STATE REPORT 11.22.2020 Issue 23



SUMMARY

Iowa is in the red zone for cases, indicating 101 or more new cases per 100,000 population, with the 5th highest rate in the country. Iowa is in the red zone for test positivity, indicating a rate at or above 10.1%, with the 3rd highest rate in the country.
Iowa has seen a decrease in new cases and a decrease in test positivity.

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- The following three counties had the highest number of new cases over the last 3 weeks: 1. Polk County, 2. Linn County, and 3. Scott County. These counties represent 26.8% of new cases in Iowa.
- 100% of all counties in Iowa have moderate or high levels of community transmission (yellow, orange, or red zones), with 99% having high levels of community transmission (red zone).
- During the week of Nov 9 Nov 15, 30% of nursing homes had at least one new resident COVID-19 case, 66% had at least one new staff COVID-19 case, and 10% had at least one new resident COVID-19 death.
- Iowa had 875 new cases per 100,000 population, compared to a national average of 356 per 100,000.
- Between Nov 14 Nov 20, on average, 224 patients with confirmed COVID-19 and 41 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Iowa. This is an increase of 10% in total COVID-19 hospital admissions.

RECOMMENDATIONS

- Referring to the national profiles in the back of the packet, there is aggressive, rapid, and expanding community spread across the country, reaching over 2,000 counties. In states with aggressive mitigation, we are beginning to see the impact of that mitigation despite the cooling weather. We are also seeing stabilization in many European countries that implemented strong public and private mitigation, but preserved schooling. However, in many areas of the country, mitigation efforts are inadequate or too recently implemented to see a significant impact. All states and all counties must flatten the curve to sustain the health system for both COVID and non-COVID emergencies.
- The silent community spread that precedes and continues to drive these surges can only be identified and interrupted through
 proactive, focused testing for both the identification of asymptomatic and pre-symptomatic individuals. This must be combined
 with significant behavior change of all Americans. Ensure masks at all times in public, increase physical distancing through
 significant reduction in capacity in public and private indoor spaces, and ensure every American understands the clear risks of
 ANY family or friend interactions outside of their immediate household indoors without masks.
- Continue with strong Thanksgiving messaging: we need to protect those we are thankful for in our families and communities. Ensure indoor masking around vulnerable family members during any gatherings due to the significant amount of virus circulating and the high rate of asymptomatic and undiagnosed infections among family and community members.
- Encouraged by the steps the Governor is taking to decrease transmission; this is the first week where the rise in cases is less than previous weeks. COVID-related hospitalizations will continue in the coming weeks; however, with increased strong mitigation, cases could decline to the yellow zone within 4 to 5 weeks, like in states that strongly mitigated during the summer surge.
- Target testing and antigen testing to the asymptomatic populations under 35 years. Incentivize testing to those populations.
- With all counties in the red zone for new cases and nearly 70% of nursing homes with at least one positive staff member, mitigation and messaging needs to be further strengthened as other states have done. Effective practices to decrease transmission in public spaces include limiting restaurant indoor capacity to less than 25% and limiting bar hours until cases and test positivity decrease to the yellow zone.
- Ensure compliance with public health orders, including wearing masks.
- Conduct active testing in school for teachers and students where cases are increasing. In accordance with CDC guidelines, masks
 must be worn by students and teachers in K-12 schools. Consider pausing extracurricular school activities, even though athletics
 are not transmission risks, as the surrounding activities are where transmission is occurring.
- Stay vigilant with nursing home staff and residents; nearly 70% of nursing homes have COVID positive staff and 30% have COVID
 positive residents, indicating unmitigated community spread. Ensure all nursing homes, assisted living, and elderly care sites
 have full testing capacity and are isolating positive staff and residents.
- New hospital admissions in Iowa are increasing across all age groups; investigate the rise in new admissions in those under 18 years old.
- Ensure all hospitals are capacitated with updated training on use and timing of effective interventions, contingency staffing plans with appropriate task-shifting, and maximized access to medications and supplies. Ensure ongoing communication with state and federal partners and that hospital reporting on staffing, bed availability, and supplies is maintained to allow triage and assistance. Expansion of telehealth and remote clinical consultation capacity is an important achievement and should be established across Iowa.
- Ensure full flu immunizations across the state.
- Tribal Nations: Provide Abbot BinaxNOW tests to Tribal Nations to conduct weekly testing among all of those who live or work on the reservation. Weekly testing will immediately identify positives (asymptomatic and symptomatic), who will isolate and prevent further transmission to the community.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.





