

#### Protecting Chicago: Phase IV Re-Opening Metrics Update

**August 8, 2020** 

(Data current through 8/5/2020)

#### CDPH COVID-19 Phase IV starting June 26 2020

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	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  Hospitalizations 7-day rolling daily average  Deaths 7-day rolling daily average  COVID Emergency department visits 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)
Positivity rate 7-day rolling daily average	>10%	5% - 10%	<5%	<5%	<5%
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 total tests/day	Explained decline in testing <4500 total tests/day	Stable testing >4500 total tests/day		
Response capacity	N/A	N/A	Initiate case inves 50% of cases	stigation within 24h o 75% of cases	f assignment for 90% of cases

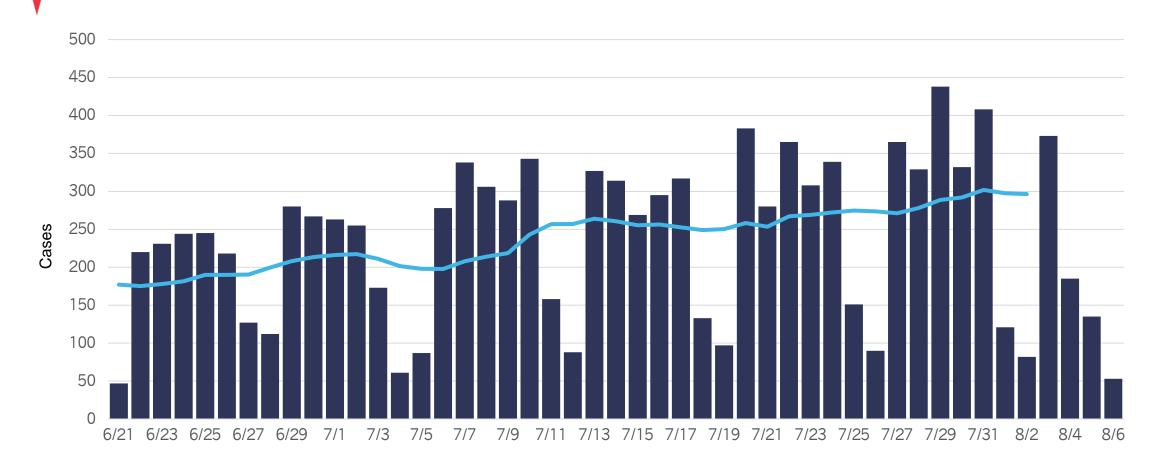


#### **COVID-19 Confirmed Cases**

# COVID-19 case incidence in Chicago is persistently high and growing, with a sustained 15 day increase. COVID-19 cases, daily counts and rolling 7-day average, specimen

Recent Increase Trend Dec

Stable 2 days (7/4-7/6) Increase 6 days (7/6-7/12) Decrease 6 days (7/12-7/18) Increase 15 days (7/18-8/2)



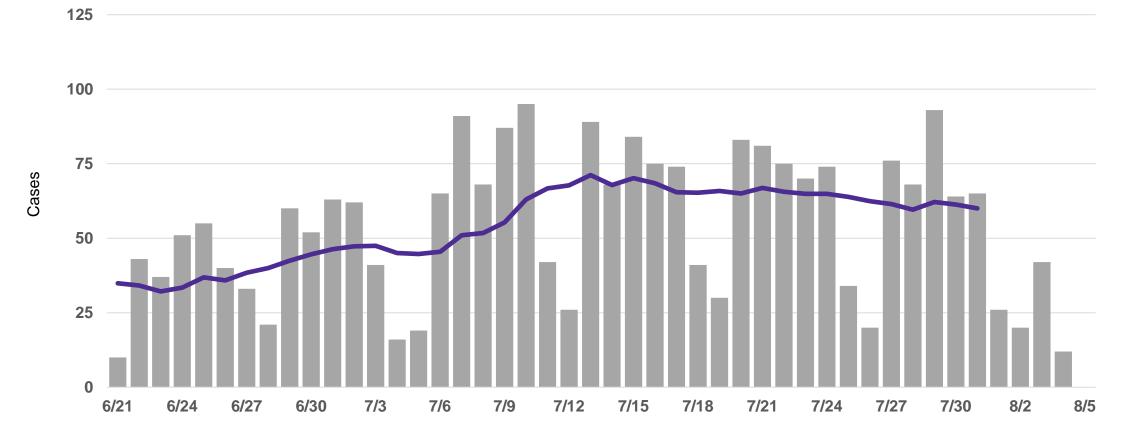
Daily COVID-19 cases with known specimen report date. \*14-day incidence is calculated by summing all new cases in the most recent 14-day period and dividing by 14 days to find an average daily count. Incidence gating rank is determined using 14-day cumulative incidence/100,000 population. The gating rank categories are defined as. LOW (1-10); MODERATELY LOW (11-25); MODERATE (11-50); 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 high and stable, with a sustained 19 day decrease.

