



# Protecting Chicago: Phase IV Re-Opening Metrics Update

August 29, 2020

(Data current through 8/26/2020)

# CDPH COVID-19 Phase IV starting June 26 2020

	Stop: May need to delay moving ahead	Caution: Pause and monitor	Go: Cautious progress	Go: Continued progress	Go: Advanced progress
<b>Cases</b> 7-day rolling daily average	Any sustained increase >14 days within the past 28 days	Increase 0-14 days (in most recent 14 -day period)	Stable or decrease 0-13 days (w/o increase in most recent 14-day period)	Stable or decrease 14-28 days	Stable or decrease >28 days and/or sustained <200 new cases per day (~100 cases per 100,000 persons)
<b>Hospitalizations</b> 7-day rolling daily average					
<b>Deaths</b> 7-day rolling daily average					
<b>COVID Emergency department visits</b> 7-day rolling daily average					
<b>Positivity rate</b> 7-day rolling daily average	>10%	5% - 10%	<5%	<5%	<5%
<b>Hospital system capacity</b> 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		
<b>Testing capacity</b> 7-day rolling daily average	Unexplained decline in testing <4500 total tests/day	Explained decline in testing <4500 total tests/day	Stable testing >4500 total tests/day		
<b>Response capacity</b>	N/A	N/A	Initiate case investigation within 24h of assignment for 50% of cases	75% of cases	90% of cases



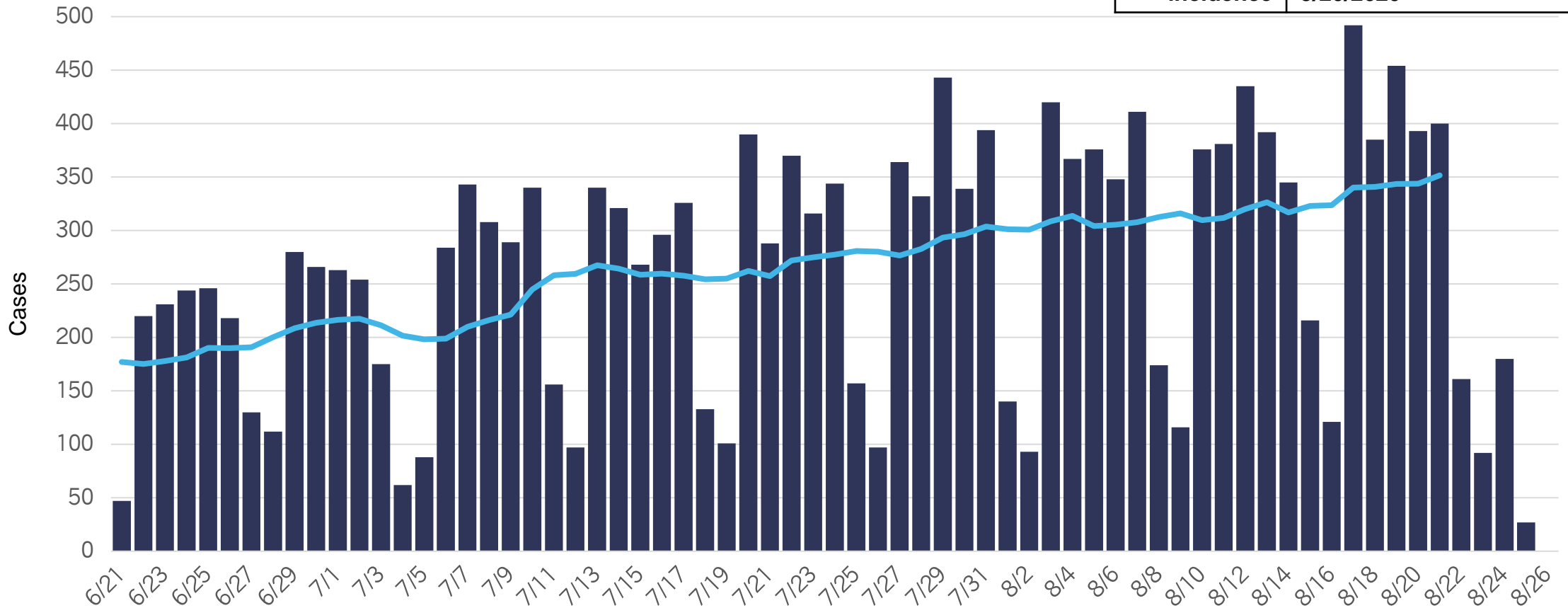
# COVID-19 Confirmed Cases

# COVID-19 case incidence in Chicago is persistently high and growing, and now increasing for 29+ days.



COVID-19 cases, daily counts and rolling 7-day average, specimen

Recent Trend	Increase 29 days (7/23-8/21) 2.7 C/D
14-day Incidence	HIGH (334 avg. daily cases*)
14-day slope	GROWTH +3.1 cases per day
Peak 14-day incidence	998 avg. daily cases 5/20/2020

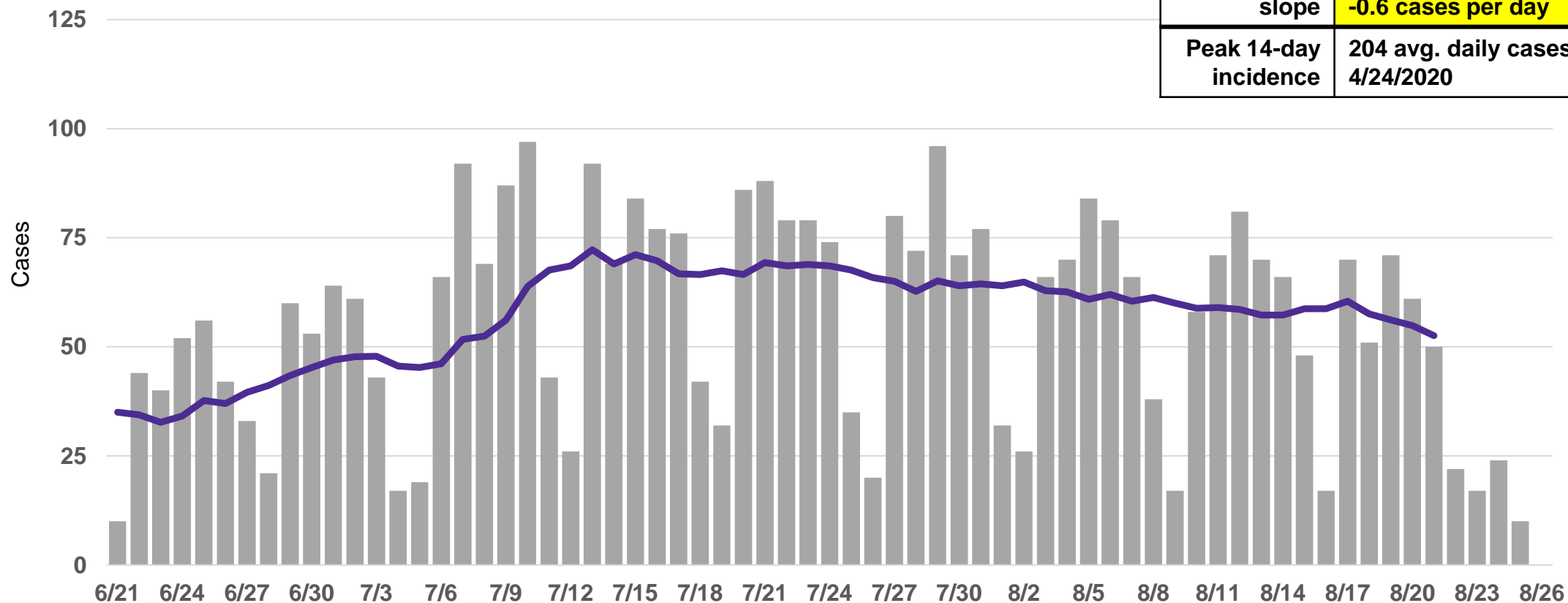


Daily COVID-19 cases with known specimen report date. \*14-day incidence is calculated by summing all new cases in the most recent 14-day period and dividing by 14 days to find an average daily count. Incidence gating rank is determined using 14-day cumulative incidence/100,000 population. The gating rank categories are defined as. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category. Daily counts for most recent dates displayed are likely incomplete.

