

## **3/15 UPDATES**

We have modified the data in this report to align with the Washington State Department of Health's (WA DOH's) [COVID-19 Risk Assessment Dashboard metrics](#). Compared to our previous reports:

- **Our case rate is higher than previous reports.** See page 4 for more details.
- **Percent positivity has not changed.** We continue to investigate the completeness of testing data to ensure they are accurate.
- **COVID-19 hospitalizations are weekly figures instead of a two-week average.**

The Washington State Department of Health's [Tools to Prepare for Provision of In-Person Learning](#) provides guidance to communities when making decisions about in-person learning during the COVID-19 pandemic. It includes objective metrics and also provides room for schools to implement the guidelines in a way that best serves their students and communities. School administrators make the final decision in how to provide instruction to their students. This report provides an assessment of COVID-19 activity and related indicators in our community to support administrators' decision-making. In addition, Cowlitz County Health & Human Services' (CCHHS) leadership meets weekly with school district administrators to discuss COVID-19 activity as it relates to school reopening.

Cowlitz County entered Phase 2 of the Governor's [Roadmap to Recovery](#) plan on Sunday, February 14<sup>th</sup>. This affects youth sports. More information can be found on the [What's open?](#) webpage as well as the [COVID-19 Reopening Guidance for Businesses and Workers](#) webpage, under [Sporting Activities](#) and [Sporting Activities FAQ](#).

Along with the rest of the state, [we will enter Phase 3 on March 22](#), which will allow in-person spectators at high school sports. More information will be provided when available.

Do you have a question or comment? Please email us at [Askcowlitzhealth@co.cowlitz.wa.us](mailto:Askcowlitzhealth@co.cowlitz.wa.us).

## **Current COVID-19 status in Cowlitz County**

***Case counts back down to late October levels and decreasing or leveling off; hospitalizations decreasing gradually; deaths are steady***

We saw an average of 14 new confirmed and probable cases per day from specimens collected Feb 17 – Mar 2. Case counts are back down to late October levels and may either be continuing to decrease gradually or have leveled off. Cowlitz County's new per capita case rate is currently just above the state average.

Since late November, new COVID-19 hospital admissions among Cowlitz residents have been decreasing gradually and on par with the state per capita average.

Because counts are so small, trends in new COVID-19 deaths among Cowlitz residents have been erratic. Overall, since November, this trend has been fairly steady, with the rate on par or slightly above the state per capita average. Deaths lag behind cases and hospitalizations; we expect deaths to eventually decrease following our decrease in cases and hospitalizations.

## **For whom should our community provide in person learning?**

We are now at a **MODERATE** level of COVID-19 activity. The WA DOH [Tools](#) document recommends considering case incidence and test positivity, as well as trends in cases and hospitalizations, when making decisions about in-person learning. More information can be found on page 8 of DOH's [Tools](#) document. Specific indicators related to this question are provided on the next page.

\*Continued on next page\*

***Is there adequate access to testing in the community health system for ill students and staff?***

**YES** Students and staff can access COVID-19 testing through their healthcare provider, the Family Health Center, or Walgreens or Rite Aid pharmacies. Visit CCHHS' [COVID-19 Testing](#) website for more information. In addition, Kelso School District is participating in the Governor's [in-school testing program](#), which will [begin operating mid-March](#).

***Is there adequate capacity in our local health department to investigate confirmed COVID-19 cases, quarantine their close contacts, and assess whether transmission is occurring in the school?***

**YES** CCHHS supports schools in case of an outbreak, including case and outbreak investigation and contact tracing.

***Can local public health monitor the level of community spread to determine when a change in education modality is needed?***

**YES** We publish this report weekly to provide relevant data to school districts and the community.

# For whom should our community provide in person learning?

These data are accessed Monday morning of each week. More current data may be available online.

	Most recent time frame with complete data	Current status	Trend over time	Where to find the most current data for this indicator on the <a href="#">Roadmap to Recovery Metrics webpage</a>
Cases	2/17– 3/2	177 cases per 100,000 population in past 14 days	Sharp increase starting late October, Steady from Thanksgiving through the end of January. Sharp decrease in February. may still be decreasing or leveled off	<ol style="list-style-type: none"> <li>1. Scroll down to “COVID-19 Risk Assessment Dashboard”</li> <li>2. Click on the “COVID-19 Disease Activity” tab</li> <li>3. Select “Cowlitz County” from the dropdown “Select a County” menu</li> <li>4. The default view is a 14-day rate.</li> </ol>
Percent of tests that are positive	2/16 – 2/22	8.4%	Sharp increase from late October to mid-November, most likely steady since Thanksgiving may have decreased in February	<ol style="list-style-type: none"> <li>1. Scroll down to “COVID-19 Risk Assessment Dashboard”</li> <li>2. Click on the “Testing Capacity” tab</li> <li>3. Select the “Percent of positive molecular tests” key metric</li> <li>4. Select “Cowlitz County” from the dropdown “Select a County” menu</li> </ol>
Cowlitz County residents admitted to the hospital for COVID-19 during the past week*	2/15 – 2/21	3 COVID-19 hospital admissions	Sharp increase from late October through late November, gradual decrease since late November	<ol style="list-style-type: none"> <li>1. Scroll down to “COVID-19 Risk Assessment Dashboard”</li> <li>2. Click on the “COVID-19 Disease Activity” tab</li> <li>3. Under “Select a key metric”, click on “New hospitalizations per 100K people”</li> <li>4. Select “Cowlitz County” from the dropdown “Select a County” menu.</li> </ol>

\*This includes all Cowlitz residents hospitalized with COVID-19, regardless of what county they are hospitalized in. Hospitalizations are generally excluded if they are for a reason other than COVID-19.

## *Why has the case rate increased from previous reports?*

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The case rate we report now is higher than previous reports because our calculations now align with WA DOH's methodology. Compared to our previous reports:

### **Case counts now include cases identified from both molecular and antigen tests**

There are two types of COVID-19 tests – antigen and molecular. PCR tests are a type of molecular test.

When the COVID-19 pandemic began, the state DOH reported only COVID-19 cases confirmed with a molecular test. They call these “confirmed cases”. In mid-December, the state DOH began including cases identified only with an antigen test (no confirmatory molecular test) on its dashboards. The state DOH calls these “probable cases”. CCHHS continued to only report confirmed cases in our figures.

Up until recently, we've had a relatively small number of probable cases in Cowlitz County, so the discrepancy between the state DOH and CCHHS figures was very small. However, probable cases in Cowlitz County have increased now that antigen testing is more available in our community.

### **The reporting lag is now longer**

State DOH case counts have a longer reporting lag than our internal case counts. CCHHS used a lag time of 6 days; the state DOH's lag time is about 1 ½ weeks. When rates are decreasing, as they are now, less-recent rates will be higher than more-recent rates.

### **The denominator is now slightly smaller**

CCHHS had been using a population denominator from 2020, while the state DOH uses population data from 2019. Smaller population denominators result in higher rates.