VERMONT
DEPARTMENT OF HEALTH

Weekly COVID-19 Surveillance Report

January 25, 2023

Report Timeframe: January 15 to January 21, 2023

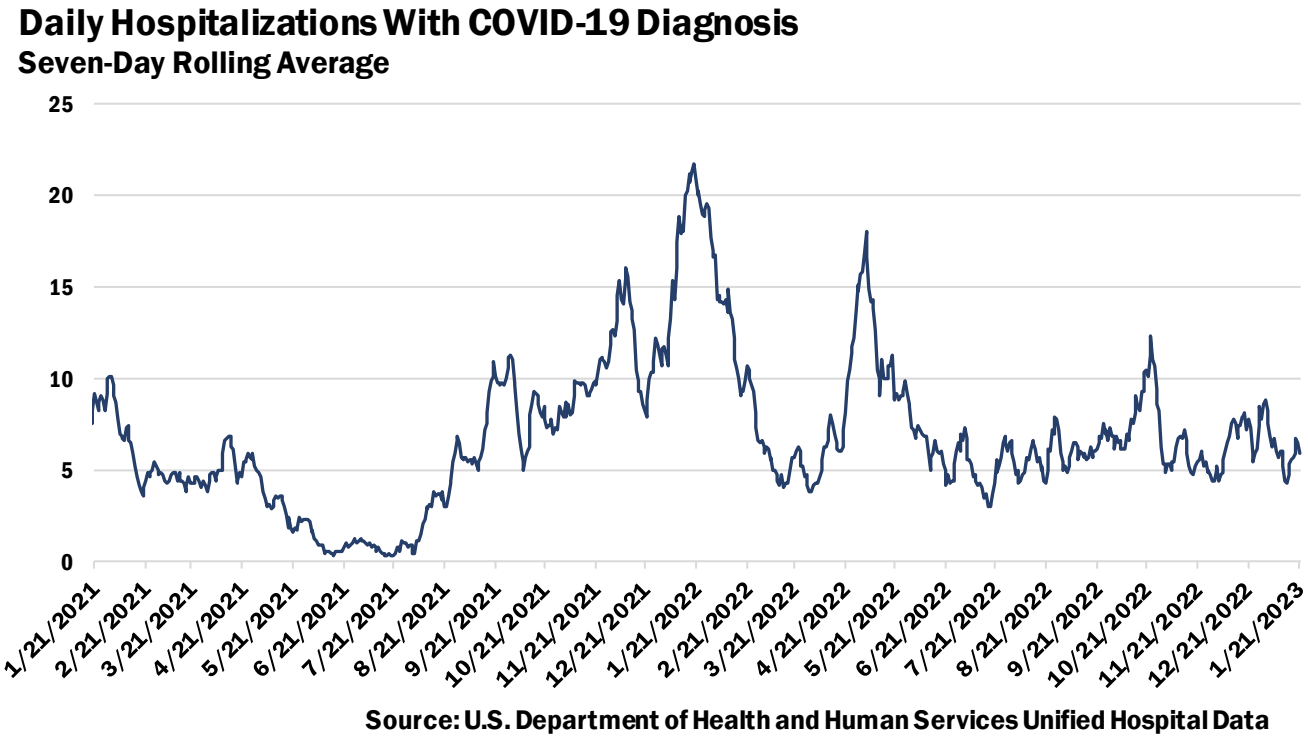
Statewide community levels: Low. For this seven-day reporting period, the rate of new COVID-19 cases per 100,000 Vermonters is below 200. New COVID-19 admissions are below 10 per 100,000 Vermonters per day, and the percent of staffed hospital beds occupied by COVID-19 is below 10%.

- (Provisional) New COVID-19 cases, last 7 days: 72.92 per 100k
  - Weekly case count: 455 (increase from previous week)
- New hospital admissions of patients with COVID-19, last 7 days: 6.57 per 100K
  - 41 total new admissions with COVID-19 (increase from previous week)
- Percent of staffed inpatient beds occupied by patients with COVID-19 (7-day average): 3.21% (increase from previous week)

Vermont Department of Health recommendations: Preventing COVID-19 (healthvermont.gov)