# Black, non-Latinx case incidence is moderately high and stable. 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 collection date



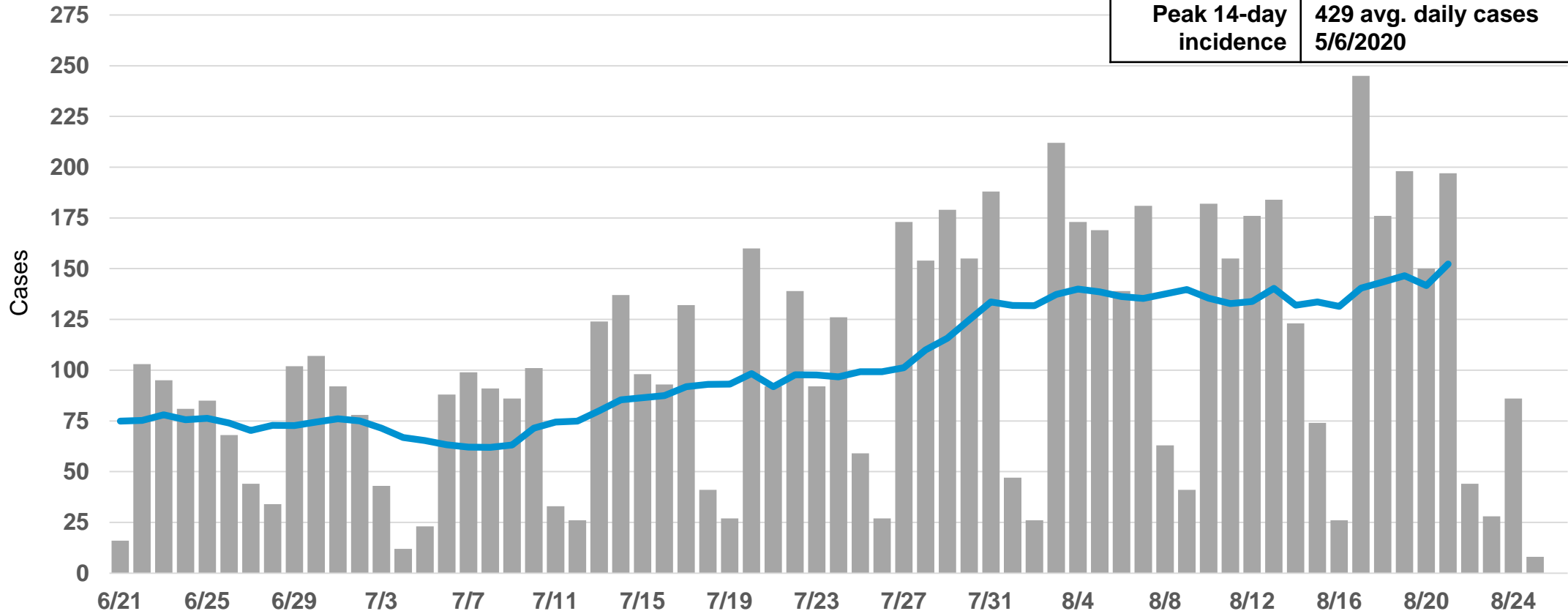
Recent Trend	Decrease 5 days (7/22-7/28) Stable 5 days (7/28-8/2) Decrease 12 days (8/2-8/14) Stable 3 days (8/14-8/17) Decrease 4 days (8/17-8/21)
14-day incidence	<b>MODERATELY HIGH</b> (55 avg. daily cases*)
14-day slope	<b>STABLE</b> -0.6 cases per day
Peak 14-day incidence	204 avg. daily cases 4/24/2020

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 daily count. Incidence gating rank is determined using 14-day cumulative incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category.

# Latinx case incidence is very high and growing. Cases have been increasing for 5 most recent days.



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



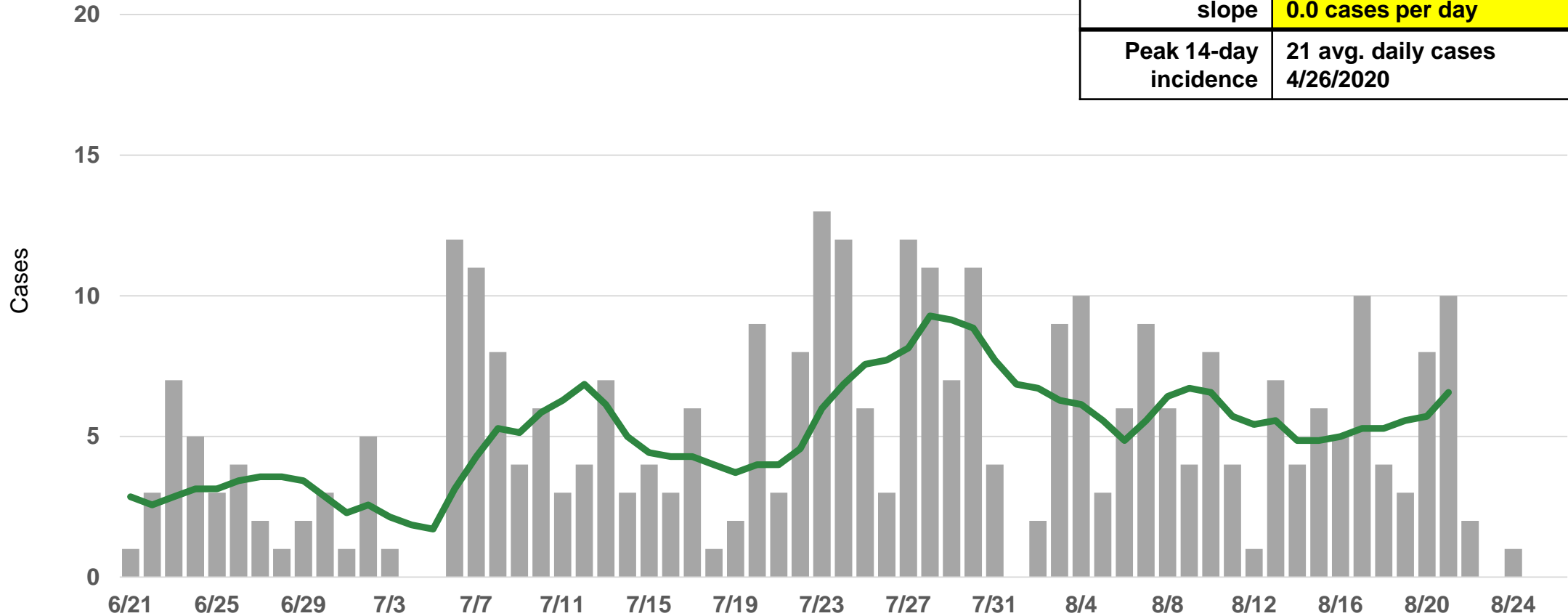
Recent Trend	Stable 4 days (7/23-7/27) Increase 4 days (7/27-7/31) 8 C/D Stable 16 days (7/31-8/16) Increase 5 days (8/16-8/21) 2 C/D
14-day incidence	<b>HIGH</b> (142 avg. daily cases*)
14-day slope	<b>GROWTH</b> 1.1 cases per day
Peak 14-day incidence	429 avg. daily cases 5/6/2020

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 daily count. Incidence gating rank is determined using 14-day cumulative incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category.

