Health and Human Services Committee: Chicago COVID-19 Update

February 28, 2022

Allison Arwady, MD, MPH
Commissioner, Chicago Department of Public Health
“Is the pandemic over?”

The pandemic is not over but we are in a new phase.

• Although COVID-19 continues to circulate, we now have vaccines, tests, and treatments that work, and most Chicagoans have some immunity from vaccines (77%) and/or past infection.

• So-called “living with COVID” will require us to use all we have learned over the past 2 years.

• This means putting proven public health strategies in place when they are needed to
  • prevent serious illness and death
  • stop our hospitals from being overwhelmed, and
  • protect society
# Chicago COVID-19 Community Transmission and Risk Matrix

<table>
<thead>
<tr>
<th>COVID-19 CASES DIAGNOSED PER DAY</th>
<th>VERY HIGH TRANSMISSION</th>
<th>HIGH TRANSMISSION</th>
<th>SUBSTANTIAL TRANSMISSION</th>
<th>LOWER TRANSMISSION</th>
<th>LOW TRANSMISSION</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>Current: 250 Decreasing</td>
<td>20 – 199</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COVID-19 TEST POSITIVITY</th>
<th>VERY HIGH TRANSMISSION</th>
<th>HIGH TRANSMISSION</th>
<th>SUBSTANTIAL TRANSMISSION</th>
<th>LOWER TRANSMISSION</th>
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</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>
<td>≤2%</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>HOSPITAL BEDS (NON-ICU) OCCUPIED BY COVID PATIENTS</th>
<th>VERY HIGH TRANSMISSION</th>
<th>HIGH TRANSMISSION</th>
<th>SUBSTANTIAL TRANSMISSION</th>
<th>LOWER TRANSMISSION</th>
<th>LOW TRANSMISSION</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>Current: 211 Decreasing</td>
<td>100 – 249</td>
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<th>ICU BEDS OCCUPIED BY COVID PATIENTS</th>
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<td>Chicago hospitals - 7-day rolling daily average</td>
<td>400+</td>
<td>300 – 399</td>
<td>100 – 299</td>
<td>Current: 61 Decreasing</td>
<td>20 – 99</td>
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Source: Chicago Department of Public Health, data current as of February 28, 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: 250
Case count is the lowest it has been since July 2021—even though now approximately 3-5 times the number of laboratory tests are being performed across Chicago as in July 2021.

Daily COVID-19 laboratory tests in Chicago residents
Chicago COVID-19 test positivity peaked 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: 1.4%
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 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: 20
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: 211 (21% capacity available)

Yesterday: 186
Chicago: ICU Hospital Beds occupied by COVID-19 patients also now in lower transmission/risk.

Peak daily total 1/15: 330

Current daily average: 61 (23% capacity available)

Yesterday: 43

Chi.gov/coviddash
Vaccines Work: Chicago Weekly Rate of COVID-19 Cases by Vaccination Status

During the past 4 weeks, unvaccinated people had a **2.5X** higher risk of testing positive for COVID-19 compared to people who were boosted.
Vaccines Work: Chicago Weekly Rate of COVID-19 Hospitalizations by Vaccination Status

During the past 4 weeks, unvaccinated people had a 6.3X higher risk of being hospitalized for COVID-19 compared to people who were boosted.
Vaccines Work: Chicago Weekly Rate of COVID-19 Deaths by Vaccination Status

During the past 4 weeks, unvaccinated people had a 12.9X higher risk of dying from COVID-19 compared to people who were boosted.
Facts:

7,512 Chicago residents have died as a direct result of COVID-19 infection.

912 Chicago residents, the great majority unvaccinated, have died of COVID-19 since January 1, 2022.

4,930 Chicago residents, the great majority unvaccinated, have been hospitalized with COVID-19 since January 1, 2022.

ZERO Chicago residents have died as a direct result of COVID-19 vaccination.
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.

At least one dose (% vaccinated as of 2/23/2022)

- 5-11: 80.1%
- 12-17: 79.3%
- 18-29: 83.2%
- 30-39: 89.0%
- 40-49: 94.1%
- 50-59: 88.3%
- 60-69: 80.7%
- 70-79: 71.2%
- 80+: 50.9%

Completed vaccine series (% vaccinated as of 2/23/2022)

- 5-11: 69.2%
- 12-17: 68.0%
- 18-29: 75.4%
- 30-39: 82.2%
- 40-49: 88.1%
- 50-59: 83.0%
- 60-69: 75.3%
- 70-79: 66.5%
- 80+: 41.1%

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

Chi.gov/coviddash
61% of Black non-Latinx Chicagoans have now had a first dose of COVID vaccine (54% 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
Three of four (75%) Latinx Chicagoans (all ages) have now had a first dose of COVID-19 vaccine. This is the same first dose vaccine coverage seen in White non-Latinx Chicagoans.