Recent Trend Stable 4 days (7/2-7/6) Increase 6 days (7/6-7/12) Decrease 19 days (7/12-7/31)



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



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); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category.

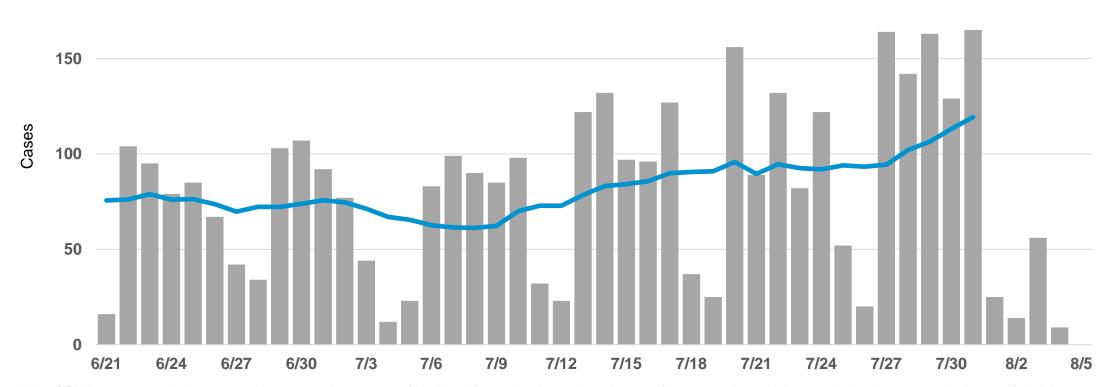


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# Latinx case incidence is high and growing. Cases have been increasing rapidly for 4 most recent days.

Recent Trend Decrease 5 days (7/2-7/7) Increase 10 days (7/7-7/17) Stable 10 days (7/17-7/27) Increase 4 days (7/27-7/31)

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



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); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category.

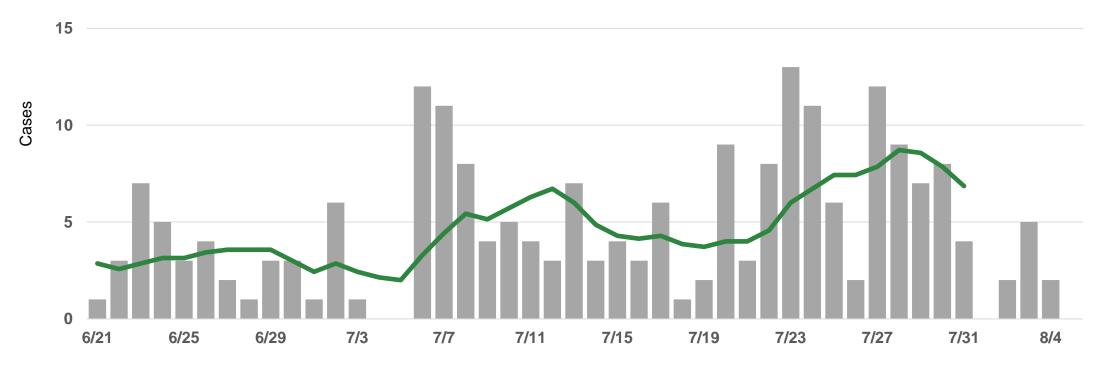
# Asian, non-Latinx case incidence is moderately high and growing. Cases have been stable for 3 days following a recent increase. Stable 2 days (7/2-7/4)