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STATE		STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION	UNITED STATES
NEW COVID-19 CASES (RATE PER 100,000)	27,610 (875)	-12%	97,425 (689)	1,169,615 (356)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	22.1%	-1.9%*	20.9%	10.5%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	123,796** (3,924**)	+4%**	327,060** (2,313**)	10,032,677** (3,057**)
COVID-19 DEATHS (RATE PER 100,000)	180 (5.7)	+36%	638 (4.5)	9,981 (3.0)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	30%	+10%*	32%	22%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	66%	+10%*	60%	43%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	10%	+2%*	10%	7%
TOTAL NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	1,858 (24)	+10% (+9%)	9,294 (25)	136,015 (19)

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES – Additional data details available under METHODS

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020; previous week is 11/7 - 11/13.

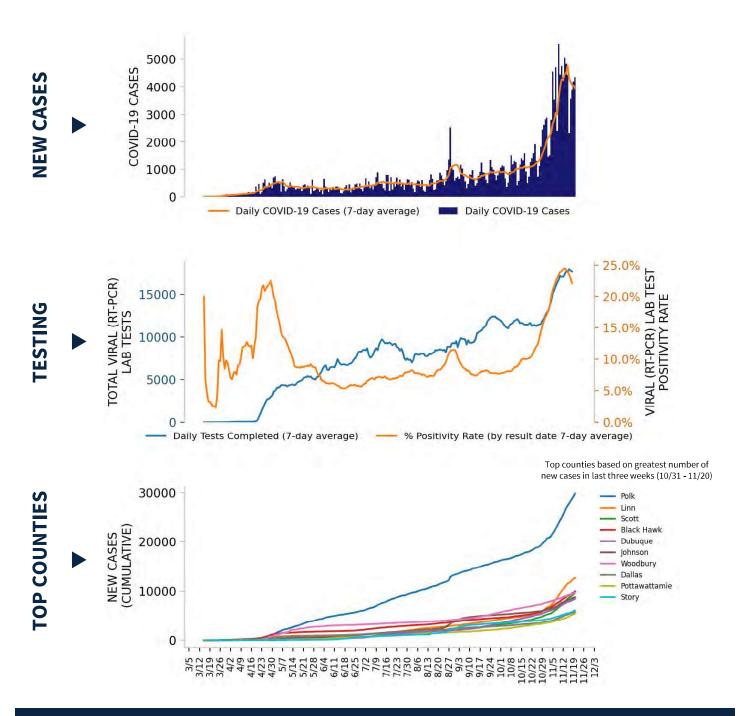
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020. Previous week is 11/5 - 11/11. **SNFs:** Skilled nursing facilities. National Healthcare Safety Network. Data are reported separately for cases among residents and staff. Data is through 11/15/2020, previous week is 11/2-11/8. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.

Admissions: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the totals. Totals include confirmed and suspected COVID-19 admissions.





