The daily average of COVID-19 cases in Chicago has decreased by 97% since Omicron peak.
## Chicago COVID-19 Community Transmission and Risk Matrix

<table>
<thead>
<tr>
<th><strong>COVID-19 CASES DIAGNOSED PER DAY</strong></th>
<th><strong>HIGH TRANSMISSION</strong></th>
<th><strong>SUBSTANTIAL TRANSMISSION</strong></th>
<th><strong>LOWER TRANSMISSION</strong></th>
<th><strong>LOW TRANSMISSION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicago residents - 7-day rolling daily average</td>
<td>800+</td>
<td>400 – 799</td>
<td>200 – 399</td>
<td>20 – 199</td>
</tr>
<tr>
<td><strong>CURRENT:</strong> 196</td>
<td><strong>DECREASING</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>COVID-19 TEST POSITIVITY</strong></th>
<th><strong>HIGH TRANSMISSION</strong></th>
<th><strong>SUBSTANTIAL TRANSMISSION</strong></th>
<th><strong>LOWER TRANSMISSION</strong></th>
<th><strong>LOW TRANSMISSION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicago residents - 7-day rolling daily average</td>
<td>10%+</td>
<td>6.6 – 9.9%</td>
<td>5.0 – 6.5%</td>
<td>2 – 4.9%</td>
</tr>
<tr>
<td><strong>CURRENT:</strong> 1.0%</td>
<td><strong>DECREASING</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>HOSPITAL BEDS (NON-ICU) OCCUPIED BY COVID PATIENTS</strong></th>
<th><strong>HIGH TRANSMISSION</strong></th>
<th><strong>SUBSTANTIAL TRANSMISSION</strong></th>
<th><strong>LOWER TRANSMISSION</strong></th>
<th><strong>LOW TRANSMISSION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicago hospitals - 7-day rolling daily average</td>
<td>1250+</td>
<td>750 – 1249</td>
<td>250 – 749</td>
<td>100 – 249</td>
</tr>
<tr>
<td><strong>CURRENT:</strong> 196</td>
<td><strong>DECREASING</strong></td>
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<tr>
<th><strong>ICU BEDS OCCUPIED BY COVID PATIENTS</strong></th>
<th><strong>HIGH TRANSMISSION</strong></th>
<th><strong>SUBSTANTIAL TRANSMISSION</strong></th>
<th><strong>LOWER TRANSMISSION</strong></th>
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<tr>
<td>Chicago hospitals - 7-day rolling daily average</td>
<td>400+</td>
<td>300 – 399</td>
<td>100 – 299</td>
<td>20 – 99</td>
</tr>
<tr>
<td><strong>CURRENT:</strong> 53</td>
<td><strong>DECREASING</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Chicago Department of Public Health, data current as of March 3, 2022. These metrics represent general community COVID transmission and should not be applied to individual settings that have mitigation practices in place.
Chicago COVID-19 cases: Chicago saw the highest daily case count in the entire pandemic on 12/28/21. Cases now lowest they have been since July 2021.

Peak daily total 12/28: 10,032

Current 7-day average: 199

Chi.gov/coviddash
Case count is the lowest it has been since July 2021—even though more than 3 times the number of laboratory tests are being performed across Chicago as in July 2021.

Daily COVID-19 laboratory tests in Chicago residents
Statistical chance that even ONE person in a 25-or 50-person gathering would have COVID is now very low in Chicago/Cook County.

Chicago COVID-19 test positivity peaked on January 1 and has been declining since; now lowest it has been since July 2021 and at low community risk.

Peak positivity 1/2: 20.3%

Current test positivity: 1.0%
Chicago COVID-19 Hospitalizations (new hospitalizations each day) have decreased significantly since peak in early January and are now at less than half of the CDC's Low risk level.

Peak daily total 1/4: 298

Current daily average: 14

Chi.gov/coviddash
Chicago COVID Hospital Census (non-ICU Hospital Beds occupied by COVID-19 patients) is now in lower transmission/risk.

Peak daily total 1/12: 1,643

Current daily average: 196 (16% capacity available)

Chi.gov/coviddash
Chicago: ICU Hospital Beds occupied by COVID-19 patients also now in lower transmission/risk.