Continuing to see increases EVERY WEEK!
NEW Guidance: CDC COVID-19 Community Levels

• We are in a new phase of this pandemic
  • Vaccines, boosters, and tests 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
## Determining Transmission Risk

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

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

You should:

- Stay up to date with COVID-19 vaccines
- Get tested if you have symptoms
You should:
• Talk to your healthcare provider about whether you need to wear a mask and take other precautions if you’re at **high risk for severe illness**
• Stay up to date with COVID-19 vaccines
• Get tested if you have symptoms

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
State and Local Authorities should:
GREEN/YELLOW +

- Consider setting-specific recommendations for prevention strategies based on local factors
- Implement healthcare surge support

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
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

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<th>New COVID-19 Cases</th>
<th>Indicators</th>
<th>Level</th>
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<tr>
<td>per 100,000 people in the last 7 days</td>
<td></td>
<td>LOW</td>
</tr>
<tr>
<td>FEWER THAN 200</td>
<td>New COVID-19 admissions per 100,000 population (7-day total)</td>
<td>&lt;10.0</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>
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<tr>
<td>200 OR MORE</td>
<td>New COVID-19 admissions per 100,000 population (7-day total)</td>
<td>NA</td>
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<td>Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)</td>
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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.
Where does the United States stand with these newly defined metrics?

As of Friday, all of Puerto Rico, New York City, D.C., Hawaii and the counties that include Seattle, Chicago, Denver and Atlanta were all at a “low” community level.
# NEW CDC Guidance on Community COVID-19 Risk

## COVID-19 Community Levels

Use the Highest Level that Applies to Your Community

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<tr>
<td>Fewer than 775 cases/day</td>
<td>Percent of staffed inpatient beds occupied by COVID-19 patients (7-average)</td>
<td>10.0–19.9</td>
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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.
How would the new CDC metrics have performed in Chicago in the past?
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.
LOOKING AHEAD

Example: Promote Protect Chicago At Home Vaccine Appts

Example for Faith Leaders: I’ll Hold Your Hand

• **Step One:** Call or email Minister Sandra Robinson Cunningham to register your place of worship for the program. (312-446-0500 or srobinson@goldstarc.com)

• **Step Two:** Attend one of the upcoming webinars March 15 or March 29.

• **Step Three:** Encourage members to make a Protect Chicago At Home vaccine appointment where the clinic comes to their home. Members can call your place of worship once their appointment is scheduled through to send someone from your team to support them while being vaccinated.
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/athome
LOOKING AHEAD
Example: Approval of Vaccine for Children Under 5

• **WHAT?** FDA has not yet authorized COVID vaccine for kids under 5
  • FDA will review data on all three doses of the vaccine for young kids, instead of starting with just two

• **WHY?** Young-child sized trial dose is just 1/10th of the adult vaccine dose
  • No safety concerns but lower efficacy after two doses in 2-4 year olds than desired; expected improved efficacy after third dose

• **WHEN?** Data should be available by April; if trial data supports, vaccination may begin early summer

• **WHERE?** Map shows where many children under age 5 live in Chicago
Six Equity Zones, covering the entire geography of Chicago.

Leads:
- North Central: Swedish Convent Hospital
- Northwest: Northwest Side Housing Center
- West: Rush Medical/West Side United
- Southwest: Southwest Organizing Project
- Near South: Greater Auburn Gresham Development Corporation
- Far South: Phalanx Family Services
HCEZ STRUCTURE

EXAMPLE: Near South Equity Zone

- **1 Regional Lead**

- **Up to 16** Community Leads, each covering one or more neighborhoods in the region

  - Each Community Lead coordinates a **hyper-local neighborhood network** of partners, including:
    - Other community groups
    - Health providers
    - Schools
    - Faith-based organizations
    - Businesses
HCEZ NEXT STEPS: 2022 Growth Timeline...Beyond Vaccine

VACCINE EQUITY ACTIVATIONS

- Jan: Award letters issued
- Feb: Finalize budget, scopes; community assessments and project planning
- Mar: Continued implementation of vaccine equity work
- Apr: Finalize budget scopes
- May: Health and racial equity project implementation
- Jun: Health and racial equity project implementation
- Jul: Health and racial equity project implementation
- Aug: Health and racial equity project implementation
- Sept: Health and racial equity project implementation
- Oct: Health and racial equity project implementation
- Nov: Health and racial equity project implementation
- Dec: Health and racial equity project implementation

HEALTH & RACIAL EQUITY ACTIVATIONS
• 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
“Is the pandemic over?”

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  • prevent serious illness and death
  • stop our hospitals from being overwhelmed, and
  • protect society
Need a vaccine or a booster? Have questions?

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or call 312-746-4835