

Weekly Summary of Vermont COVID-19 Data

Reflecting cases identified between
March 5, 2020 – May 19, 2021



Date published: May 21, 2021. This summary will be updated every Friday.



Common Terms and Data Sources

This document contains information about people who have tested positive for COVID-19 in Vermont. You will find data presented in a few different ways throughout this document:

- **Count:** the number of people who have tested positive for COVID-19 (overall or in a particular group)
- **Rate:** the number of people who have tested positive for COVID-19 in a particular group, divided by the total number of people in that group. Using rates allows for more direct comparisons between groups.
- **Growth rate:** a measure of the percent change in COVID-19 cases over time; this tells us how quickly or slowly the disease is spreading in Vermont
- **Week:** for the purposes of this document, “this week” is defined as May 12 through May 19.

For geographic information, please see the [COVID-19 Data Dashboard](#) or [Town Map](#). For more information on data sources, please see our [Data Notes](#) document. For information on cases in schools, see [COVID-19 Cases in Vermont K-12 Learning Communities While Infectious](#).

Please Note:

- On February 11, 2021 the denominators used to calculate rates by age and sex were updated from 2018 to 2019 Vermont Department of Health estimates based on Census data. The corresponding change in rates in the February 12, 2021 Weekly Summary is due to this change in methodology.
- On March 28, 2021 the outbreak definition changed. See slide 24 for more details.

Table of Contents

Click on a box below to jump to that section

Overview of COVID-19 in Vermont

Case Demographics

Clinical Course

Outbreaks

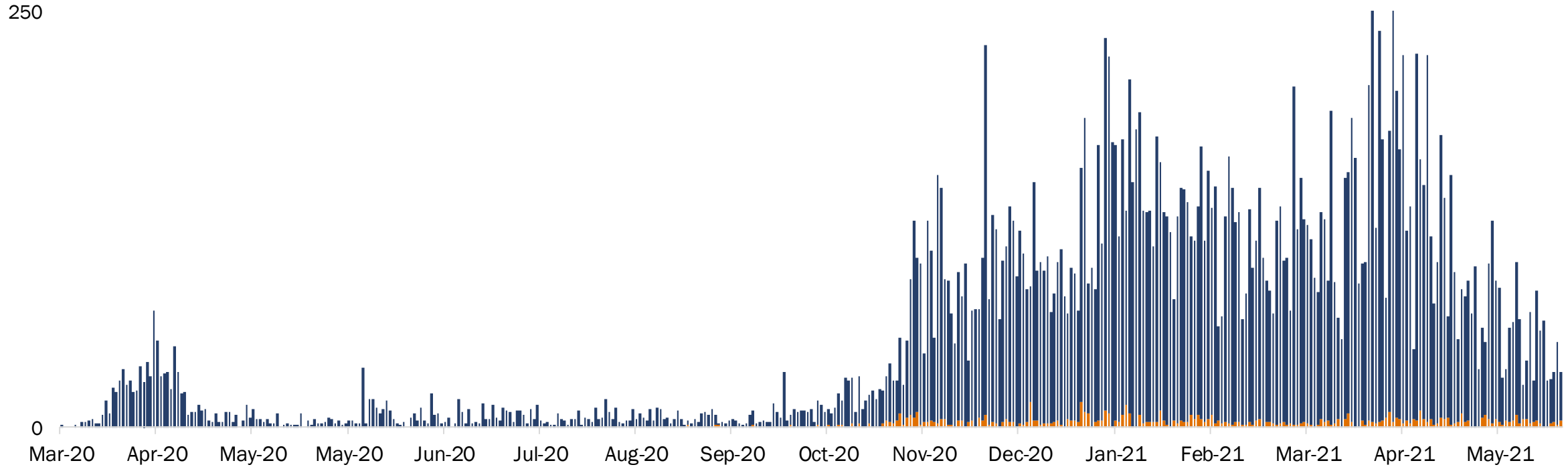
Vaccine Breakthrough

Weekly Spotlight

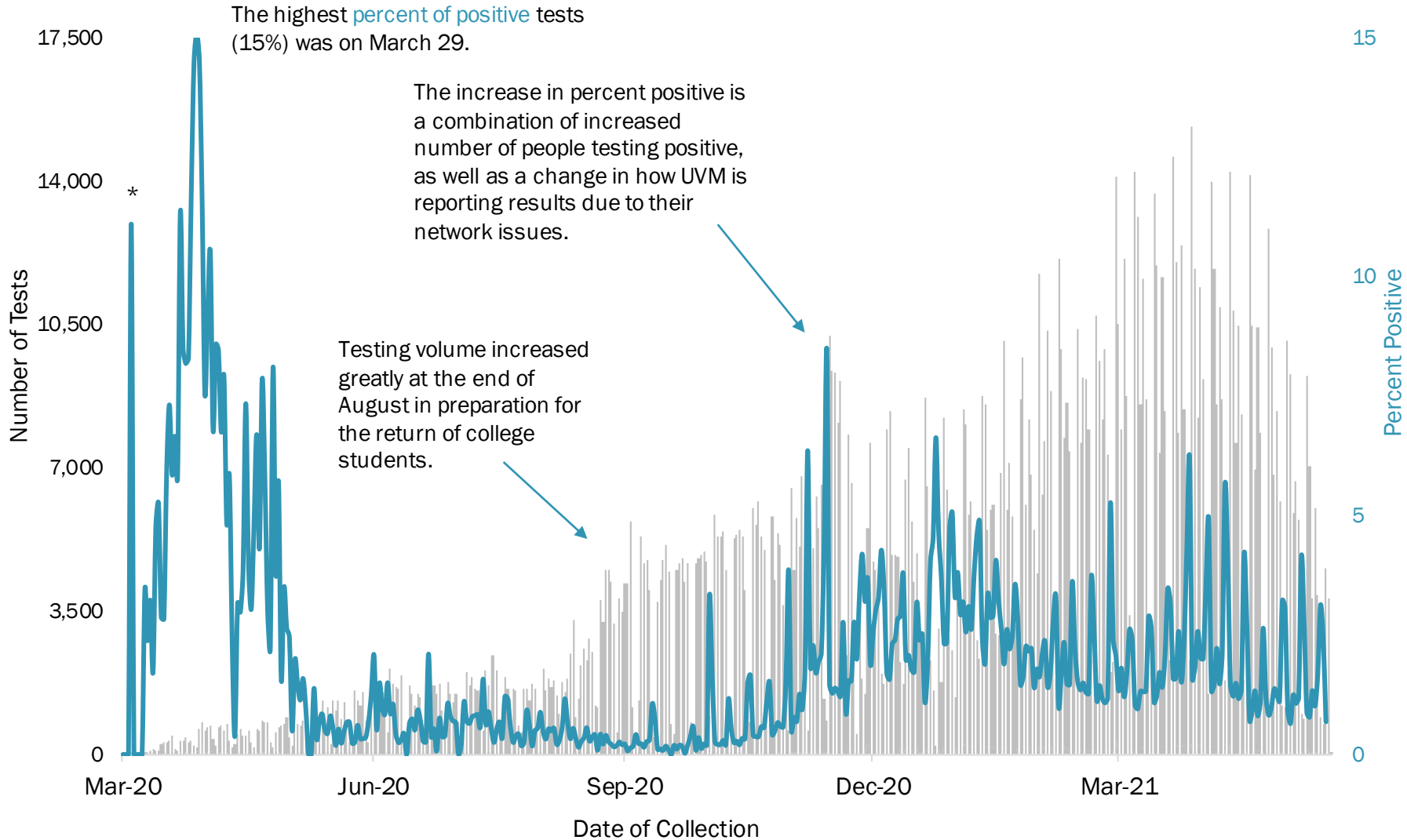
COVID-19 in Vermont

An overview of our number of cases and laboratory testing to date.

Total Number of **Confirmed** and **Probable** Cases in Vermont: 24,026



Percent of positive COVID-19 tests may indicate how prevalent the disease is in the population.

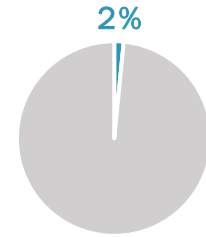


*Not a stable estimate due to small numbers. There were 8 total tests and 1 was positive.

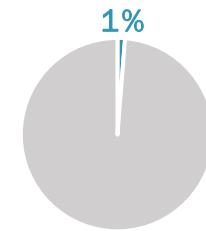
Vermont Department of Health

The **number of people tested** reflects the number of individual people who have had confirmatory testing for COVID-19 in Vermont. Each person is only counted once. The **number of tests** reflects the number of specimens that have had confirmatory tests for COVID-19 in Vermont. This number may include multiple specimens for one person, the same person tested multiple times, etc. **Percent positive** is the number of laboratory confirmed COVID-19 specimens divided by the total number of specimens (updated 11/6/20). None of these numbers include serology or antigen testing.

Percent Positive to Date

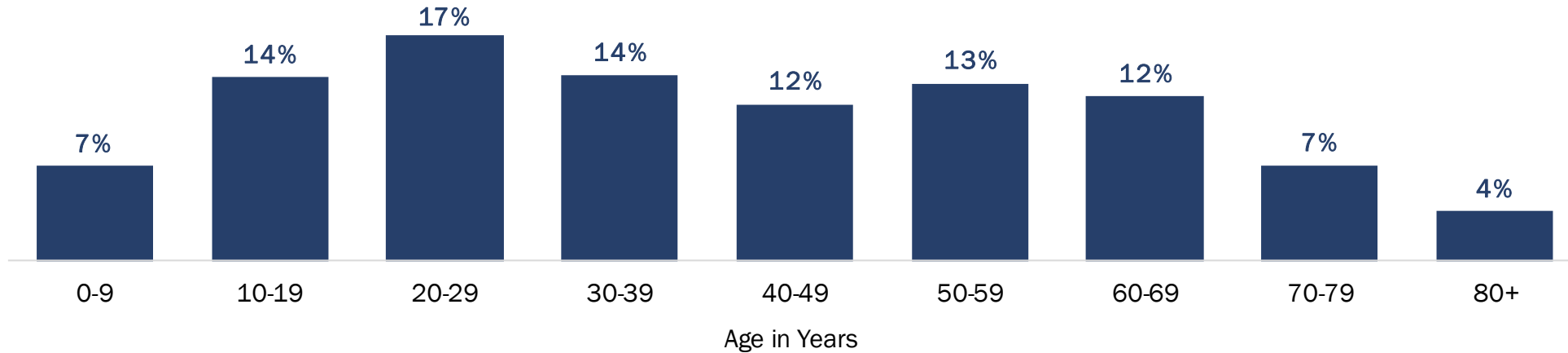


Percent Positive This Week (May 12- May 19)



4,147 People Tested this Week	23,762 Tests this Week
390,605 People Tested to Date	1,683,771 Tests to Date

The distribution of people tested for COVID-19 in Vermont varies by age group.



More **females** are tested than **males** for COVID-19.



