



Protecting Chicago: Phase IV Re-Opening Metrics Update

October 17, 2020

(Data current through 10/14/2020)

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 |
|---|---|---|---|--|---|
| Cases 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) |
| 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 | >10% | >5% - 10% | 3% - 5% of all daily tests are confirmed positive | <3% of all daily tests are confirmed positive | <=1% of all daily tests are confirmed positive |
| 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 | <500 non-ICU beds occupied by COVID patients <200 ICU beds occupied by COVID patients <150 ventilators occupied by | <250 non-ICU beds occupied by COVID patients <100 ICU beds occupied by COVID patients <75 ventilators occupied by COVID |



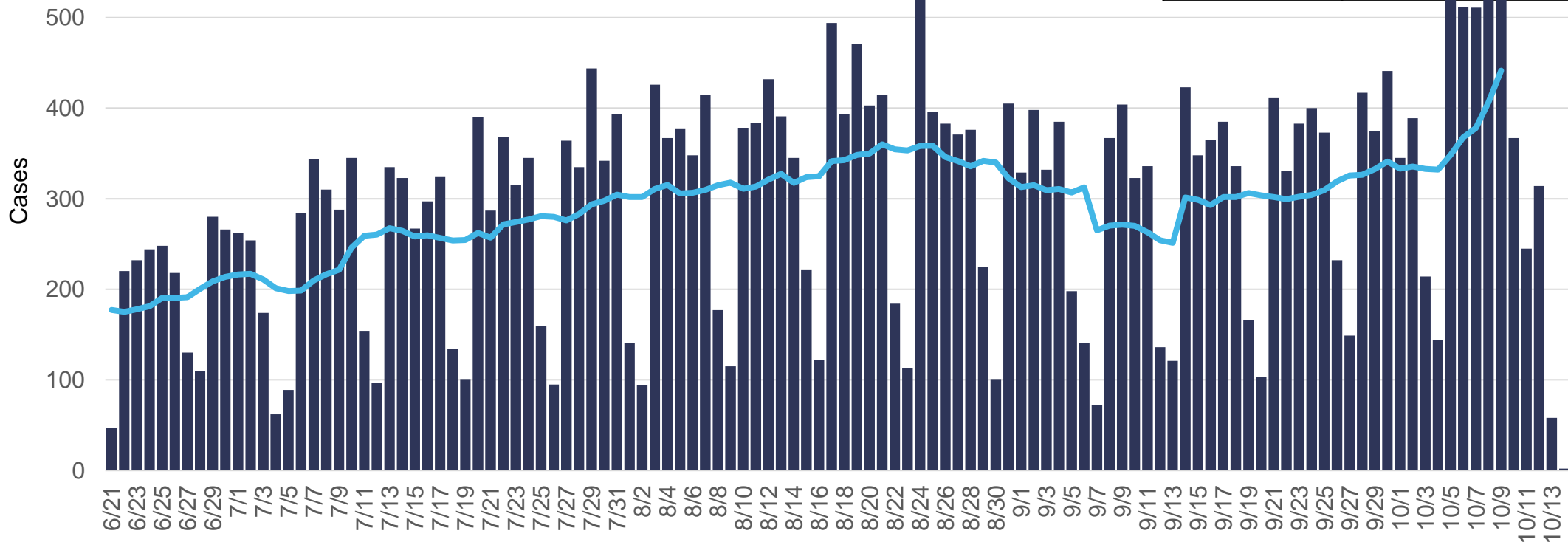
COVID-19 Confirmed Cases

COVID-19 case incidence in Chicago is persistently high and growing. Cases have been increasing or stable for 27 days.



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|-----------------------|---|
| Recent Trend | Decrease 2 days (9/10-9/12) Increase 3 days (9/12-9/15) 16 C/D Stable 8 days (9/15-9/23) Increase 7 days (9/23-9/30) 6 C/D Stable 5 days (9/30 -10/4) Increase 5 days (10/4-10/9) 22 C/D |
| 14-day Incidence | HIGH (389 avg. daily cases*) |
| 14-day slope | GROWTH +9.4 cases per day |
| Peak 14-day incidence | 998 avg. daily cases 5/20/2020 |

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

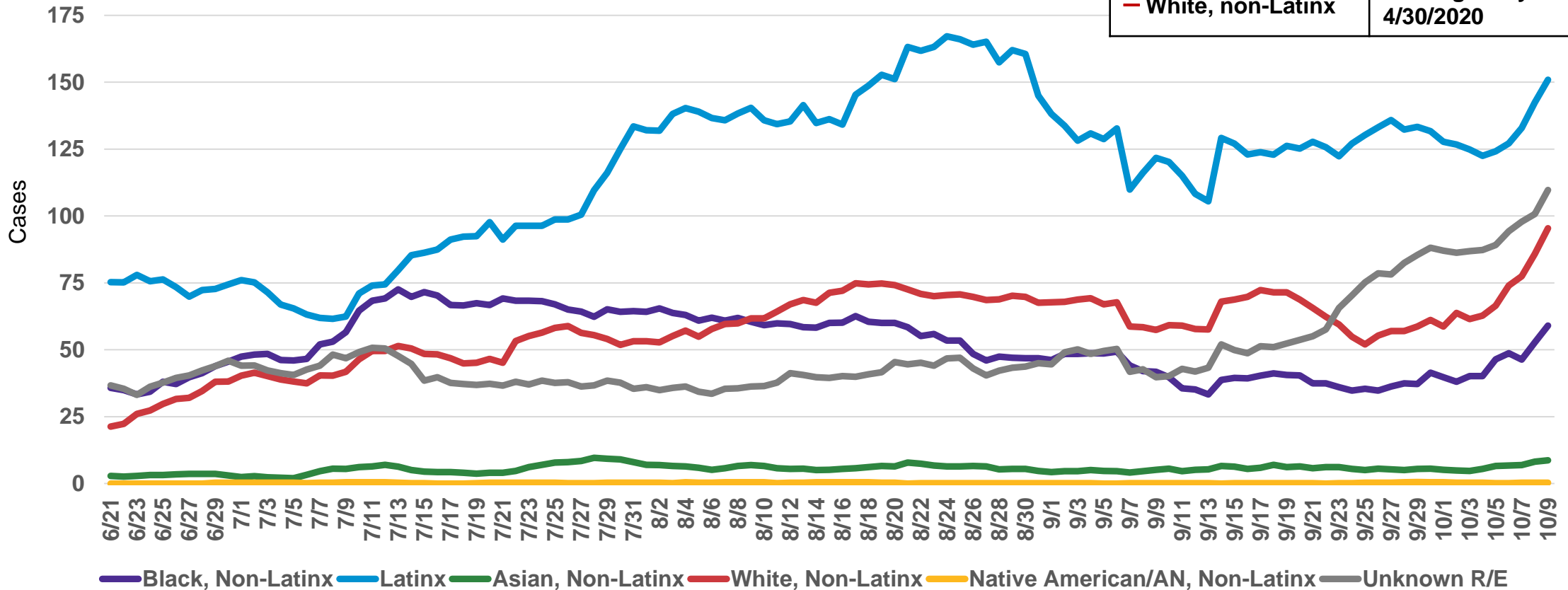


Daily COVID-19 cases with known specimen report date. *14-day incidence is calculated by summing all new cases in the most recent 14-day period and dividing by 14 days to find an average daily count. Incidence gating rank is determined using 14-day cumulative incidence/100,000 population. The gating 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.