CDC recommendations: COVID-19 by County | CDC

Hospitalizations Over Time



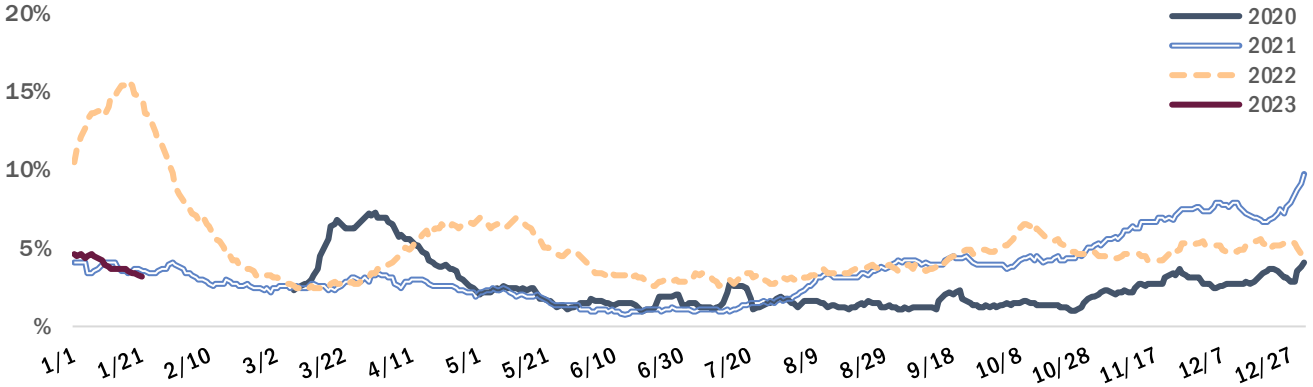
The seven-day rolling average of hospital patients admitted with a laboratory-confirmed COVID-19 has been around five to seven during the most recent seven-day period. The number is the daily average of the previous seven days; for example, the value for May 28 is the daily average for the days of May 21 through May 27.

Syndromic Surveillance

Vermont is using the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE), which provides all individual emergency department visits from participating emergency departments[1], to identify Emergency Department visits for COVID-Like Illness (CLI).

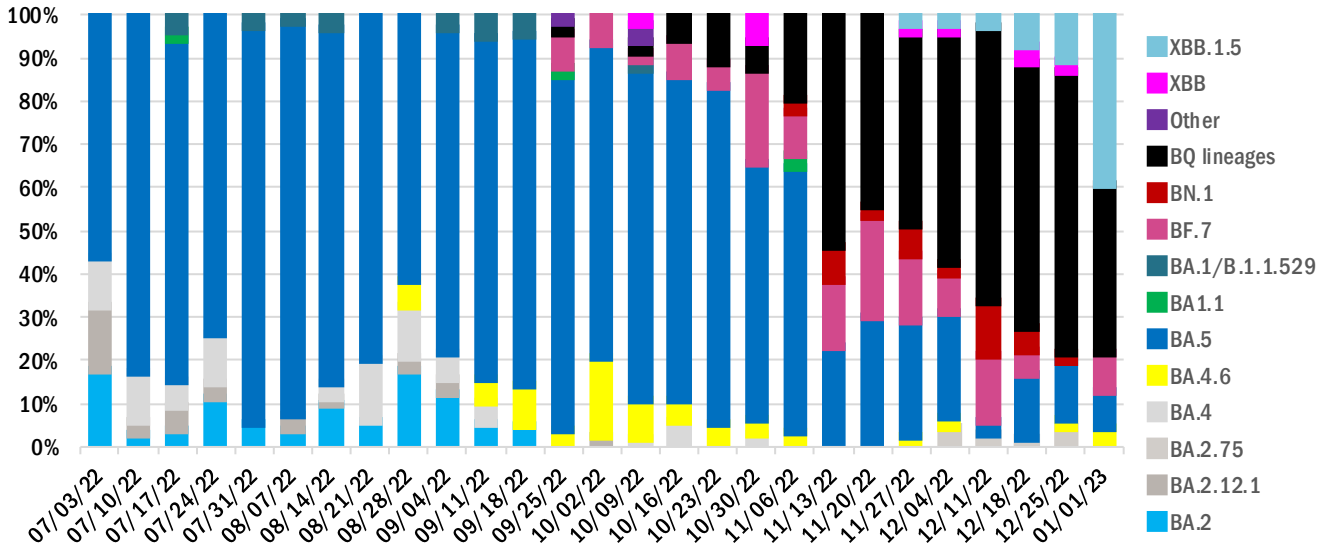
During this reporting period the proportion of emergency visits in participating emergency departments that included CLI was under 4%, much lower than the same period in 2022.

