

Dover Public School District - Assessment of COVID-19 Metrics

	HIGH / CRITICAL RISK	MEDIUM / IMMINENT RISK	LOWEST RISK
Hospital capacity (ICU headroom used)	High or critical risk (60-100%)	Medium risk (50-60%) 59% of ICU headroom used	Low risk (0-50%)
Trend in hospital capacity	Medium risk and increasing; High risk and increasing, stable, or decreasing;	Low risk and increasing; Medium risk and decreasing or stable;	Low risk and stable or decreasing
Cases per 100,000	High or critical case load (25+ per 100k) NH: 58.4 per 100k Strafford: 56.0 per 100k	Medium case load (10 - <25 per 100k)	Low case load (<10 per 100k)
Transmission rate	High risk (Rt >= 1.20)	Medium risk (1.00 < Rt < 1.20)	Low risk (Rt <= 1.00) NH: Rt = 1.01 Strafford: Rt = 1.00
3-4 week trend in case load and transmission rate	Medium risk and increasing rates; High risk and increasing, stable, or decreasing rates	Low risk and increasing rates; Medium risk and decreasing or stable rates	Low risk and stable or decreasing rates
Testing availability	Difficult to get symptomatic testing; little to no asymptomatic testing	Symptomatic testing widely available; asymptomatic testing available for exposed → Long waits for asymptomatic testing, if available. Testing priority is symptomatic and exposed.	Symptomatic and asymptomatic testing widely available
Percent of tests that are positive	High risk (> 10%) NH: 12.5% Strafford: 17.5%	Medium risk (3-10% positive)	Low risk (< 3% positive)
Time to test results	More than 48 hours	< 48 hours	<24 hours
Contact tracing	Insufficient (< 50% capacity) 4% capacity estimated	Insufficient (50-90% capacity)	Sufficient (> 90% capacity)

Our “new normal” can occur when there is a safe and effective vaccine, rapid and frequent surveillance testing, and/or effective treatment reducing the risk of mortality and morbidity to levels comparable to other common viruses.

This information is the interpretation of Megan W. Harvey, PhD, based on publicly available data available at the time of writing, for generalized population-level guidance. Megan Harvey is not responsible for outcomes related to following or not following this guidance.

Data Sources:

Publicly available data from NH:

<https://www.nhpr.org/post/explore-data-tracking-covid-19-new-hampshire>

COVID Act Now:

<http://covidactnow.org/us/nh?s=983197>

Rt COVID-19:

<https://rt.live/us/NH>

The COVID Tracking Project:

<https://covidtracking.com/data/#state-nh>

Harvard Global Health Key Metrics for COVID Suppression:

https://ethics.harvard.edu/files/center-for-ethics/files/key_metrics_and_indicators_v4.pdf

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