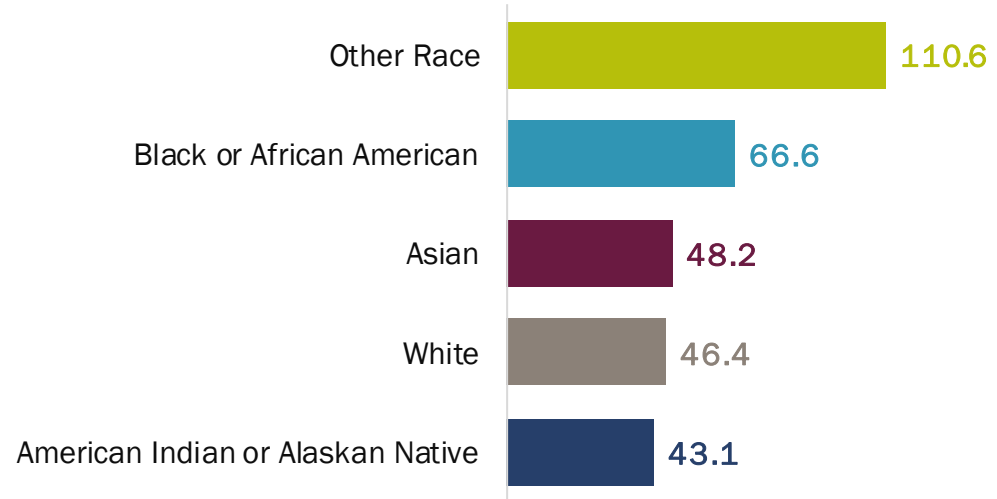
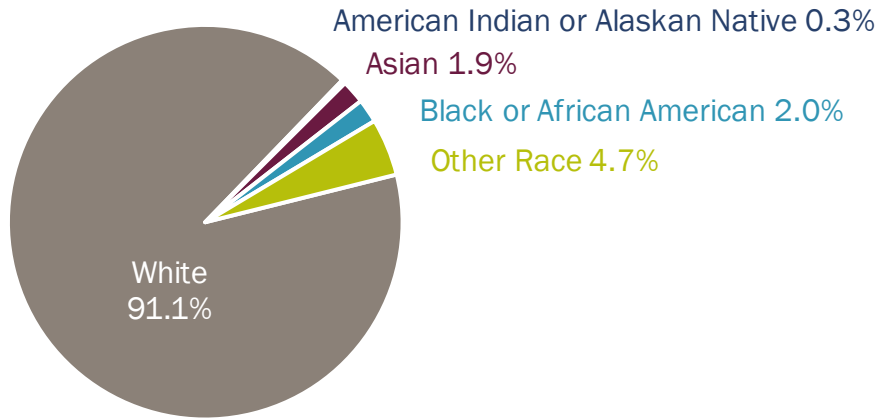
54% of people tested for COVID-19 are **female**.



46% of people tested for COVID-19 are **male**.

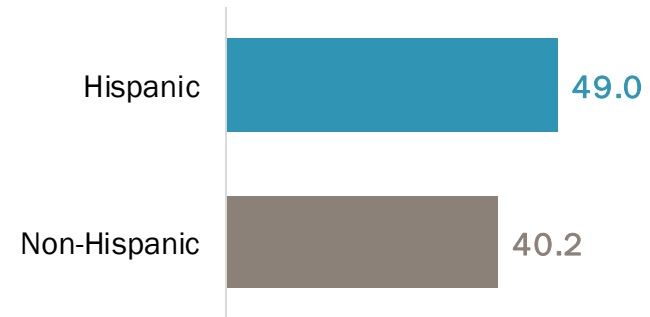
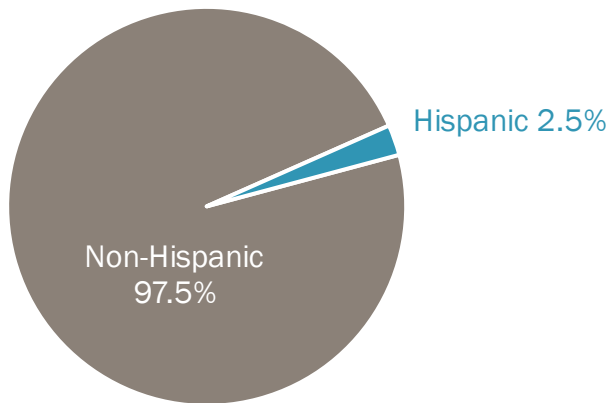
White Vermonters represent the majority of people tested in Vermont for COVID-19. Vermonters with other race have the highest rate of testing.

Rates per 100 Vermonters



Non-Hispanic Vermonters represent the majority of people tested in Vermont for COVID-19. Hispanic Vermonters have the higher rate of testing.

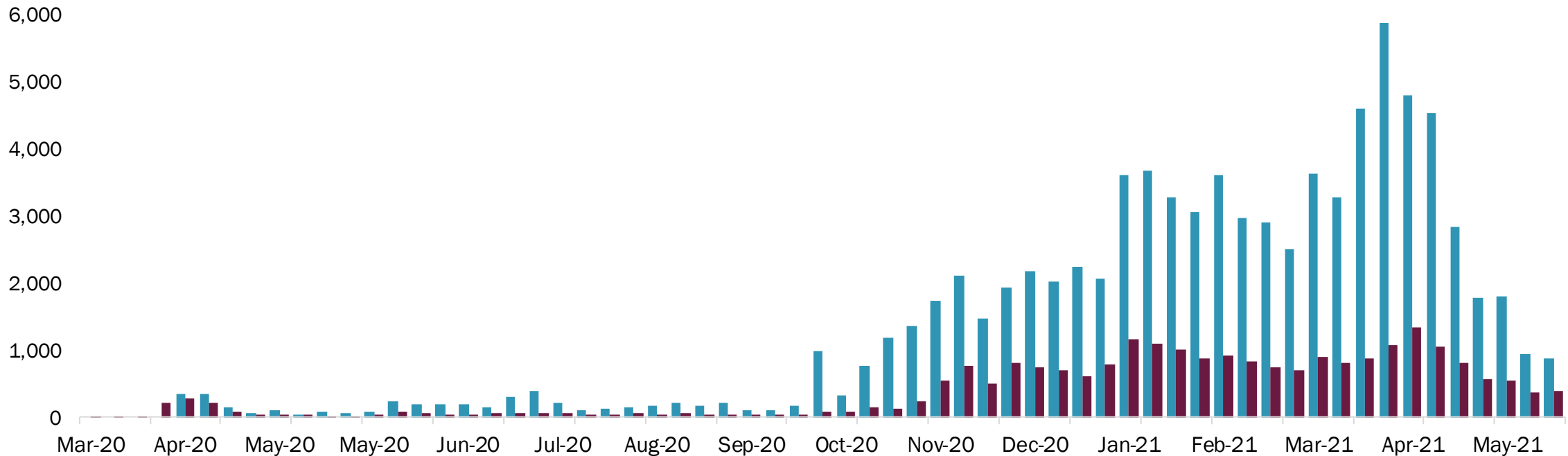
Rates per 100 Vermonters



Other Race includes people who identify as two or more races, or a race other than white, Asian, African American or Black, and American Indian or Alaskan Native.

Race is unknown in 23% of people tested (n = 91,168) and ethnicity is unknown in 36% of people tested (n = 138,887).

Contact tracers speak with both **cases** and their **close contacts** each week.



82

Number of full-time equivalent contact tracing staff trained

319

Cases interviewed last week

May 9 – May 15

875

Contacts named last week

May 9 – May 15

3.3

Average number of contacts per case*

*Since April 1, 2020

The number of confirmed cases may not match the number of cases interviewed. There is not always clean overlap between the week in which a case is confirmed and in which that case is interviewed (i.e., a case confirmed on Saturday afternoon may not be interviewed until Sunday morning). Some cases (long term care facility residents, for example) are not managed by the contact tracing team and are not “eligible” for interview. On 2/11/2021, the methodology for determining contact metrics was updated.

In the last two weeks (from May 2 to May 15):



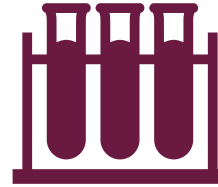
77%

Of cases were interviewed within 24 hours



72%

Of cases provided their close contacts



51%

Of contacts were tested within 14 days of exposure



8%

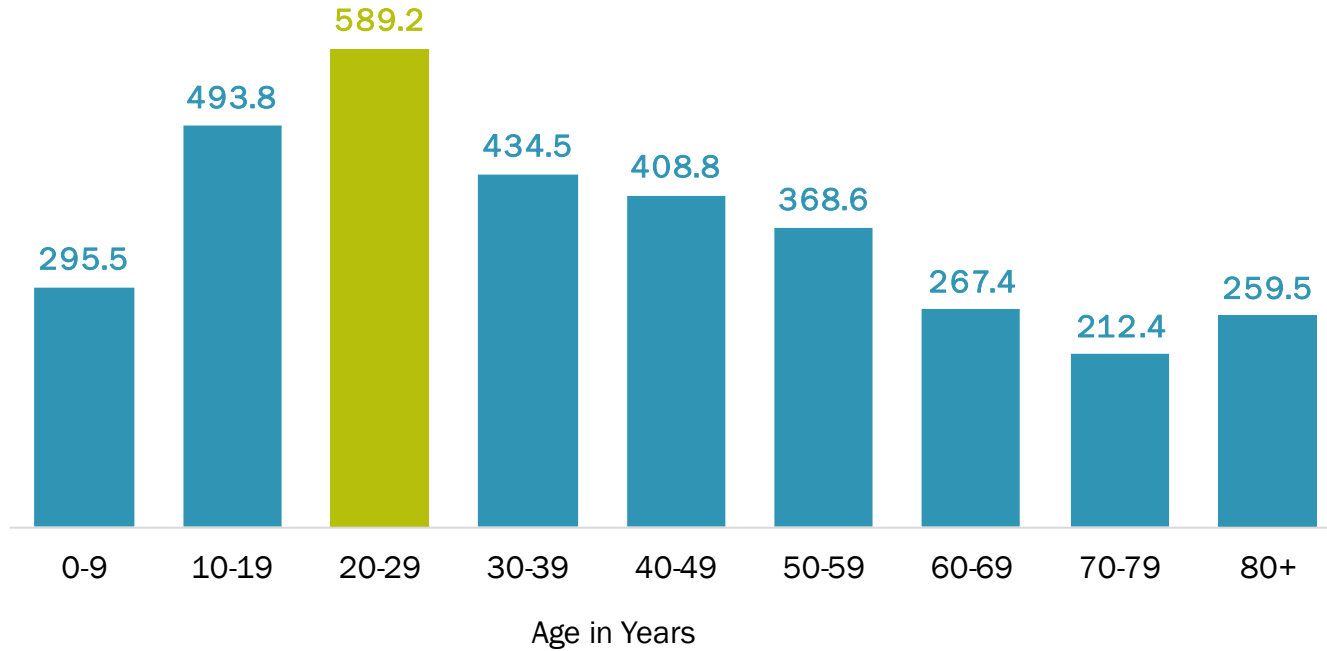
Of contacts became a case

Case Demographics

Who has been impacted by COVID-19 in Vermont?

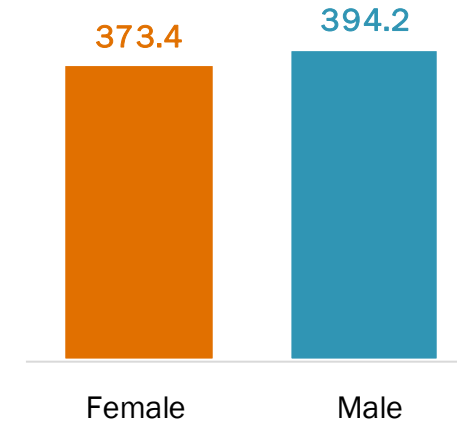
Rates of COVID-19 are highest among Vermonters 20-29 years old.

Rate per 10,000 Vermonters



Females and males have similar rates of COVID-19.