Peak daily total 1/15: 330
Current daily average: 53 (17% capacity available)
SARS-CoV-2 Variant Surveillance, Midwest Region

- Omicron B.1.1 (94.1%)
- Omicron BA.2 (5.9%)
- Delta (0.0%)
- Other (0.0%)
### Determining Transmission Risk

If the two indicators suggest different transmission levels, the higher level is selected.

<table>
<thead>
<tr>
<th></th>
<th>Low</th>
<th>Moderate</th>
<th>Substantial</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>New cases per 100,000 persons in the past 7 days*</td>
<td>&lt;10</td>
<td>10-49.99</td>
<td>50-99.99</td>
<td>≥100</td>
</tr>
</tbody>
</table>
| Percentage of positive NAATs tests during the past 7 days** | <5%  | 5-7.99%  | 8-9.99%     | ≥10.0%

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- Community transmission indicators were developed in fall 2020 (prior to availability of vaccines) and reflect goal of limiting transmission in anticipation of vaccines being available.
- Neither of the community transmission indicators reflects medically significant disease or healthcare strain.
- Community transmission levels are largely driven by case incidence, which does not differentiate mild and severe disease.

[covid.cdc.gov/covid-data-tracker](covid.cdc.gov/covid-data-tracker)
Original CDC Risk Table with Chicago numbers included

Determining Transmission Risk

If the two indicators suggest different transmission levels, the higher level is selected

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<th>Substantial</th>
<th>High</th>
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</thead>
<tbody>
<tr>
<td>New cases per 100,000 persons in the past 7 days*</td>
<td>&lt;10</td>
<td>10-49.99 &lt;200 cases/day</td>
<td>50-99.99 200-399 cases/day</td>
</tr>
<tr>
<td>Percentage of positive NAATs tests during the past 7 days**</td>
<td>&lt;5%</td>
<td>5-7.99% 8-9.99%</td>
<td>≥10.0%</td>
</tr>
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</table>

For Chicago (rounded)
covid.cdc.gov/covid-data-tracker
NEW Guidance: CDC COVID-19 Community Levels

• We are in a new phase of this pandemic
  • Vaccines, boosters, and tests are widely available; effective treatments developed; the very large majority of Chicagoans have some immunity because they have been vaccinated (77%) and/or previously infected
  • Our ability to prevent or reduce severe illness makes it less critical to focus on stopping every case of COVID-19 (plus we do not expect to be able to eradicate COVID)

• The virus will continue to circulate, so we must prevent overwhelming our hospital and healthcare systems
  • Overwhelmed hospitals cannot provide the best care for COVID-19 patients or people experiencing other health crises
  • We cannot allow emergency departments to be overwhelmed causing people to wait for lifesaving care

• Looking at severe cases that require hospital care and use healthcare resources (in addition to monitoring overall number of new cases) provides a better picture of COVID-19 impact on our communities
WHAT’S A COVID-19 COMMUNITY LEVEL?

• It’s a new tool to help communities decide what prevention measures to take based on the latest data

• Every community in the United States is classified as:

  Low
  Limited impact on healthcare system, low levels of severe illness

  Medium
  Some impact on healthcare system, more people with severe illness

  High
  High potential for healthcare system strain; high level of severe illness

cdc.gov/coronavirus
LOW COVID-19 COMMUNITY LEVEL

You should:
- Stay up to date with COVID-19 vaccines
- Get tested if you have symptoms

State and Local Authorities should:
- Distribute and administer vaccines to achieve high community vaccination coverage
- Maintain improved ventilation
- Ensure access and equity in vaccination, testing, treatment, community outreach
State and Local Authorities should:
GREEN+

- Protect people at high risk for severe illness or death
- Consider implementing screening testing for people who are in high-risk settings (schools, workplaces, etc.)
- Implement prevention measures in high-risk congregate settings
HIGH COVID-19 COMMUNITY LEVEL

You should:
• Wear a mask indoors in public
• Stay up to date with COVID-19 vaccines
• Get tested if you have symptoms
• Take additional precautions as needed, if you're at high risk for severe illness

