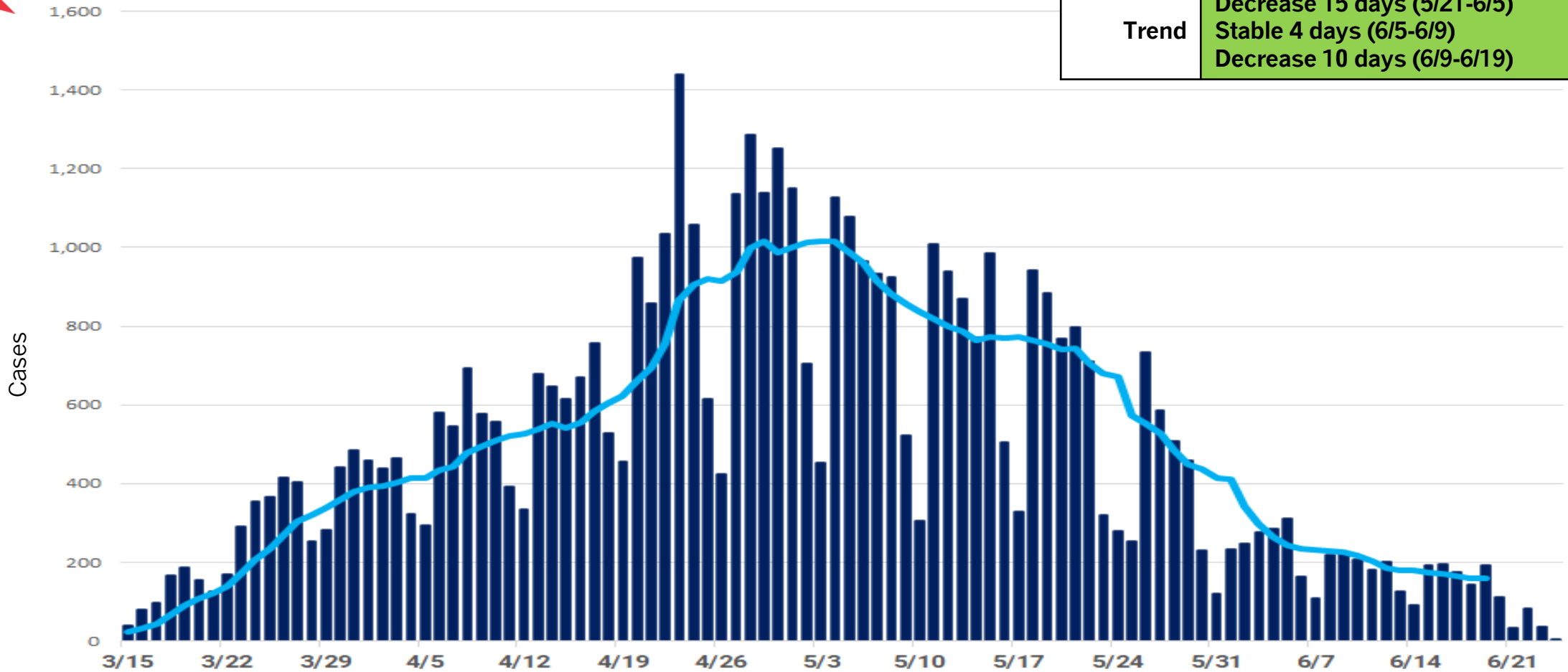


COVID-19 Confirmed Cases

COVID-19 case incidence in Chicago is moderately high, but declining. Cases have been stable or decreasing for >28 days



COVID-19 Cases, daily counts and rolling 7 day average by specimen collection date



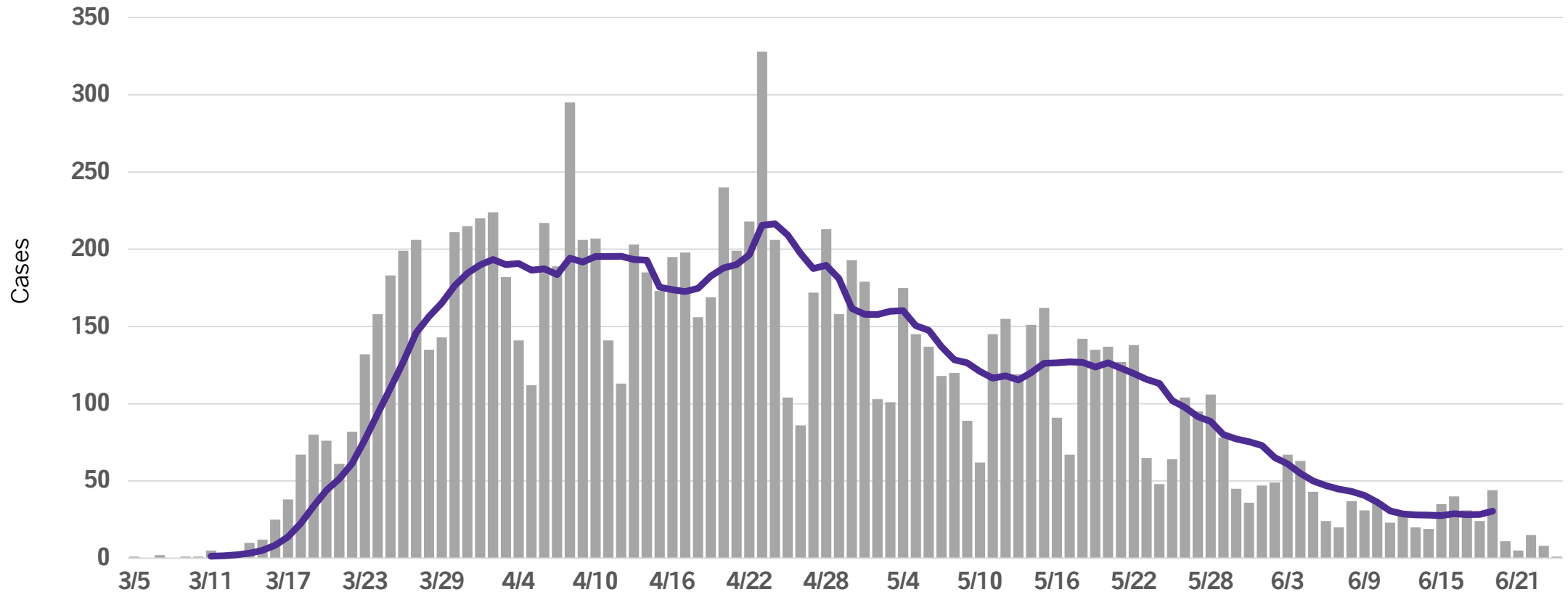
Daily COVID-19 cases with known specimen report date. *14-day incidence is calculated by summing all new cases in the most recent 14-day period and dividing by 14 days to find an average. Incidence gating rank is determined using 14-day average incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATE (11-50); MODERATELY HIGH (51-99); HIGH (100+). Daily counts for most recent dates displayed are likely incomplete.

Black, non-Latinx case incidence is moderately high, but declining. Cases have been stable or decreasing for >28 days



COVID-19 cases among Black, non-Latinx residents, daily counts and rolling 7-day average, specimen date

| | |
|-------|---|
| Trend | Decrease 22 days (5/21-6/12) Stable 7 days (6/12-6/19) |
|-------|---|