Rate per 10,000 Vermonters

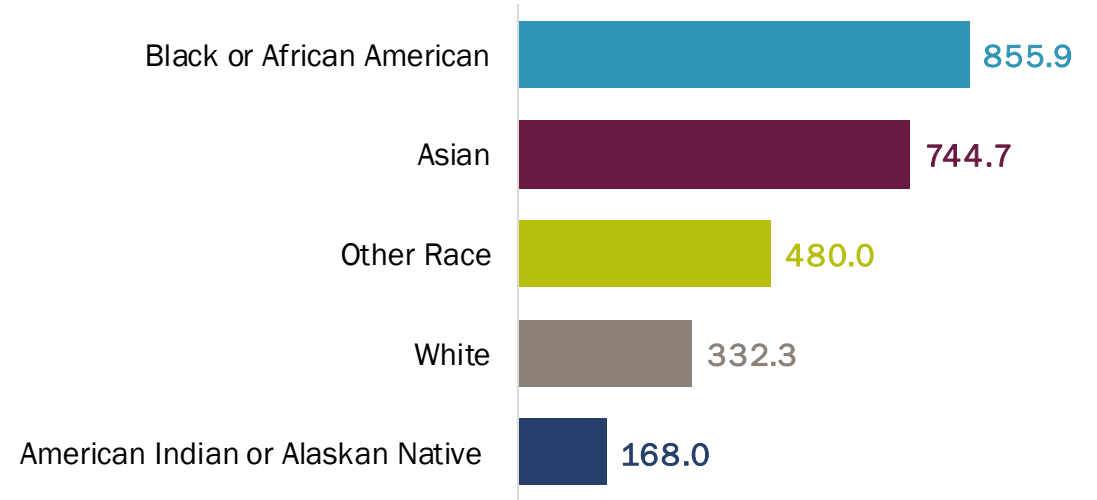
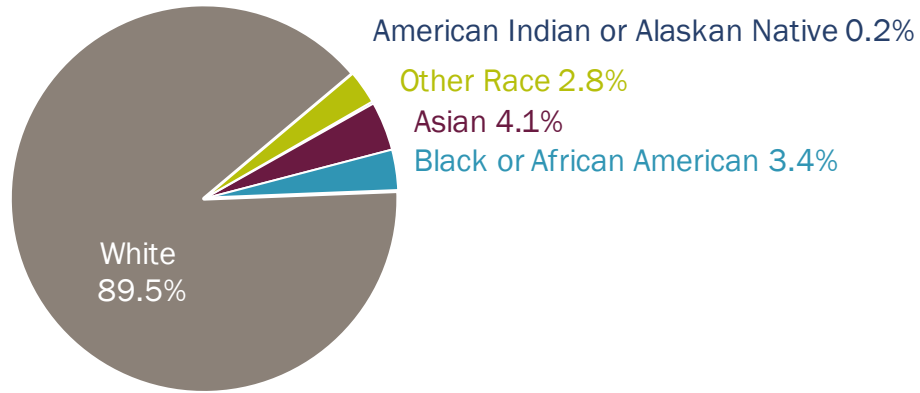


8% of Vermonters with COVID-19 have a disability*.

*The Health Department has complete data about disabilities for 5,396 people with COVID-19. The disability data gathered includes information about people with neurologic, neurodevelopmental, and intellectual disabilities, as well as physical, vision, and hearing impairments.

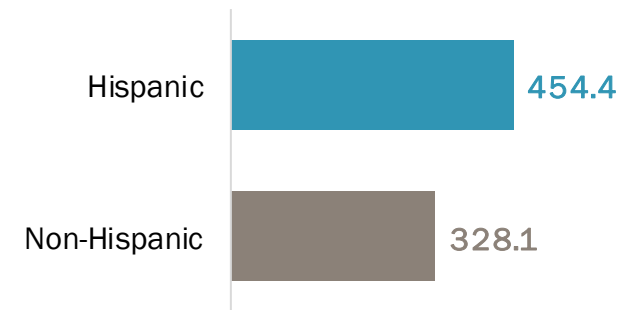
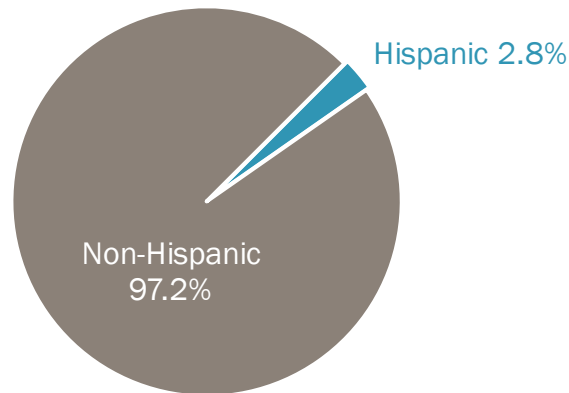
White Vermonters represent the majority of COVID-19 cases. African American Vermonters have the highest rate.

Rate per 10,000 Vermonters



Non-Hispanic Vermonters represent the majority of COVID-19 cases. Hispanic Vermonters have the higher rate.

Rate per 10,000 Vermonters



Other Race includes people who identify as two or more races, or a race other than white, Asian, African American or Black, and American Indian or Alaskan Native.

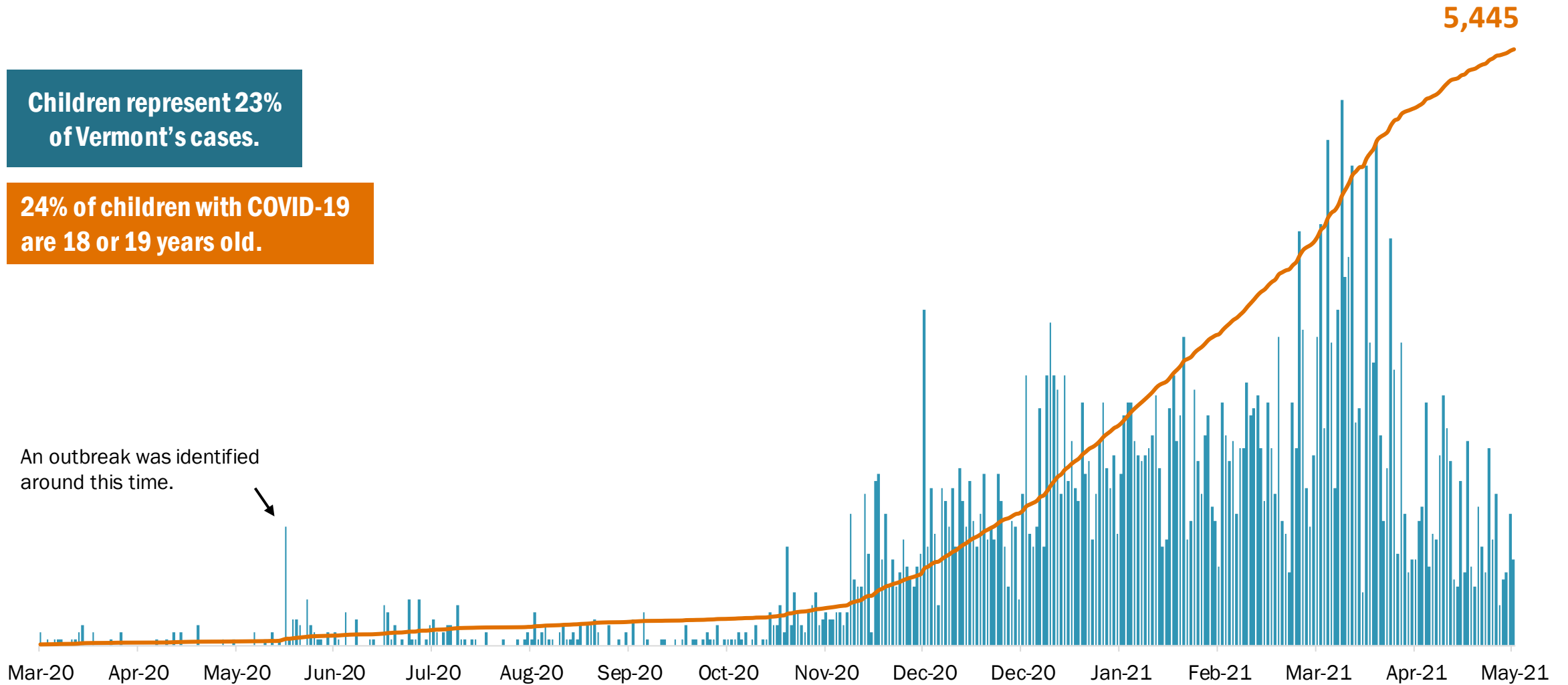
Race is unknown in 9% of cases (n = 2,190) and ethnicity is unknown in 14% of cases (n = 3,391).

On 3/12/2021, the pie chart methodology for percentage of race and ethnicity among cases was updated.

New and Cumulative Cases of Vermont Children (Age 19 and Younger) with COVID-19

Children represent 23% of Vermont's cases.

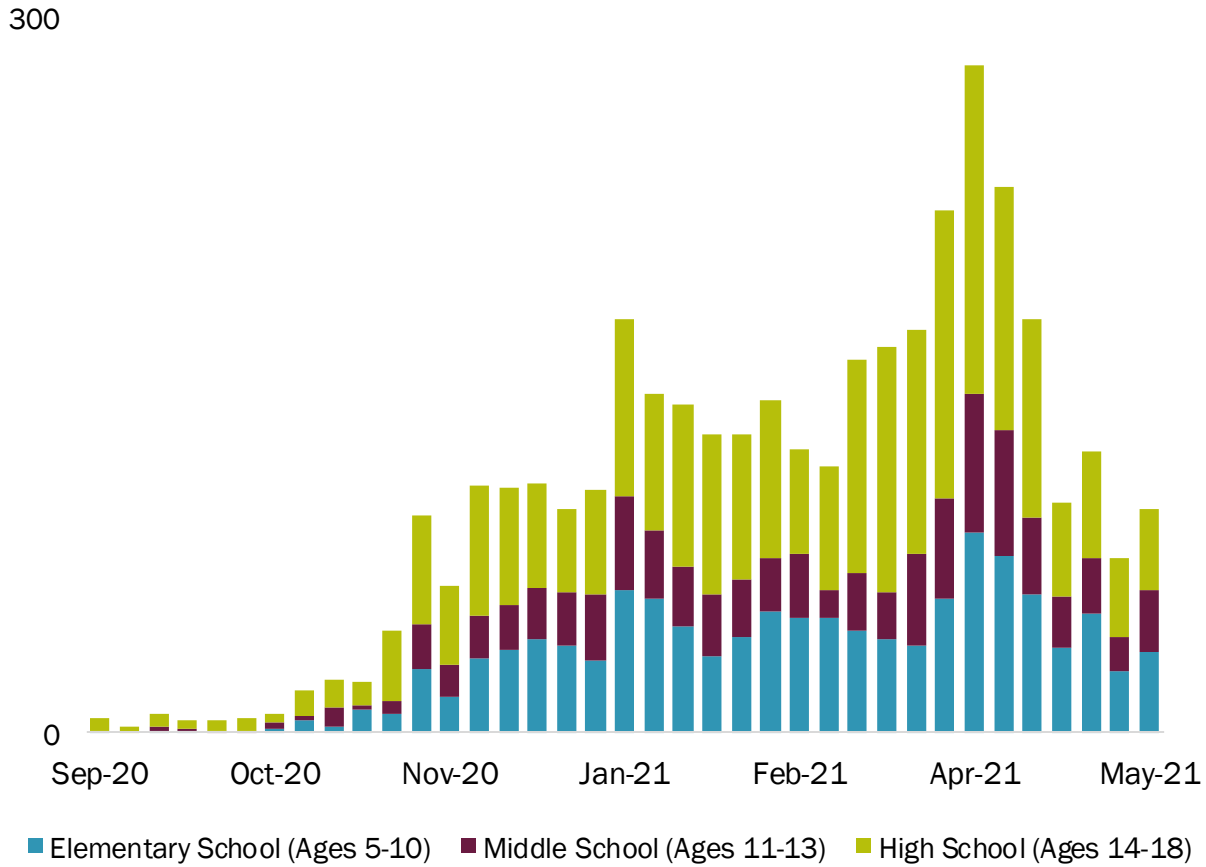
24% of children with COVID-19 are 18 or 19 years old.