COVID-19 case incidence highest among Latinx; incidence is rising among all race/ethnicity groups.

COVID-19 cases among Chicago residents by race/ethnicity, rolling 7-day average, specimen collection date

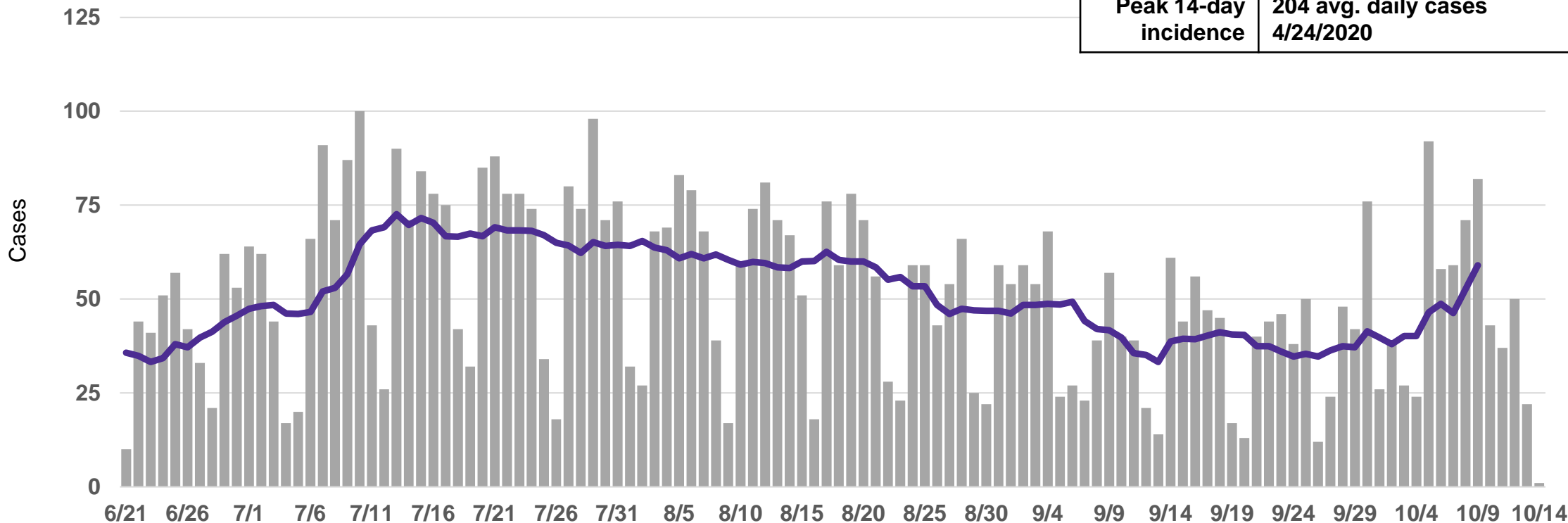


Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence.

Black, non-Latinx case incidence is moderately high and growing. Cases have been increasing for 15 days.



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



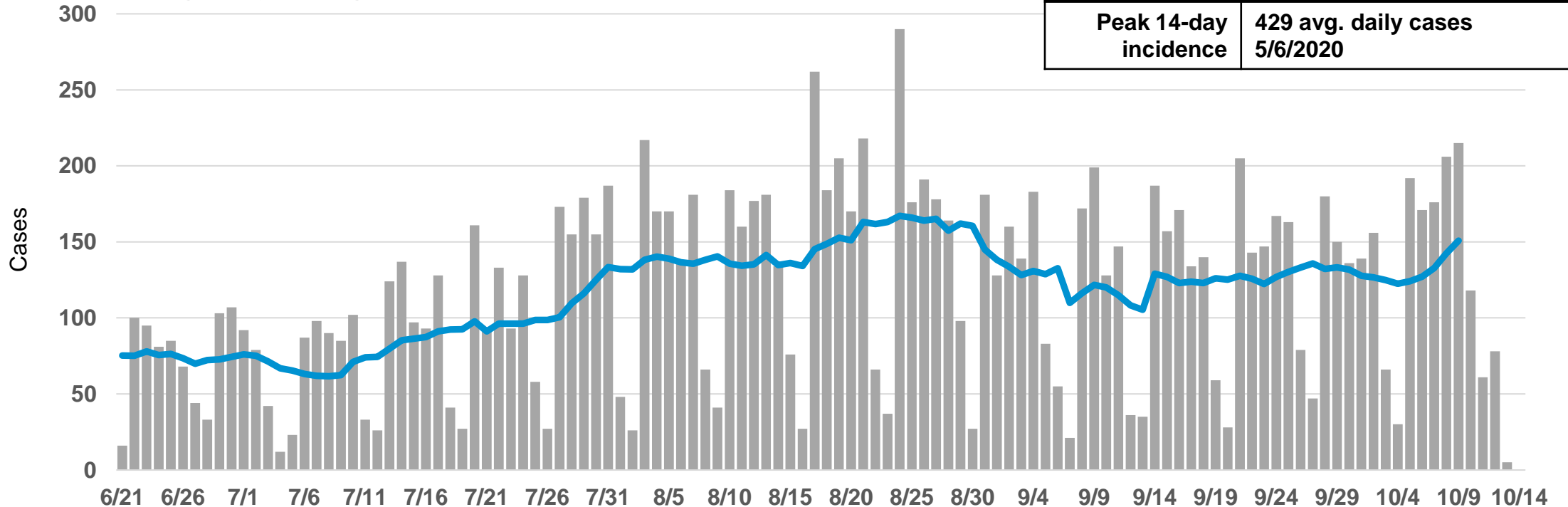
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| Recent Trend | Stable 2 days (9/10-9/12) Increase 6 days (9/12-9/18) 1 C/D Decrease 6 days (9/18-9/24) Increase 15 days (9/24-10/9) 2C/D |
| 14-day incidence | MODERATELY HIGH (49 avg. daily cases*) |
| 14-day slope | GROWTH +1.7 cases per day |
| 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 rapidly for the past 4 days.



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



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| Recent Trend | Decrease 2 days (9/10-9/12) Increase 3 days (9/12-9/15) 6 C/D Stable 8 days (9/15-9/23) Increase 4 days (9/23-9/27) 4 C/D Decrease 8 days (9/27-10/5) Increase 4 days (10/5-10/9) 7 C/D |
| 14-day incidence | HIGH (139 avg. daily cases*) |
| 14-day slope | GROWTH +1.3 cases per day |
| Peak 14-day incidence | 429 avg. daily cases 5/6/2020 |

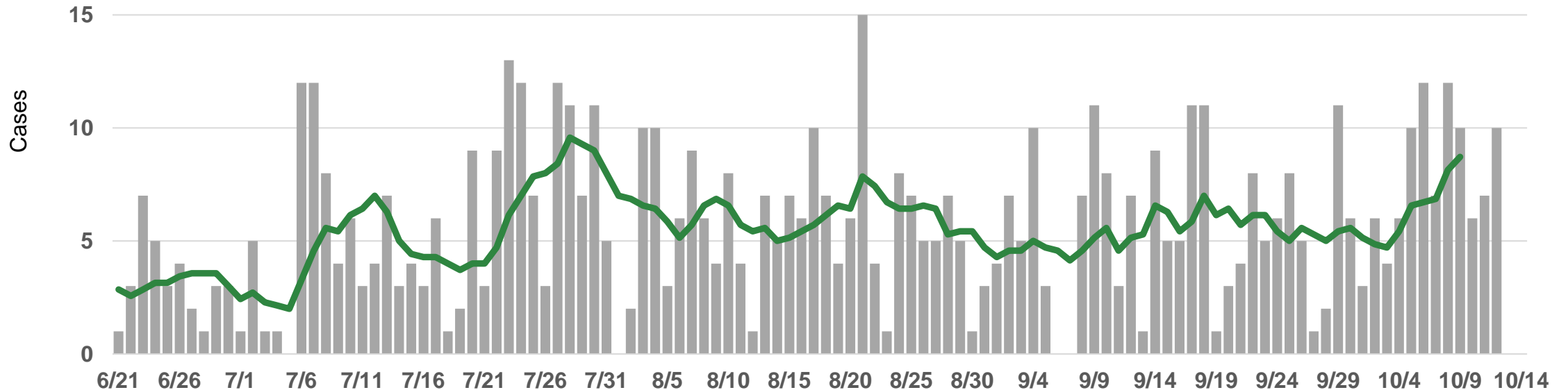
Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence. Daily counts for most recent dates 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 moderately high and growing. Cases have been increasing for the past 6 days.

