LHUSD questions and answers from Mohave Health Department

What data is used to determine the cases metric?
- These are the data posted on websites, how COVID is counted around the world. It is the number of individuals (with permanent address in MC) with positive COVID tests reported to MCDPH by labs, hospitals, etc. Unlike number of tests, it only counts each person once, even if they have multiple tests. Mohave County numbers reflect only PCR positive tests. Positive antibody and "probable" cases are not reported on the Mohave County web page.

Can we have our numbers broken down specifically to our city as opposed to countywide numbers?
- Not at this time, we are still working to see if this is possible. The issue is whether the size of the cities are large enough to look at cases by week and have it be a reliable measure.

How is the PCR number calculated? (Assuming this really means % positivity)
- Percent positivity is based on diagnostic or PCR tests. AZDHS looks at the percentage of total PCR tests that are positive. Formula is #PCR positive tests / # All PCR tests.

- *The number of tests are a rolling total, the databases updates the dashboard at different sequences. Running the calculation on the dashboard may not reflect the percent positive shown on the MC website. The calculated variables constantly change.*

- *Percent positive is designed to reveal trends, as such, AZDHS ~~medical~~ staff have selected the above parameters and it is provided on a county by county basis.*

Why is PCR a better measurement than positive cases divided by the entire county population?
- This is used because of the unfeasibility of testing the entire population. The tool provides an estimate based on the most reliable tests possible. It should be viewed as a rough measure that provides an assessment of the level of virus circulating in the community.

If percent positivity is done per zip code can this be combined for all LHC zip codes?
- Zip codes will likely need to be combined as data from a single zip code is too small to be reliable enough to use for important decision making.

Does Percent Positivity influence the other two benchmarks for schools? If so how?
- AZDHS has selected three different benchmarks to base guidance on for schools. The three metrics, while independent in their design, do have elements of interplay. The CLI data are independent of the cases and % positivity because those data come from hospital triage and diagnosis and must meet different criteria. The cases and % positivity are related as cases come from positive PCR tests.
- The AZDHS coordinates with the White House Coronavirus Task Force in determining the best metrics to use, these metrics are then provided to public health entities throughout the state.

Is there a possibility that the COVID-like Illness benchmark will be significantly impacted during the flu season?

- While it is too early to know how these metrics will be impacted by influenza, we do know that the rate of influenza vaccination has been considerably lower in numerous jurisdictions. Mohave County Public Health Department encourages people to get the influenza vaccination.

There are a lot of questions around who would be sent home if a student tested positive for COVID 19. If it were one student in one class at the elementary level I assume the students or staff being asked to quarantine are in that specific class. The bigger question is at the secondary level. If we have a student who rides the bus to school, attends 6 classes with a variety of students, has lunch with another group of students and rides the bus home I'm assuming the number who may need to quarantine is exponentially higher.

- Staff and students who are determined to be close contacts of the suspected and/or confirmed case, should quarantine. Close contacts as defined by the CDC would be:
    - You were within 6 feet of someone who has COVID-19 for a total of 15 minutes or more
    - You provided care at home to someone who is sick with COVID-19
    - You had direct physical contact with the person (hugged or kissed them)
    - You shared eating or drinking utensils
    - They sneezed, coughed, or somehow got respiratory droplets on you

Useful Resources
Provides information about cases, data, and surveillance.

https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/purpose-methods.html