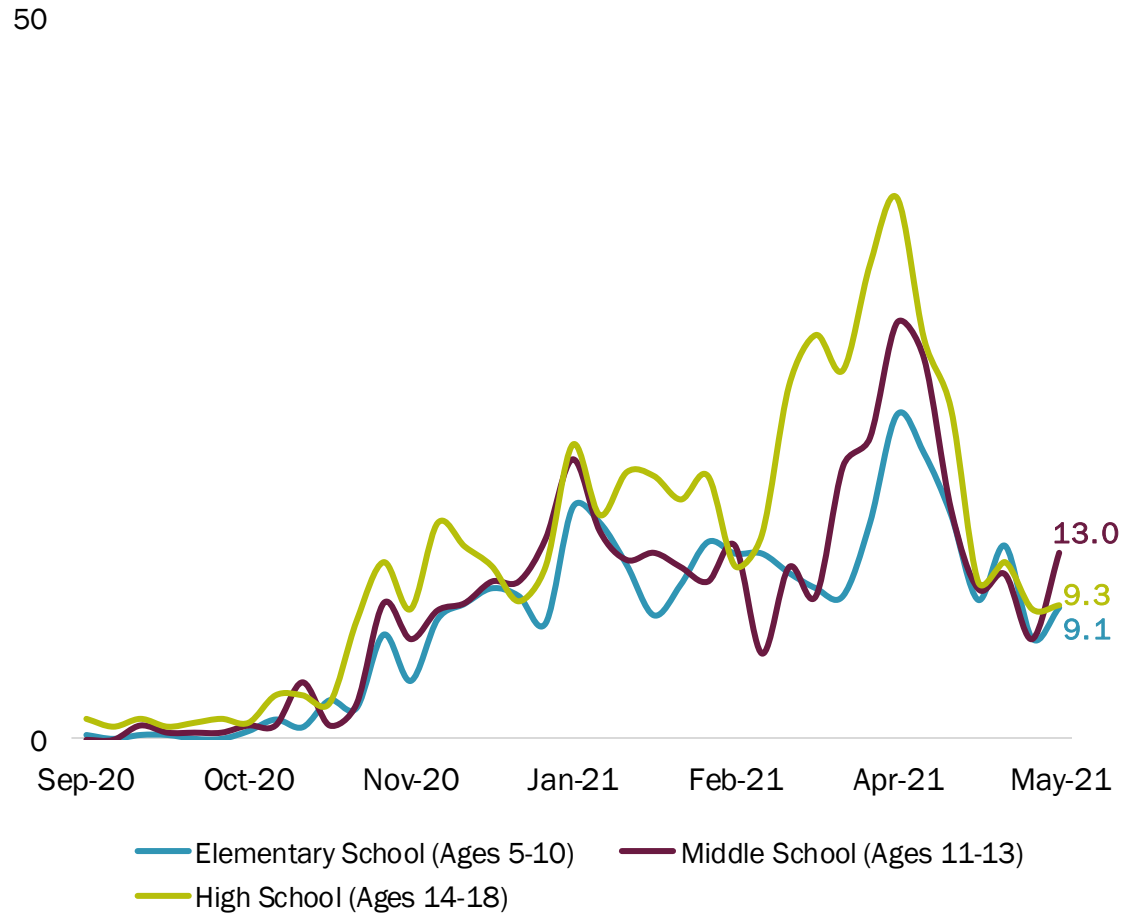
An outbreak was identified around this time.

Both the number and the rate of COVID-19 among school aged children continue to fluctuate.

Number of Cases

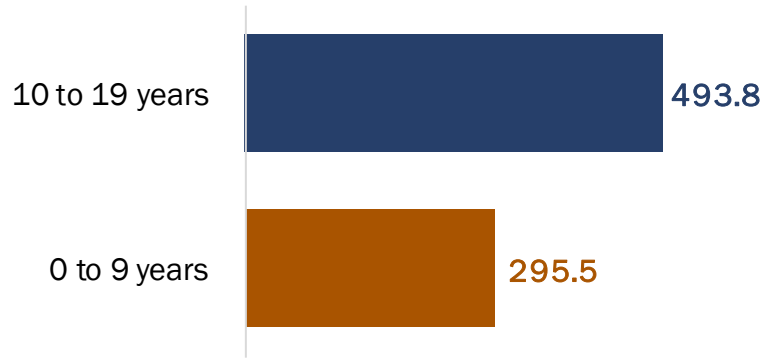


Rate per 10,000 Children



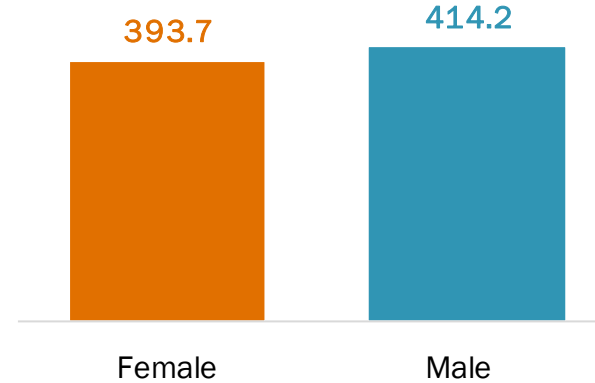
Older children have a higher rate of COVID-19 compared to younger children.

Rate per 10,000 Vermonters 0-19 years old

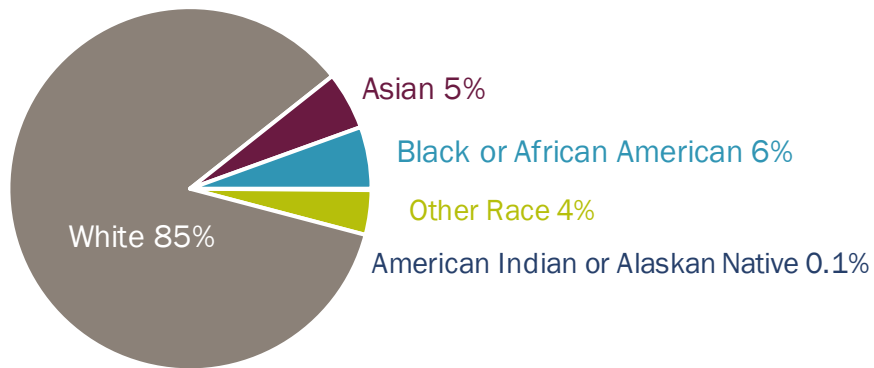


Female and male children have similar rates of COVID-19.

Rate per 10,000 Vermonters 0 to 19 years old

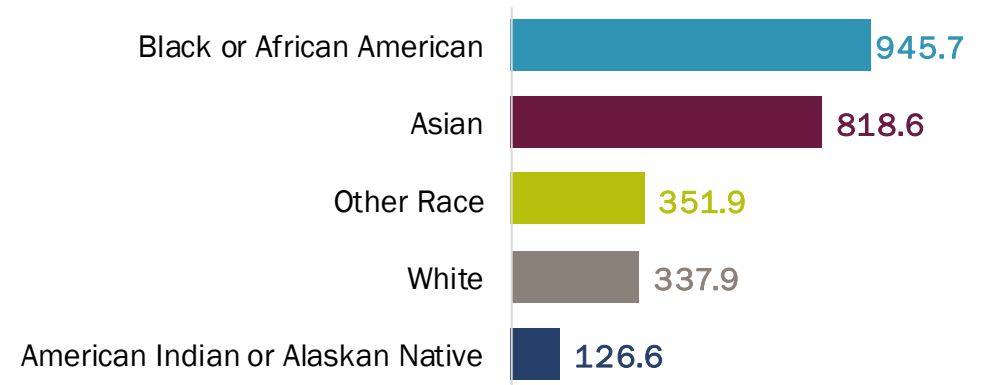


Among children with COVID-19, Black, Indigenous and people of color represent 15% of cases.



Among children with COVID-19, Black or African Americans have the highest rate.

Rate per 10,000 Vermonters 0 to 19 years

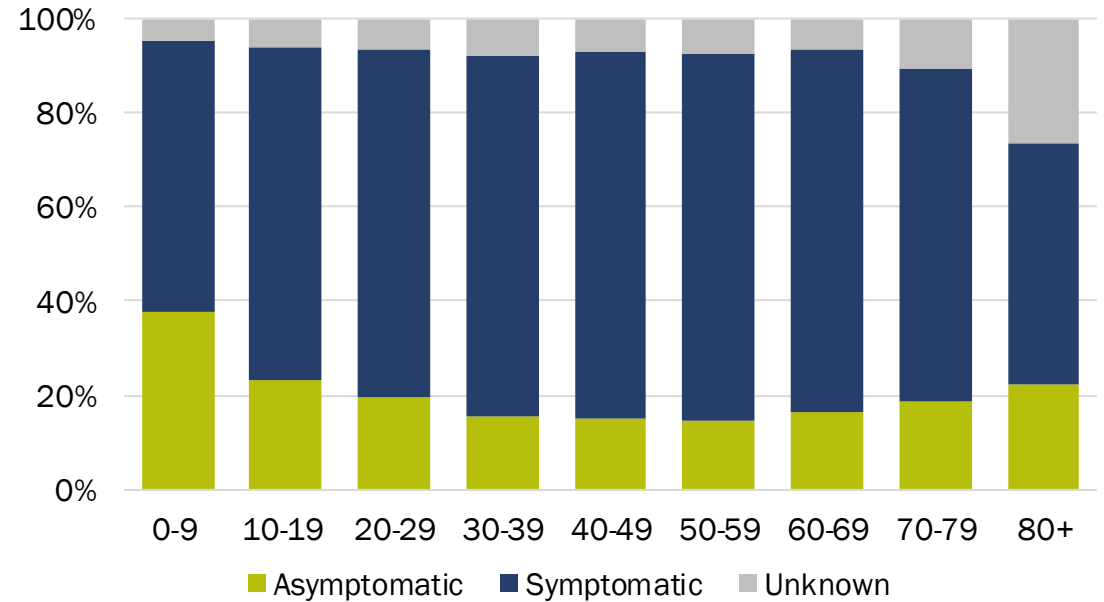


Sign or Symptom	Percent of Children with Symptom
Runny Nose	55%
Headache	46%
Cough	46%
Fatigue	41%
Sore Throat	38%
Muscle Pain	25%
Loss of Smell/Taste	24%
Fever	19%

5 days
Average illness duration among children

Among Vermont's children with COVID-19, there are currently no reported cases of multi-system inflammatory syndrome or deaths, and 10 hospitalizations.

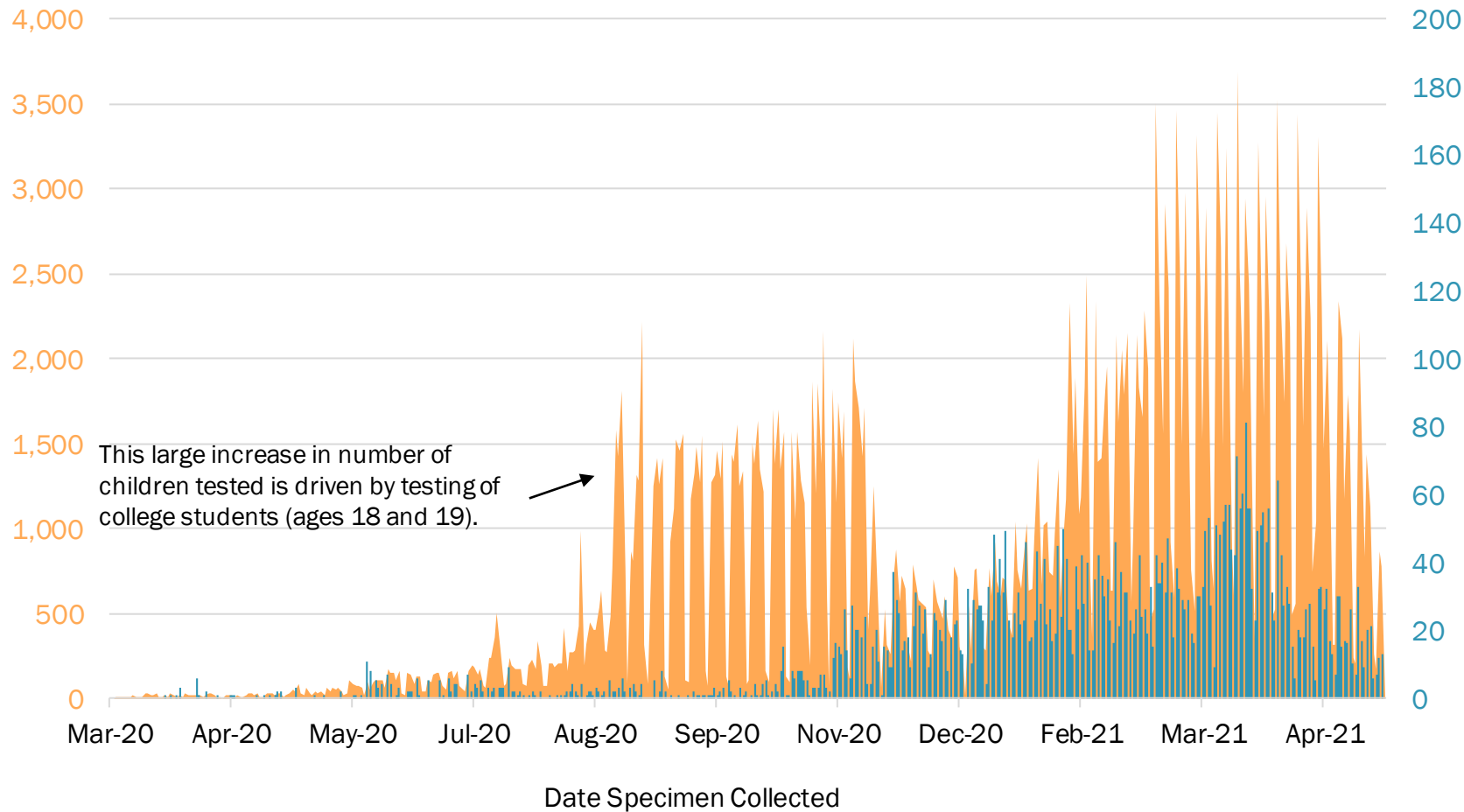
The percent of COVID-19 cases with **no symptoms is higher among children. More than one quarter (28%) of cases among children had **no symptoms** reported.**



69% of children with COVID-19 had known contact with somebody else who had COVID-19.