20

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

Recent Trend Stable 2 days (7/2-7/4) Increase 6 days (7/4-7/10) Decrease 9 days (7/10-7/19) Increase 9 days (7/19-7/28) Stable 3 days (7/28-7/31)



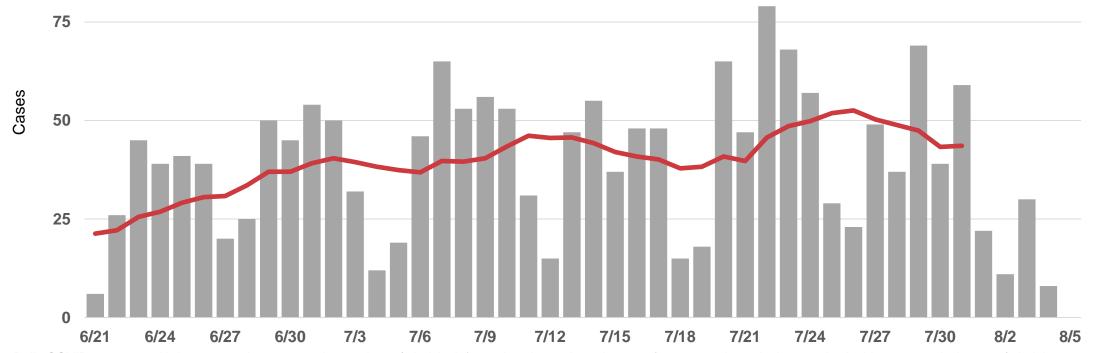
Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence. Daily counts for most recent dates 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); MODERATELY HIGH (51-99); HIGH (100+) and presented as corresponding daily counts color-coded to gating category.



# White, non-Latinx case incidence is moderately high and stable, with a 6 day decrease following a recent increase.

Recent Trend Stable 4 days (7/2-7/6) Increase 6 days (7/6-7/12) Decrease 7 days (7/12-7/19) Increase 6 days (7/19-7/25) Decrease 6 days (7/25-7/31)

COVID-19 cases among white, non-Latinx residents, daily counts and rolling 7-day average, specimen collection date 100



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); 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 stable or decreasing for >28 days.



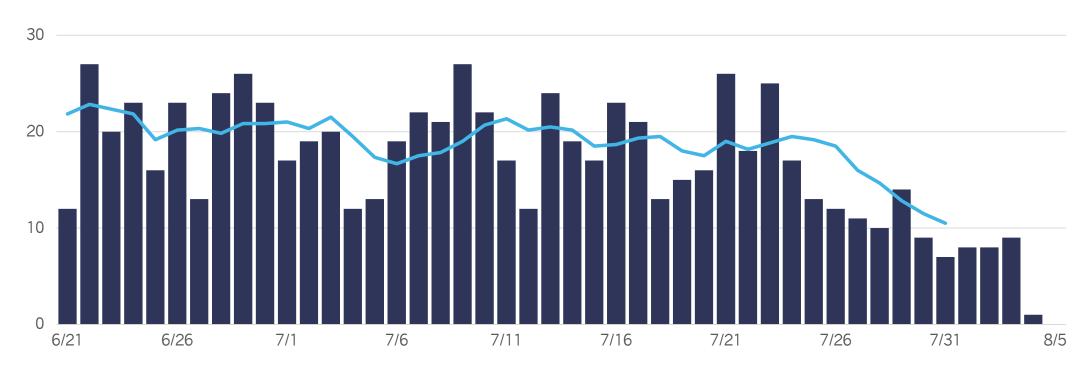
COVID-19 Hospital admissions, daily counts and rolling 7-day average, first known hospital admit date

