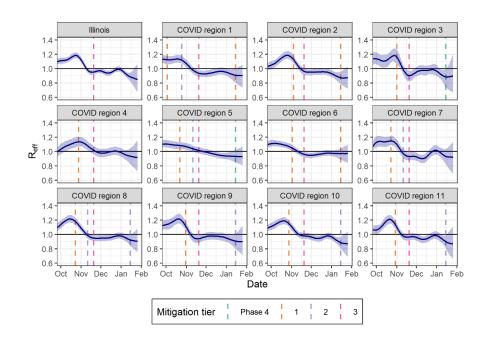
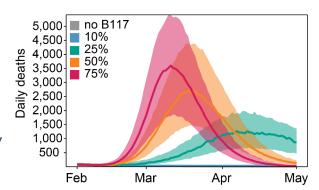


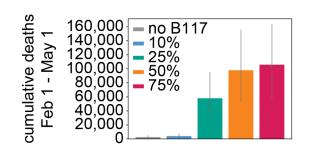
- In all regions, R<sub>eff</sub> was at or below 1 as of January 27, indicating that transmission was steady or declining. However, the hospital census in regions 1, 4, and 5 suggest recent upticks in transmission.
- Rapid distribution of first vaccine doses to older age groups is critical to reduce mortality and mitigate future spread. Even with imperfect efficacy, primary doses reduce disease severity and probably reduce transmission.



## Northwestern University

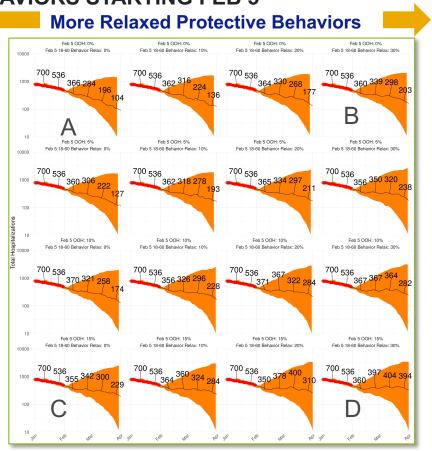
- $R_t$  is currently (as of Feb 3) still < 1 in all Regions.
- We modeled hypothetical scenarios with different starting prevalence of B.1.1.7 under current transmission conditions and no new mitigations. We used current best estimates that the B.1.1.7 variant has increased transmissibility (50%) and increased hospitalization and lethality (50%).
- If even 25% of current COVID-19 infections are caused by the B.1.1.7 variant, there will be an **enormous number of deaths** between Feb 1 and May 1, 2021.
- Our scenarios do not yet include vaccination activities. Continued vaccination data and timeline are urgently needed for models to incorporate vaccine impacts into forecasts.
- Only 2.02% of the IL population is currently vaccinated. Urgent vaccination scale up is critical.
- If B.1.1.7 becomes more predominant locally before we reach herd immunity, immediate move back to Tier 3 or Stay-at-Home will likely be necessary.
- Sentinel surveillance can detect trends up to 10 days in advance of hospital admissions. Quality surveillance is critical to quickly identify areas with increasing transmission.





## Out-Of-Household Contacts ncreasing

## COMBINED EFFECTS OF EASING RESTRICTIONS AND RELAXING PROTECTIVE BEHAVIORS STARTING FEB 5



- We show here the CityCOVID median projection (black line) and uncertainty ranges (orange) for total COVID-related hospitalizations in Chicago, plotted against total hospitalization data up to 2/1/21 (red dots), with changes starting 2/5/21
  - A: No easing and no relaxed behavior case
  - D: Maximum easing and maximum relaxed behavior case
- We studied the combined effects of easing restrictions and relaxing protective behaviors
  - -We observe an overall decline of median hospitalizations as we head towards March in all cases of easing, when protective behaviors are not relaxed by more than 20%
  - –Median hospitalizations may increase due to easing, when protective behaviors are relaxed by more than 30%
- This output does not include any effects of vaccination, which, in the longer term would likely reduce hospitalizations
- This output does not include any effects of the B.1.1.7 variant