Percent of Emergency Visits with COVID-Like Illness
Seven-Day Rolling Average, over Calendar Year



Source: Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE)

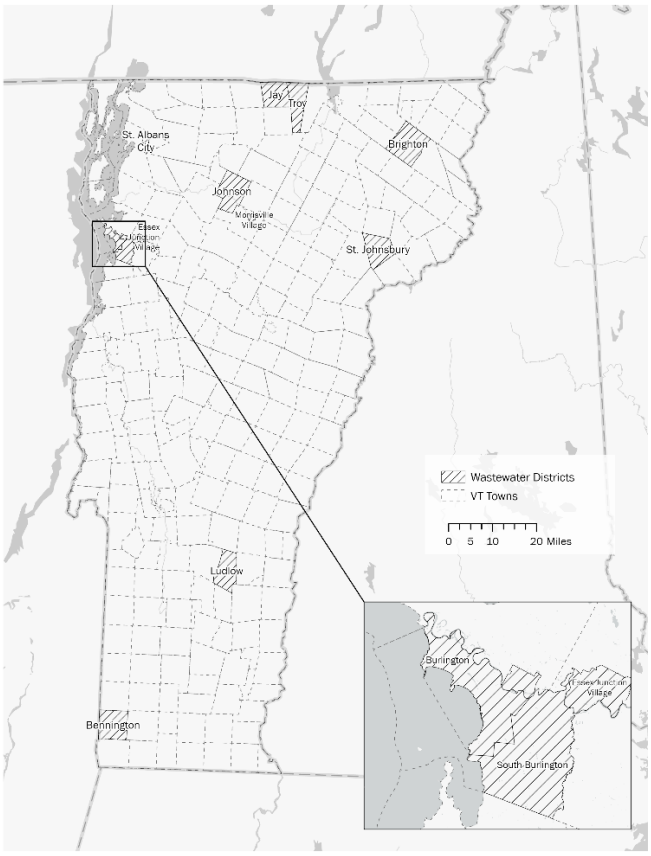
Proportion of sequenced variants



The variant XBB.1.5 accounted for 39% of circulating variants during the week beginning 01/01/2023. (Sources: Broad; Aegis; Helix; LabCorp; Quest; Health Department Whole Genome Sequencing program)

[1] All Vermont hospitals and two urgent care clinics are included in ESSENCE.

Wastewater Monitoring

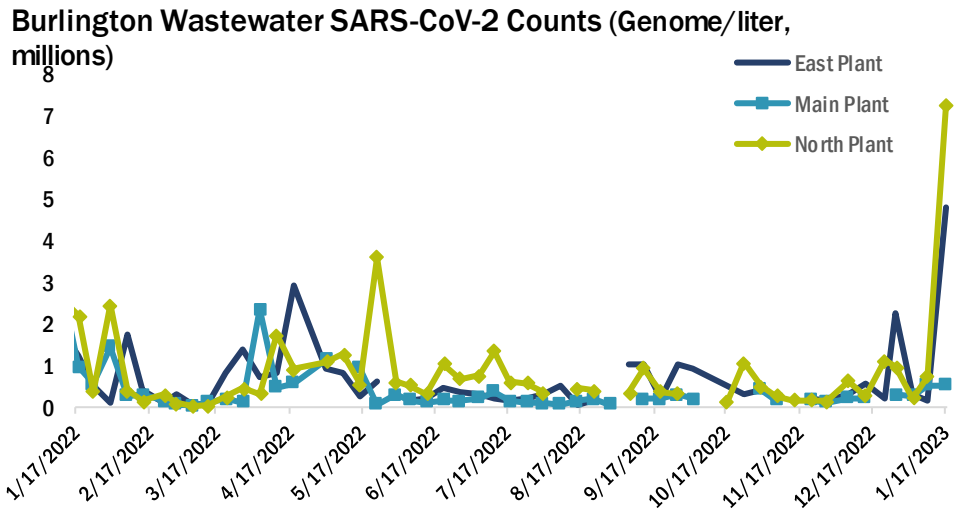


Vermont wastewater districts participating with the National Wastewater Surveillance System (NWSS).