**Recent Trend** 

Decrease 4 days (7/2-7/6) Stable 4 days (7/6-7/10) Decrease 21 days (7/10-7/31)

Hospital Admissions

40





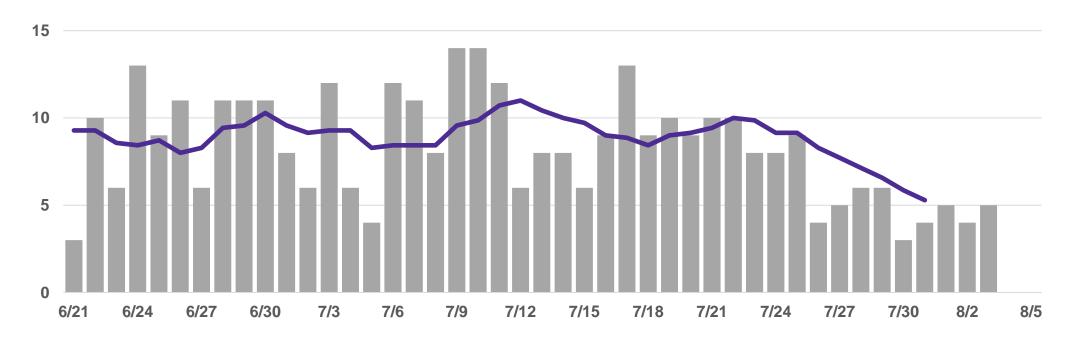
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COVID-19 hospital admissions among Black, non-Latinx residents, daily counts and rolling 7-day average, first known hospital admit date

Recent Trend Stable 9 days (7/2-7/11)
Decrease 7 days (7/11-7/18)
Stable 5 days (7/18-7/23)
Decrease 8 days (7/23-7/31)



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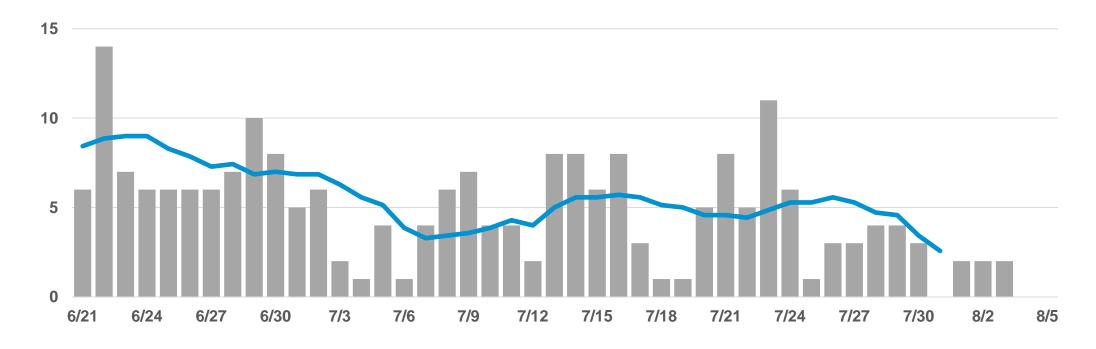
#### Latinx hospital admissions at low incidence for 28 days.



