

KITTITAS COUNTY PUBLIC HEALTH
DAILY VIDEO UPDATE
Friday, September 11, 2020

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Hi, everyone. My name is LeAnne Bradshaw. I am the Assessment Coordinator here at the Kittitas County Public Health Department.

I am going to briefly talk about data and go over some of the metrics we use to monitor COVID-19 activity here in Kittitas County.

Before I get started, I want to remind everyone that it's important to make sure that you're getting your data from a reliable source, and that you're checking the time and date your data was published or updated. Remember that it's really important to interpret the data correctly.

It's also important to understand that data changes because new evidence needs to be incorporated as soon as possible. In response to those changes, our data and estimates will also change. So, we're constantly adapting, staying updated on state metric changes so that we can get the most accurate data.

I have Washington state's Risk Assessment Dashboard open, which I hope many of you are familiar with by now.

[See screen.]

The first metric I'll talk about is the cases per 100,000. This is the metric that many people talk about, especially in regard to school reopenings.

The Department of Health uses this metric to measure disease activity within the state and in each individual county. We use the 100,000 to represent the general population as well as to put all the counties on an even playing field for easier comparison.

We count the number of cases reported in the last two weeks, with a 10-day lag period, divide that by the population of Kittitas County and finally multiply that by 100,000. The 10-day lag is because the data from the most recent 10 days is incomplete. The Department of Health typically has less than 90% of test results for the prior ten days, so it's important to have that lag

period.

Imagine that King County and Kittitas County each had 2000 cases. 2000 cases in King County, with a population of 2.23 million, is a lot different than 2000 cases in Kittitas County, with a population of 47,000. While 2000 cases in King County would be concerning, that's a small amount considering its large population number. On the other hand, 2000 cases in Kittitas County would be a really big problem.

This is why we can't necessarily use case counts to measure disease activity, and why we convert the measure of disease activity to the per population metric.

The next metric on the Risk Assessment Dashboard is the Average Daily COVID-19 Testing Rate Per 100,000 over a week, which is basically the same thing as above, just using the number of tests we've performed instead.

The next metric is the Percent of Positive Tests over a week. This measures how many tests came back positive and is set to 2% or less by the Health Department. The higher the rate, the more tests we have coming back positive. This metric is calculated by taking dividing the total number of new cases by the total tests for a certain time period.

The next metric is the Health Care System Readiness metric, which is the percent of licensed beds occupied by patients and percent of licensed beds occupied by COVID-19 patients. This is to see how our hospitals are doing. Are they near or past capacity? This information is reported directly from the acute care hospitals.

Another piece of data I want to share with you is our case and contact investigations.

[See screen.]

We keep track of several things:

- 1) If our cases are reached within 24 hours.
- 2) If their contacts were reached within 48 hours of a positive lab report.
- 3) The calls we make daily to the cases and contacts during their isolation and quarantine periods. We note if we attempted to

contact them, if we were able to contact them, and if we weren't able to contact them for some reason

You can see the targets [on screen] that the state has set for us and we typically meet those targets each week.

I hope that helped explain the data and metrics we use here at Public Health, that you have a better understanding of why we use them, and how we get those numbers.

Thank you.

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