NWSS Site	15-day % change
Bennington	Decrease between 10%-99%
Brighton	Increase between 100%-999%
Essex Junction	*
Johnson	Decrease between 10%-99%
Ludlow	Decrease between 10%-99%
Morrisville	Increase between 10%-99%
South Burlington	Decrease between 10%-99%
St. Albans City	Increase between 10%-99%
St. Johnsbury	Decrease between 10%-99%
Troy / Jay WWTP	Increase between 10%-99%
Winooski	Decrease between 10%-99%

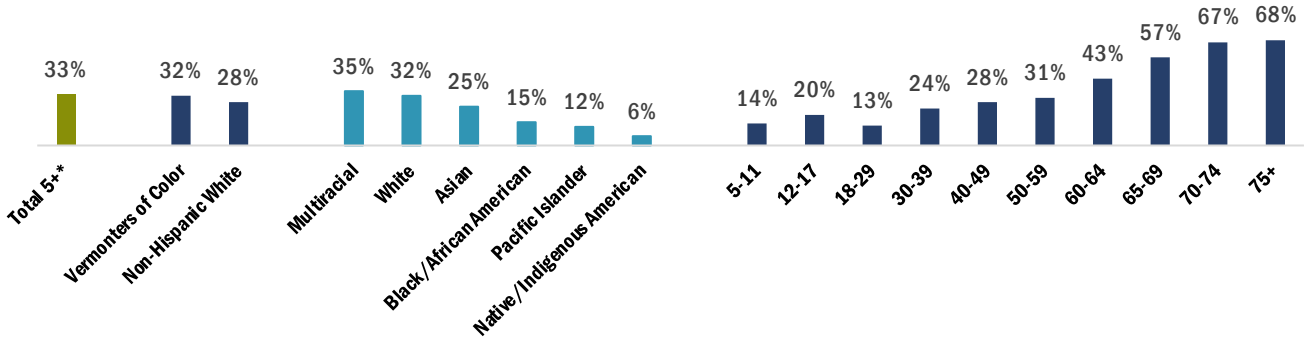
*Trend data will be reported when available

In addition to Vermont's NWSS sites, the City of Burlington has been collecting samples in collaboration with the Health Department and research partners at the University of Vermont and at Dartmouth-Hitchcock Medical Center. Burlington has been collecting data since August 2020, and reports on the 24-hour viral concentration (as genomes per liter) of SARS-CoV-2 ribonucleic acid (RNA) collected at the city's three wastewater plants.



For January 17, there were extremely large increases Burlington's North and Main wastewater readings. Given the absence of other indicators of a true sudden spike, it is unclear whether this reflects a genuine increase or an anomaly. (Source: City of Burlington; burlingtonvt.gov)

Vaccination Rates



Source: Vermont Immunization Registry (January 2023), Health Department Population Estimates (2019)

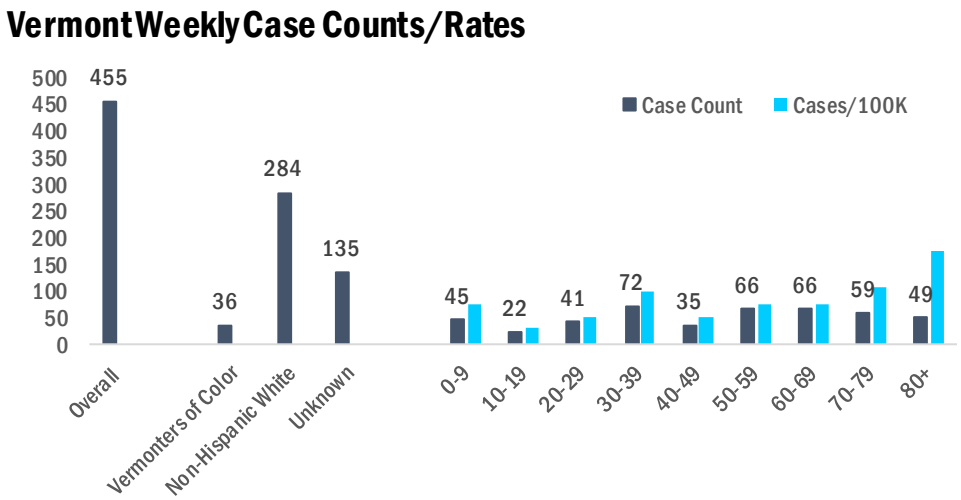
Note: Race/ethnicity information is missing for 5% of vaccinated individuals. Population denominators are from 2019 population estimates so percentages shown are an estimate which may vary from the true proportion in the population, particularly for smaller groups.