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DATA SOURCES – Additional data details available under METHODS

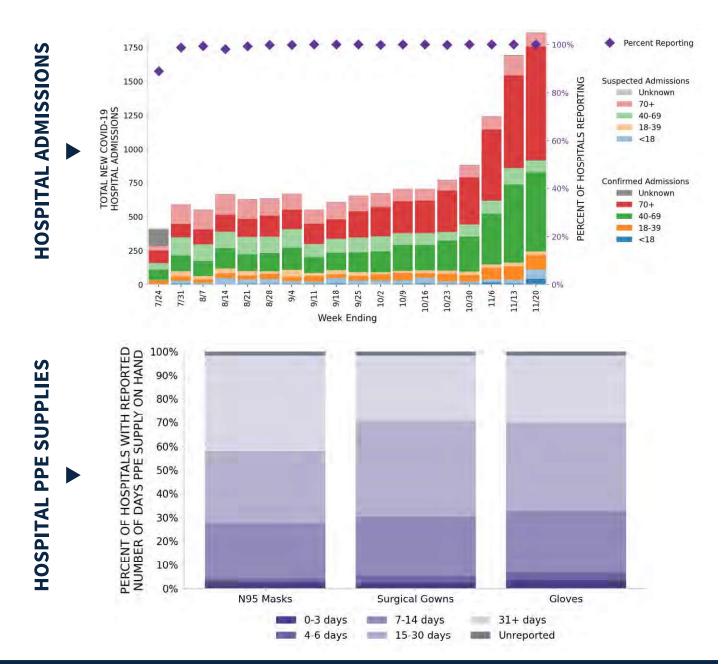
Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. **Cases:** State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020.



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119 hospitals are expected to report in Iowa



DATA SOURCES – Additional data details available under METHODS

Hospitalizations: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. **PPE:** Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Values presented show the latest reports from hospitals in the week ending 11/18/2020.



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COVID-19 COUNTY AND METRO ALERTS*

Top 12 shown in table (full lists below)

METRO AREA (CBSA)

COUNTIES

LOCALITIES IN RED ZONE	24 ■ (+0)	Des Moines-West Des Moines Cedar Rapids Waterloo-Cedar Falls Davenport-Moline-Rock Island Iowa City Dubuque Omaha-Council Bluffs Ames Sioux City Mason City Clinton Fort Dodge		98 ▼ (-1)	Polk Linn Scott Black Hawk Dubuque Johnson Woodbury Dallas Pottawattamie Story Jones Cerro Gordo	
LOCALITIES IN ORANGE ZONE	0 ■ (+0)	N/A		0 ■ (+0)	N/A	
LOCALITIES IN YELLOW ZONE	0 ■ (+0)	N/A		1 ▲ (+1)	Lucas	
	Change from pre	vious week's alerts:	▲ Increase		Stable	▼ Decrease

All Red CBSAs: Des Moines-West Des Moines, Cedar Rapids, Waterloo-Cedar Falls, Davenport-Moline-Rock Island, Iowa City, Dubuque, Omaha-Council Bluffs, Ames, Sioux City, Mason City, Clinton, Fort Dodge, Burlington, Marshalltown, Muscatine, Fort Madison-Keokuk, Pella, Ottumwa, Carroll, Storm Lake, Spencer, Spirit Lake, Oskaloosa, Fairfield

All Red Counties: Polk, Linn, Scott, Black Hawk, Dubuque, Johnson, Woodbury, Dallas, Pottawattamie, Story, Jones, Cerro Gordo, Clinton, Webster, Des Moines, Warren, Marshall, Muscatine, Bremer, Benton, Sioux, Lee, Plymouth, Marion, Jasper, Wapello, Calhoun, Page, Carroll, Jackson, Buena Vista, Buchanan, Washington, Henry, Fayette, Mills, Hardin, Delaware, Butler, Boone, Hamilton, Clayton, Appanoose, Clay, Cedar, Floyd, Tama, O'Brien, Dickinson, Grundy, Mahaska, Iowa, Kossuth, Hancock, Mitchell, Poweshiek, Union, Chickasaw, Wright, Lyon, Winneshiek, Sac, Winnebago, Jefferson, Keokuk, Shelby, Cherokee, Allamakee, Cass, Greene, Harrison, Crawford, Humboldt, Franklin, Guthrie, Palo Alto, Pocahontas, Madison, Louisa, Emmet, Davis, Montgomery, Ida, Adair, Howard, Osceola, Worth, Taylor, Van Buren, Wayne, Decatur, Monroe, Fremont, Monona, Audubon, Clarke, Adams, Ringgold

* Localities with fewer than 10 cases last week have been excluded from these alerts.