State and Local Authorities should: GREEN/YELLOW +
• Consider setting-specific recommendations for prevention strategies based on local factors
• Implement healthcare surge support

cdc.gov/coronavirus
REGARDLESS OF YOUR COVID-19 COMMUNITY LEVEL, YOU SHOULD MASK IF YOU HAVE

- Symptoms of COVID-19
- Positive COVID-19 Test
- Exposure to someone with COVID-19

[cdc.gov/coronavirus]
NEW CDC Guidance on Community COVID-19 Risk

COVID-19 Community Levels  |  Use the Highest Level that Applies to Your Community

<table>
<thead>
<tr>
<th>New COVID-19 Cases per 100,000 people in the last 7 days</th>
<th>Indicators</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>FEWER THAN 200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>New COVID-19 admissions per 100,000 population (7-day total)</td>
<td>&lt;10.0</td>
<td>10.0–19.9</td>
</tr>
<tr>
<td>Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)</td>
<td>&lt;10.0%</td>
<td>10.0–14.9%</td>
</tr>
<tr>
<td>200 OR MORE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>New COVID-19 admissions per 100,000 population (7-day total)</td>
<td>NA</td>
<td>&lt;10.0</td>
</tr>
<tr>
<td>Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)</td>
<td>NA</td>
<td>&lt;10.0%</td>
</tr>
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The COVID-19 Community Level is determined by the higher of the new admissions and inpatient beds metrics, based on the current level of new cases.

These changes DO NOT APPLY IN HEALTHCARE SETTINGS
# NEW CDC Guidance on Community COVID-19 Risk

## COVID-19 Community Levels

Use the Highest Level that Applies to Your Community

<table>
<thead>
<tr>
<th>New COVID-19 Cases per 100,000 people in the last 7 days</th>
<th>Indicators</th>
<th>Low Level</th>
<th>Medium Level</th>
<th>High Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fewer than 200 cases/day</td>
<td>New COVID-19 admissions per 100,000 population (7-day total)</td>
<td>&lt;10.0</td>
<td>10.0–19.9</td>
<td>≥20.0</td>
</tr>
<tr>
<td></td>
<td>Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)</td>
<td>&lt;10.0%</td>
<td>10.0–14.9%</td>
<td>≥15.0%</td>
</tr>
<tr>
<td>200 OR MORE cases/day</td>
<td>New COVID-19 admissions per 100,000 population (7-day total)</td>
<td>NA</td>
<td>&lt;10.0</td>
<td>≥10.0</td>
</tr>
<tr>
<td></td>
<td>Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)</td>
<td>NA</td>
<td>&lt;10.0%</td>
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</table>

For Chicago (rounded)

The COVID-19 Community Level is determined by the higher of the new admissions and inpatient beds metrics, based on the current level of new cases.
Where does the United States stand with these newly defined metrics?
Citywide Vaccination Rate by Age

51% of 5-11 year-olds and 80% of 12-17 year-olds in Chicago have received their first dose of COVID vaccine.

U.S. 5-11 y/o: 32.1%
U.S. 12-17 y/o: 67.1%

Chi.gov/coviddash
SHOULD MY 5–11 YEAR-OLD CHILD GET THE COVID-19 VACCINE?

YOUR ANSWER MAY COME FROM KNOWING THAT...

- The COVID-19 vaccine is new, but the science behind it is well established.
- The children’s dose is 1/3 the size of the adult dose.
- In the U.S., over 8 million children have already had at least one dose.
- Vaccines have been with us for at least 100 years.

Deciding to schedule the first dose may not be easy, but it’s the safe thing to do.
Citywide Vaccination Rate by Race/Ethnicity

61% of Black non-Latinx Chicagoans have now had a first dose of COVID vaccine (55% fully vaxxed)
A Latinx Chicagoan is just as likely to have received at least one dose of COVID vaccine as a White Non-Latinx Chicagoan

At least one dose (% vaccinated as of 3/1/2022)

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>At least one dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian Non-Latinx</td>
<td>83.9%</td>
</tr>
<tr>
<td>Black Non-Latinx</td>
<td>61.0%</td>
</tr>
<tr>
<td>Latinx</td>
<td>75.2%</td>
</tr>
<tr>
<td>White Non-Latinx</td>
<td>75.2%</td>
</tr>
</tbody>
</table>