On October 26, 2022, Vermont began reporting the percent of the population age 5 and older that has received an updated, bivalent booster dose since September 1, 2022.

COVID-19 vaccination rates for Vermonters who identify as Pacific Islanders or Native American, Indigenous, or First Nation have been substantially lower than rates for other Vermonters. In addition, the number of people in the Vermont Immunization Registry who identify as Pacific Islanders or Native American, Indigenous, or First Nation are much lower than our Vermont Department of Health population estimates. These findings could be due to one or more of the following:

1) Pacific Islanders and Native/Indigenous Americans are less likely to report their race.
2) Pacific Islanders and Native/Indigenous Americans are receiving fewer vaccinations.
3) Health Department population estimates are overestimating the true population.
4) Race and ethnicity are collected by providers in a way that does not align with how people identify.

Identified Cases



Note: Case counts and rates are calculated by *confirmed* and *probable* cases reported to the Health Department.

To calculate rates, counts are divided by 2019 Vermont population estimates for respective category and expressed per 100,000 in each category.

Due to a high number of cases missing race/ethnicity data, rates are not provided for race/ethnicity categories.

COVID-19 Outbreaks Reported January 17 through January 23

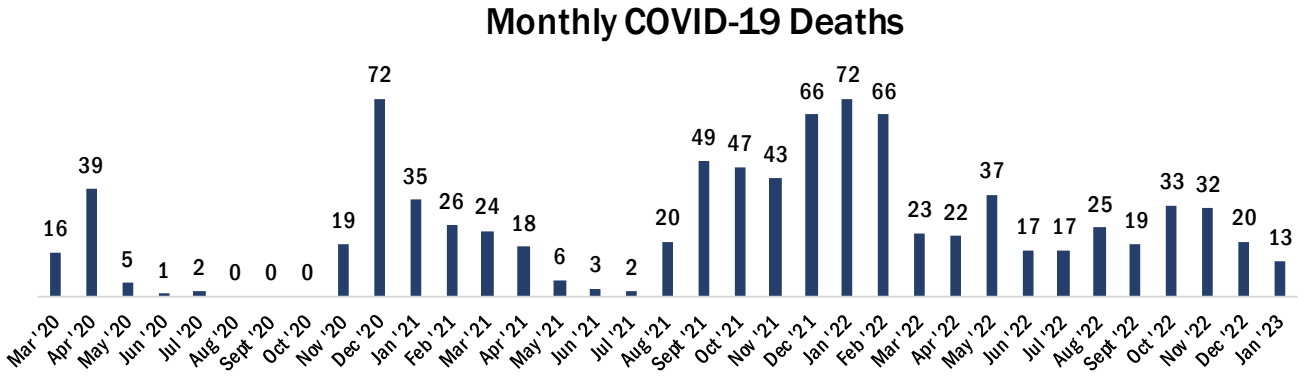
For purposes of this report, an outbreak is defined as three or more epidemiologically linked cases of COVID-19, where at least one such case has been laboratory or otherwise clinically confirmed as COVID-19.

Facility type	New Outbreaks Reported 1/17 – 1/23
Long-term Care (LTC)	5
Non-LTC Healthcare	-
Correctional Facility	1
School/childcare	7
Other	-

County	New Outbreaks Reported 1/17-1/23
Addison	-
Bennington	2
Caledonia	-
Chittenden	3
Essex	-
Franklin	-
Grand Isle	-
Lamoille	-
Orange	1
Orleans	2
Rutland	2
Washington	1
Windham	1
Windsor	1

Cumulative COVID-19 Deaths as of January 21, 2023

	Age group								
Total	Under 10	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80+
889	1	0	2	9	18	62	94	203	500



Note: Deaths are from registered death certificates and represent preliminary data. A change in death count may represent new deaths, corrections, or other updates.

Data Source: Vermont Department of Health Vital Statistics System.

For more information about this report, please contact john.davy@vermont.gov