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

Recent At or below 6 avg. daily admissions for 28 days



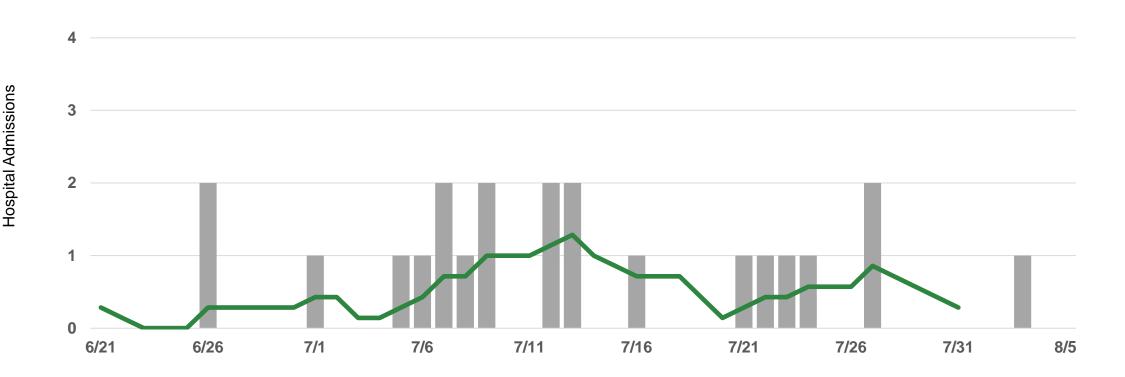


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## Asian non-Latinx hospital admissions at near-zero incidence for >28 days.

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

Recent Trend At or below 1 avg. daily admissions for 30 days



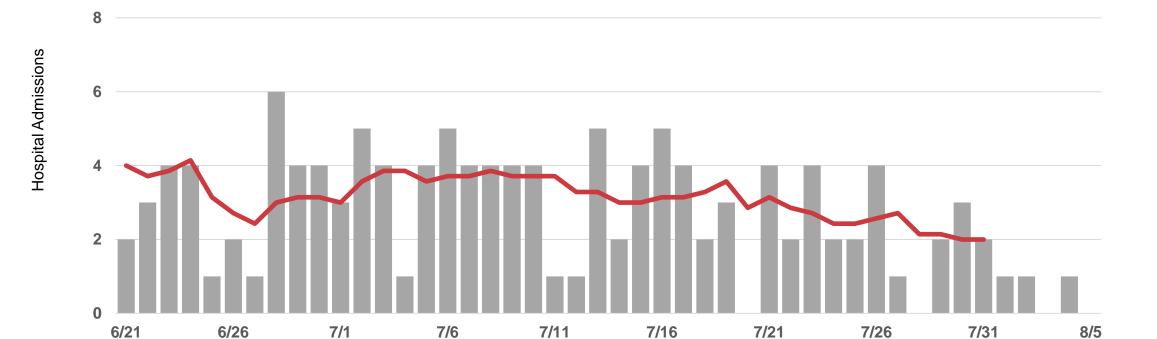


## White, non-Latinx hospital admissions at low incidence for >28 days.

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



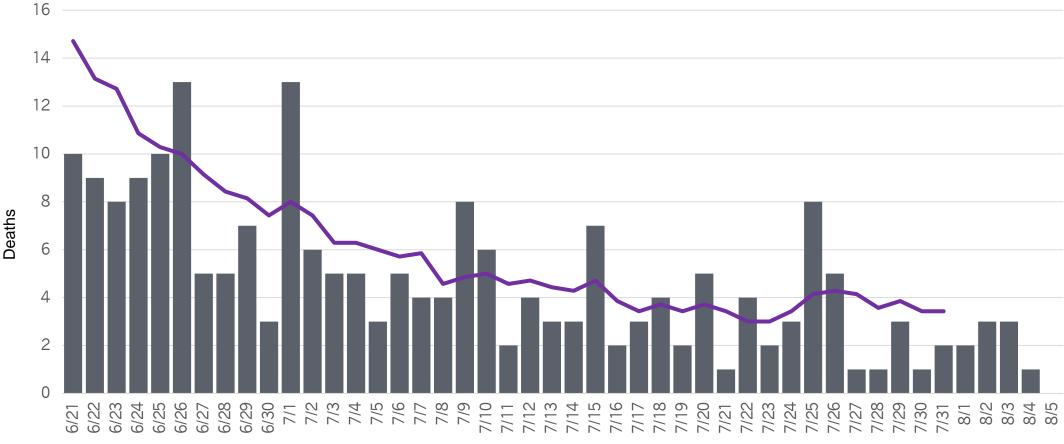
### COVID-19 deaths are decreasing or stable for >28 days with stable trend for most recent 9 days.