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

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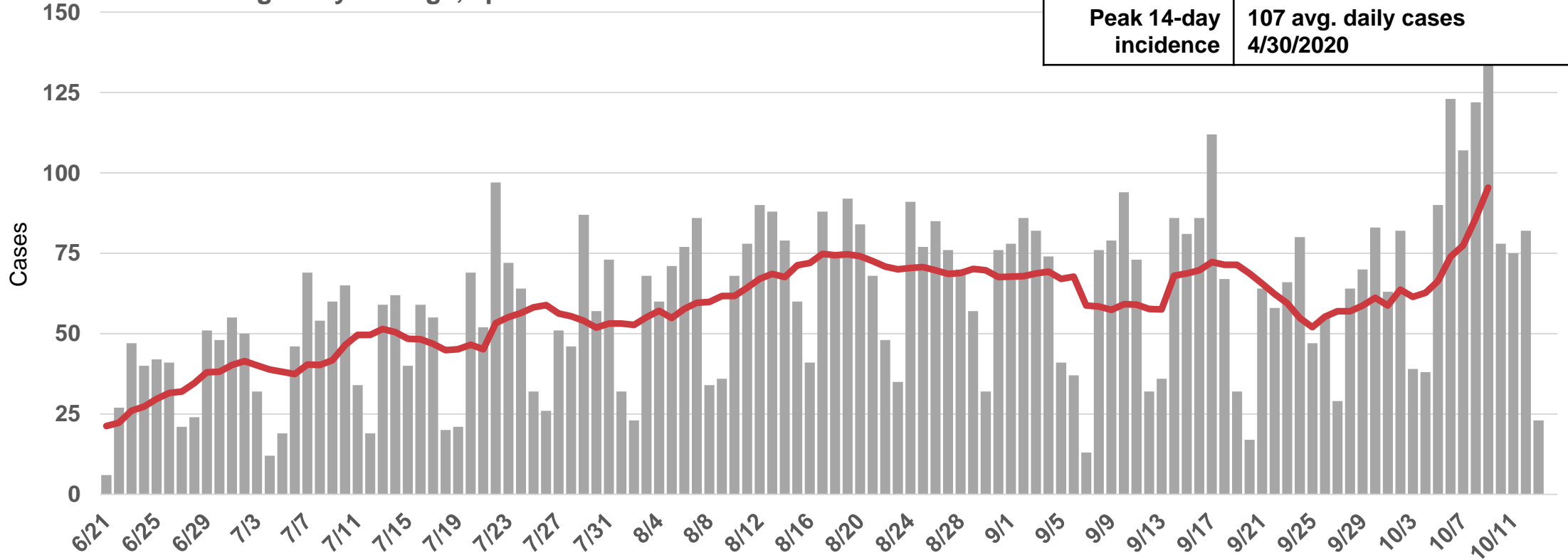
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| Recent Trend | Stable 8 days (9/10-9/18) Decrease 15 days (9/18-10/3) Increase 6 days (10/3-10/9) 1 C/D |
| 14-day incidence | MODERATELY HIGH (7 avg. daily cases*) |
| 14-day slope | GROWTH +0.2 cases per day |
| Peak 14-day incidence | 21 avg. 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 growing. Cases have been increasing for 14 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 2 days (9/10-9/12) Increase 3 days (9/12-9/15) 4 C/D Stable 4 days (9/15-9/19) Decrease 6 days (9/19-9/25) Increase 14 days (9/25-10/9) 3 C/D |
| 14-day incidence | HIGH (80 avg. daily cases*) |
| 14-day slope | GROWTH +2.9 cases per day |
| Peak 14-day incidence | 107 avg. daily cases 4/30/2020 |

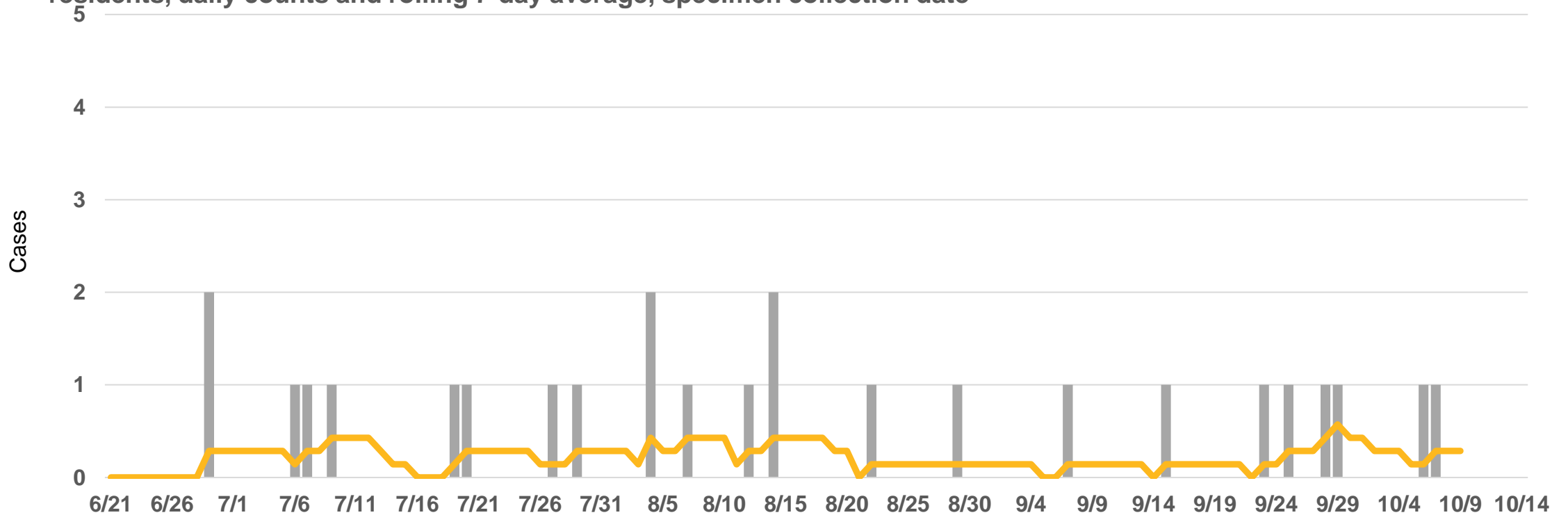
Daily COVID-19 cases with known specimen report date and race/ethnicity information. Approximately 30% of cases used to calculate 14-day incidence are missing race/ethnicity information, therefore the reported 14-day incidence represents an undercount of true incidence. Daily counts for most recent dates 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.