# Asian, non-Latinx case incidence is moderate and stable. Cases have been increasing for 6 most recent days.



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



Recent Trend	Increase 6 days (7/23-7/29) 0.5 C/D Decrease 8 days (7/29-8/6) Stable 3 days (8/6-8/9) Decrease 6 days (8/9-8/15) Increase 6 days (8/15-8/21) 0.3 C/D
14-day incidence	<b>MODERATE</b> (6 avg. daily cases*)
14-day slope	<b>STABLE</b> 0.0 cases per day
Peak 14-day incidence	21 avg. daily cases 4/26/2020

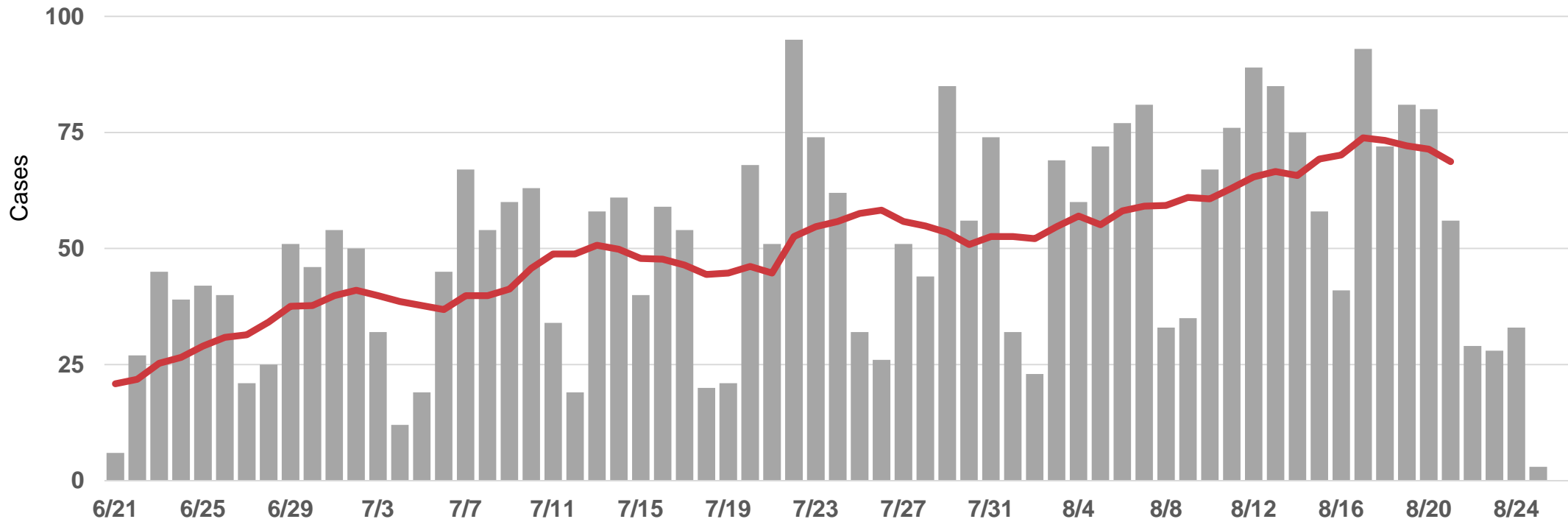
Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence. Daily counts for most recent dates 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 daily count. Incidence gating rank is determined using 14-day cumulative incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category.

# White, non-Latinx case incidence is high and stable. Cases have been decreasing for 4 most recent days



COVID-19 cases among white, non-Latinx residents, daily counts and rolling 7-day average, specimen collection date  
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Recent Trend	Stable 3 days (7/23-7/26) Decrease 4 days (7/26-7/30) Increase 18 days (7/30-8/17) 1.3 C/D Decrease 4 days (8/17-8/21)
14-day incidence	<b>HIGH</b> (67 avg. daily cases*)
14-day slope	<b>STABLE</b> +0.7 cases per day
Peak 14-day incidence	107 avg. daily cases 4/30/2020



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 daily count. Incidence gating rank is determined using 14-day cumulative incidence/100,000 population. The gating rank categories are defined as follows. LOW (1-10); MODERATELY LOW (11-25); MODERATE (26-50); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category.





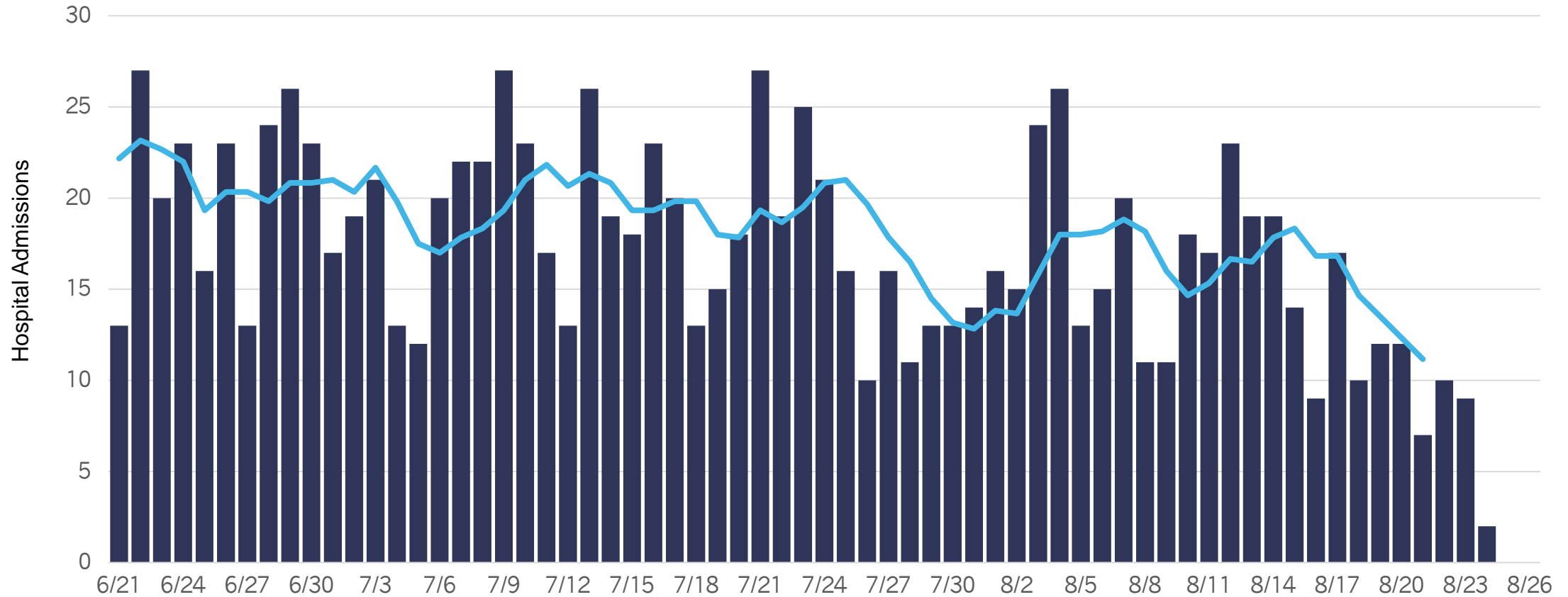
# COVID-19 Severe Outcomes



# Daily COVID-19 hospital admissions have been decreasing for 6 days after a recent increase.

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

Recent Trend	Stable 2 days (7/23-7/25) Decrease 6 days (7/25-7/31) Increase 7 days (7/31-8/7) 0.9 A/D Stable 3 days (8/7-8/10) Increase 5 days (8/10-8/15) 0.7 A/D Decrease 6 days (8/15-8/21)
Peak 7-day rolling average	173 avg. daily admissions 4/12/2020