21% of children with COVID-19 were part of an outbreak.

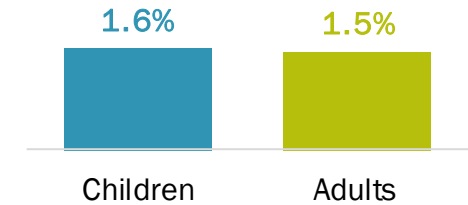
The number of **tests among children** for COVID-19 and the number of **positive tests** have increased over time.



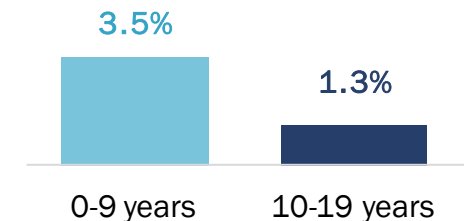
Total tests represents the total number of tests among children (specimen level).

There have been **348,008** COVID-19 tests completed among children.

Percent of tests positive among **children** is similar to **adults**.



Percent of tests positive among **younger children** is greater than **older children**, however many more older children have been tested.



Clinical Course

What symptoms have Vermonters experienced? How many have been hospitalized? How many have died?

8 days

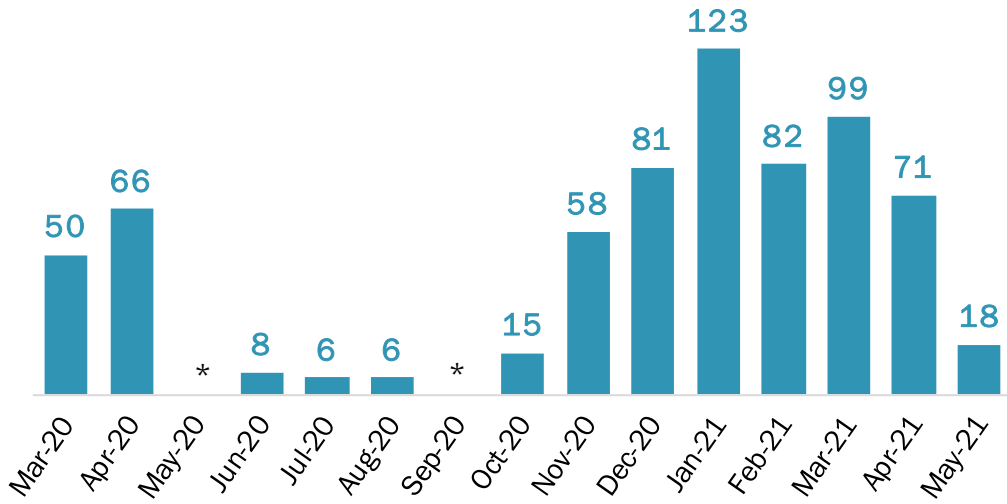
Average illness duration

73%

Cases with symptoms

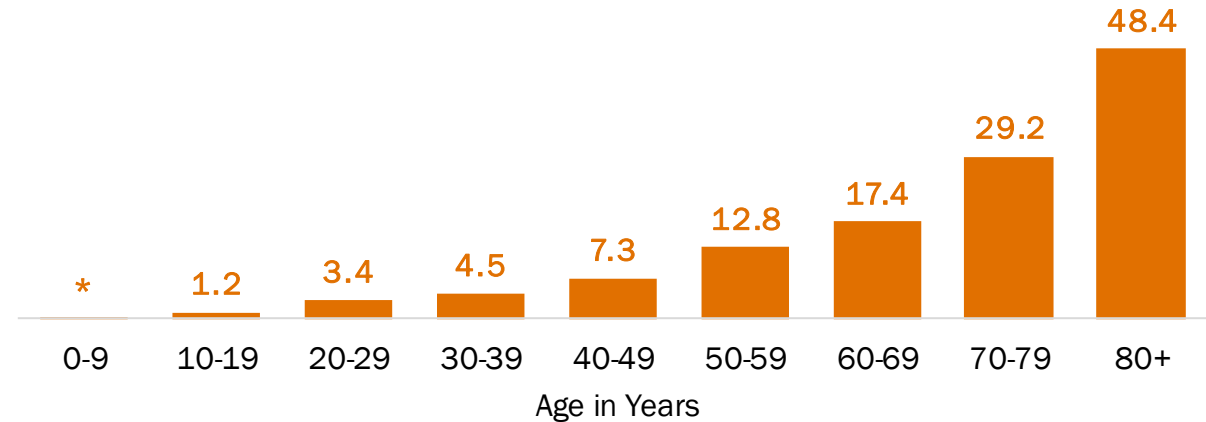
Sign or Symptom	Percent of Symptomatic Cases
Cough	58%
Fatigue	56%
Headache	54%
Runny Nose	53%
Muscle Pain	44%
Sore Throat	37%
Loss of Smell/Taste	36%
Felt Feverish	35%

Number of Hospitalizations Over Time



Vermonters 80 years and older are more likely to be hospitalized for COVID-19.

Rate per 10,000 Vermonters

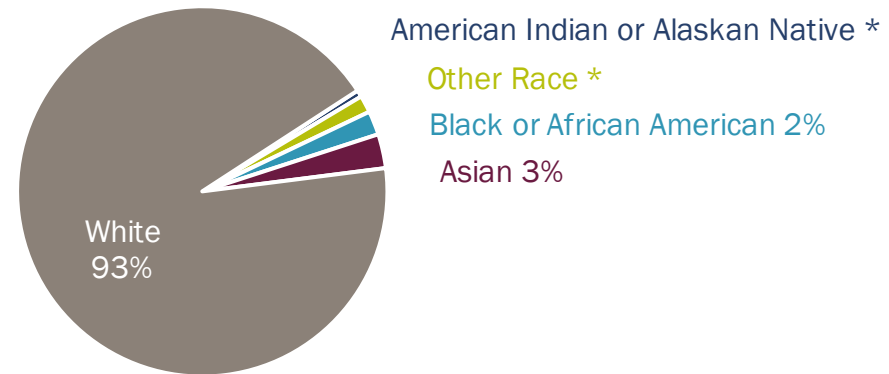


8%
Of those hospitalized
were on a ventilator

24%
Of those hospitalized
were in the ICU

7 days
Average hospital stay
(range: 0-78 days)

White Vermonters represent a majority of hospitalized COVID-19 cases.

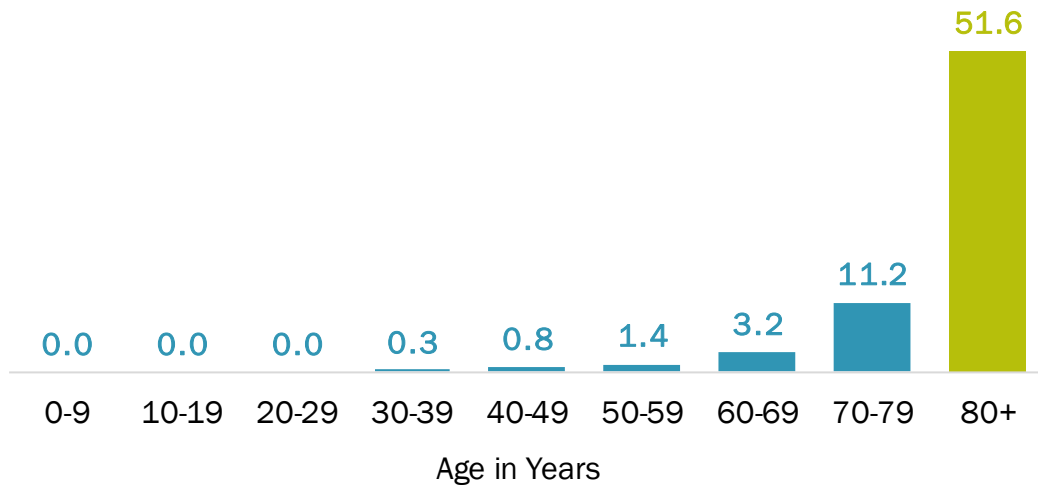


Please note 17 hospitalized persons are missing race information.

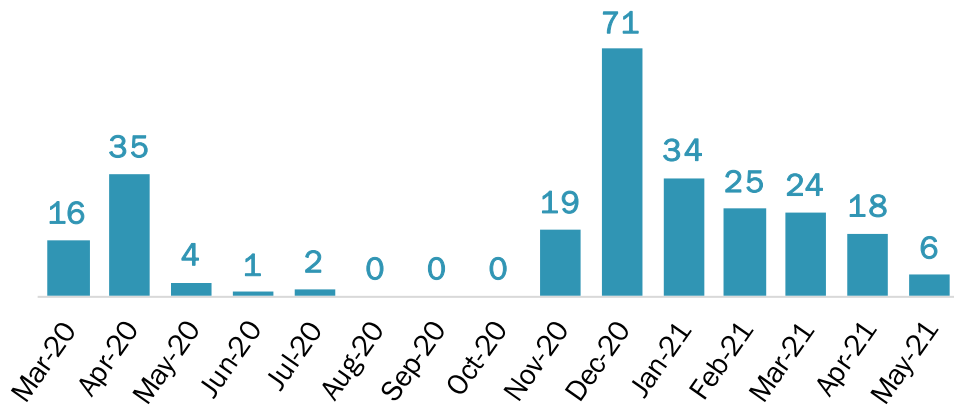
*Values suppressed due to small numbers.

Vermonters 80 years and older have higher rates of COVID-19 death than other age groups.

Rate per 10,000 Vermonters



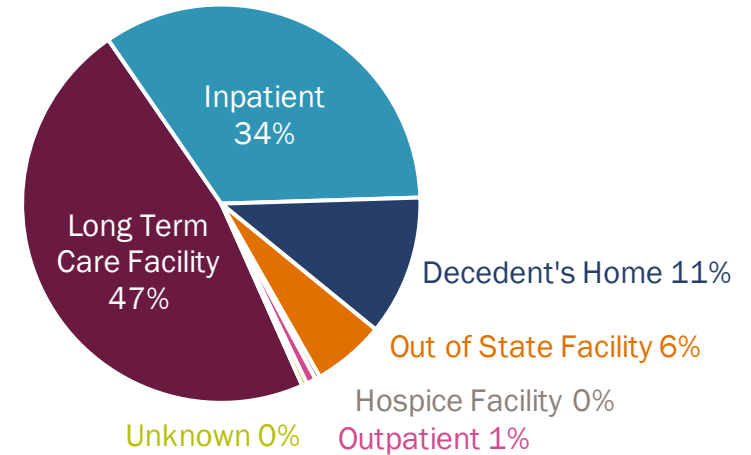
Number of Deaths Over Time



Note: On April 9, 2021 the methodology for generating this graph changed. It now shows number of deaths by the month in which the person died, not the month in which their case of COVID-19 was reported to the Health Department.