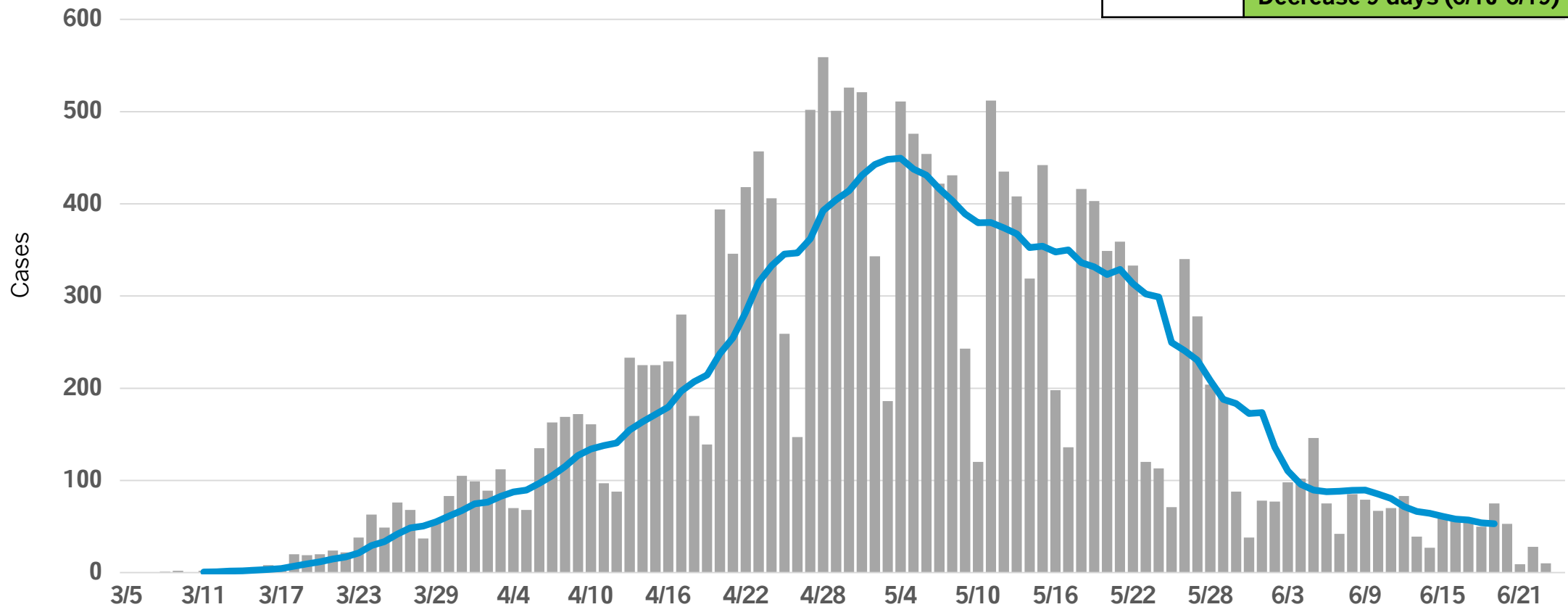
Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence. Daily counts for most recent dates displayed are likely incomplete *14-day incidence is calculated by summing all new cases in the most recent 14-day period and dividing by 14 days to find an average. Incidence gating rank is determined using 14-day average incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-100); HIGH (100+)

Latinx case incidence is high but declining. Cases have been stable or decreasing for >28 days



COVID-19 cases among Latinx residents, daily counts and rolling 7-day average, specimen date

| | |
|-------|-----------------------------|
| Trend | Decrease 14 days (5/21-6/4) |
| | Stable 6 days (6/4-6/10) |
| | Decrease 9 days (6/10-6/19) |



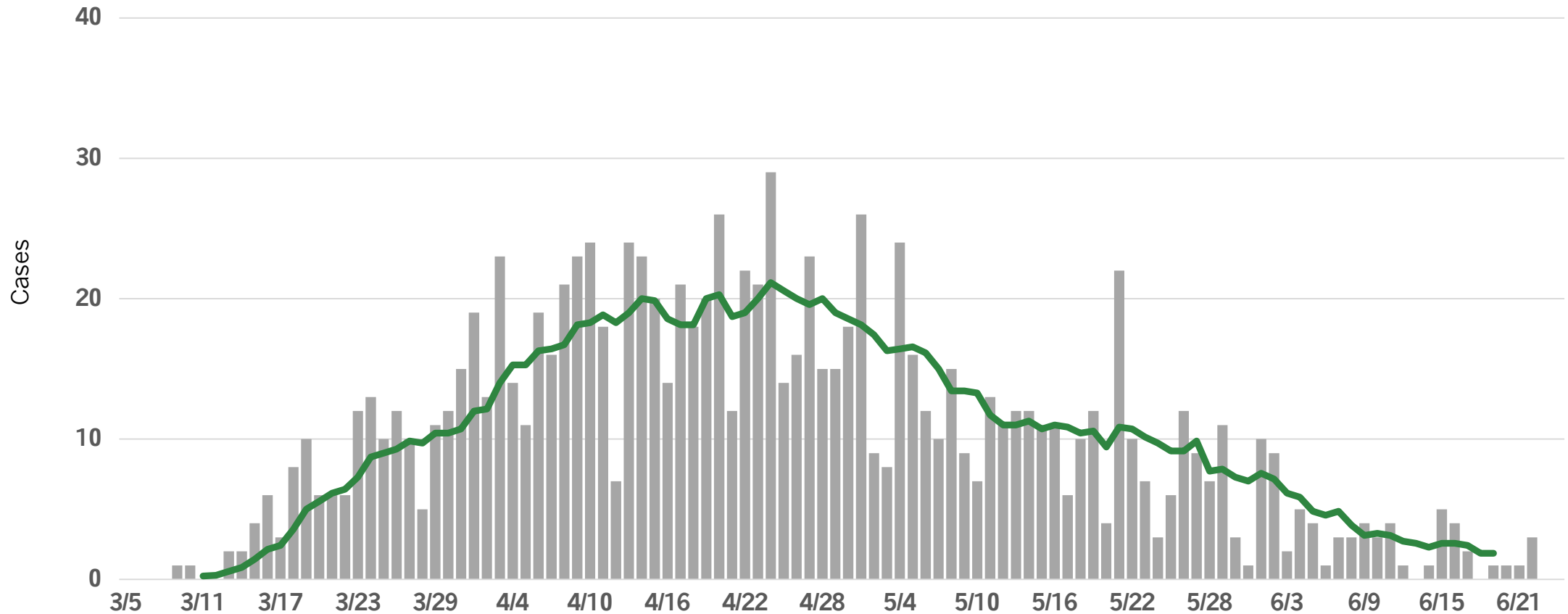
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Asian, non-Latinx incidence is moderately low and stable. Cases have decreased for >28 days



COVID-19 cases among Asian, non-Latinx residents, daily counts and rolling 7-day average, specimen date

| | |
|-------|------------------------------|
| Trend | Decrease 29 days (5/21-6/19) |
|-------|------------------------------|



Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence. Daily counts for most recent dates displayed are likely incomplete *14-day incidence is calculated by summing all new cases in the most recent 14-day period and dividing by 14 days to find an average. Incidence gating rank is determined using 14-day average incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-100); HIGH (100+)

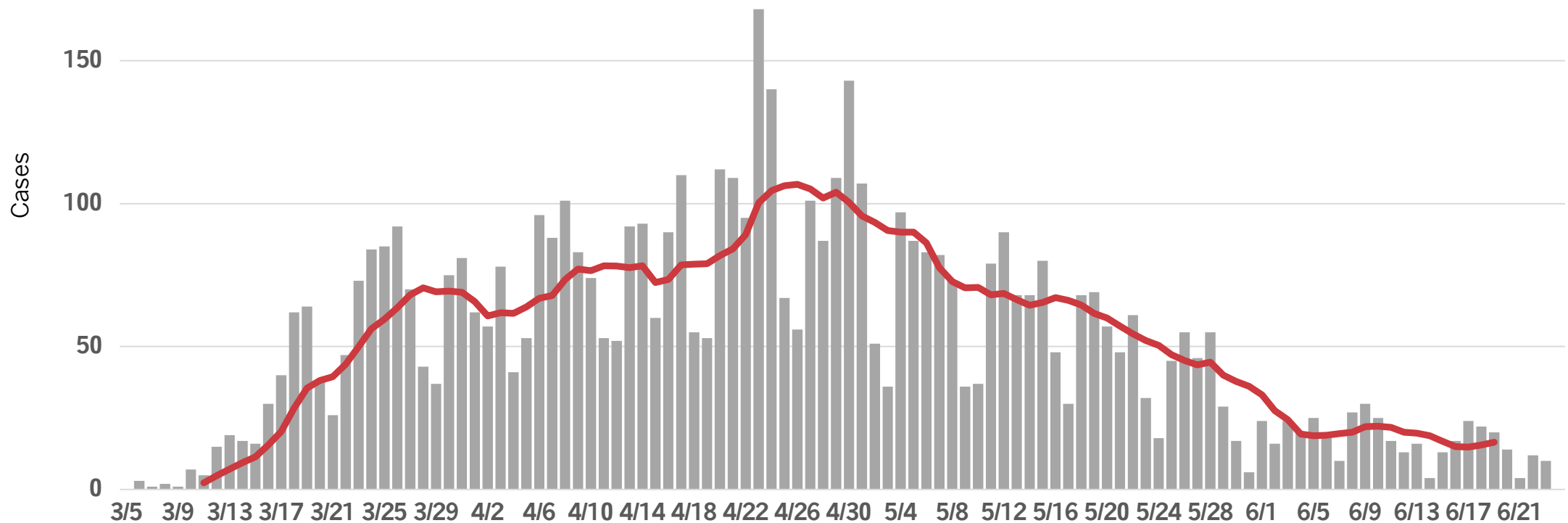
White, non-Latinx case incidence is moderate and stable. Cases are now decreasing or stable after a 5-day period of increase.