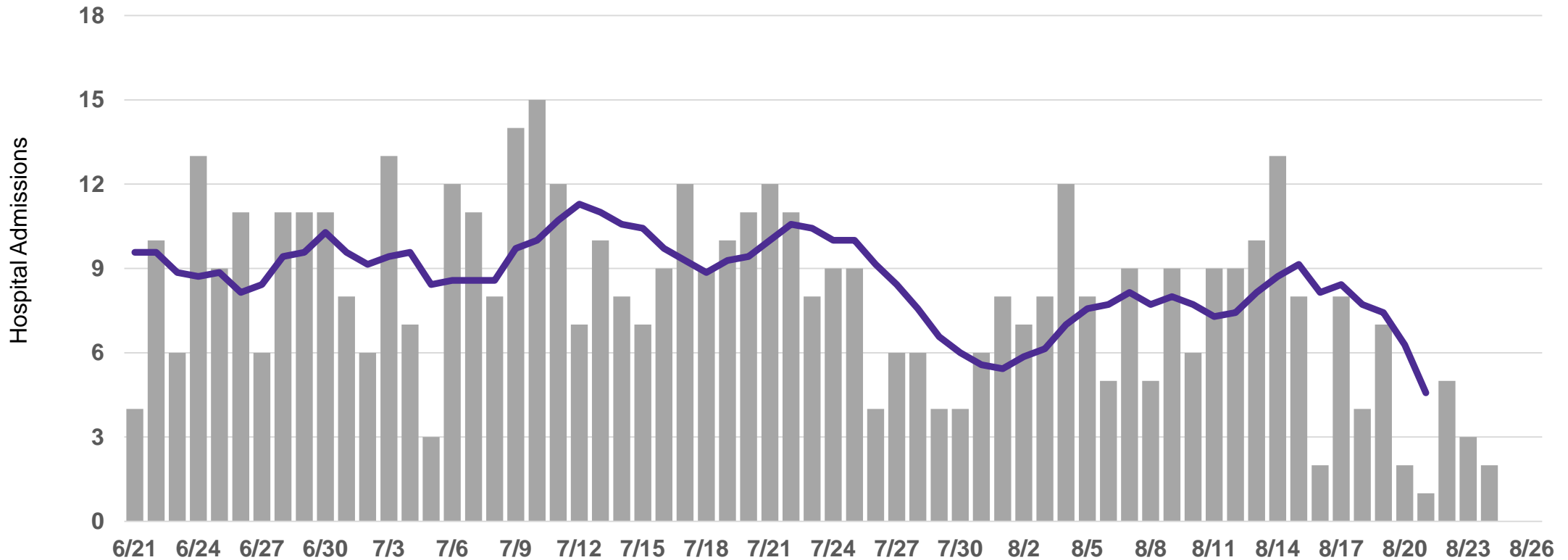
Hospitalizations are reported to CDPH by hospitals into I-NEDSS and ESSENCE and self-reported by patients via an online survey. Daily counts for most recent dates displayed are likely incomplete. Cases who are not indicated to have been hospitalized across any of the three data sources are assumed to not have been hospitalized. Six records with hospital admit dates from January and February 2020 are excluded from this chart. Peak daily admissions based on rolling 7-day average.



# Black, non-Latinx hospital admissions have been stable or decreasing for 15 days.

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

Recent Trend	Stable 2 days (7/23-7/25) Decrease 7 days (7/25-8/1) Increase 5 days (8/1-8/6) 0.5 A/D Stable 9 days (8/6-8/15) Decrease 6 days (8/15-8/21)
Peak 7-day rolling average	97 avg. daily admissions 4/6/2020

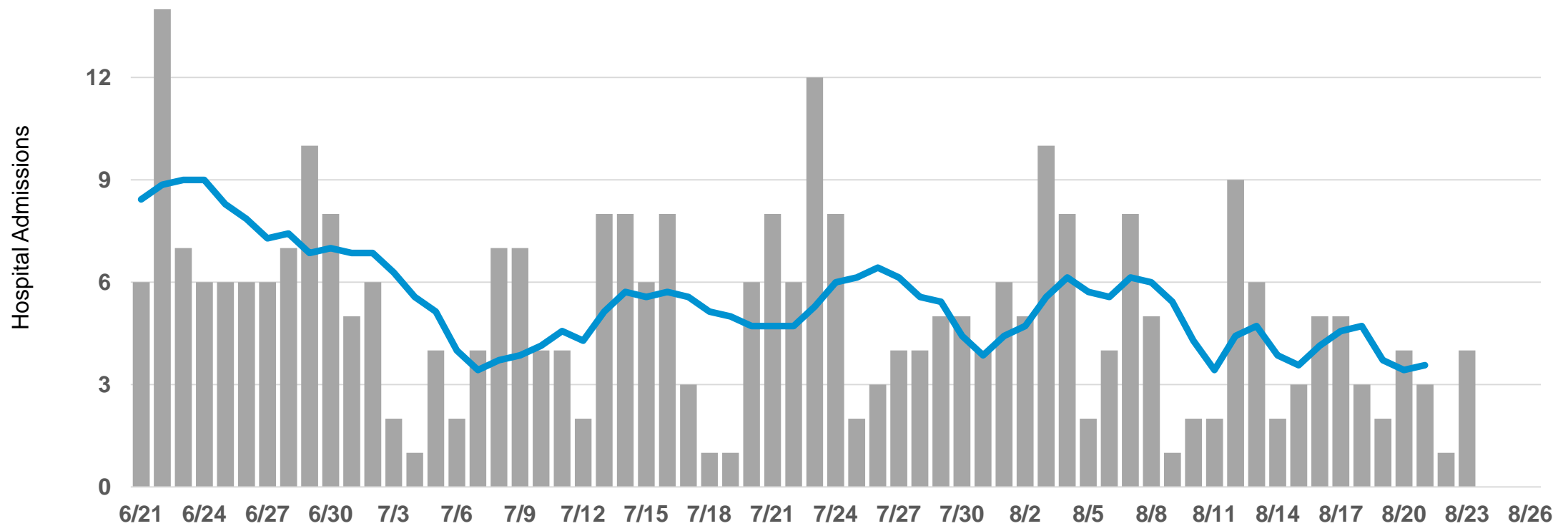


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# Latinx hospital admissions at low incidence for >28 days.

Recent Trend	At or below 6 avg. daily admissions for 30 days
Peak 7-day rolling average	57 avg. daily admissions 4/28/2020

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



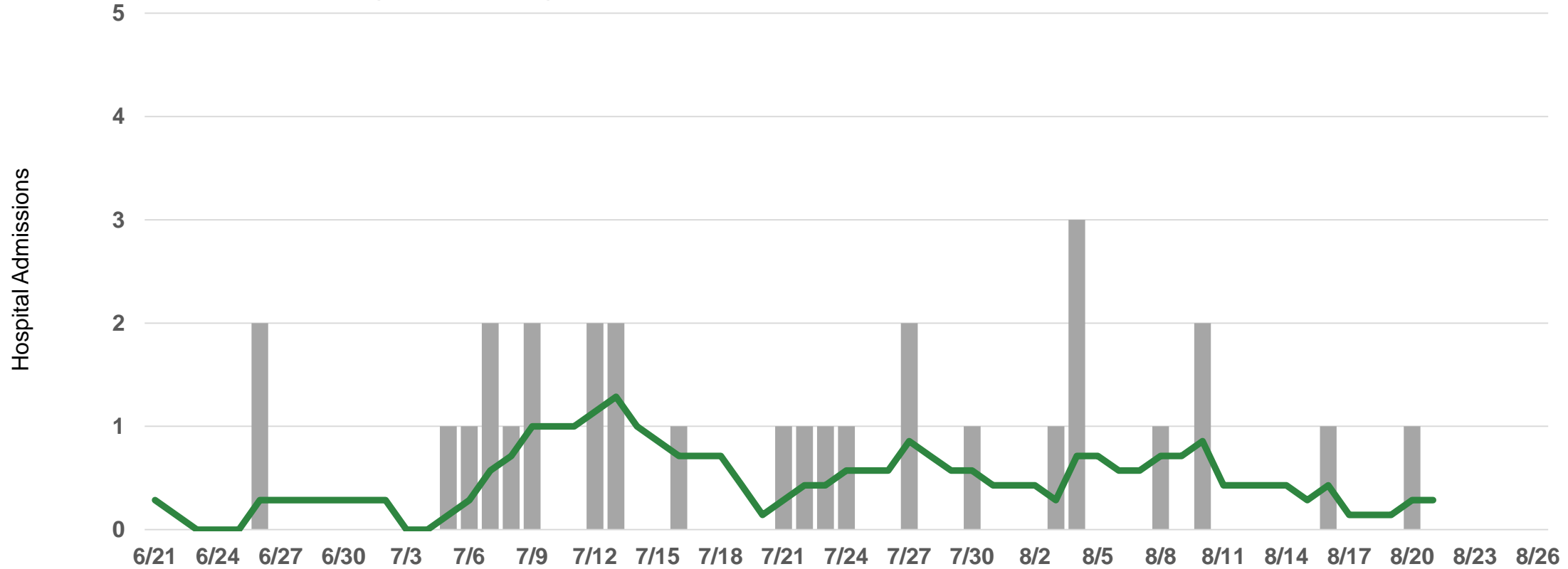
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# Asian non-Latinx hospital admissions at near-zero incidence for >28 days.