Completed vaccine series (% vaccinated as of 3/1/2022)

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Completed vaccine series</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian Non-Latinx</td>
<td>77.1%</td>
</tr>
<tr>
<td>Black Non-Latinx</td>
<td>54.8%</td>
</tr>
<tr>
<td>Latinx</td>
<td>66.9%</td>
</tr>
<tr>
<td>White Non-Latinx</td>
<td>70.7%</td>
</tr>
</tbody>
</table>
In households* of people with COVID-19 caused by the Omicron variant, spread was common

The spread was lowest among household contacts when the person with COVID-19:

- isolated from others
- wore a mask in the home
- was up to date with COVID-19 vaccines

1 in 2 household contacts developed COVID-19†

Prevent COVID-19 spread at home to protect your loved ones

* Chicago, Illinois; Connecticut; Milwaukee, Wisconsin; Utah; Mar 2021–Feb 2022
† Of 453 household contacts, 51 patients with Omicron variant, 227 tested positive or developed COVID-19 symptoms

bit.ly/MMWR7109
While not required, be prepared to see updated signage in various settings.

**MASKS OPTIONAL**

While this establishment no longer requires masks to enter, please be kind to those who choose to wear a mask.

**THIS ESTABLISHMENT NO LONGER REQUIRES MASKS OR PROOF OF VACCINATION TO ENTER**

Please wear a mask if you are experiencing potential COVID-19 symptoms and be kind to those who choose to wear a mask.
Some businesses may choose to maintain the mask and/or vaccine requirement. Options for signage will be available on our website.
GET VAXXED AT HOME
GET $50* PER DOSE

• Anyone age 5+ can get a vaccine at home
• Pfizer pediatric, adult and boosters doses available
• Up to 10 people can get vaccinated at the same time
• Appointments: Monday-Sunday, 8:00 am to 6:30 pm

*One $50 gift card for each primary Pfizer dose. Booster doses do not qualify.

To schedule your appointment:
CALL 312.746.4835
OR VISIT chicago.gov/at home
• ALL individuals 65+ are eligible for these treatments

• These treatments are provided by the federal government at no-cost

• These treatments are available regardless of an individual’s vaccination status

• These treatments are available now in Chicago

• If you test positive for COVID-19, talk with your healthcare provider immediately

If you test positive for COVID-19, there are IV and oral medications that can help keep you out of the hospital, but they need to be taken in the first few days of infection.

If you test positive and have underlying conditions that put you at higher risk for hospitalization, talk with your healthcare provider immediately to see if they recommend newer treatments now available.

Treatments used for COVID-19 can interact with other medications you take and must be prescribed by your healthcare provider.

• Please do not go to a pharmacy or infusion center without a prescription.

Supply is growing but remains limited for these treatments and will be prioritized for those at highest risk of developing severe illness.

Looking for a vaccine? visit CHI.GOV/COVIDVAX or call 312-746-4835

CHICAGO
Mayor Lori E. Lightfoot
Protect Against and Treat COVID-19

Prepare for New Variants

Prevent Economic and Educational Shutdowns

Continue to Lead the Effort to Vaccinate the World and Save Lives
Mayor and City Leaders announce near-term efforts and community collaborations to reduce violence

- Community Safety Coordination Center (CSCC)
  - People-based strategy
  - Place-based strategy
  - Crisis response

- Virtual Community Safety Town Halls
  - Learn more about the City’s community safety efforts in your region; ask questions and provide feedback

- Symposium on Trauma-Informed Response to Violence (March 14)

- Youth Trade Show (March 22-24 at the McCormick Center)
  - Expose and connect 3,000 graduation seniors at risk of post-graduation disconnection with info and tools to explore careers in skilled trades

ALL TOWN HALLS WILL BE VIRTUAL
Register at: bit.ly/CommunitySafetyTownHalls

March 9    North/Northwest Sides
March 10   West Side
March 12   Southwest Side
March 15   City Center (Loop, Near North, West Loop, South Loop)
March 16   South Side
March 19   Spanish Session
Need a vaccine or a booster? Have questions?

Visit CHI.GOV/COVIDVAX

or call 312-746-4835

CDPH