COVID-19 cases among white, non-Latinx residents, daily counts and rolling 7-day average, specimen date

200

| | |
|-------|-----------------------------|
| Trend | Decrease 15 days (5/21-6/5) |
| | Increase 5 days (6/5-6/10) |
| | Decrease 7 days (6/10-6/17) |
| | Stable 2 days (6/17-6/19) |



Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence. Daily counts for most recent dates displayed are likely incomplete *14-day incidence is calculated by summing all new cases in the most recent 14-day period and dividing by 14 days to find an average. Incidence gating rank is determined using 14-day average incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-100); HIGH (100+)



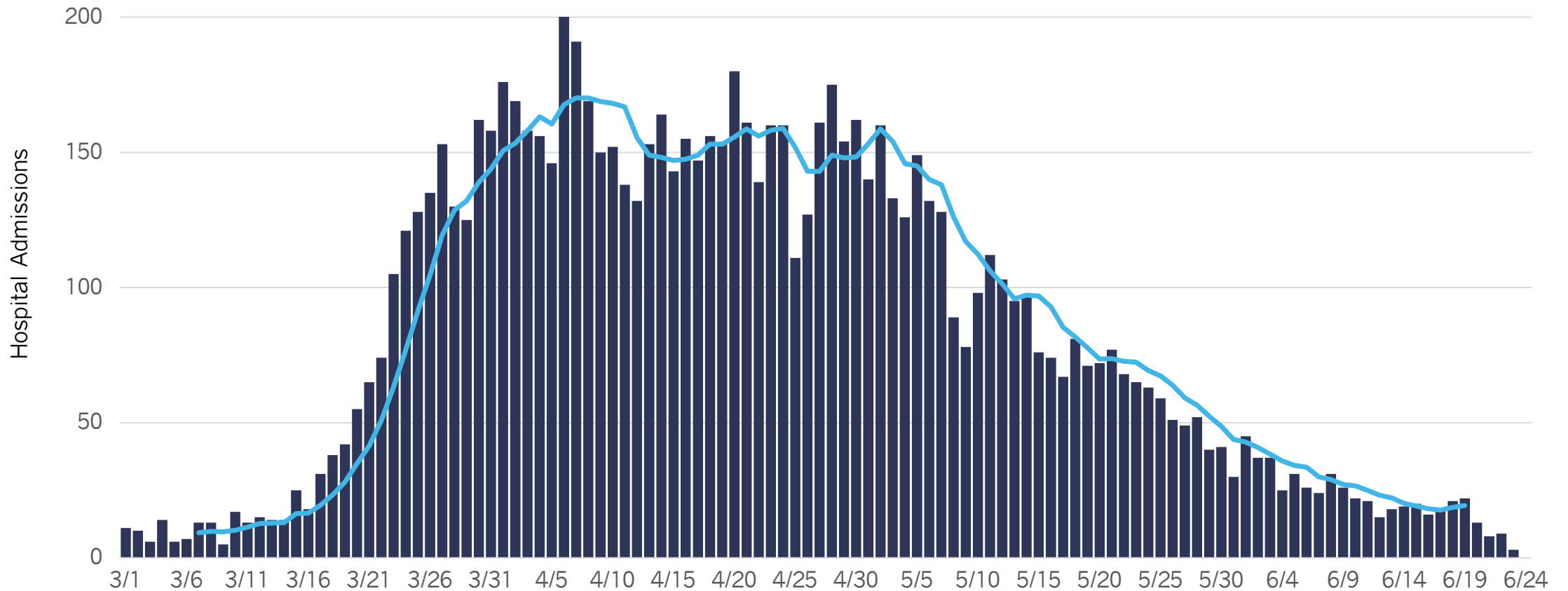
COVID-19 Severe Outcomes

Daily COVID-19 hospital admissions stable or decreasing for >28 days



COVID-19 Hospital admissions, daily counts and rolling 7-day average, first known hospital admit date

| | |
|-------|---|
| Trend | Decrease 27 days (5/21-6/17) Stable 2 days (6/17-6/19) |
|-------|---|



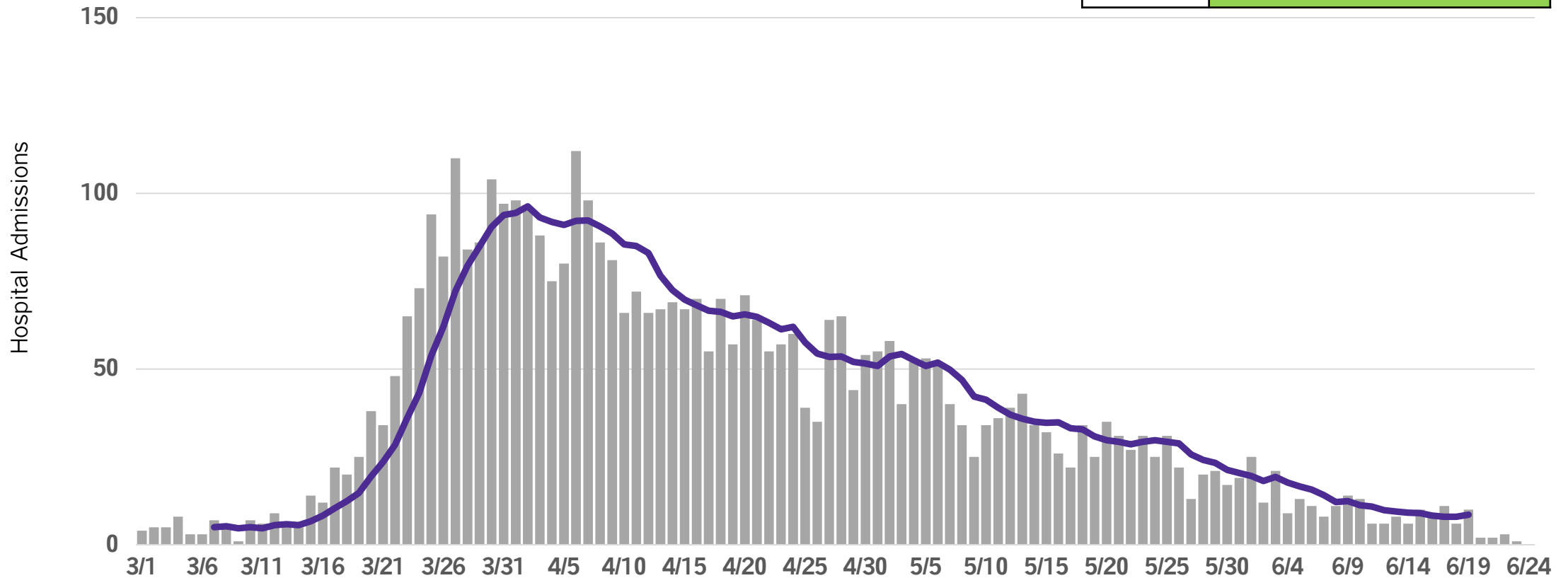
Hospitalizations are reported to CDPH by hospitals into I-NEDSS and ESSENCE and self-reported by patients via an online survey. Daily counts for most recent dates displayed are likely incomplete. Cases who are not indicated to have been hospitalized across any of the three data sources are assumed to not have been hospitalized. Six records with hospital admit dates from January and February 2020 are excluded from this chart.