Vermont Department of Health

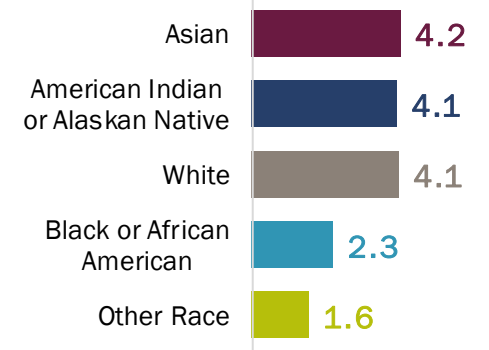
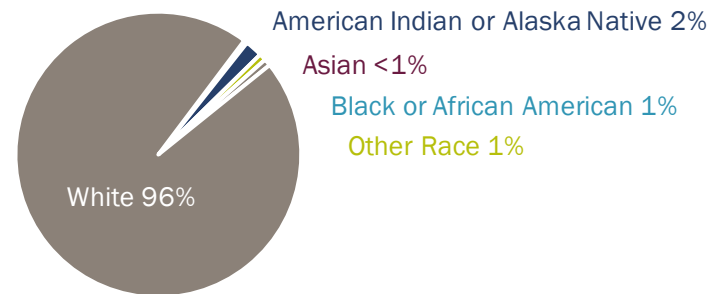
Most COVID-19 deaths occurred in a long-term care facility or an inpatient hospital setting.



White Vermonters represent a majority of COVID-19 deaths.

Death rates by race are similar.

Rate per 10,000 Vermonters



Note: One death is missing race information. One death has been identified as Hispanic or Latino.

Death rates by race are not statistically different.

Outbreaks

How is COVID-19 impacting group settings?

Outbreaks can occur in many types of places. Here is what outbreak means in these places:

	Outbreak Setting		
	Healthcare and Supportive Residential	Education	Businesses/Workplaces
Outbreak Definition	Three or more patients/clients/residents or staff members with COVID-19 and known connections to each other in the facility setting.	Three or more COVID-19 cases among children/ students or teachers/staff with known connections in the educational setting, and the cases: <ul style="list-style-type: none"> • have an illness start or a positive test collection date within 14 days, and • do not live together or have close contact with each other in another setting, and • there is no other more likely source of exposure. 	Three or more COVID-19 cases among employees or customers at the same business, and the cases: <ul style="list-style-type: none"> • had contact with each other in the business, and • have an illness start or positive test collection date within 14 days, and • do not live together or have close contact with each other in another setting, and • there is no other more likely source of exposure.
Outbreak Resolved When	No new COVID-19 positive tests occur after 28 days from the last positive test or illness start date (whichever is later).	When no new confirmed or positive cases are identified after 28 days (two incubation periods) from the last known facility exposure from a case, or if unknown, the last case's specimen collection or illness onset date (whichever is later).	When no new confirmed or probable cases are identified after 28 days (two incubation periods) from the last known business exposure from a case, or if unknown, the last case's specimen collection date or illness onset date (whichever is later).
Examples of Where Definition is Used	Inpatient and outpatient healthcare settings (including long-term care facilities), correctional facilities, and homeless shelters.	K-12 schools, colleges/universities, and childcare.	All workplaces not elsewhere classified (e.g. restaurants, grocery stores, ski resorts, manufacturing, construction, etc.).

Outbreak definitions changed on 3/28/2021, see page 02 for more details.

Outbreaks can occur in many types of places. Here is what outbreak means in these places:

	Outbreak Setting	
	Social Gatherings/Events	Senior Independent Living and Income-Restricted Multifamily Housing
Outbreak Definition	<p>Three or more COVID-19 cases involving more than one family or household where the cases:</p> <ul style="list-style-type: none"> • have an illness start date or positive test collection date within 14 days, and • are linked through contact or location, and • are not linked to another outbreak, and • attended a social event/gathering, and • there is no other more likely source of exposure. 	<p>Three or more COVID-19 cases involving different households or staff where the cases:</p> <ul style="list-style-type: none"> • have an illness start date or positive test collection date within 14 days, and • live, work, or provide services at the same multifamily housing facility, and • had contact with each other at the facility, and • there is no other more likely source of exposure. <p>OR</p> <p>Three or more COVID-19 cases involving different households or staff where the cases:</p> <ul style="list-style-type: none"> • have an illness start date or positive test collection date within 14 days, and • live, work, or provide services at the same multifamily housing facility, and • there is no other more likely source of exposure.
Outbreak Resolved When	When No new confirmed or probable COVID-19 cases after 28 days (two incubation periods) have passed since the most recent case's specimen collection date or illness onset date (whichever is later).	
Examples of Where Definition is Used	Parties, meetings, celebrations, recreational sports, fitness classes, etc.	Senior independent living facilities and other high risk community independent living settings (not meant for general community multifamily independent living settings).



21% of people testing positive for COVID-19 are associated with an outbreak.



Outbreaks

31 Active

473 Resolved*

31 Primary

0 Secondary

*See previous page for definitions of resolved outbreaks.

Congregate Care & Living

 **852** cases among residents

 **425** cases among facility staff

Schools & Child Care

 **1,704** cases among children & staff

**4,993
Unique
Cases**

Workplaces/Businesses

 **1,120** cases among employees

Some cases may be counted in more than one outbreak. The unique case count is the cumulative outbreak count, where all cases are counted only once.

Acute & Outpatient Healthcare

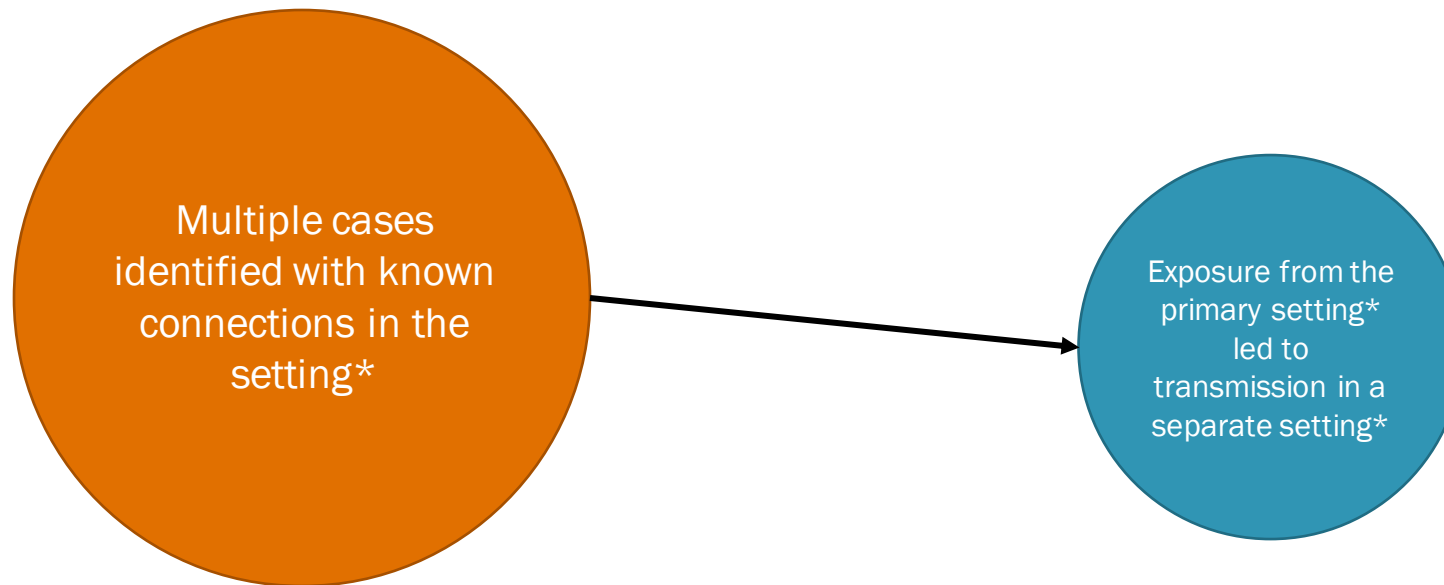
 **90** cases

Community

 **963** cases

36 primary outbreaks have led to 61 secondary outbreaks.

Secondary outbreaks are when multiple cases occur in a new setting as a result of spread from the primary outbreak. Transmission is largely, but not exclusively, happening among people interacting in small groups of people they trust in settings such as private parties, recreational sports, workplaces, and schools.



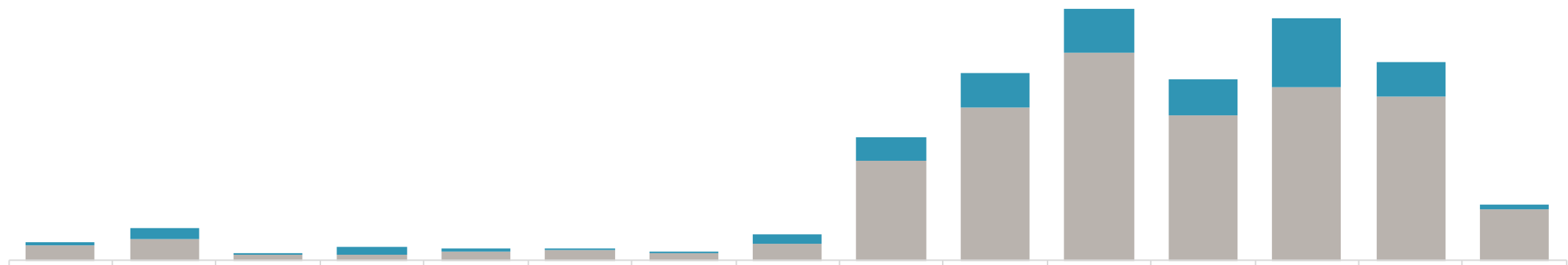
*See outbreak definitions on page 24-25 for setting descriptions.

Vermont COVID-19 Cases Associated with an Outbreak Over Time

6000

0

Mar-20 Apr-20 May-20 Jun-20 Jul-20 Aug-20 Sep-20 Oct-20 Nov-20 Dec-20 Jan-21 Feb-21 Mar-21 Apr-21 May-21