Native American/Alaska Native, non-Latinx case incidence is low and stable.



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| Recent Trend | Cases at low incidence for >28 days. 97 cumulative cases. |
| 14-day incidence | 0.3 avg. daily cases* |
| 14-day slope | +0.0 cases per day |
| Peak 14-day incidence | 2 avg. daily cases 5/5/2020 |

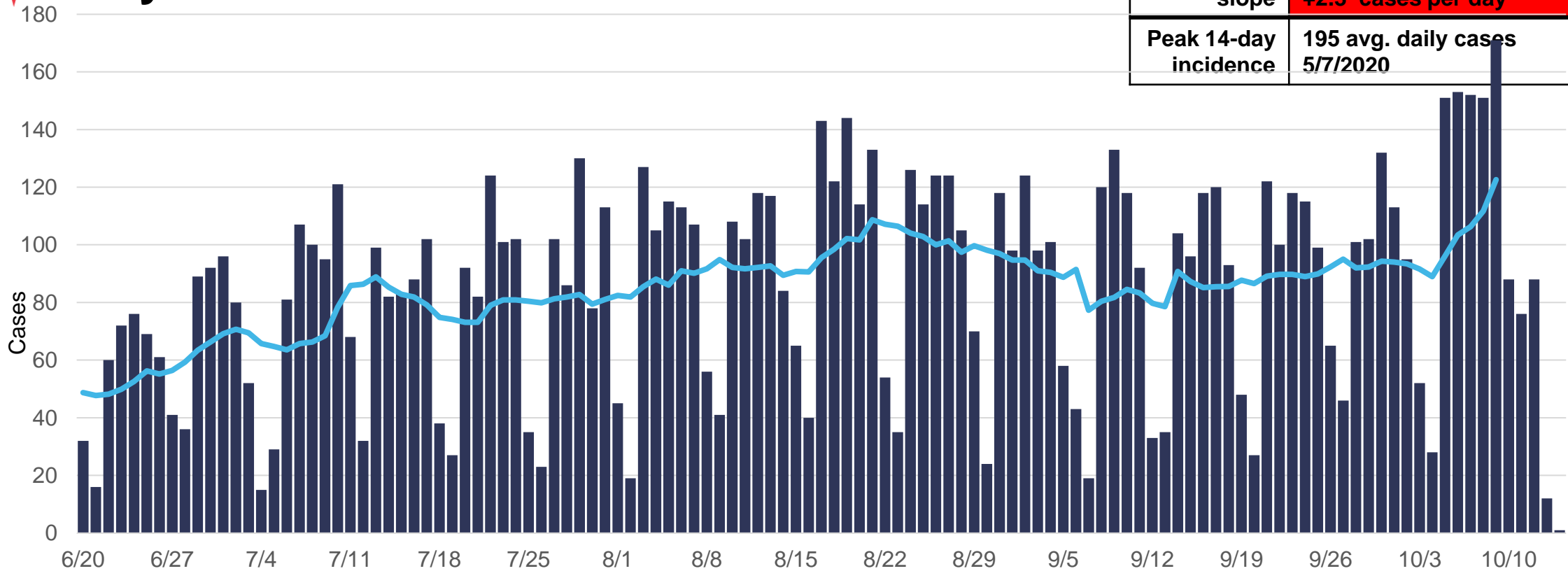
COVID-19 cases among Native American/Alaska Native, non-Latinx residents, daily counts and rolling 7-day average, specimen collection date



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. Due to the citywide population size of 8,086, gating ranks are not applied here.

18-29 year old case incidence is persistently high and growing. Cases have been increasing for 26 of the last 29 days.

COVID-19 cases among 18-29 year olds, daily counts and rolling 7-day average, specimen date



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| Recent Trend | Increase 21 days (9/10-10/1) 1C/D Stable 3 days (10/1-10/4) Increase 5 days (10/4 -10/9) 7 C/D |
| 14-day Incidence | HIGH (108 avg. daily cases*) |
| 14-day slope | Growth +2.3 cases per day |
| Peak 14-day incidence | 195 avg. daily cases 5/7/2020 |

Daily COVID-19 cases with known specimen report date and race/ethnicity information. 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.

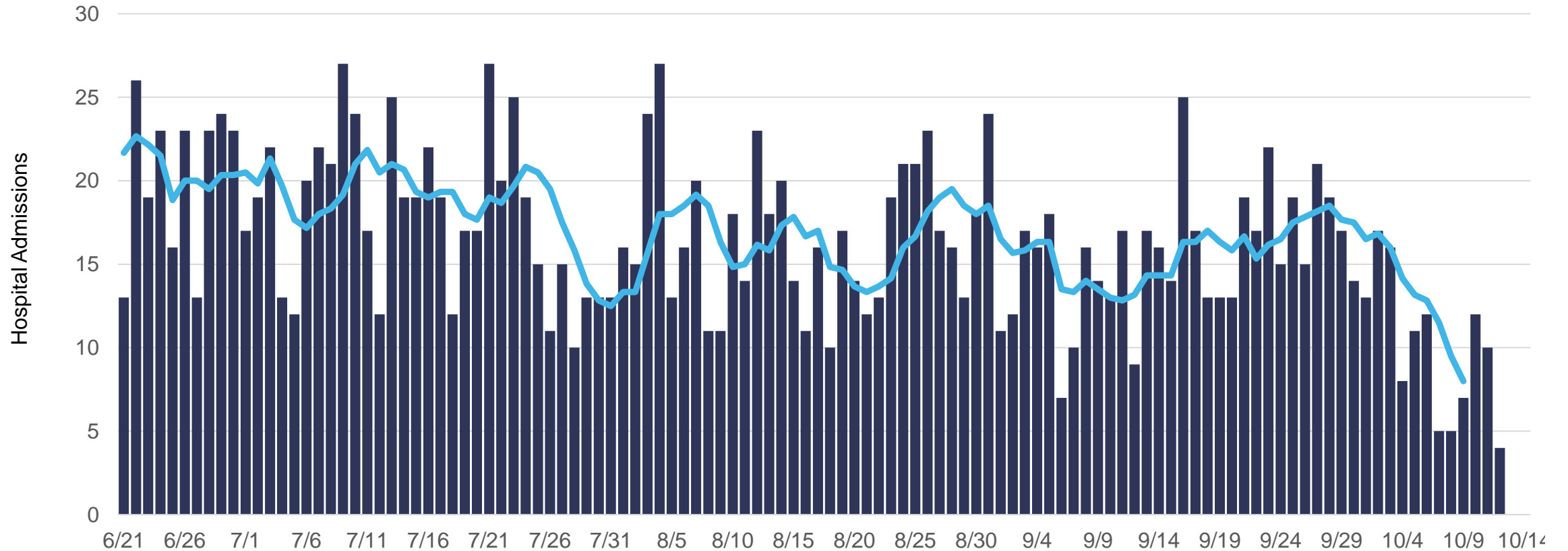


COVID-19 Severe Outcomes

Daily COVID-19 hospital admissions data are unreliable for last 14 days

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| Recent Trend | <19 admissions per day for 30 days |
| Peak 7-day rolling average | 173 avg. daily admissions 4/12/2020 |