Black, non-Latinx hospital admissions stable or decreasing for >28 days



COVID-19 hospital admissions among Black, non-Latinx residents, daily counts and rolling 7-day average, first known hospital admit date

| | |
|-------|------------------------------|
| Trend | Stable 5 days (5/21-5/26) |
| | Decrease 22 days (5/26-6/17) |
| | Stable 2 days (6/17-6/19) |



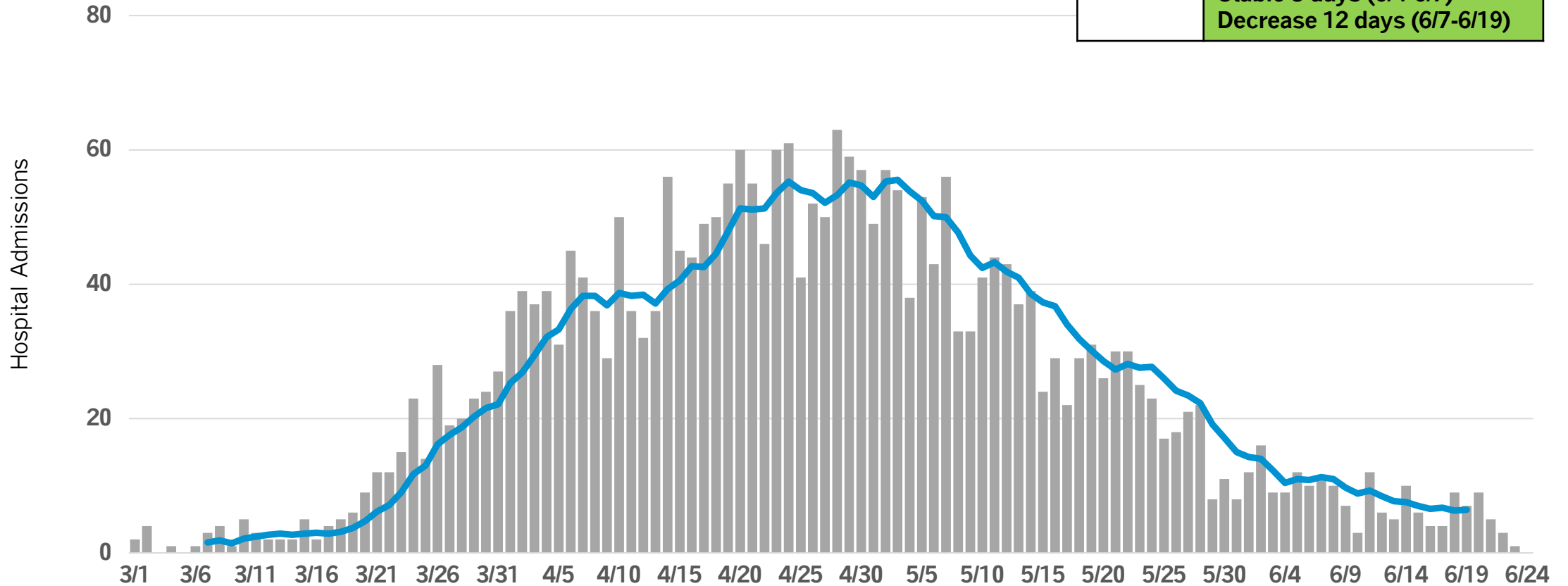
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Latinx hospital admissions stable or decreasing for >28 days



COVID-19 hospital admissions among Latinx residents, daily counts and rolling 7-day average, first known hospital admit date

| Trend | Duration |
|----------|--------------------|
| Stable | 3 days (5/21-5/24) |
| Decrease | 11 days (5/24-6/4) |
| Stable | 3 days (6/4-6/7) |
| Decrease | 12 days (6/7-6/19) |



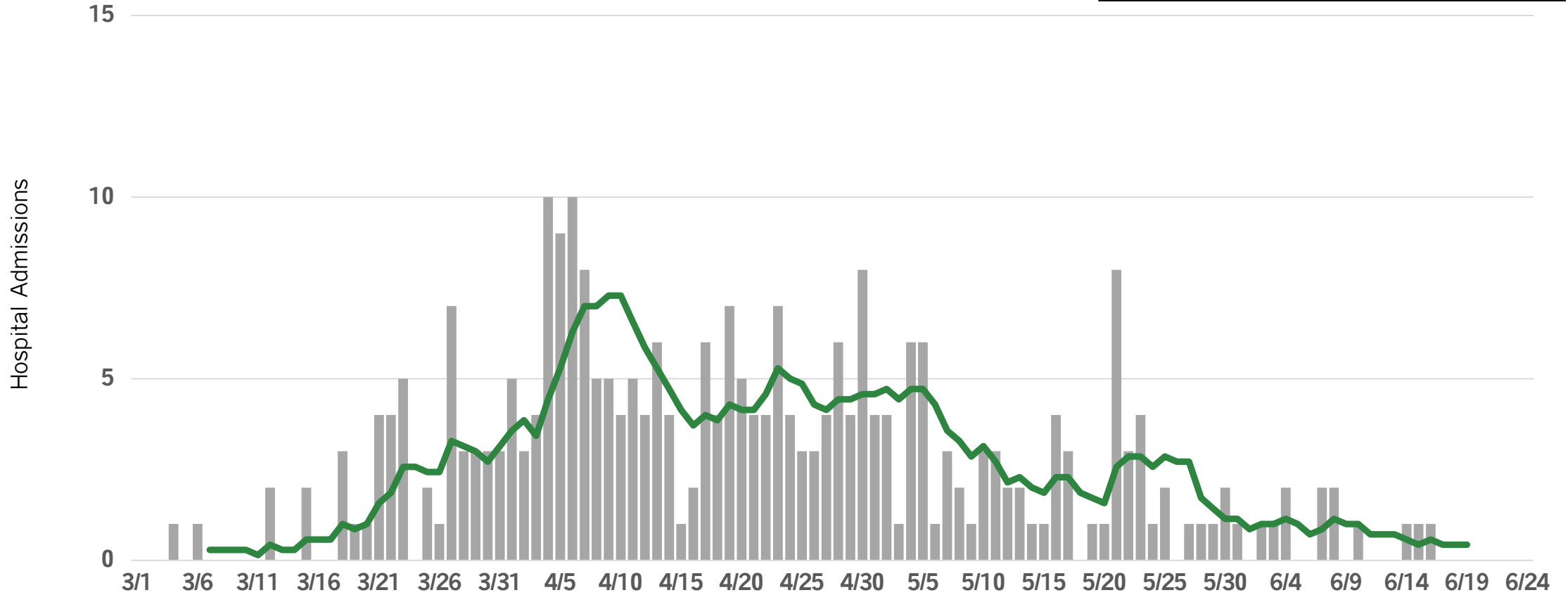
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Asian non-Latinx hospital admissions at low incidence for 23 days



COVID-19 hospital admissions among Asian, non-Latinx residents, daily counts and rolling 7-day average, first known hospital admit date

| | |
|-------|---|
| Trend | Below 2 avg. daily admissions for 23 days |
|-------|---|



