

Summary of The Virginia Department of Health COVID-19 Pandemic Metrics

Compiled by Fairfax County Health Department

Overview

To guide decisions about community mitigation measures needed to reduce the impact of COVID-19 on Virginians, VDH has developed pandemic metrics that will be utilized to evaluate both **disease burden** and **disease trends** and assess the extent of viral transmission within each region of Virginia. Burden is determined based on whether a metric has exceeded an established threshold of concern or “flag” and trend is evaluated as to whether the metric is increasing, holding steady, or decreasing in the right direction.

Methodology

For each pandemic metric (see below), a 7-day moving average is calculated. VDH has established criteria level (e.g., vital, major, minor) for each of the metrics. The metrics are evaluated to determine composite burden and trend scores. Based on the combination of those scores, levels of transmission (**none, low, moderate, substantial**) will be assigned at the regional (or state) level. While these metrics can be considered individually, the combination of flags for each metric indicates the larger level of concern for a community. Burden and trend information should be interpreted with other data and local/regional information.

Current Status

Northern Virginia is currently experiencing **low** disease burden and a **steady** trend. The overall calculated COVID-19 community transmission extent remains **low**.

The Pandemic Metrics are as follows:

1. COVID-19 case incidence rate
 - Count of new COVID-19 cases per 100,000 population. Thresholds – high, moderate, and low burden.
2. PCR test percent positivity for COVID-19
 - Among COVID-19 PCR test results, the percent that are positive. Thresholds – high and low burden. There is no moderate burden category.
3. Rate of COVID-19 outbreaks
 - Count of COVID-19 outbreaks per 100,000 population. Thresholds – high, moderate, and low burden.
4. Percent of COVID-19 cases among healthcare workers
 - Among all COVID-19 cases, the percent that are healthcare workers. Thresholds – high and low burden. There is no moderate burden category.
5. Rate of emergency department visits for coronavirus-like illness
 - Count of emergency department visits that are for coronavirus-like illness per 100,000 population. Thresholds – high, moderate, and low burden.
6. Rate of confirmed COVID-19 intensive care unit hospitalizations
 - Count of confirmed COVID-19 cases that been hospitalized in the intensive care unit per 100,000 population. Thresholds – high and low. There is no moderate burden category.

7. Percent of hospital beds currently occupied
 - Among all hospital beds, the percent that are currently occupied by a patient (regardless of reason for hospitalization). Thresholds – high and low burden. There is no moderate burden category.
8. Number of hospitals reporting trouble acquiring personal protective equipment
 - Count of hospitals reporting to the Virginia Department of Health that they are experiencing trouble acquiring personal protective equipment. The threshold between high and low burden is one hospital. There is no moderate burden category.

Virginia Department of Health Interim Guidance for Reinstating Community Mitigation Measures in K-12 School Settings

- I. Considerations for Schools in Regions Experiencing **NO** Community Transmission
 - Maintain communication with local health departments and maintain awareness of the extent of COVID-19 transmission in the community.
 - Maintain communication plans with staff, parents, and students regarding changes in this status.
 - Maintain readiness to implement alterations in programming and mitigation strategies if COVID-19 transmission increases in the community.
 - Consider applicable Phase III Guidance for Virginia Schools for recommendations on the scope of programming and mitigation strategies to prevent future transmission. Remote learning exceptions and teleworking should be options for students and staff who are at high risk of severe illness (as defined by the CDC).
 - Promote public messaging regarding COVID-19 mitigation.
- II. Considerations for Schools in Regions Experiencing **LOW** Community Transmission
 - Consider Phase III Guidance for Virginia Schools for recommendations on the scope of programming and mitigation strategies. Priority should be given to providing in-person instruction to the most vulnerable students (e.g., students with disabilities, preschool through third grade students, English learners).
 - Remote learning exceptions and teleworking should be options for students and staff who are at high risk of severe illness (as defined by the CDC).
 - Promote public messaging regarding COVID-19 mitigation.
- III. Considerations for Schools in Regions Experiencing **MODERATE** Community Transmission
 - Consider the **Phase II Guidance for Virginia Schools** for recommendations on the scope of programming and mitigation strategies, including:
 - Prioritize in-person instruction for the most vulnerable students (e.g., students with disabilities, preschool through third grade students, English learners).
 - Provide necessary services to vulnerable populations (e.g., children with special needs) and other children at most risk from missing in-person instruction.

- Consider remote learning options for older students.
- Remote learning exceptions and teleworking should be options for students and staff who are at high risk of severe illness (as defined by the CDC).
- Eliminate or limit extracurricular activities that are not for the purpose of providing childcare.
- Cancel social activities and gatherings that are not part of providing regular school services.

