

DANE COUNTY COVID-19 DATA

August 17, 2020 *Data from August 1—August 14*

We provide these data to help everyone understand how decisions are being made to loosen or tighten some restrictions as we continue to respond to COVID-19. To establish these metrics, we conducted a deep review of existing plans, emerging scientific literature on COVID-19 spread, regional data, and national data.

In addition to the publicly facing nine metrics, we are monitoring process measures to help us understand where there may be gaps in the system. These process measures look at transmission dynamics (the “R” value of our epidemic), lab result reporting timeliness, outbreak monitoring within priority populations, capacity for supporting isolation/quarantine, and contact attempts of both cases and contacts. The table below shows the measures we’re using for a phased reopening of Dane County, and our current status. **Stay tuned on Thursday for a full weekly snapshot!** See our [last blog post](#) for more information about our new publishing schedule.

Domain	Measure	Dane County Status	Southern Region Status
Epidemiology: We must have few enough cases of COVID-19 to be swiftly contained. This is an important parameter, and our thresholds for phased reopening are set at levels that align with the progression of our epidemic locally—a lower positivity rate than what is seen at the state level and a low number of cases per 100,000 residents.	1. Below a threshold of 5% for positive tests as a percent of total tests averaged across most recent 14 day period	1.9%	2.8%
	2. Below a low incidence threshold of 0.71 new cases per 100,000 people per day (this is below 4 cases per day for Dane County and 8 cases per day for the Southern region)	47	121
Healthcare: A sustained, high testing level is a critical metric, as testing is how we detect active infection and prevent transmission of COVID-19. Alongside testing to monitor the course of the epidemic, it is vital that healthcare systems are equipped to manage patient care in the context of a surge caused by COVID-19 as well as protect healthcare workers from infection.	3. Testing supplies and staff facilitate adequate testing for disease control and surveillance (goal of over 800 per day for Dane County and over 1,790 per day for the Southern region)	2530	4258
	4. Percent of hospitals reporting robust testing in place for healthcare workers in the past week*	100%	100%
	5. Percent of hospitals reporting ability to treat all cases without crisis care * <ul style="list-style-type: none"> • Facility use • Staffing • Critical supply 	100%	100%
	6. Decreasing or stable numbers of infected healthcare workers	X	X
	7. All positive cases be contacted quickly to facilitate rapid isolation and quarantine for disease control	83%	Not tracked at regional level
Public Health: Our ability to identify and isolate infections is critical to prevent further spread. Through rapid contact tracing, we can identify and notify contacts who have been exposed. Through education and isolation assistance, we can help keep people who test positive and their contacts separated from others for the duration of the infectious period, and lower the risk of spread in the community. Monitoring community spread—the percentage of cases with an unidentified risk factor—is how we can gain a sense of the scale of undetected disease spread.	8. Proportion of new cases over the most recent 14 day period who don't know where they could have gotten COVID	41%	37%
	9. Downward or stable trajectory of COVID-like syndromic cases reported within a 14 days period	✓	✓

* At the time of this update, 1 hospital in Dane County (out of 7 total) and 1 hospital in the Southern Region (out of 31 total) had not provided complete data. 100% of hospitals providing complete data met measures 4 and 5.