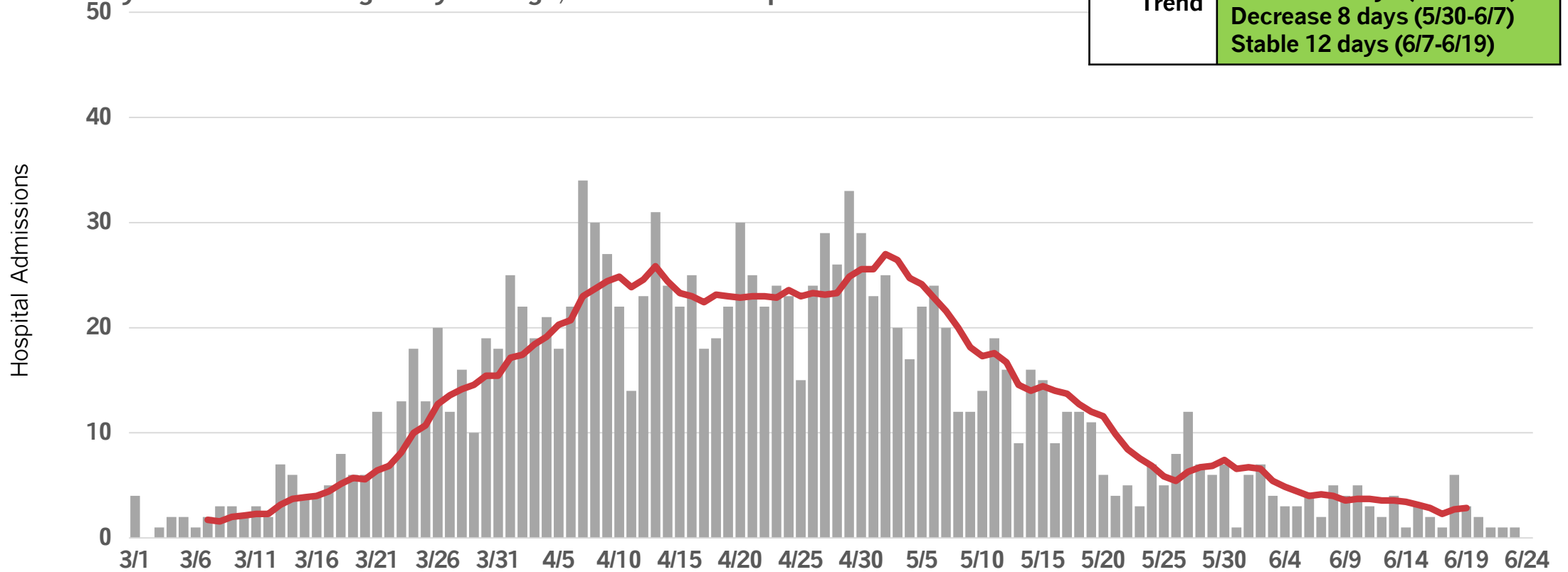
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White, non-Latinx hospital admissions stable or decreasing for >28 days



COVID-19 hospital admissions among white, non-Latinx residents, daily counts and rolling 7-day average, first known hospital admit date

| | |
|-------|-----------------------------|
| Trend | Decrease 5 days (5/21-5/26) |
| | Increase 4 days (5/26-5/30) |
| | Decrease 8 days (5/30-6/7) |
| | Stable 12 days (6/7-6/19) |

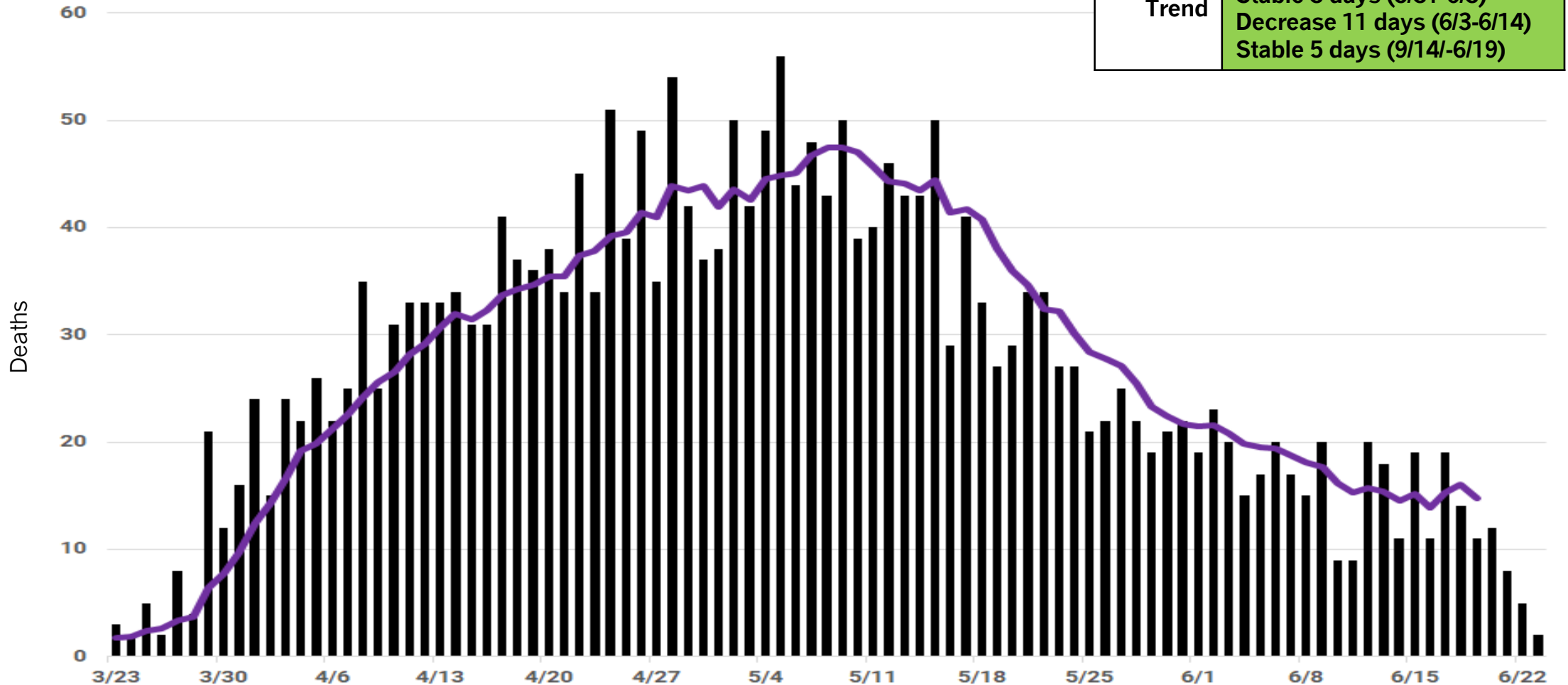


Hospitalizations are reported to CDPH by hospitals into I-NEDSS and ESSENCE and self-reported by patients via an online survey. Daily counts for most recent dates displayed are likely incomplete. Cases who are not indicated to have been hospitalized across any of the three data sources are assumed to not have been hospitalized. Six records with hospital admit dates from January and February 2020 are excluded from this chart.

COVID-19 deaths are stable or decreasing for >28 days



COVID-19 deaths, daily counts and rolling 7-day average by deceased date



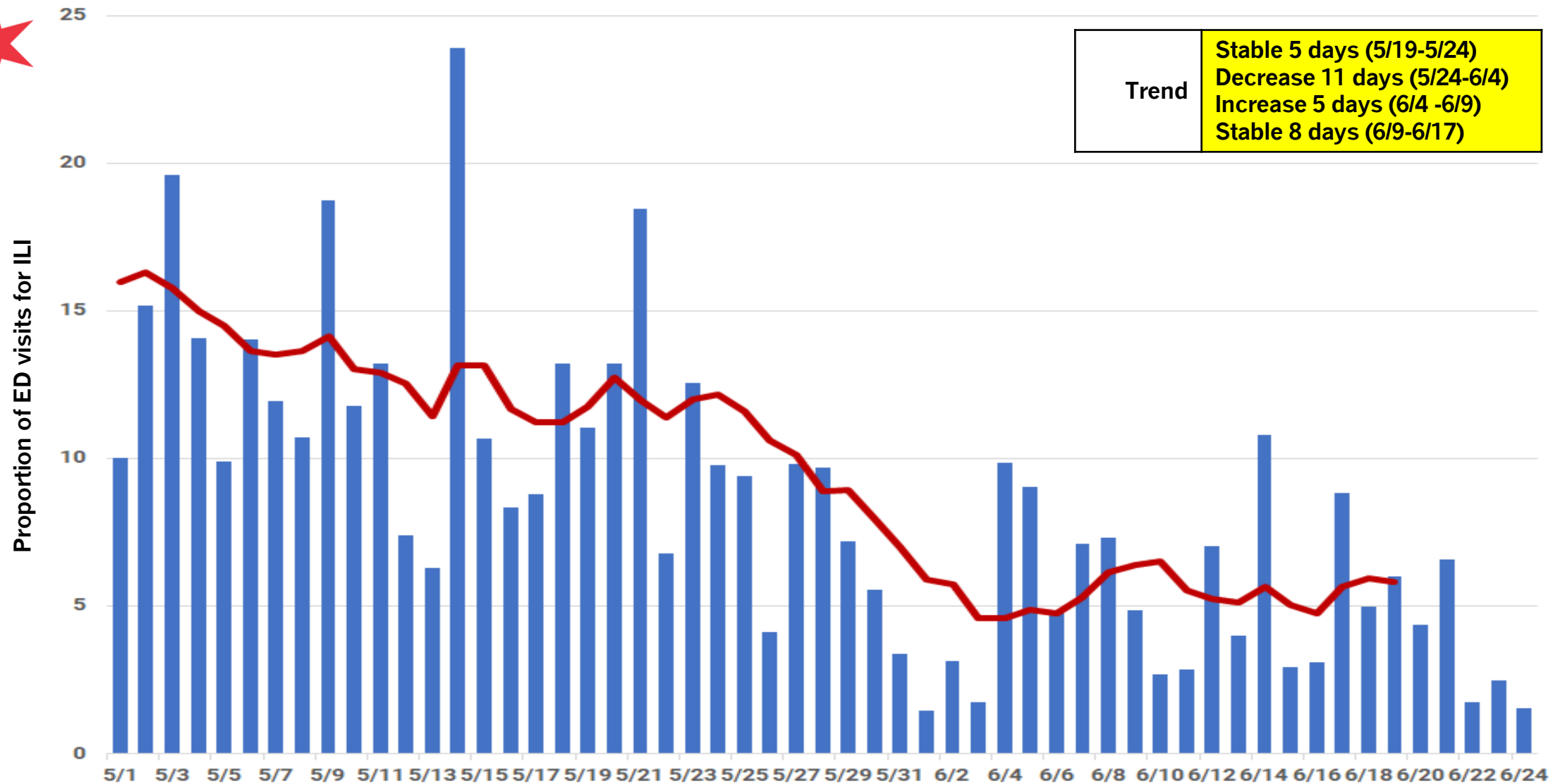
| | |
|-------|------------------------------|
| Trend | Decrease 10 days (5/21-5/31) |
| | Stable 3 days (5/31-6/3) |
| | Decrease 11 days (6/3-6/14) |
| | Stable 5 days (6/14-6/19) |