Recent Trend	At or below 1 avg. daily admissions for 30 days
Peak 7-day rolling average	8 avg. daily admissions 4/13/2020

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



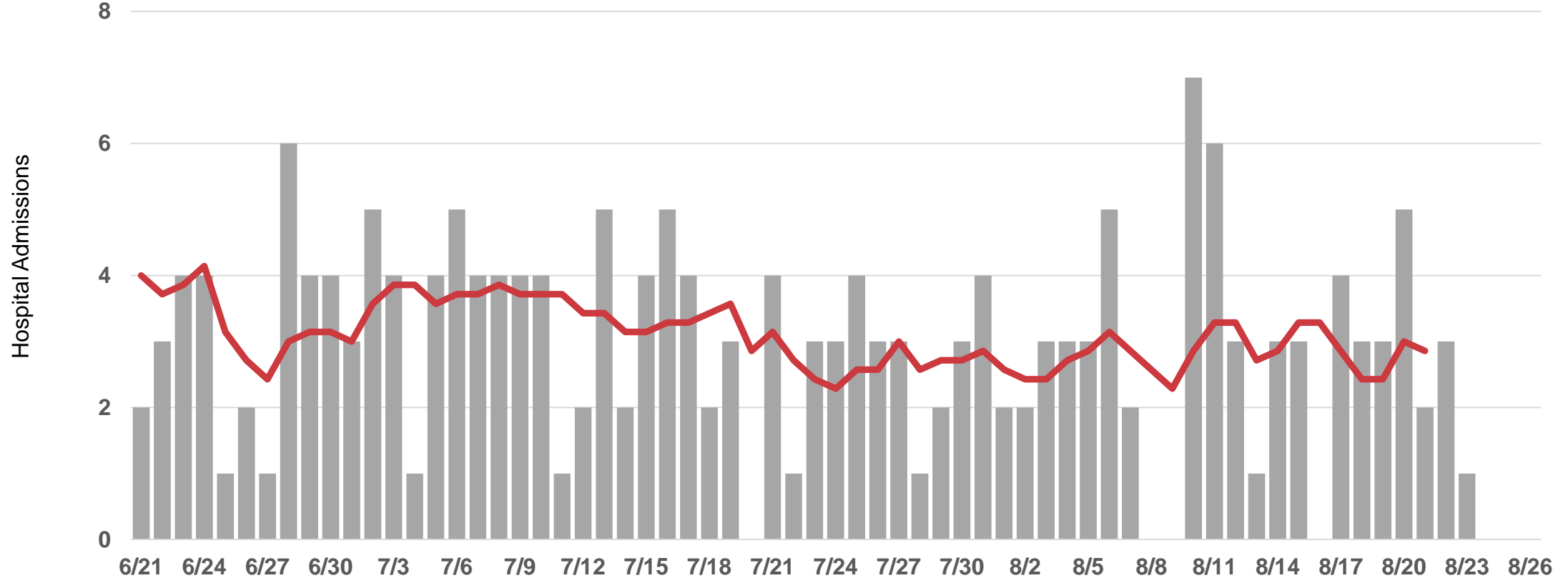
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# White, non-Latinx hospital admissions at low incidence for >28 days.

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

Recent Trend	Below 5 avg. daily admissions for 30 days
Peak 7-day rolling average	27 avg. daily admissions 5/6/2020



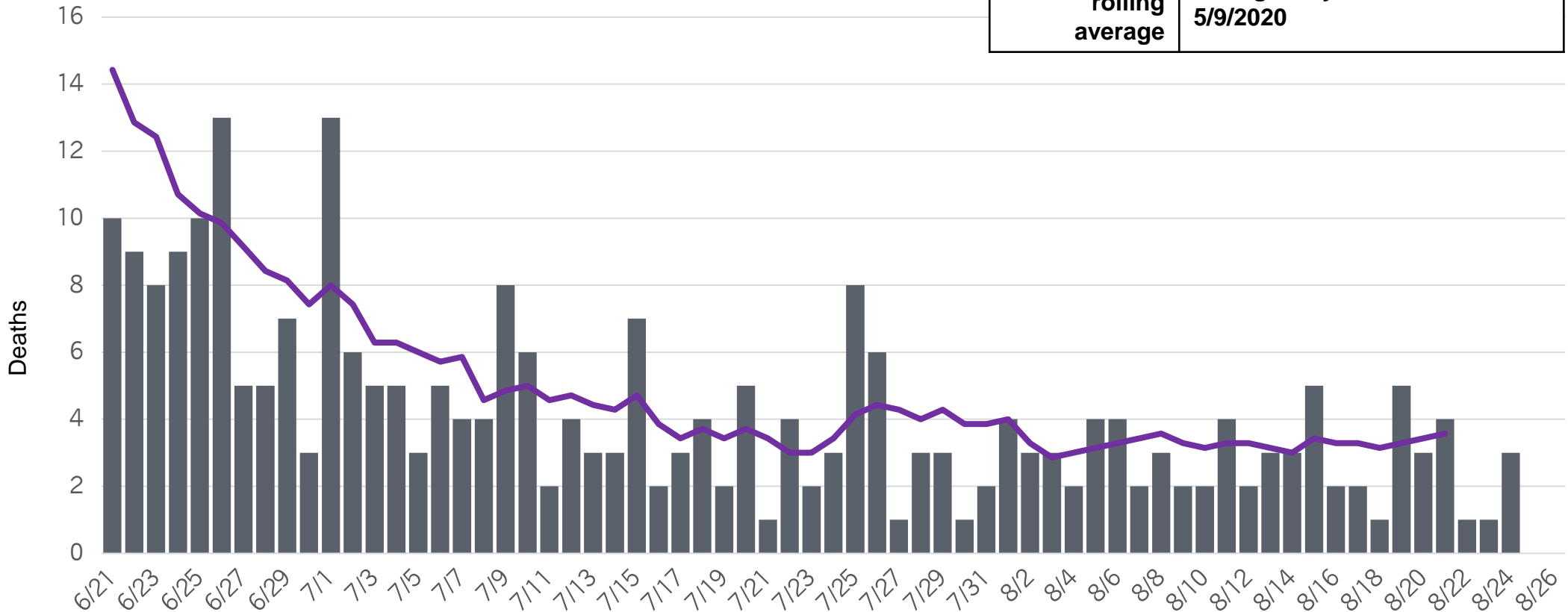
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# COVID-19 deaths are stable for >28 days with stable trend for most recent 29 days.



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

Recent Trend	Stable 29 days (7/23-8/21)
Peak 7-day rolling average	48 avg. daily deaths 5/9/2020



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.