Note: Lists of red, orange, and yellow localities are sorted by the number of new cases in the last 3 weeks, from highest to lowest. Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. **DATA SOURCES –** Additional data details available under METHODS

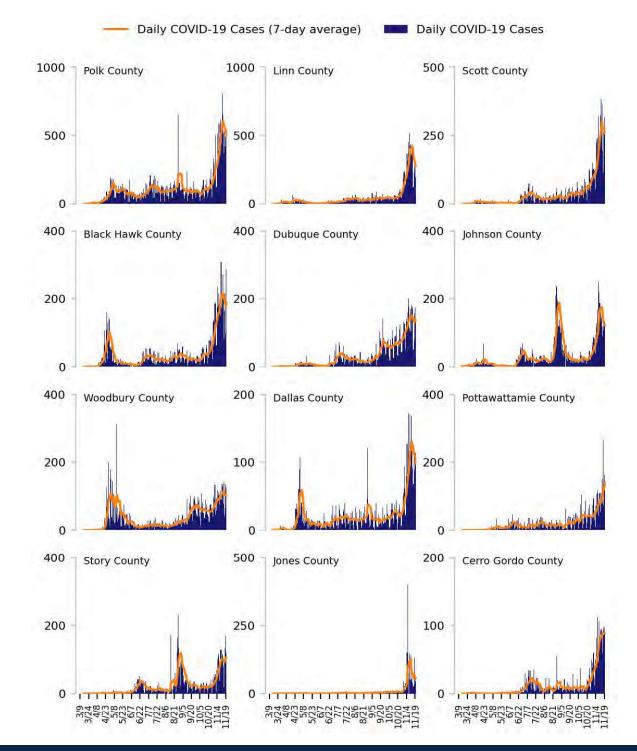
Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020.



TOTAL DAILY CASES

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES – Additional data details available under METHODS

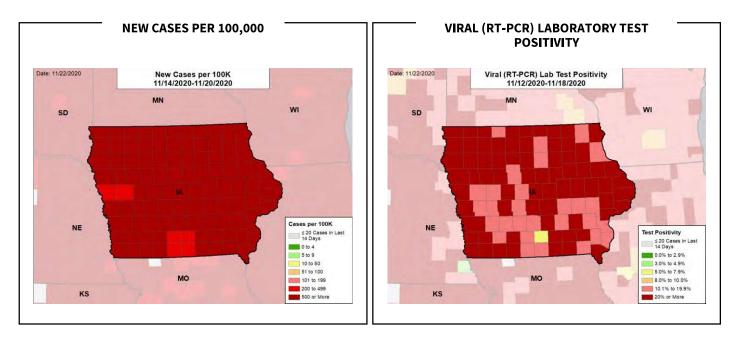
Cases: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020. Last 3 weeks is 10/31 - 11/20.

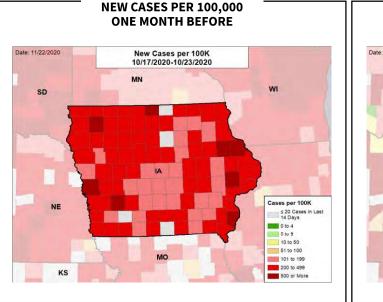


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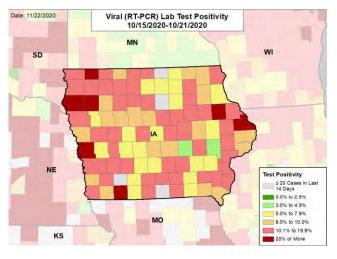
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CASE RATES AND VIRAL LAB TEST POSITIVITY





VIRAL (RT-PCR) LABORATORY TEST POSITIVITY ONE MONTH BEFORE



DATA SOURCES – Additional data details available under METHODS

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. Cases: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020. The week one month before is 10/17 - 10/23. Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020. The week one month before is 10/15 - 10/21.