Daily COVID-19 deaths reported for Chicago residents with known death date. Data source: INEDSS. Daily counts for most recent dates displayed are likely incomplete.



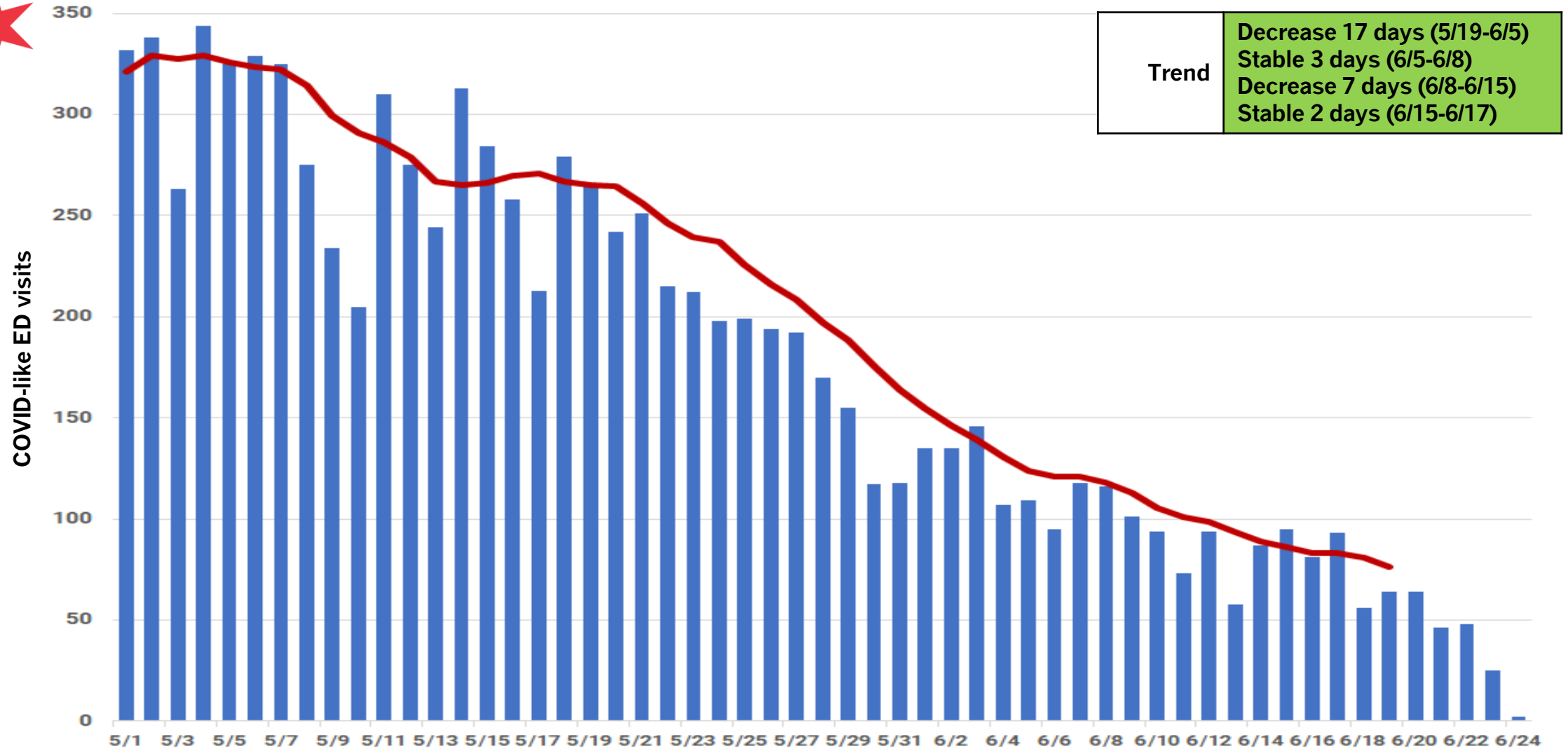
Emergency Department Visits

Proportion of ED visits for influenza-like illnesses are now stable after a recent 5-day period of increase



ILI: Influenza-like illness. Percentage of all emergency department visits reported with influenza-like illness symptoms among Chicago residents.
 Data Source: Illinois Hospital Emergency Departments reporting to CDPH through the National Syndromic Surveillance Project.

ED visits for COVID-like illness stable and decreasing >28 days



Percentage of all emergency department visits reported with COVID-like symptoms among Chicago residents.
 Data Source: Illinois Hospital Emergency Departments reporting to CDPH through the National Syndromic Surveillance Project.