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

**Recent Trend** 

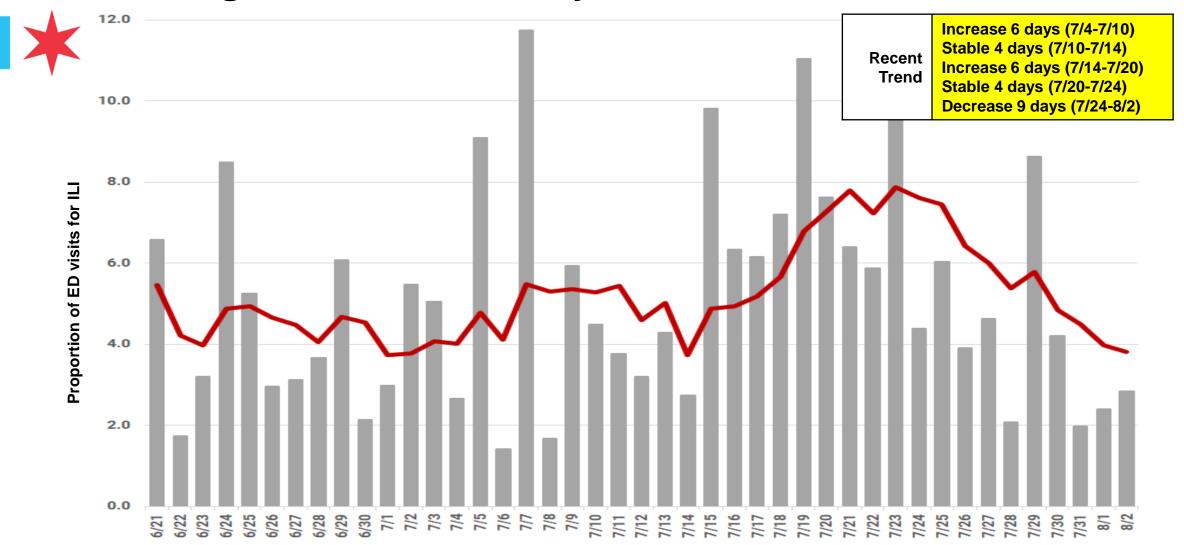
Decrease 20 days (7/1-7/22) Stable 9 days (7/22-7/31)