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

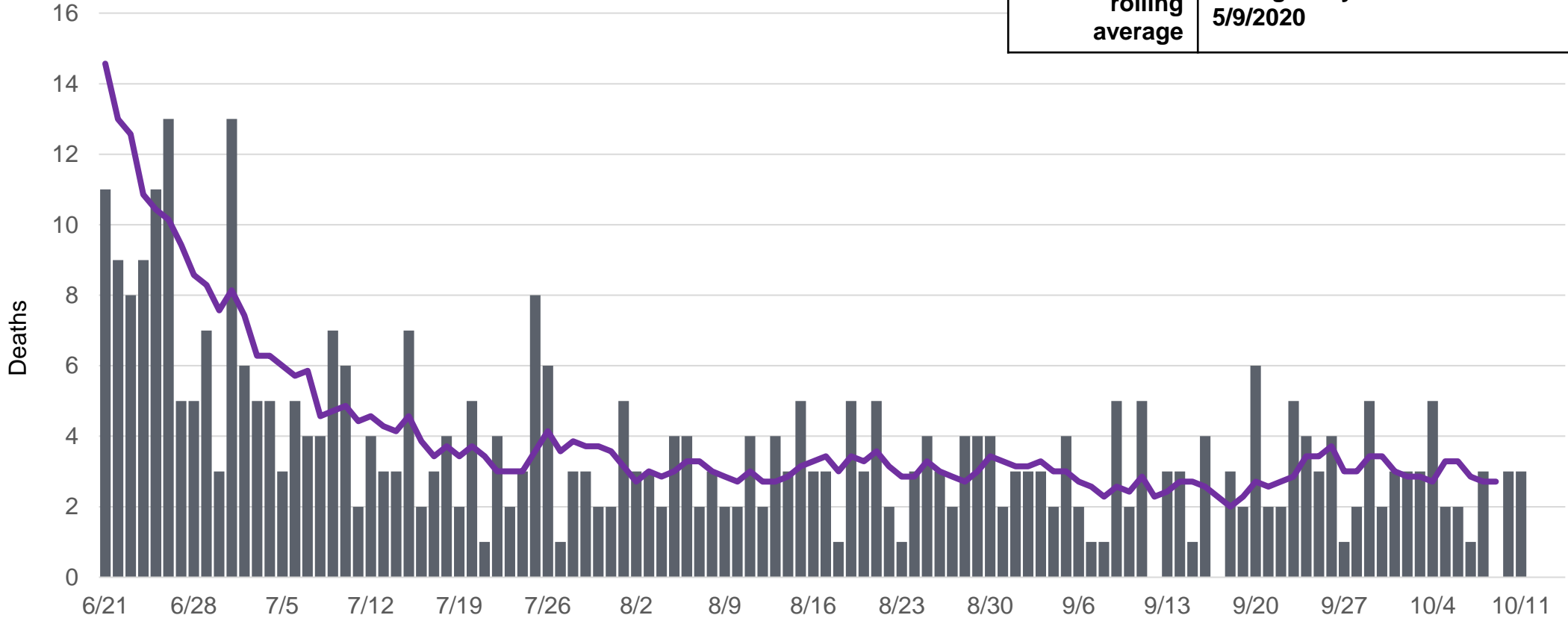


Hospitalizations are reported to CDPH by hospitals into I-NEDSS and ESSENCE and self-reported by patients via an online survey. Daily counts for most recent dates displayed are likely incomplete. Cases who are not indicated to have been hospitalized across any of the three data sources are assumed to 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.

COVID-19 deaths are stable at 2 to 4 deaths per day.



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



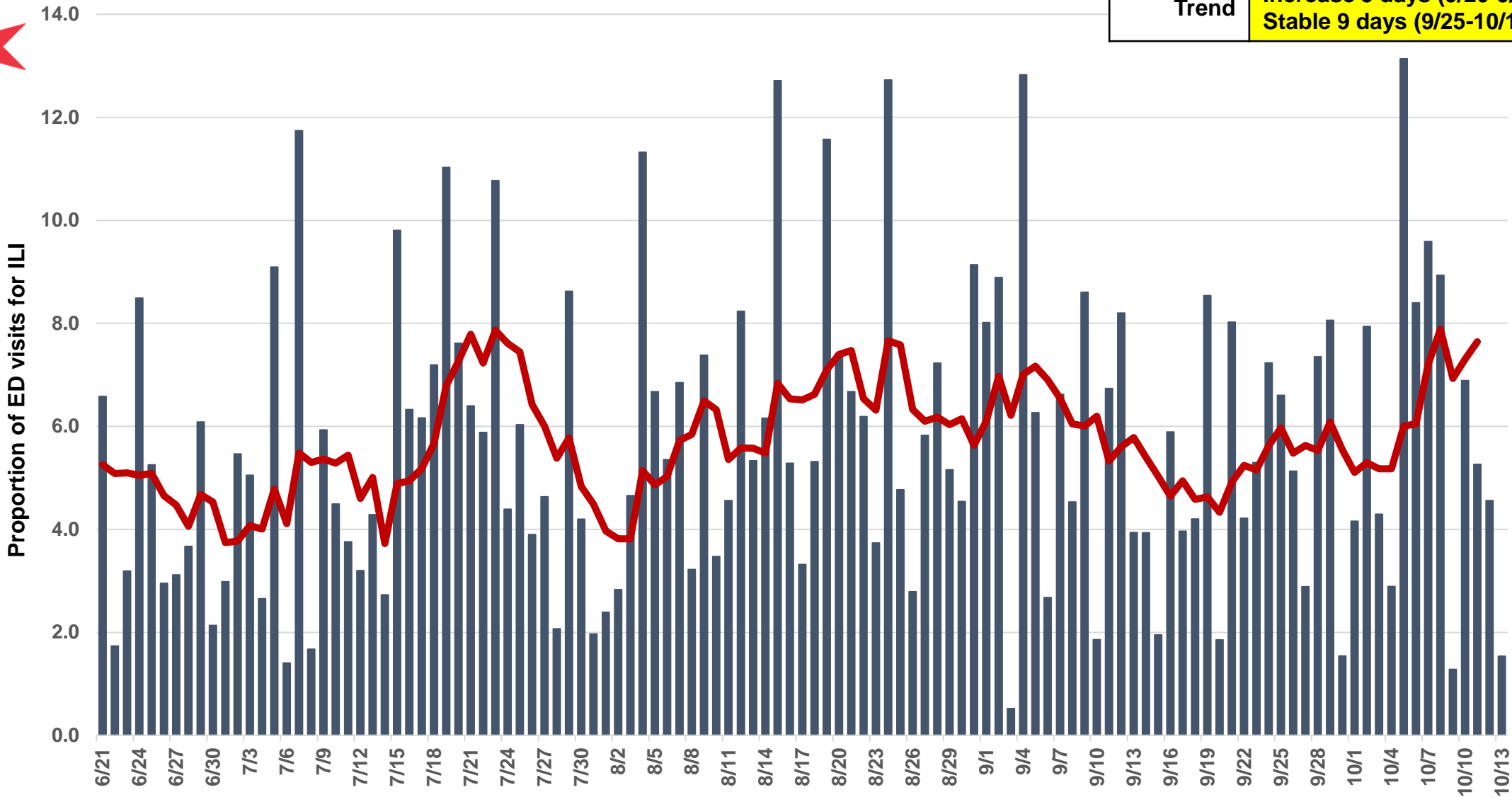
Daily COVID-19 deaths reported for Chicago residents with known death date. Data source: INEDSS. Daily counts for most recent dates displayed are likely incomplete.