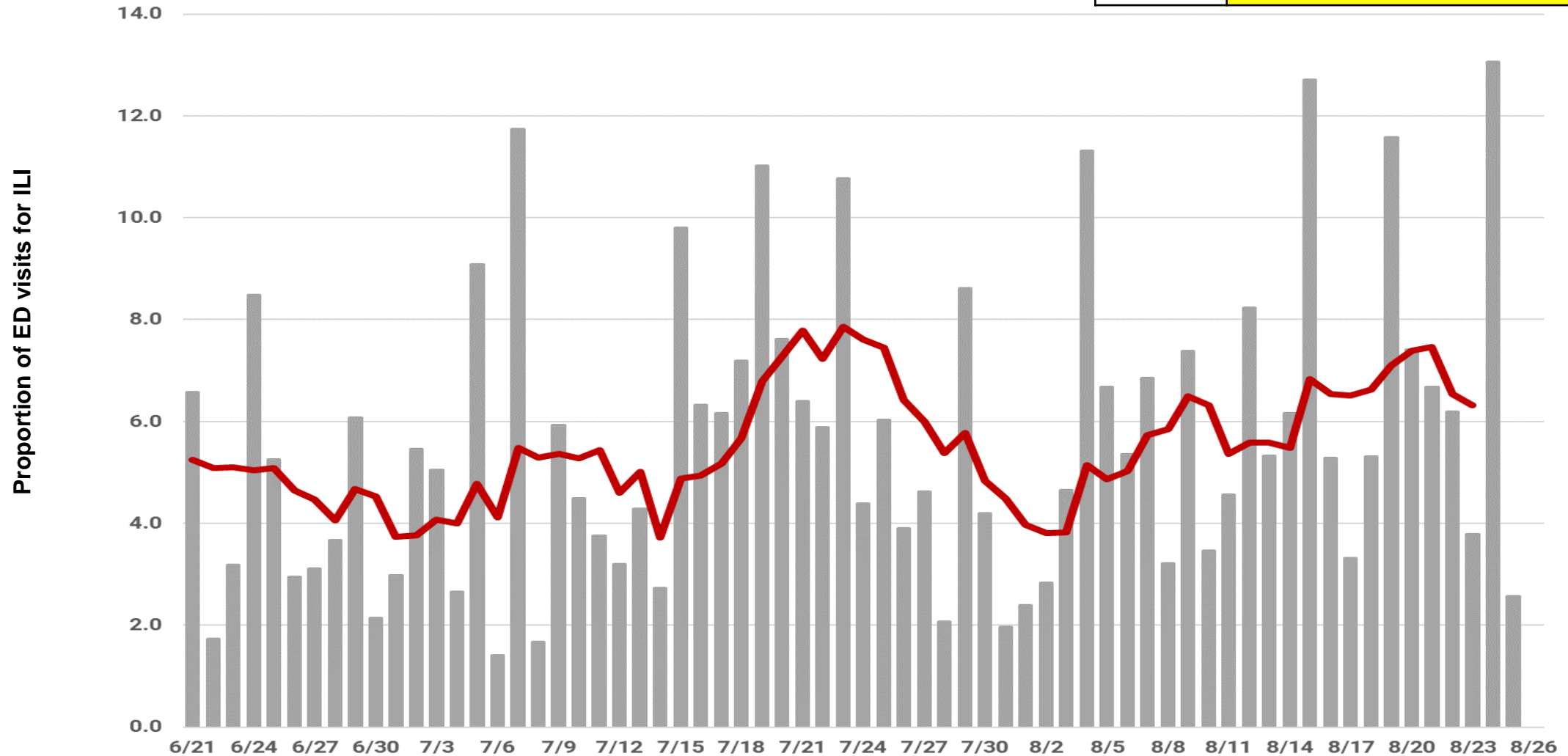
# Emergency Department Visits



# Proportion of ED visits for influenza-like illnesses has been stable for 3 days after a recent increase



Recent Trend	Decrease 8 days (7/25-8/2)
	Increase 7 days (8/2-8/9)
	Stable 3 days (8/9-8/12)
	Increase 8 days (8/12-8/20)
	Stable 3 days (8/20-8/23)

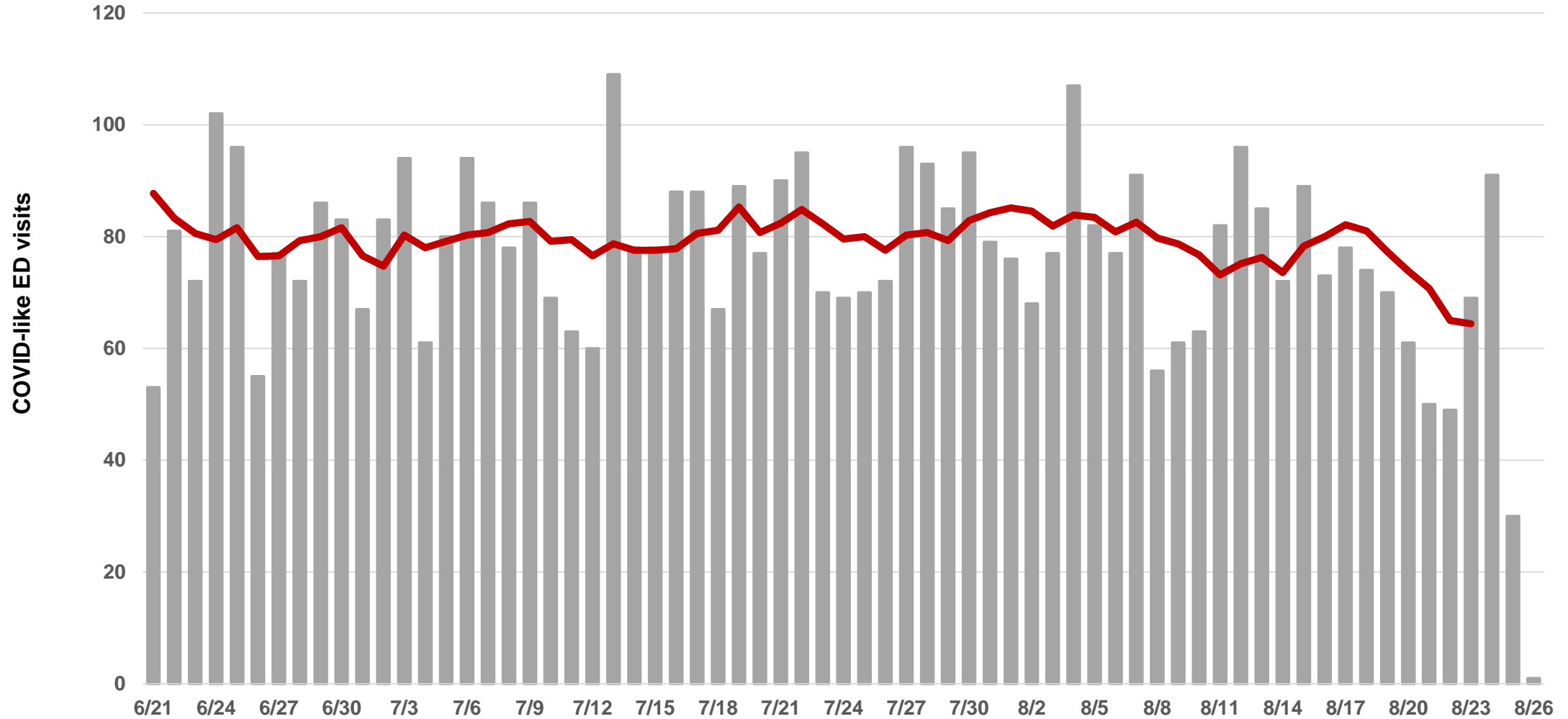


ILI: Influenza-like illness. Percentage of all emergency department visits reported with influenza-like illness symptoms among Chicago residents.  
 Data Source: Illinois Hospital Emergency Departments reporting to CDPH through the National Syndromic Surveillance Project.

# ED visits for COVID-like illness has been decreasing or stable for 21 days



Recent Trend	Increase 8 days (7/25-8/2)
	Decrease 12 days (8/2-8/14)
	Stable 3 days (8/14-8/17)
	Decrease 6 (8/17-8/23)



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.