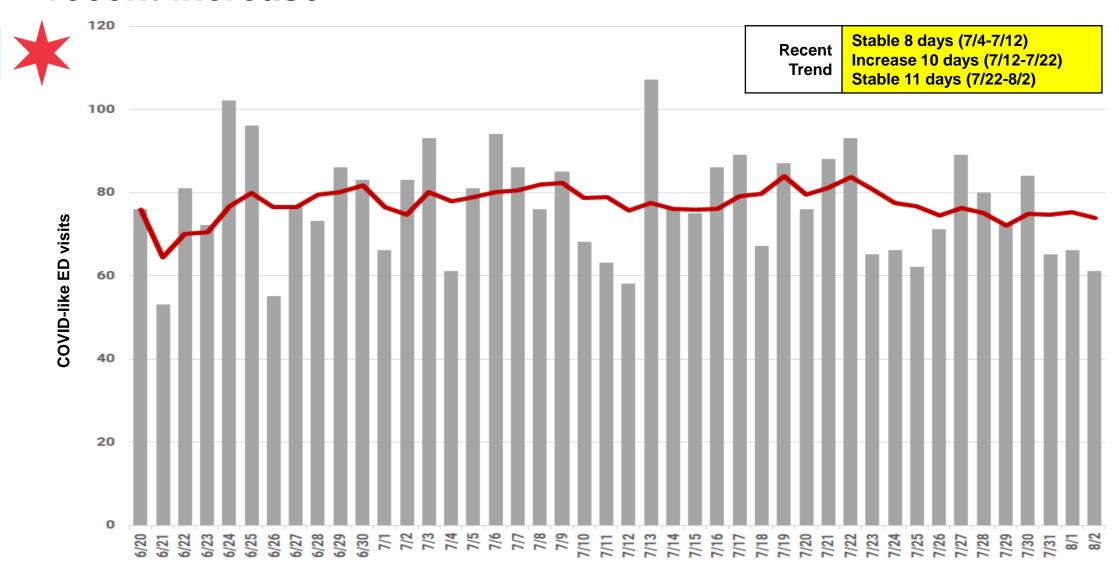


#### **Emergency Department Visits**

## Proportion of ED visits for influenza-like illnesses have been decreasing or stable for 11 days after a recent increase in mid-July



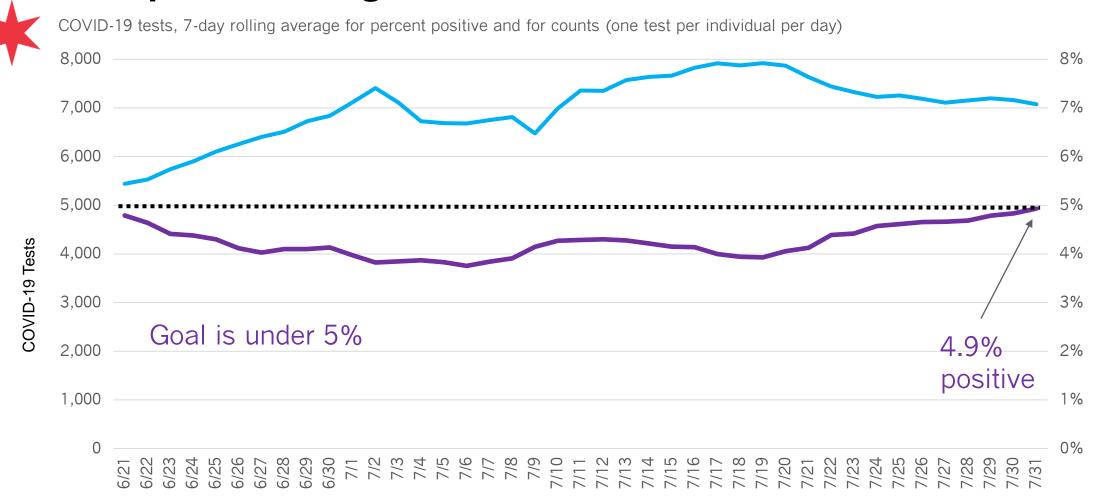
### ED visits for COVID-like illness are stable for 11 days after a recent increase





#### **Percent Positivity**

### Test positivity is increasing to 4.9% with consistently widespread testing.



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.