Emergency Department Visits

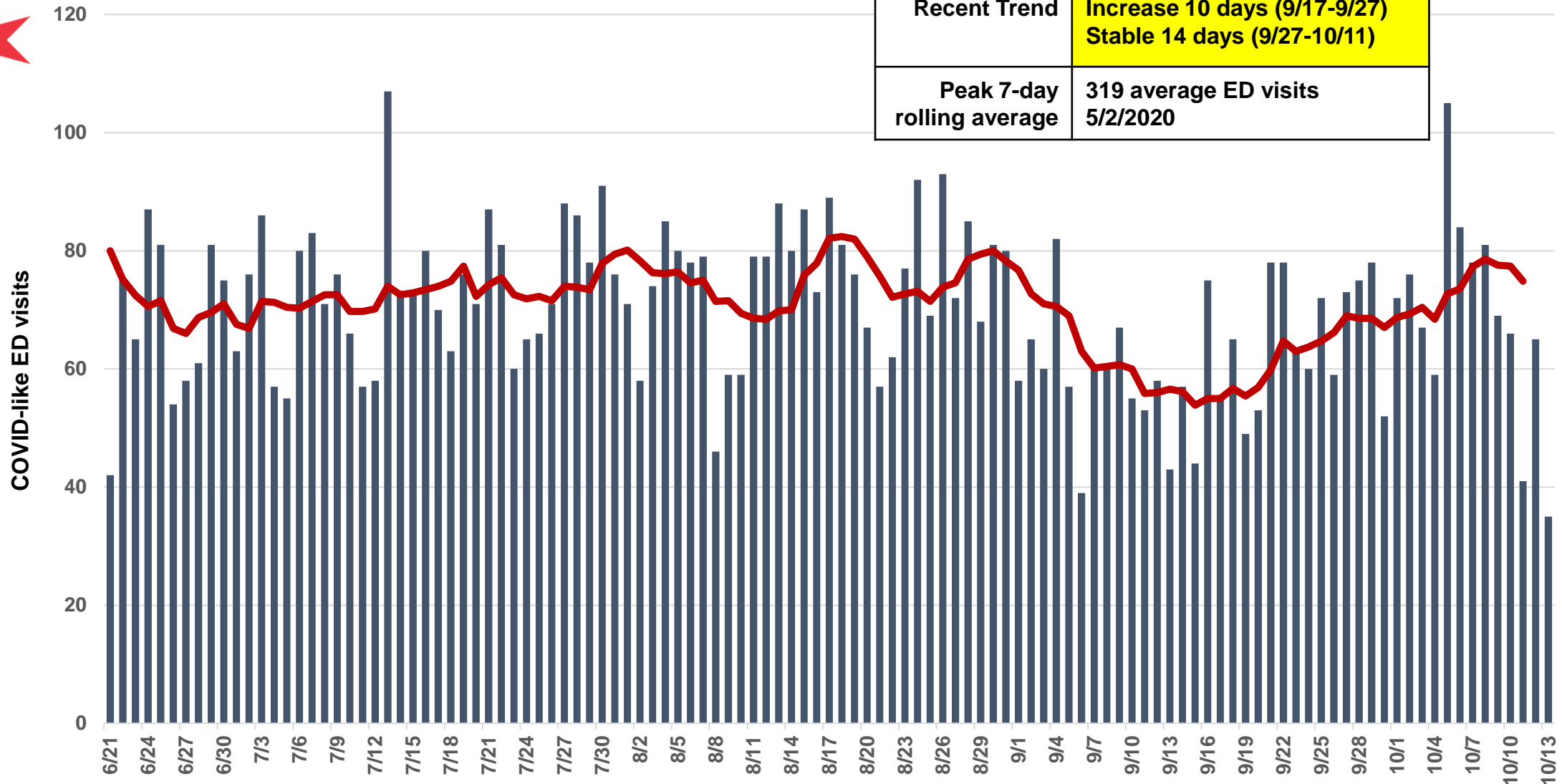
Proportion of ED visits for influenza-like illnesses has been stable for 9 days after increasing for 5 days.

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| Recent Trend | Decrease 15 days (9/12-9/20) |
| | Increase 5 days (9/20-9/25) |
| | Stable 9 days (9/25-10/11) |



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 stable for 14 days after increasing for 10 days.

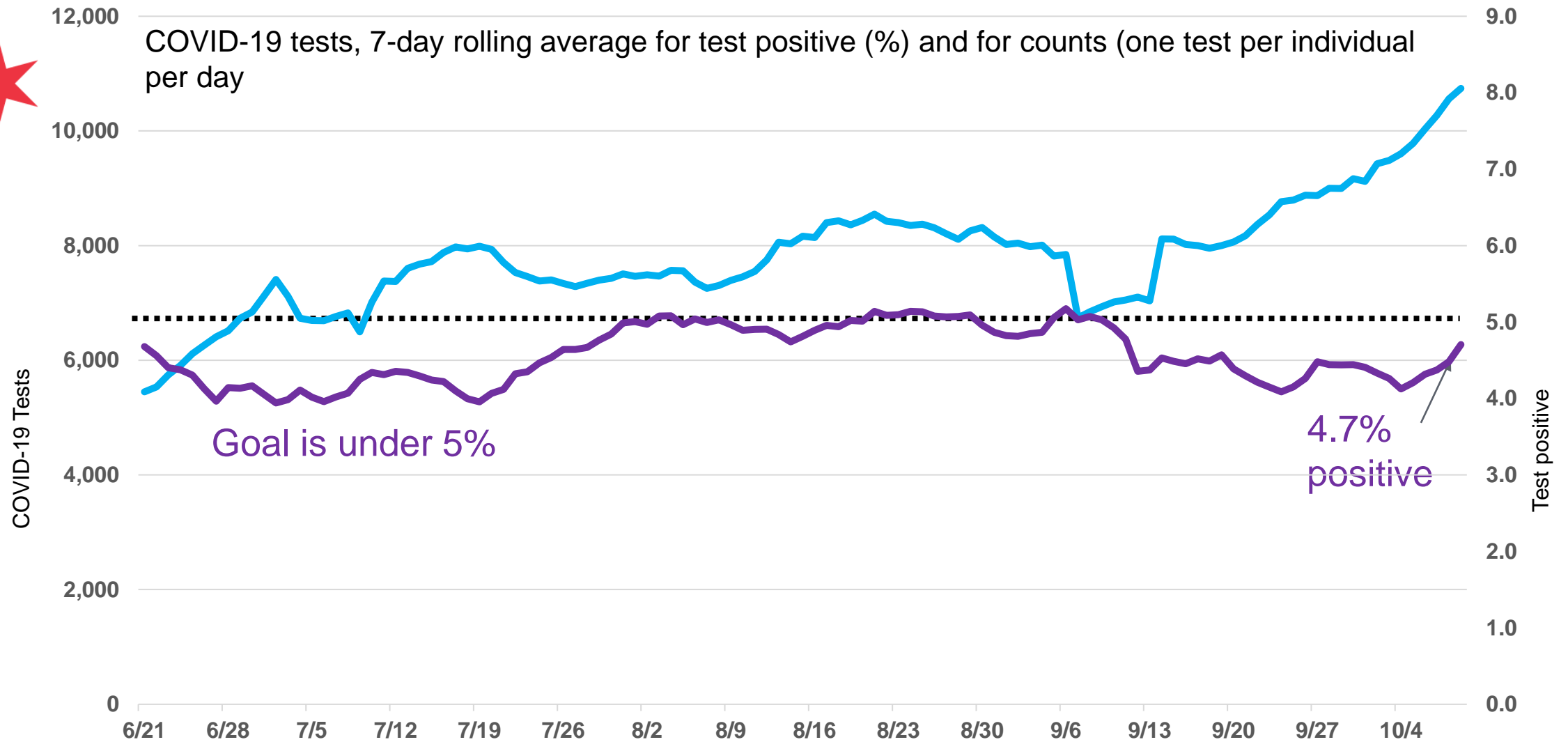


Percentage of all emergency department visits reported with COVID-like symptoms among Chicago residents.
Data Source: Illinois Hospital Emergency Departments reporting to CDPH through the National Syndromic Surveillance Project.