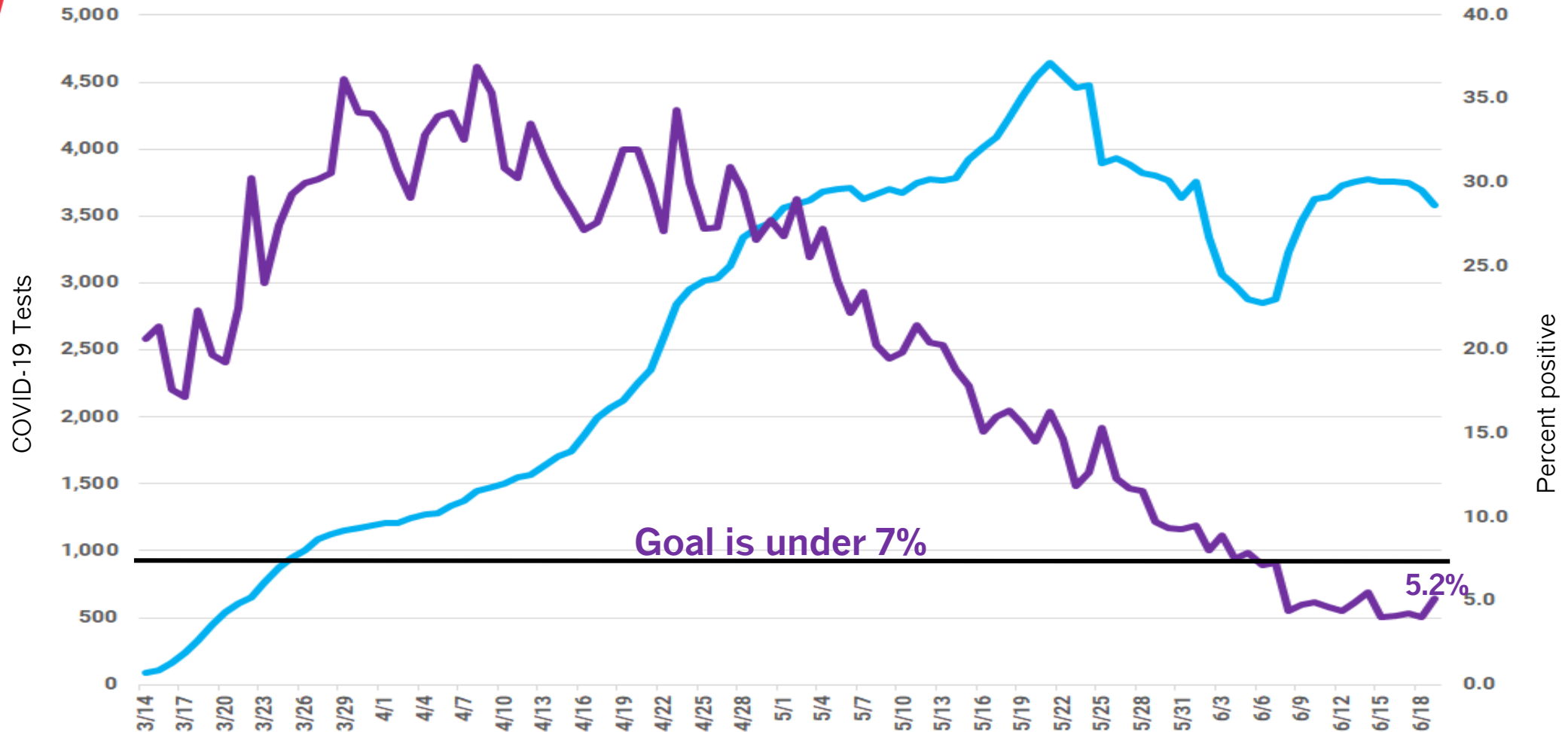


Percent Positivity

Percent positivity under 7% citywide; testing now stable or increasing after recent decline



COVID-19 tests, rolling 7-day average for percent positivity (one test per individual ever) and COVID-19 tests (one test per individual per day)



For percent positivity: Every individual tested is counted once. The first positive test is the date used for the test result. If the individual has only negative tests, the date of the first negative test is used. (INEDSS) For 7-day rolling average of counts: All tests performed on Chicago residents as reported by electronic lab reporting (IDPH).

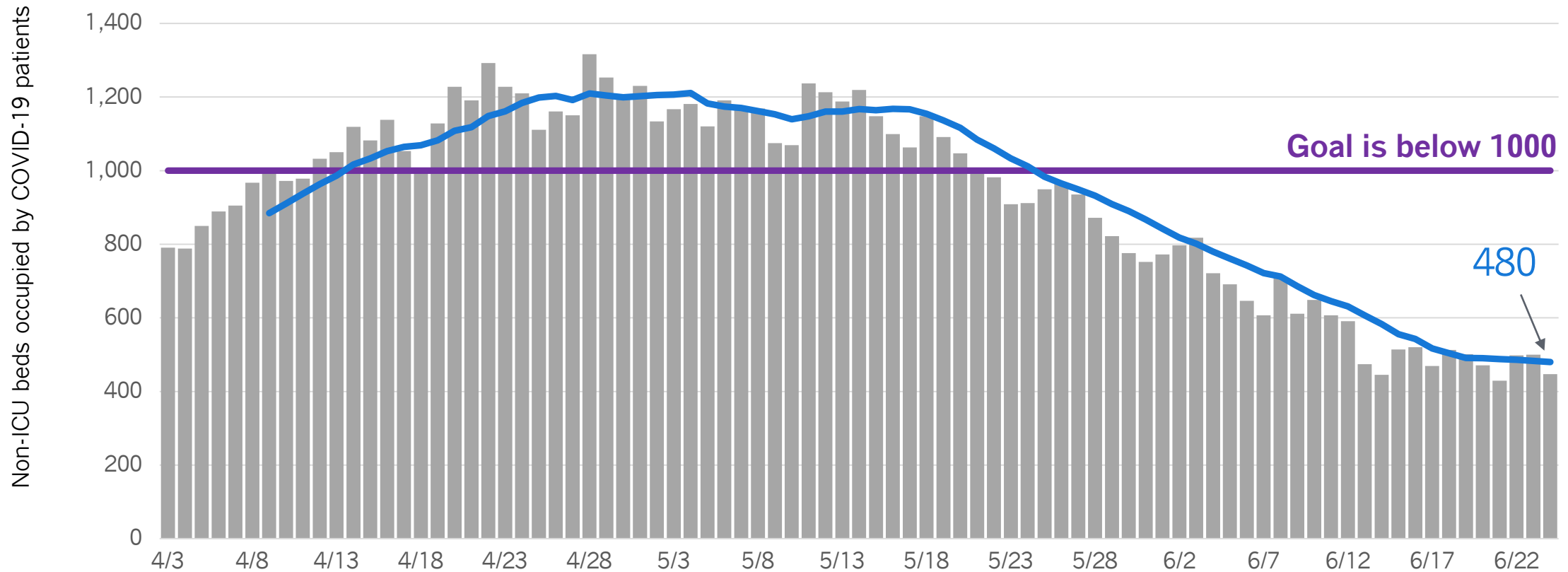


Hospital System Capacity

Non-ICU bed occupancy adequate: <1,000 non-ICU beds occupied by patients with COVID-19



COVID-19 acute/non-ICU beds occupied, daily counts, 7 day average and reopening threshold, daily occupancy census

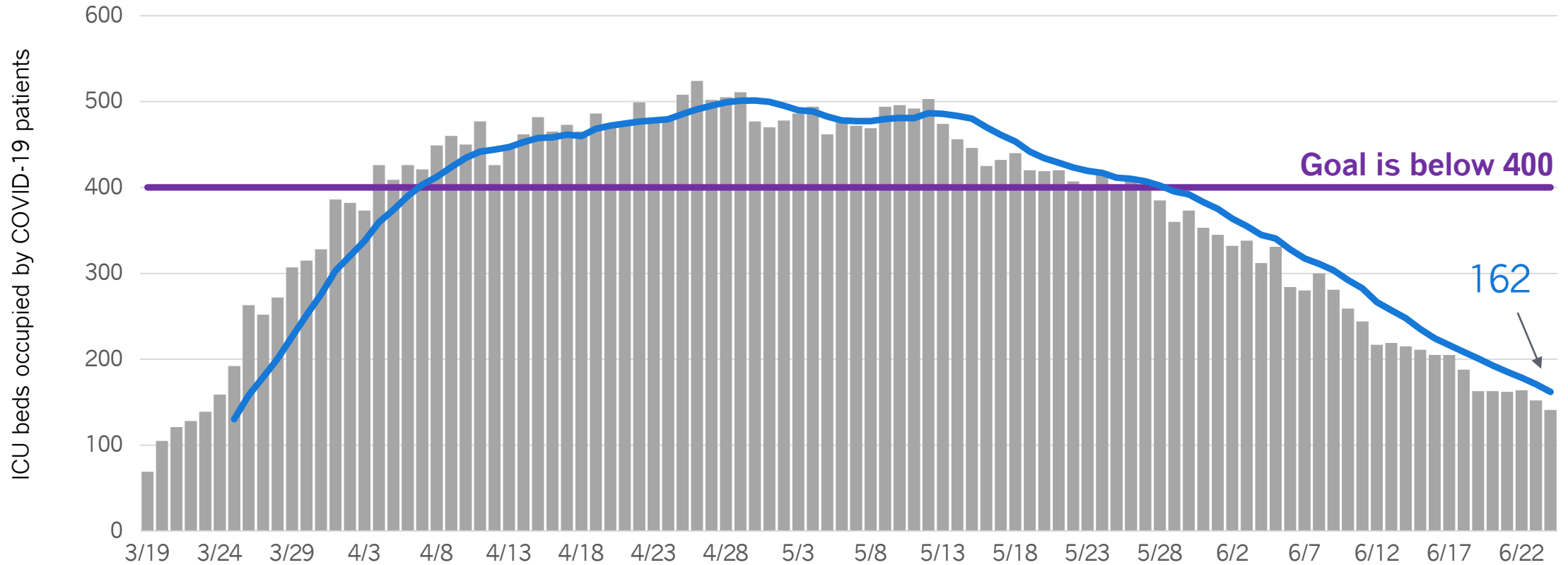


Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning April 3 (acute non-ICU occupancy). Acute non-ICU bed counts include burn, emergency department, med/surg, other, pediatrics and psychiatry beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases.