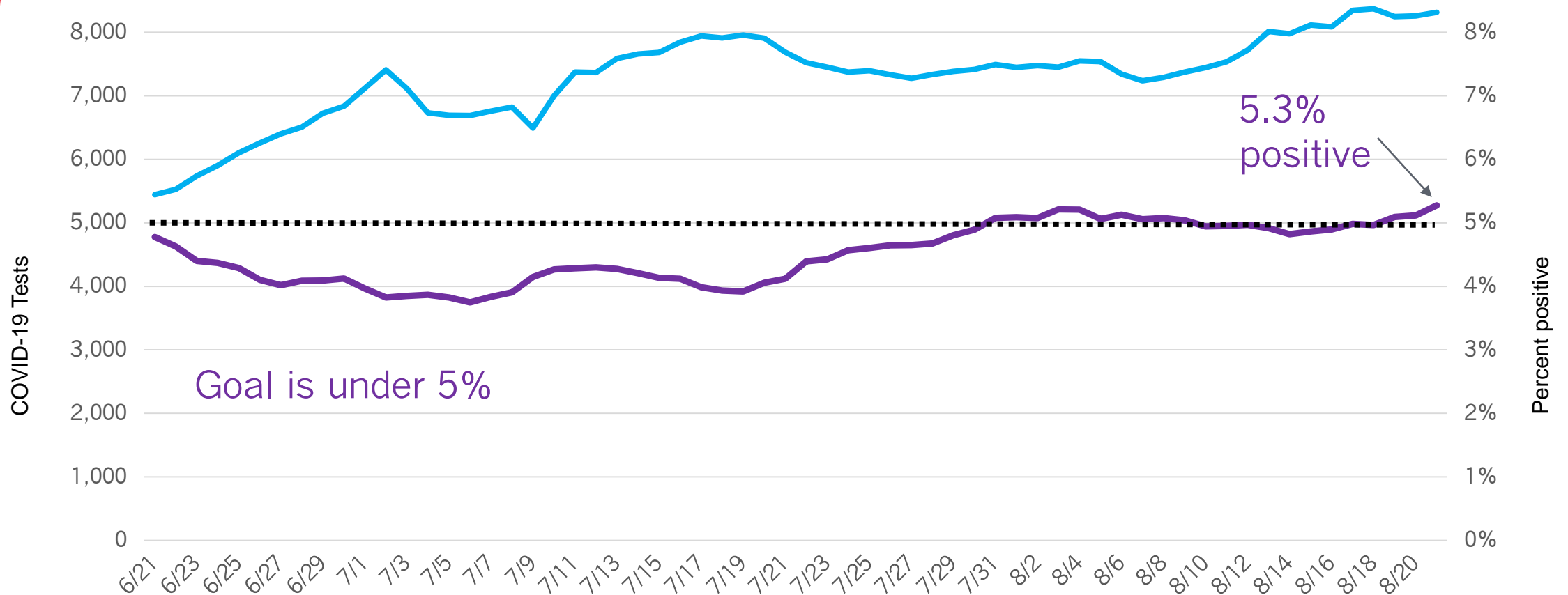


# Test Positivity Rate

# Test positivity is *above 5.0%* with consistently widespread testing. Positivity increasing with increased testing.



COVID-19 tests, 7-day rolling average for test positive (%) and for counts (one test per individual per day)



As of 7/30/2020, test positivity is being reported rather than percent positivity. Test positivity is the number of positive tests divided by all tests performed in contrast to percent positivity which is the number of individuals tested positive divided by the total number of individuals tested (Source: INEDSS). For positivity rates among demographic subgroups and zip codes CDPH will continue reporting by individuals tested.

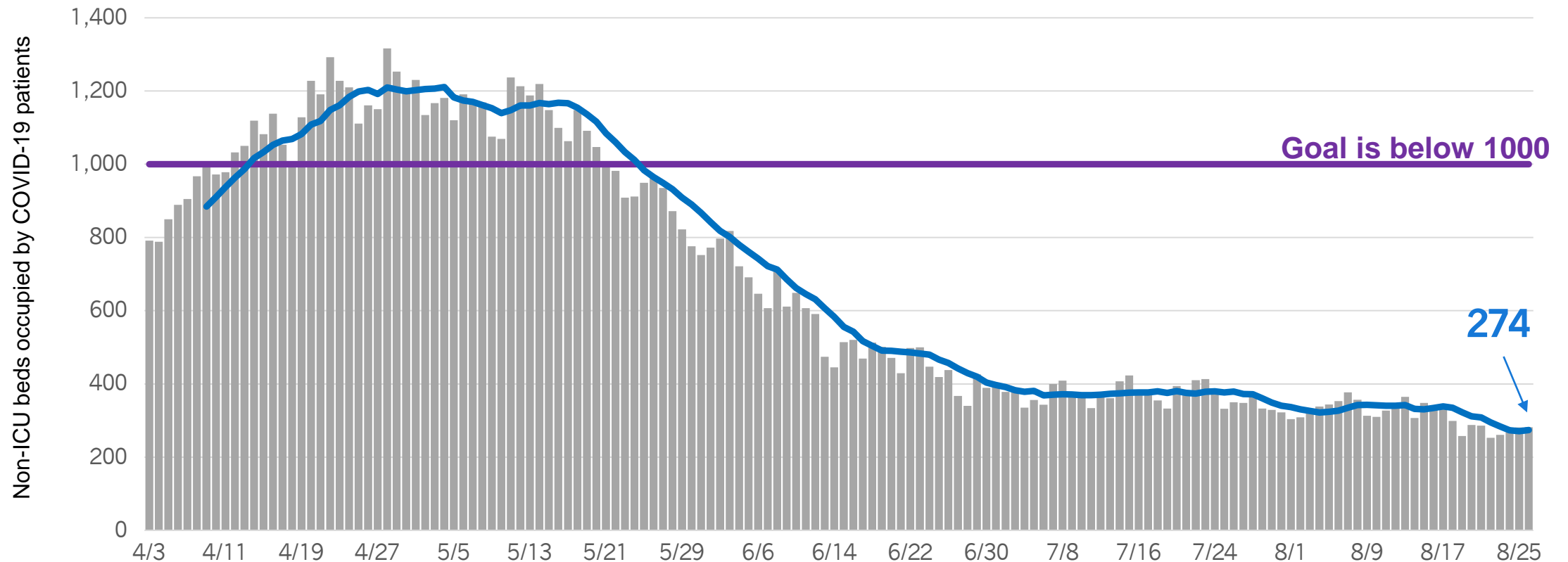


# Hospital System Capacity

# 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

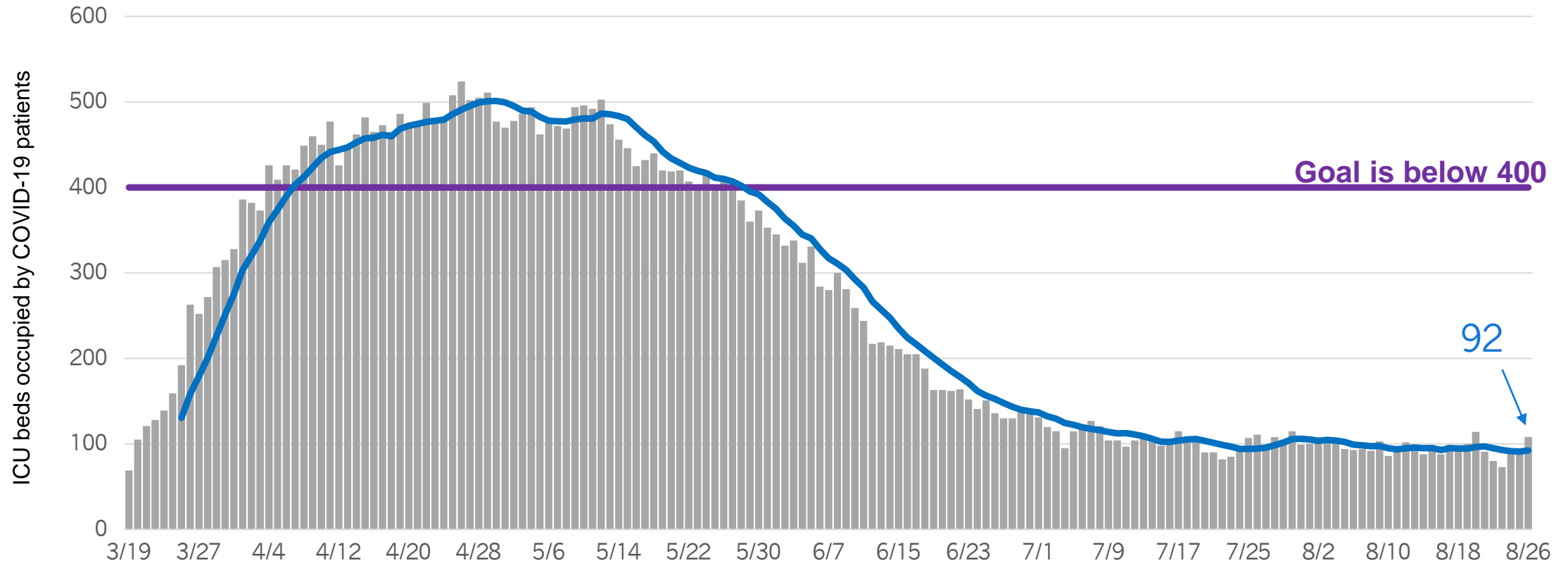


Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning April 3 (acute non-ICU occupancy). Acute non-ICU bed counts include burn, emergency department, med/surg, other, pediatrics and psychiatry beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes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