Test Positivity and Person Positivity

Test positivity is 4.7%. Testing is at an all-time high.



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.

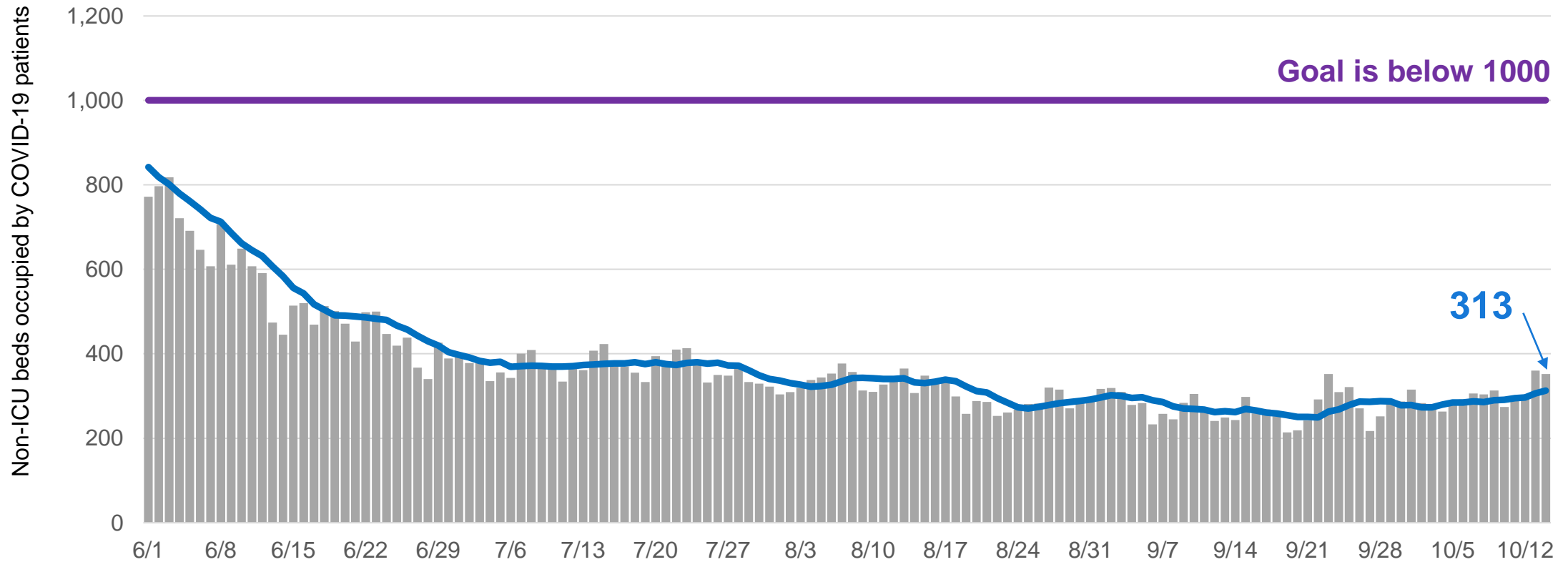


Hospital System Capacity

Non-ICU bed occupancy adequate: occupancy has increased by 25% since September 22

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| Peak 7-day rolling average | 1211 avg. occupied non-ICU beds 5/4/2020 |
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COVID-19 acute/non-ICU beds occupied, daily counts, 7 day average and reopening threshold, daily occupancy census



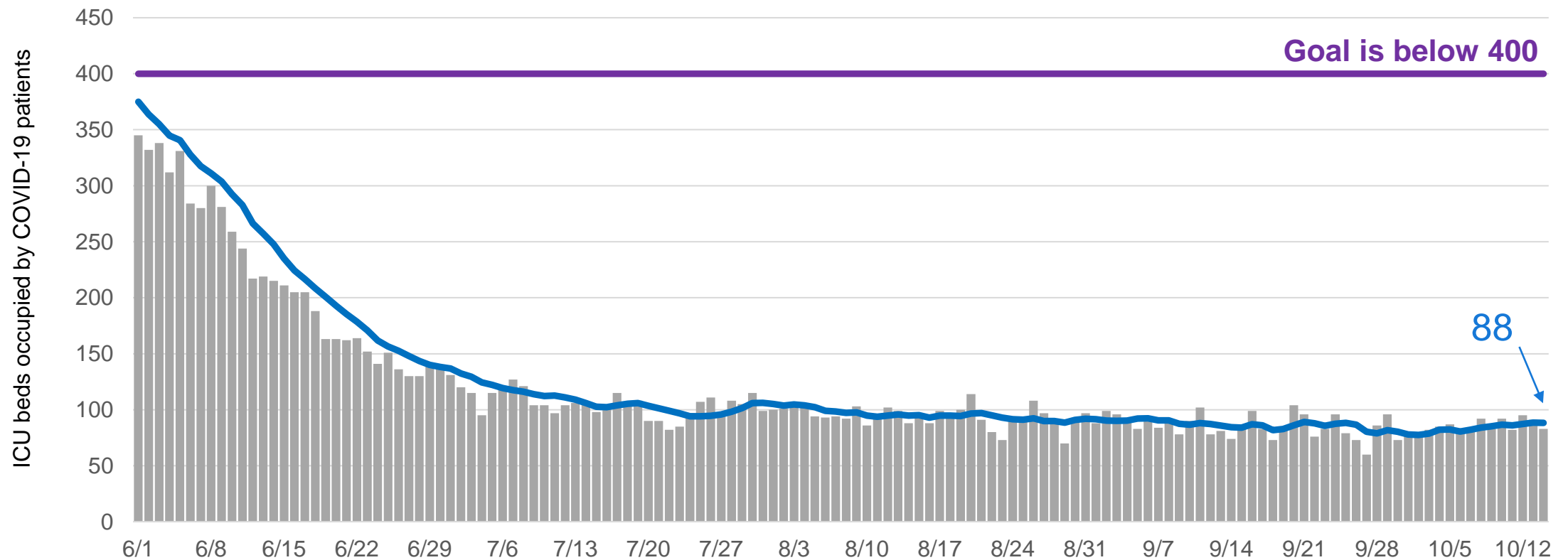
Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning April 3 (acute non-ICU occupancy). Acute non-ICU bed counts include burn, emergency department, med/surg, other, pediatrics and psychiatry beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes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

ICU capacity adequate: <100 ICU beds occupied by patients with COVID-19.