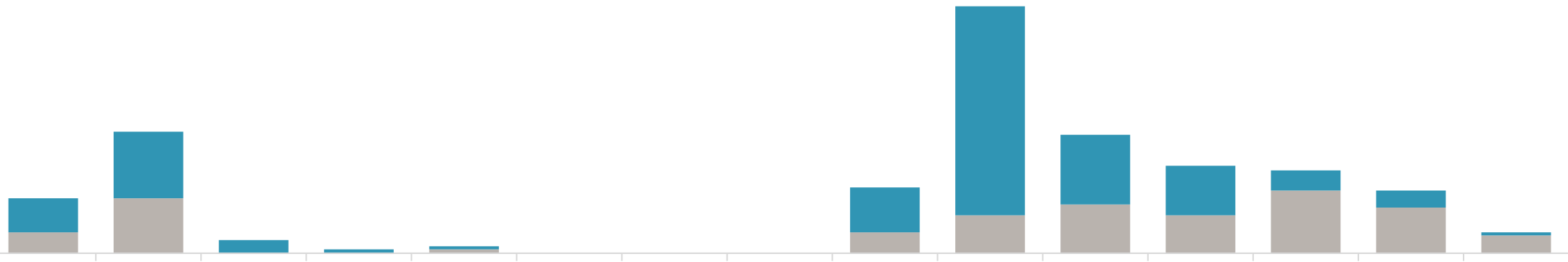


Vermont COVID-19 Deaths Associated with an Outbreak Over Time

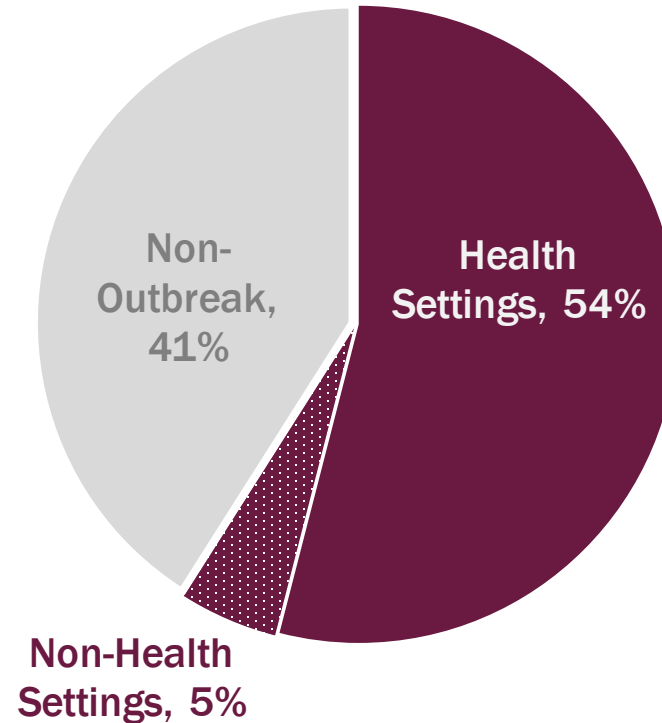
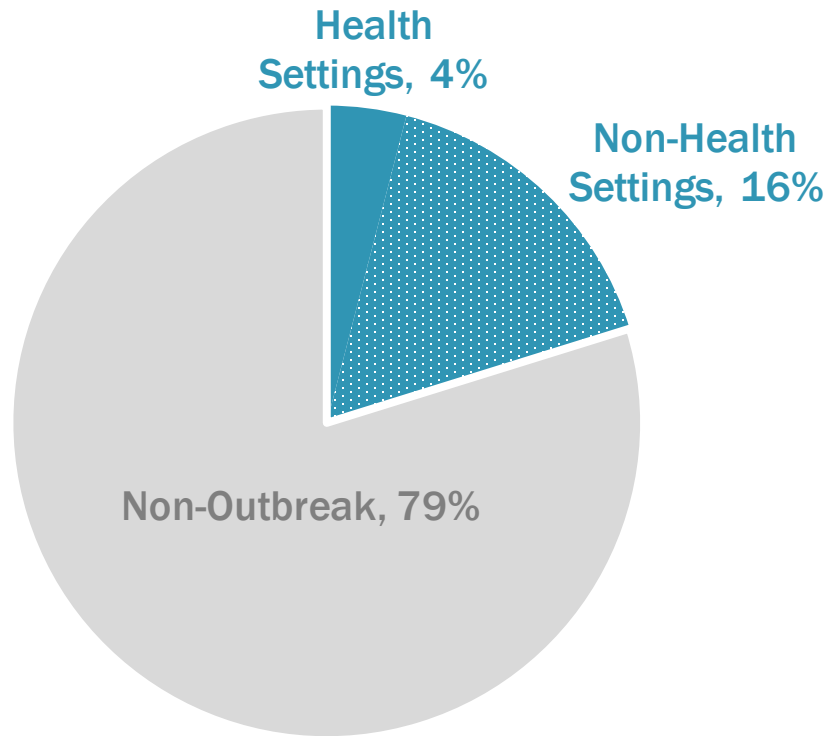
80

0

Mar-20 Apr-20 May-20 Jun-20 Jul-20 Aug-20 Sep-20 Oct-20 Nov-20 Dec-20 Jan-21 Feb-21 Mar-21 Apr-21 May-21



While only 21% of all people testing positive for COVID-19 are associated with an outbreak, 59% of COVID-19-related deaths occur in outbreak settings.



Values in these charts are rounded to the nearest whole number and therefore may not always add to 100% due to error introduced in rounding.

Note: Examples of a health setting include long term care or assisted living facilities, therapeutic treatment centers, and behavioral health institutions. Examples of a non-health setting include correctional facilities, senior housing communities, businesses, and homeless shelters. Vermont has not experienced an outbreak in all health and non-health settings.

Similar percentages of **females** and **males** with COVID-19 are associated with outbreaks

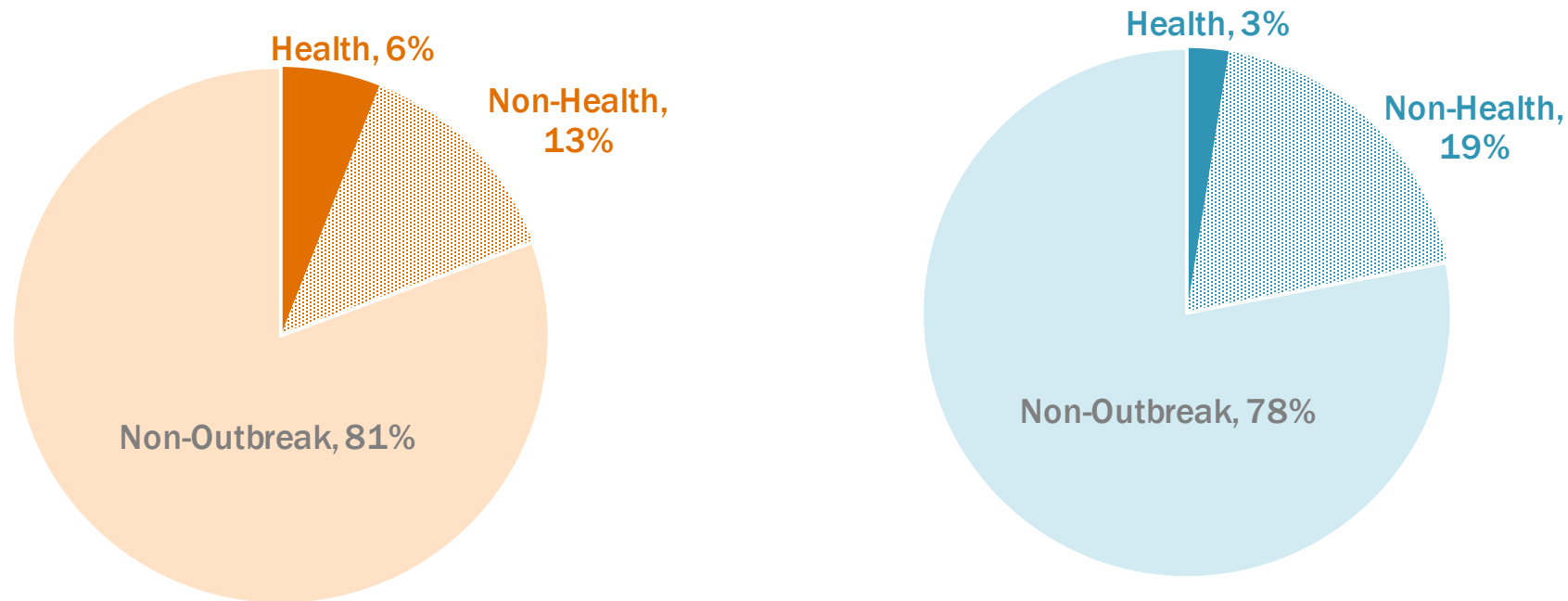


19% of **females** with COVID-19 are associated with an outbreak.



22% of **males** with COVID-19 are associated with an outbreak.

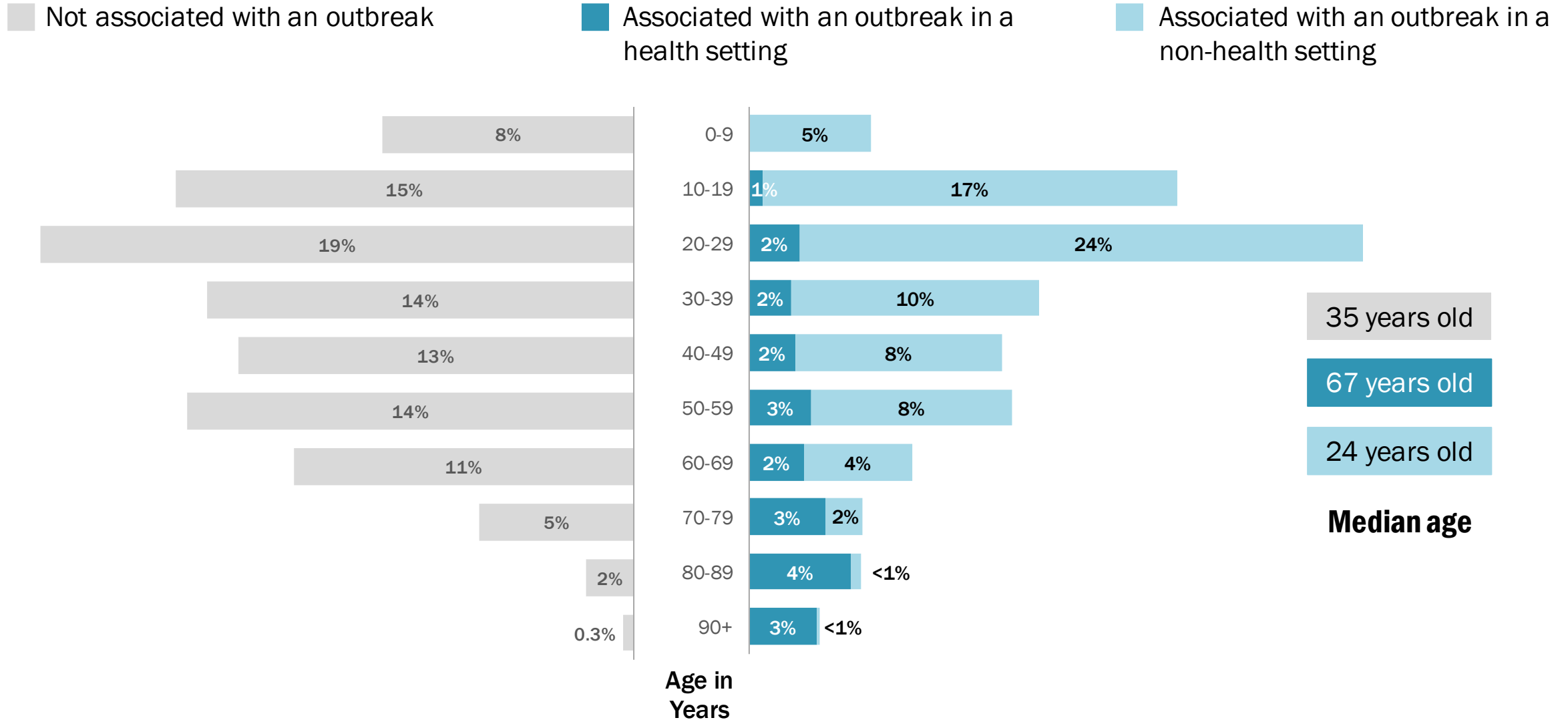
Females with COVID-19 are more likely to be associated with outbreaks in health settings than **males**.



Values in these charts are rounded to the nearest whole number and therefore may not always add to 100%. Percentages by outbreak type are rounded to the whole number, but combined totals consider the full percentages.

Note: Examples of a health setting include long-term care or assisted living facilities, therapeutic treatment centers, and behavioral health institutions. Examples of a non-health setting include correctional facilities, senior housing communities, businesses, and homeless shelters.

Percent of People Testing Positive for COVID-19 by Outbreak Status and Age



Note: Examples of a health setting include long-term care or assisted living facilities, therapeutic treatment centers, and behavioral health institutions. Examples of a non-health setting include correctional facilities, senior housing communities, businesses, and homeless shelters.

Vaccine Breakthrough Cases

This section is on fully-vaccinated Vermonters who got infected with COVID-19.

What does vaccine breakthrough mean?

- **Vaccine breakthrough happens when a fully-vaccinated person gets infected with COVID-19.**
- **Fully-vaccinated means 14 days have passed after a person receives their second dose of the Pfizer or Moderna vaccine, or single dose of the one dose Johnson & Johnson vaccine.**
- **COVID-19 vaccines prevent most people from getting seriously ill from COVID-19. However, the vaccines are not 100% effective. This means a very small number of fully-vaccinated people will still get sick with COVID-19.**

Vaccine breakthrough happens with any vaccine including measles, mumps, flu and others.

About 1% of cases since January 2021 have been among fully-vaccinated Vermonters.

There were 199 vaccine breakthrough cases among Vermonters.

Of those cases, there were:

8 hospitalizations; 4% of vaccine breakthrough cases have been hospitalized

Less than 6 deaths*; less than 2% of vaccine breakthrough cases have died

Almost 301,400 people have been fully-vaccinated in Vermont, to date. The breakthrough cases represent a small portion, about 0.07%, of the fully-vaccinated population.

