Actions to Combat a Resurgence of COVID-19

From the onset of the COVID-19 pandemic, Illinois followed the science and listened to public health experts by putting mitigations in place and then deliberately and gradually lifting many of them. As other states see their cases and positivity rates surge, Illinois has one of the lowest positivity rates in the nation because we let public health guide our decisions.

Even so, the virus is still out there and as mitigations are lifted, it is likely that cases will rise. The administration is committed to being fully prepared for any resurgence and transparent with the public as to what that planning looks like. Just as Illinois took a gradual and regional approach to safely reopen our state, Governor Pritzker and the Illinois Department of Public Health have put forward a deliberate plan that will utilize several layers of mitigations to combat a resurgence of COVID-19 and prevent uncontrollable spread.

This plan recognizes that the state is in its strongest position to combat the virus since the pandemic began, with a robust testing operation regularly yielding more than 30,000 tests per day, expanded tracing operations with 1,450 contact tracers, a growing stockpile of personal protective equipment, and hospital surge capacity. The plan also accounts for months of additional data and research as public health experts reach a greater scientific understanding of this virus and how it spreads.

This updated guidance establishes a menu of mitigation options organized by risk level. The following health metrics will be used to determine when the spread of the virus in a region requires additional mitigations:

What Could Cause a Region to Become More Restrictive?

- Sustained increase in 7-day rolling average (7 out of 10 days) in the positivity rate

    AND ONE OF THE FOLLOWING:

- Sustained 7-day increase in hospital admissions for a COVID-19 like illness

- Reduction in hospital capacity threatening surge capabilities (ICU capacity or medical/surgical beds under 20%)

OR

- Three consecutive days averaging greater than or equal to 8% positivity rate

Mitigations will be applied on a regional basis based on the Emergency Medical Services (EMS) Regions that have traditionally guided IDPH in its statewide public health work. Expanding to 11 regions allows for a more granular approach in this phase of the response to COVID-19. The new regions follow county lines to account for counties that are in more than one region of the EMS system. The new regions are as follows:

1. **NORTH:** Boone, Carroll, DeKalb, Jo Daviess, Lee, Ogle, Stephenson, Whiteside, Winnebago

2. **NORTH-CENTRAL:** Bureau, Fulton, Grundy, Henderson, Henry, Kendall, Knox, La Salle, Livingston, Marshall, McDonough, McLean, Mercer, Peoria, Putnam, Rock Island, Stark, Tazewell, Warren, Woodford

3. **WEST-CENTRAL:** Adams, Brown, Calhoun, Cass, Christian, Greene, Hancock, Jersey, Logan, Macoupin, Mason, Mason, Menard, Montgomery, Morgan, Pike, Sangamon, Schuyler, Scott

4. **METRO EAST:** Bond, Clinton, Madison, Monroe, Randolph, St. Clair, Washington

5. **SOUTHERN:** Alexander, Edwards, Franklin, Gallatin, Hamilton, Hardin, Jackson, Jefferson, Johnson, Marion, Massac, Perry, Pope, Pulaski, Saline, Union, Wabash, Wayne, White, Williamson

6. **EAST-CENTRAL:** Champaign, Clark, Clay, Coles, Crawford, Cumberland, De Witt, Douglas, Edgar, Effingham, Fayette, Ford, Iroquois, Jasper, Lawrence, Macon, Moultrie, Piatt, Richland, Shelby, Vermillion

7. **SOUTH SUBURBAN:** Kankakee, Will

8. **WEST SUBURBAN:** DuPage, Kane

9. **NORTH SUBURBAN:** Lake, McHenry

10. **SUBURBAN COOK:** Suburban Cook

11. **CHICAGO:** City of Chicago

All public health criteria included in this document are subject to change. As research and data on this novel coronavirus continue to develop, this plan can and will be updated to reflect the latest science and data.

Once a region meets the resurgence criteria, the following tiered menu of mitigation options will be considered. If sustained increases in health metrics continue unabated, further mitigations could be added from additional tiers.

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Triggers: *(1) sustained increase in positivity rate <u>and</u> A) sustained increase in hospital admissions <u>or</u> B) reduction in hospital capacity threatening surge capabilities; <u>or</u> (2) ≥ 8% positivity rate over three consecutive days*

SETTING	TIER 1	TIER 2	TIER 3
Bars and restaurants	Reduce indoor dining capacity and suspend indoor bar service	Suspend indoor dining and bar service	Suspend in-person dining; takeout only
Hospitals	Reduce elective surgeries and procedures; limit visitation at hospitals; implement twice daily bed-reporting	Suspend elective surgeries and procedures; implement surge capacity; assess need to open Alternate Care Facility	Open Alternate Care Facility
Meetings, social events and religious gatherings	Additional limits on gatherings and room capacity	Greater limits on gatherings and room capacity	Strictest limit to gatherings and room capacity
Offices	Institute remote work for high risk individuals; continued emphasis on telework for as many workers as possible	Reduce office capacity with recommendations to resume remote work where possible	Institute remote work for all non-essential workers
Organized group recreational activities & gyms* (fitness centers, sports, etc.)	Reduce indoor capacity	Suspend organized indoor recreational activities	Suspend organized indoor and outdoor recreational activities
Retail*	Reduce in-person capacity	Suspend in-person non-essential retail; online and curbside pick-up available for all	Suspend all non-essential retail; only essential retail open (i.e. grocery stores, pharmacies)
Salons and personal care*	Institute temporary location shutdown tied to outbreak	Institute temporary location shutdown tied to outbreak with possible broader mitigations	Suspend salon and personal care operations

* Optional measures based on a region's on-the-ground condition. This list is not exhaustive and other industries may be added if indicated by the data.