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| Peak 7-day rolling average | 501 avg. occupied ICU beds 4/30/2020 |
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COVID-19 ICU beds occupied, daily counts, 7 day average and progress threshold, daily occupancy census



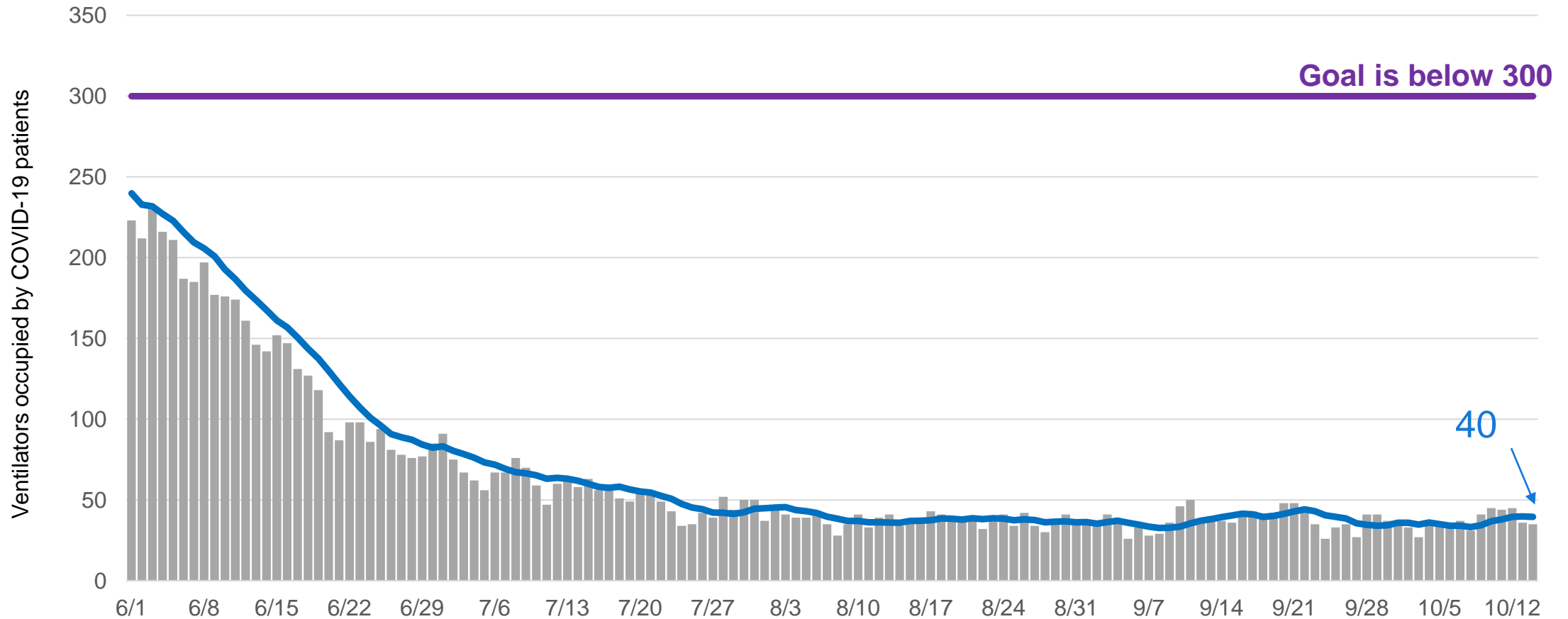
Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning March 19. ICU bed count includes all adult and pediatric ICU beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases. Beginning 4/24/2020, the definition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

Ventilator capacity adequate: <75 patients with COVID-19 on ventilators.



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

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| Peak 7-day rolling average | 344 avg. ventilators in use 5/2/2020 |
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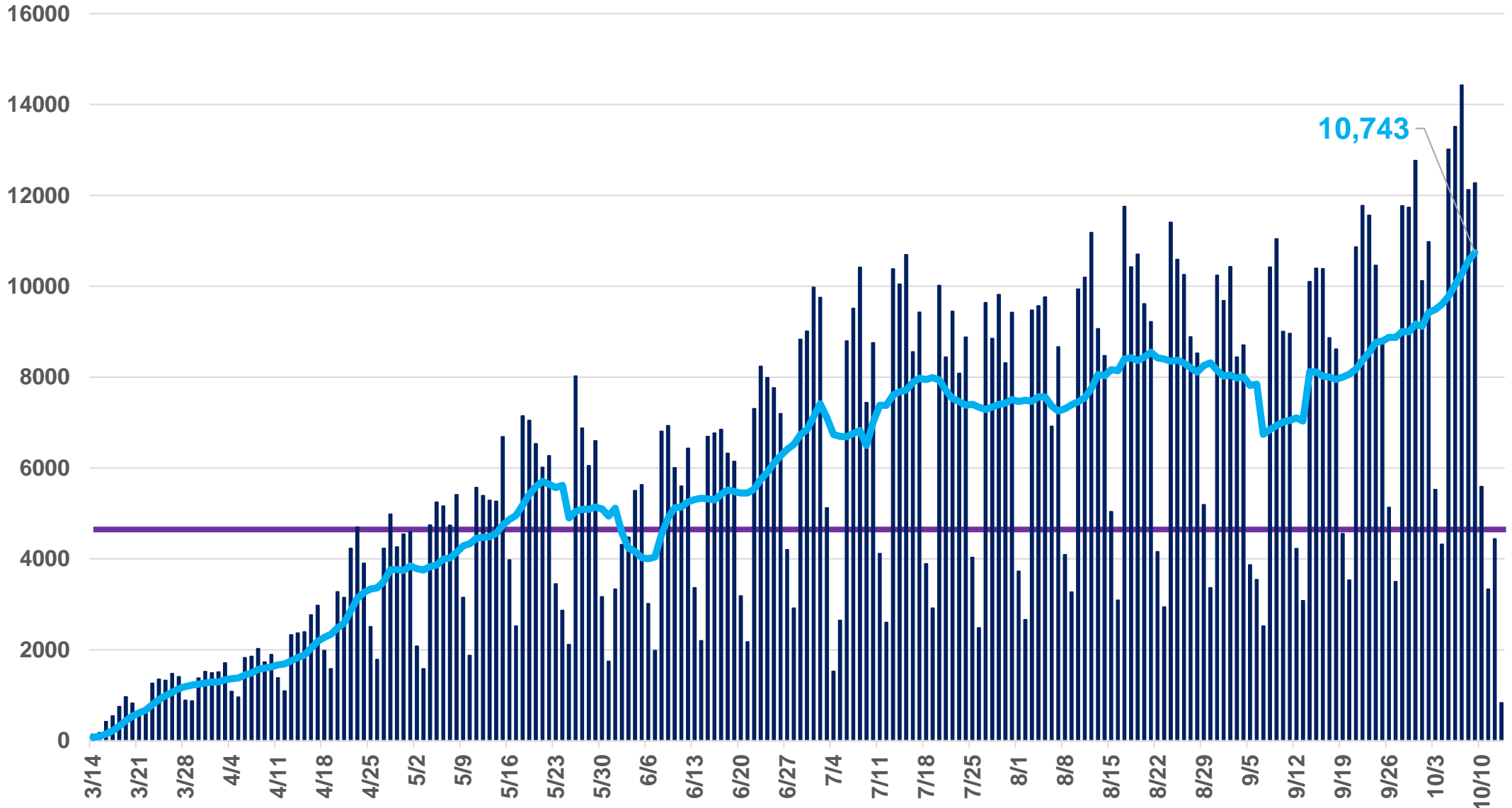


Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning March 19. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases. Beginning 4/24/2020, ventilator counts include all full-functioning mechanical ventilators, BiPAP, anesthesia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



Diagnostic Testing Capacity

COVID-19 testing above 4,500 tests per day for 116 straight days. Testing up 40% since Sept 7th.



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.



Case Investigation & Contact Tracing Response

Gating criteria being updated based on new data system implementation