Percent positive

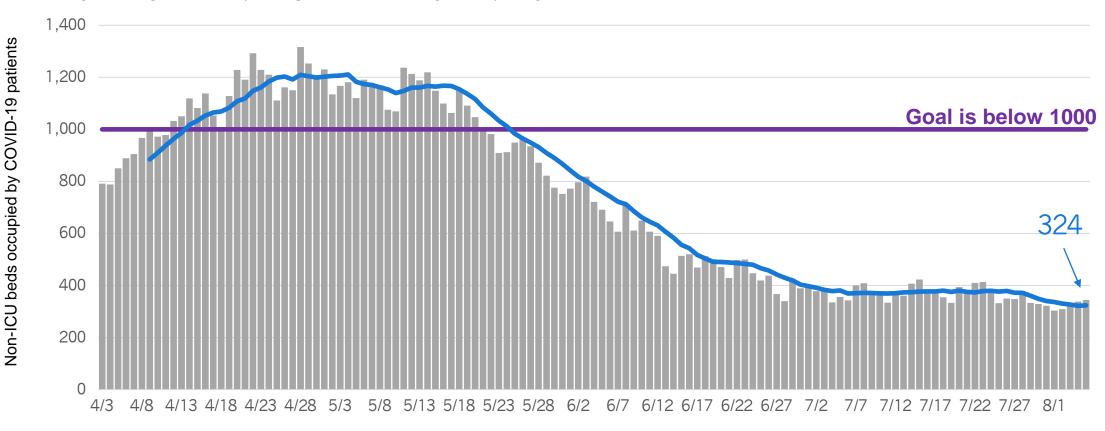


#### **Hospital System Capacity**

## 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

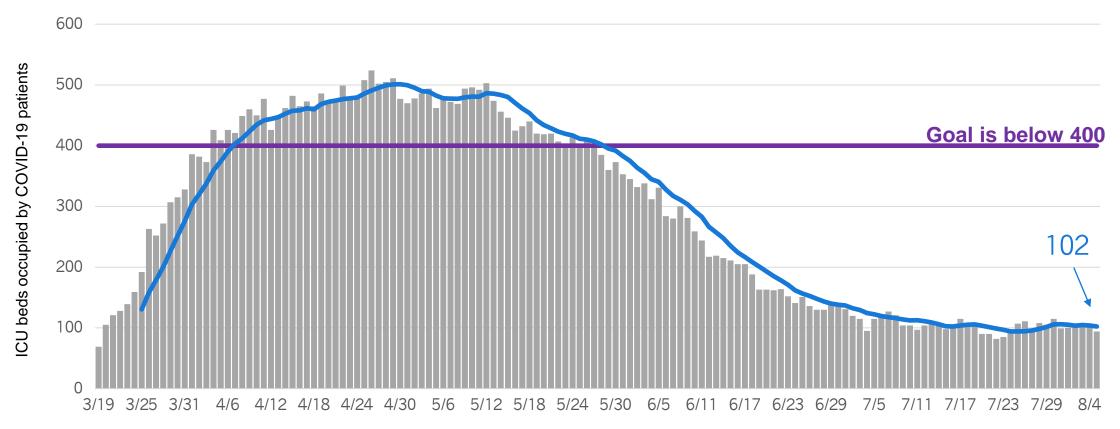


Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning April 3 (acute non-ICU occupancy). Acute non-ICU bed counts include burn, emergency department, med/surg, other, pediatrics and psychiatry beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes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

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



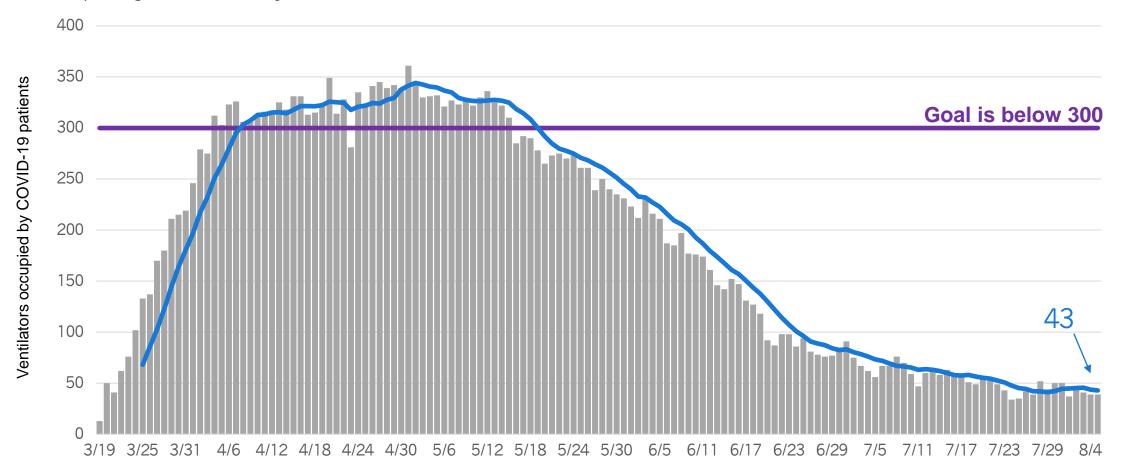
COVID-19 ICU beds occupied, daily counts, 7 day average and progress threshold, daily occupancy census



#### 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 46 straight days.