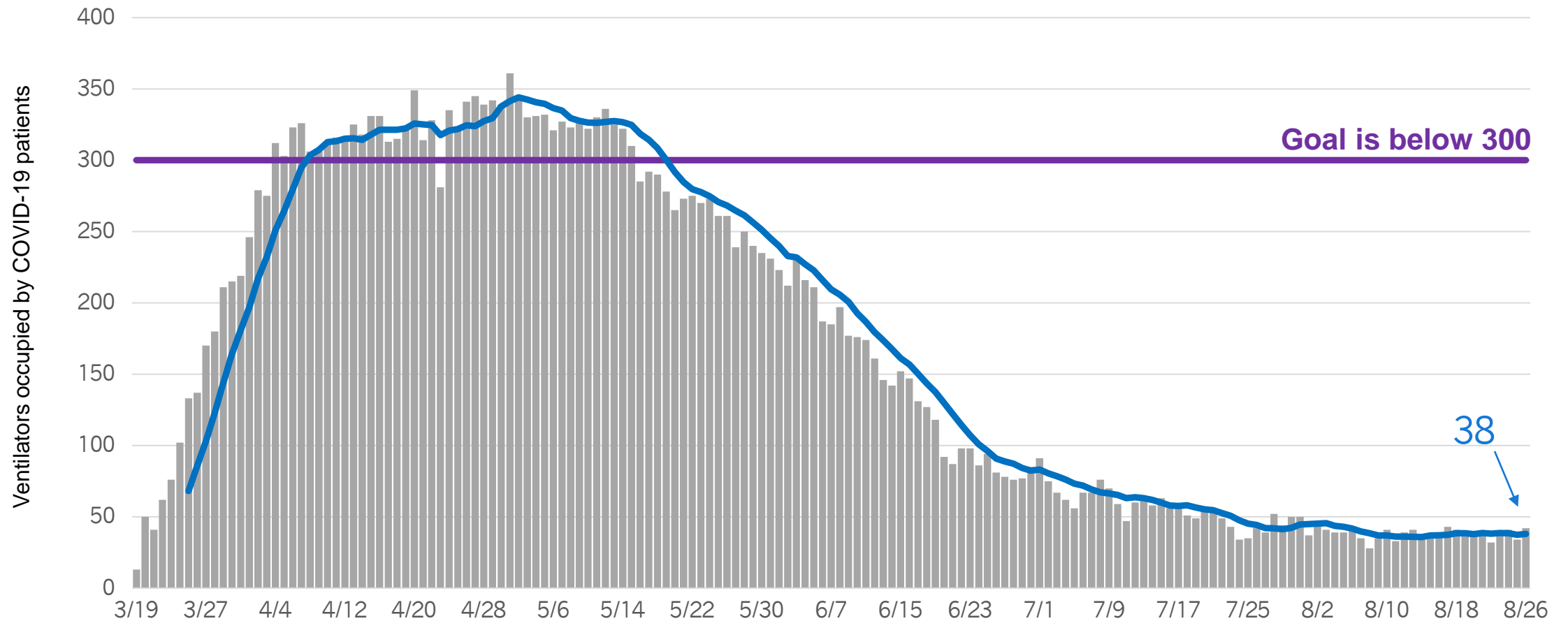


Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning March 19. ICU bed count includes all adult and pediatric ICU beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases. Beginning 4/24/2020, the definition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



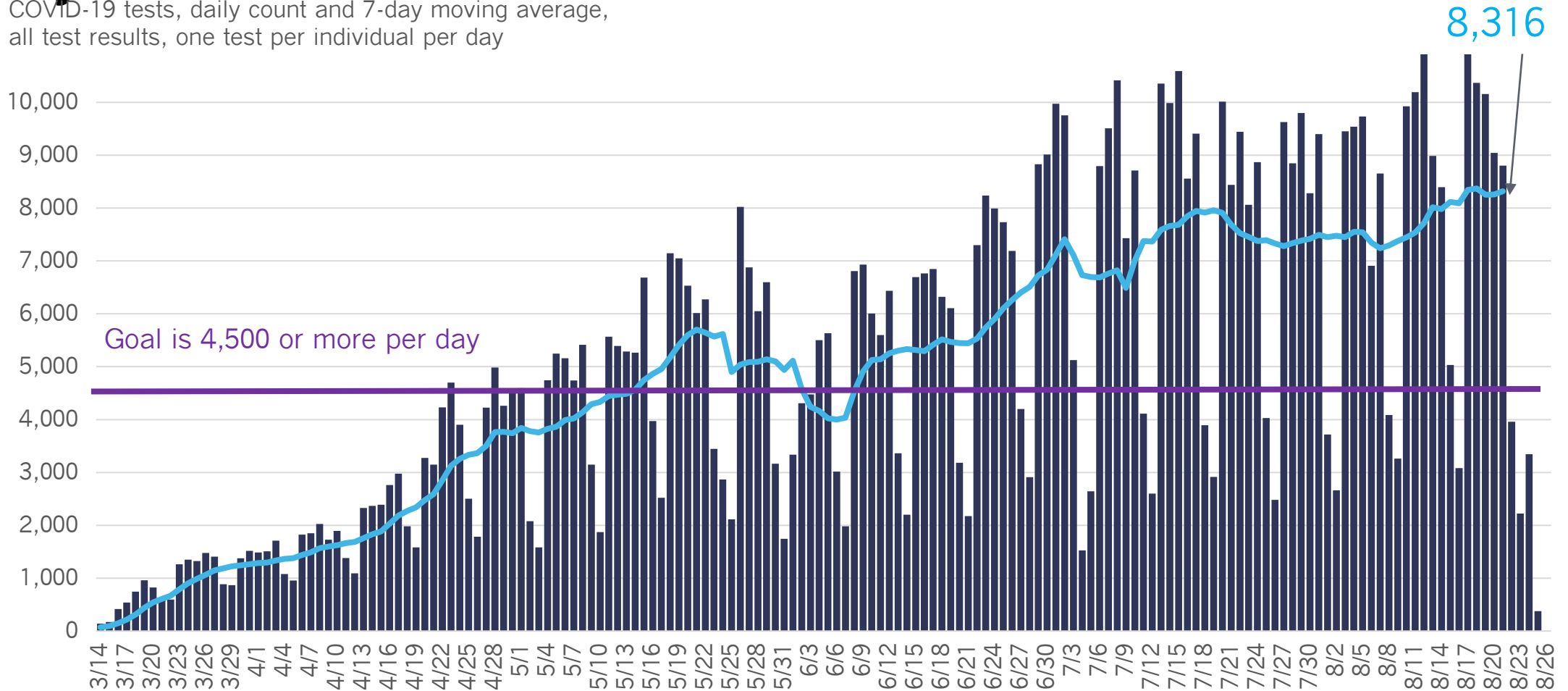


# Diagnostic Testing Capacity

# COVID-19 testing above 4,500 tests per day for 67 straight days.



COVID-19 tests, daily count and 7-day moving average, all test results, one test per individual per day



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.