ICU capacity adequate: <400 ICU beds occupied by patients with COVID-19



COVID-19 ICU beds occupied, daily counts, 7 day average and progress threshold, daily occupancy census

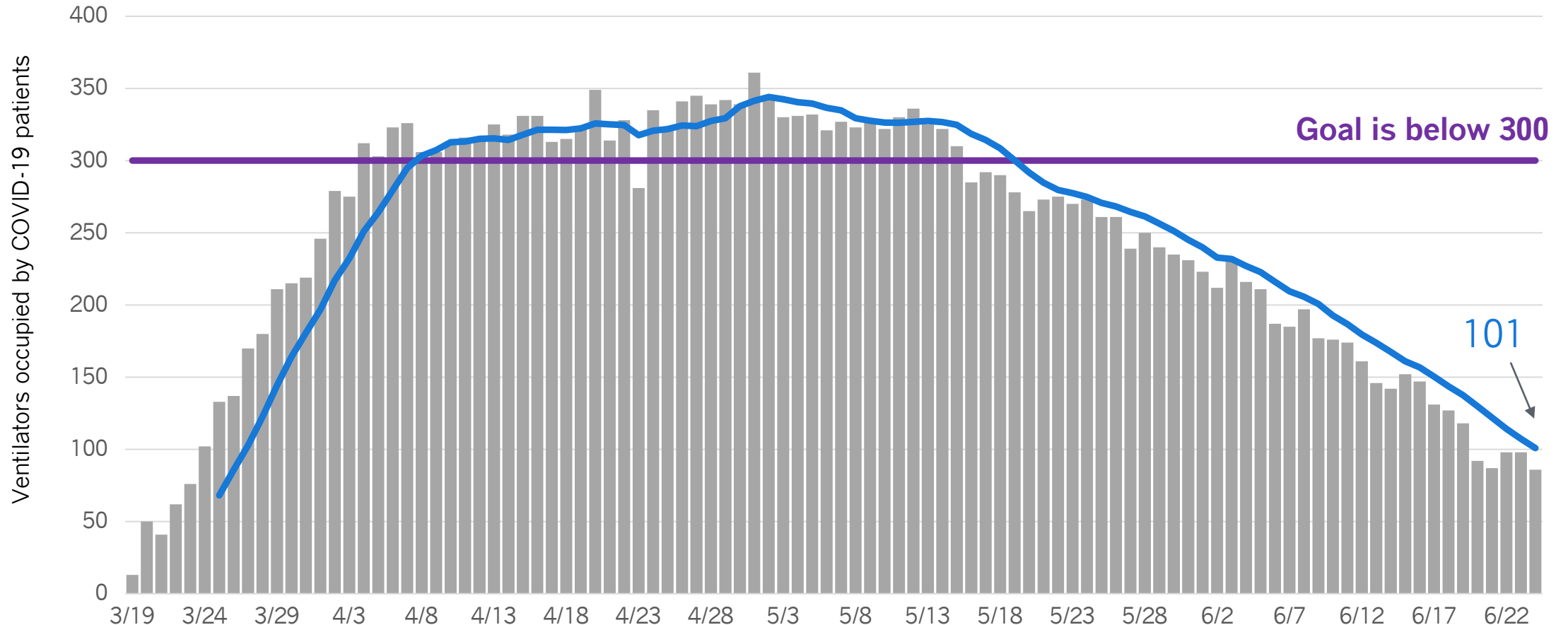


Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning March 19. ICU bed count includes all adult and pediatric ICU beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases. Beginning 4/24/2020, the definition of ICU status changed as requested by HHS.

Ventilator capacity adequate: <300 patients with COVID-19 on ventilators



COVID-19 ventilators in use, daily counts, 7 day average and reopening threshold, daily utilization census

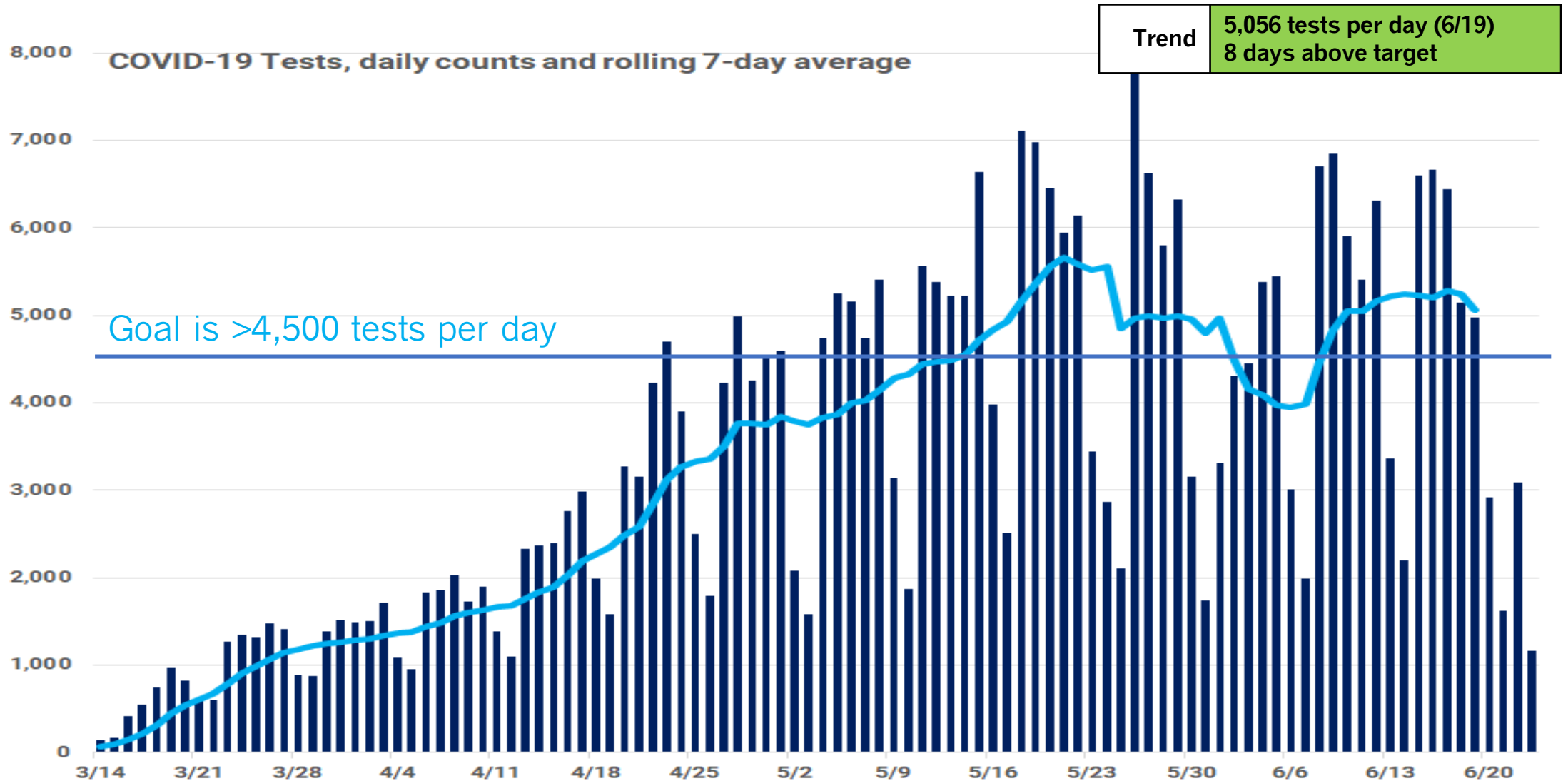


Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning March 19. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases. Beginning 4/24/2020, ventilator counts include all full-functioning mechanical ventilators, BiPAP, anesthesia machines and portable/transport ventilators.



Diagnostic Testing Capacity

COVID-19 testing now above 4,500 tests per day after recent decreases



All COVID-19 tests performed on Chicago residents per day as reported by electronic lab reporting from IDPH. 4,500 tests per day represents the capacity to test 5% of Chicago residents per month. Daily counts for most recent dates displayed are likely incomplete.