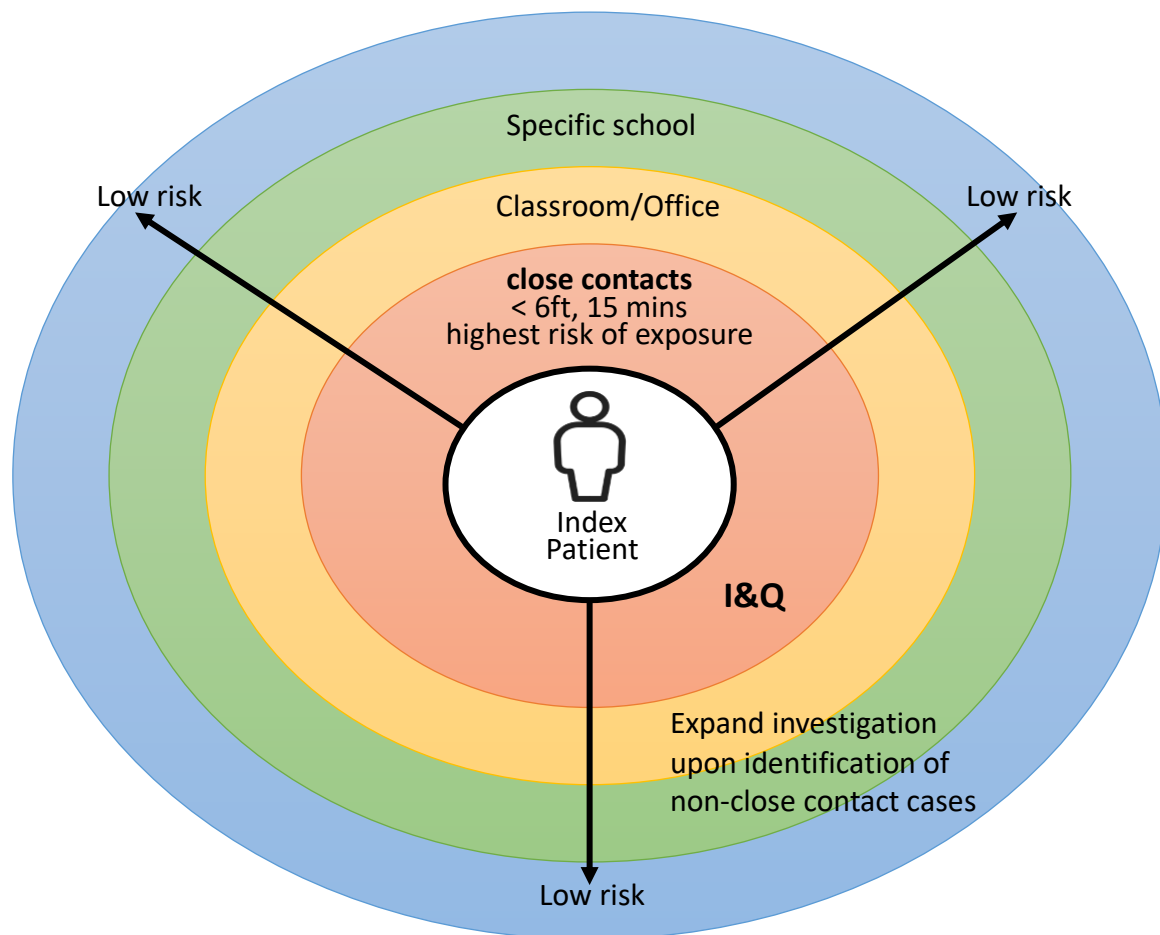
IV. Considerations for Schools in Regions Experiencing **SUBSTANTIAL** Community Transmission

- Consider Phase II and Phase I Guidance for Virginia Schools for recommendations on the scope of programming and mitigation strategies, including:
 - Limit in-person instruction to the most vulnerable students (e.g., students with disabilities, preschool through third grade students, English learners).
 - Provide necessary services to vulnerable populations (e.g., children with special needs and at most risk from missing in-person instruction.)
 - Remote learning exceptions and teleworking should be options for students and staff who are at high risk of severe illness (as defined by the CDC).
 - Remote learning should be considered as the primary method of instruction, as described in Phase I Guidance for Virginia Schools.
 - Eliminate or limit extracurricular activities that are not for the purpose of providing childcare.
 - Cancel social activities and gatherings that are not part of providing regular school services.

Public messaging

- Wear a cloth face covering while in public places and when around other individuals who are not part of your household.
- Follow recommendations for physical distancing when attending social gatherings or while in public spaces.
- Encourage students and teachers to avoid large gatherings and other events or activities that may have high potential for COVID-19 transmission
- Limit social gatherings, especially indoors, and follow recommendations for physical distancing.
- Limit mixing between groups at schools to the extent possible (this may include not participating in extracurricular activities or other social activities outside of school).
- Limit social gatherings to 50 individuals or fewer, especially indoors, and follow recommendations for physical distancing.
- Protect high-risk individuals by avoiding public events, wearing cloth face coverings in public, and practicing proper hand hygiene and respiratory etiquette.

Fairfax County Health Department Contact Investigation “Ring Approach”



Considerations for Classroom(s) or Specific School Closure

- Evidence of transmission beyond close contacts (multiple groups, grades or classes throughout the school).
- Recommended timeframe for suspension of school operations is 14 days.
- After 14 days have passed, the school building could reopen for students and staff who have no signs or symptoms of COVID-19 and who have not had recent close contact with someone with COVID-19.