



COVID-19 DATA IN CHICAGO

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KEY COVID INDICATORS

the number of cases per 100,000 population

number of COVID-related deaths per 100,000 population

percentage of ICU beds that are currently vacant (<20% is dangerous)

percentage of Total COVID Tests conducted that come back positive **Case Rate**

Death Rate

ICU Bed Capacity

Test Positivity Rate

POSITIVITY RATE (*as of* 9/9/2020)

LOW

New York (.9%) Vermont (.3%) Maine (.5%)

MEDIUM

Illinois (4.2%) Ohio (4.5%) California (4.0%)

HIGH

Alabama (255.4%) North Dakota, (19.6%) South Dakota (18.7%) Kansas (18.4%)

- Epidemiologists agree that an increasing positivity rate may be an important marker of a COVID resurgence in any community.
- The WHO-recommended positivity rate for reopening is 5% or less for a period of 14 days.
- If Chicago's positivity rate increases above 8%, the city will have to move back a phase.

CHICAGO'S FREE COVID-19 DASHBOARD

https://www.chicago.gov/city/en/sites/covid-19/home/covid-dashboard.html

Figure 1: Positivity Rate

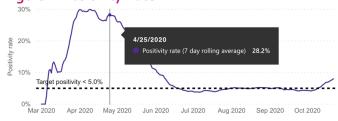


Figure 2: Citywide Case Rate

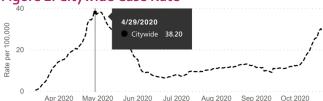
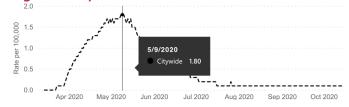


Figure 2: Citywide Death Rate



INTERPRETATION (AS OF 10/29/2020)

- Figure 1: April 25 was the peak test positivity rate in the city (7-day rolling average). We've maintained roughly around a 5% positivity rate since June until about mid-October.
- Figure 2: The peak case rates occur on April 29th at 38.2 and May 3rd at 38.3 cases per 100,000 population. There is a steady decline thereafter.
- Figure 3: The peak death rate occurs on May 8-10th at 1.9 deaths per 100,000 population. By visiting the website one can also see some smaller, surrounding peaks that drop sharply after May 17th, following the peak case rates by almost exactly two weeks.

COVID RESURGENCE INDICATORS

https://www.dph.illinois.gov/regionmetrics?regionID=11

- Public health professionals are monitoring for key indicators that identify early but significant increases in COVID Transmission.
- Three consecutive day greater than 8% positivity rate (7-day rolling average), or
- Sustained 7 day increase in hospital admissions for COVID-like illness,
- Reduction in hospital capacity threatening surge capabilities (IUC Bed capacity under 20%)