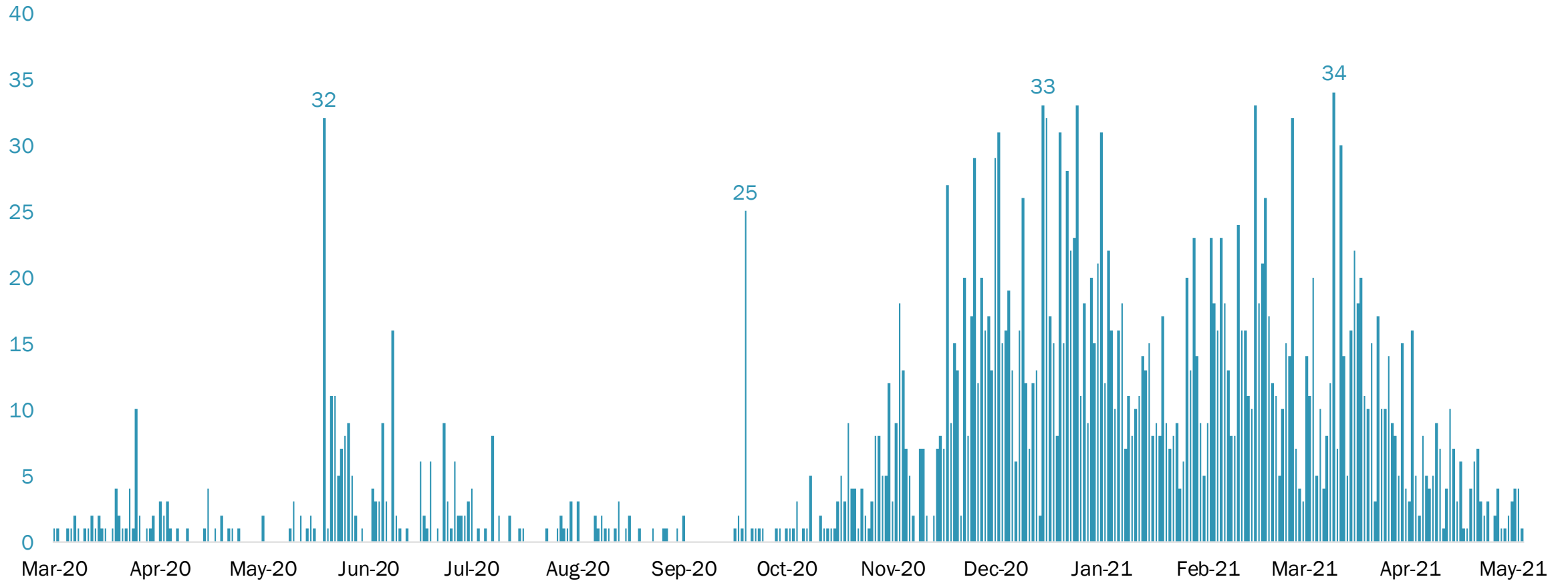
*When the numbers are below 6, the number is not shown to protect people's health privacy.

Source: Vermont Department of Health, 2020-2021.

Weekly Spotlight: Cases among Black, Indigenous and People of Color (BIPOC)

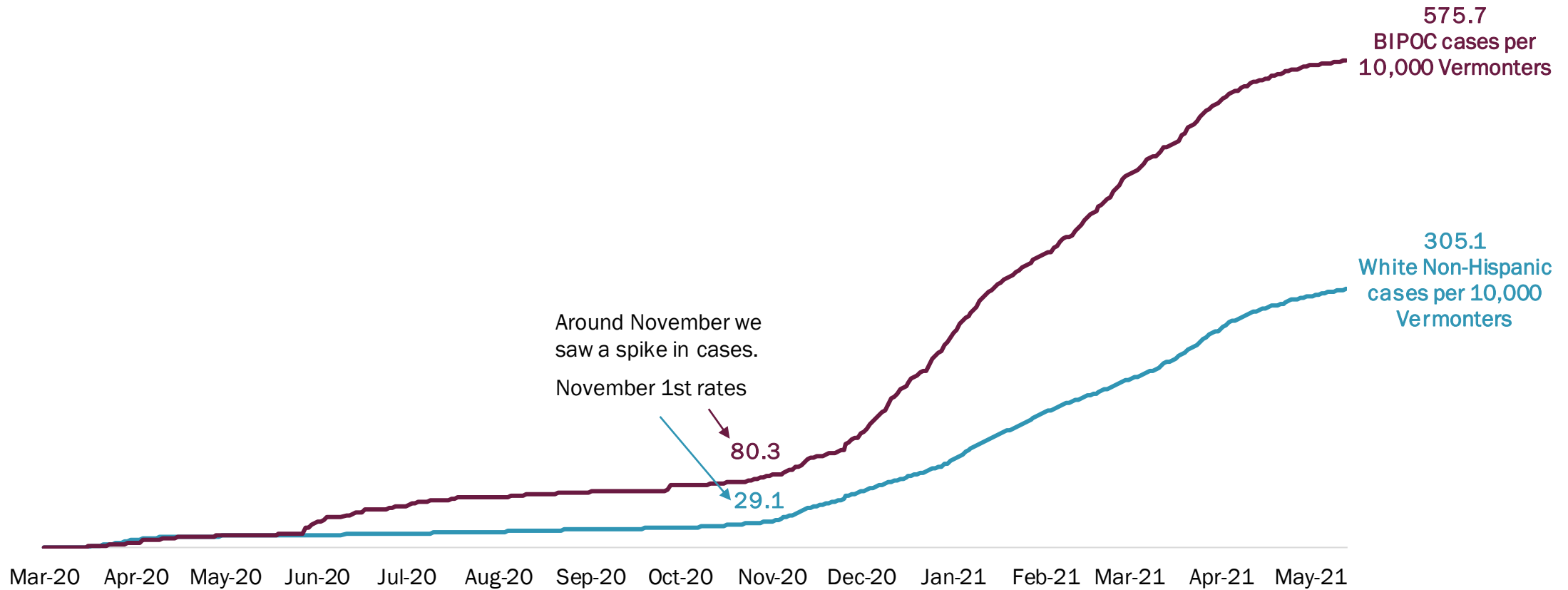
There is a disproportionate number of BIPOC with COVID-19 in Vermont. This section focuses on the 2,674 Vermont resident cases who are Asian, African American or Black, American Indian or Alaskan Native, Hispanic or race other than white.

New COVID-19 Cases among BIPOC



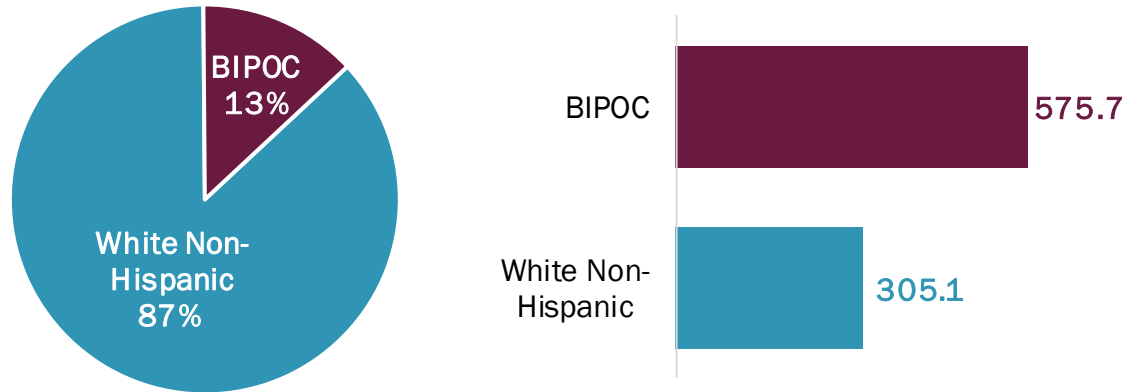
Rates of COVID-19 among BIPOC and White Non-Hispanic Vermonters Over Time

Rate per 10,000



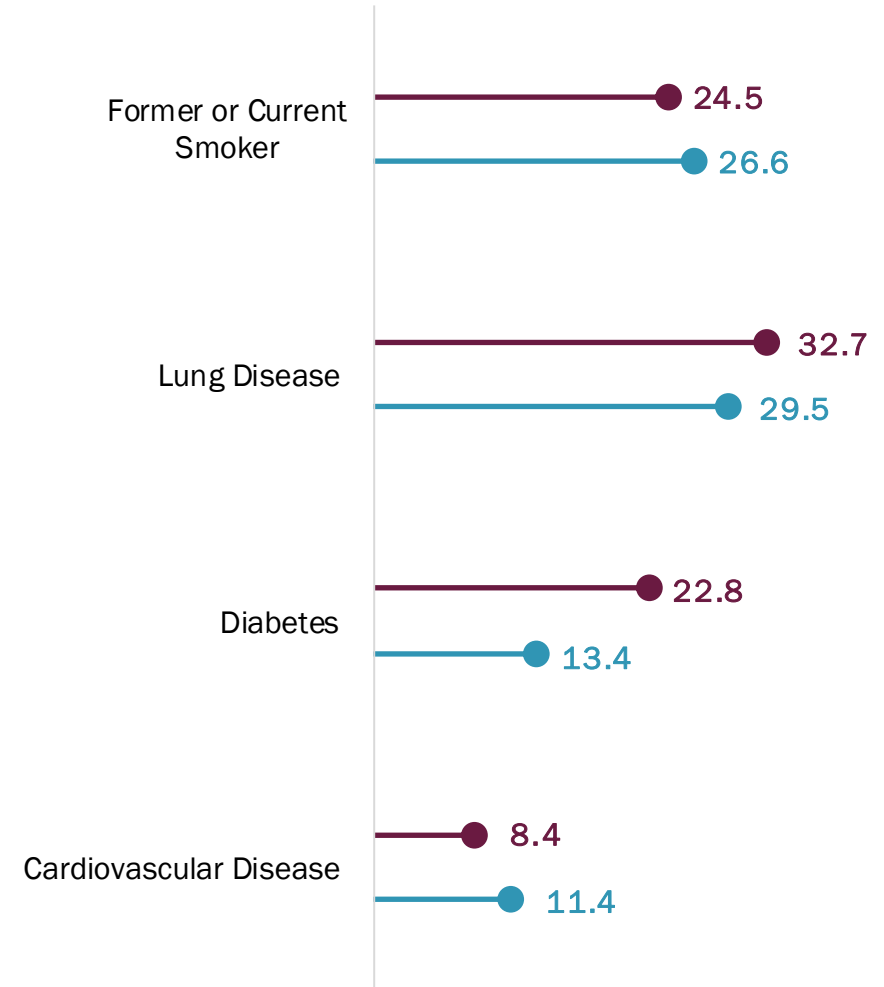
1 in 8 COVID-19 cases are BIPOC. Rates of COVID-19 are nearly 2 times higher for BIPOC compared with white non-Hispanic residents.

Rates per 10,000 Vermont BIPOC or white non-Hispanic residents



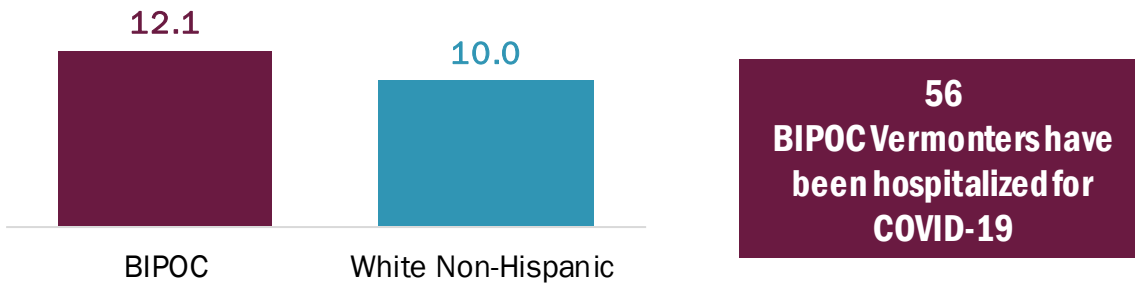
BIPOC with COVID-19 have higherrates of lung disease and diabetes compared with white non-Hispanic people with COVID-19.

Rate per 10,000 Vermont BIPOC or white non-Hispanic residents



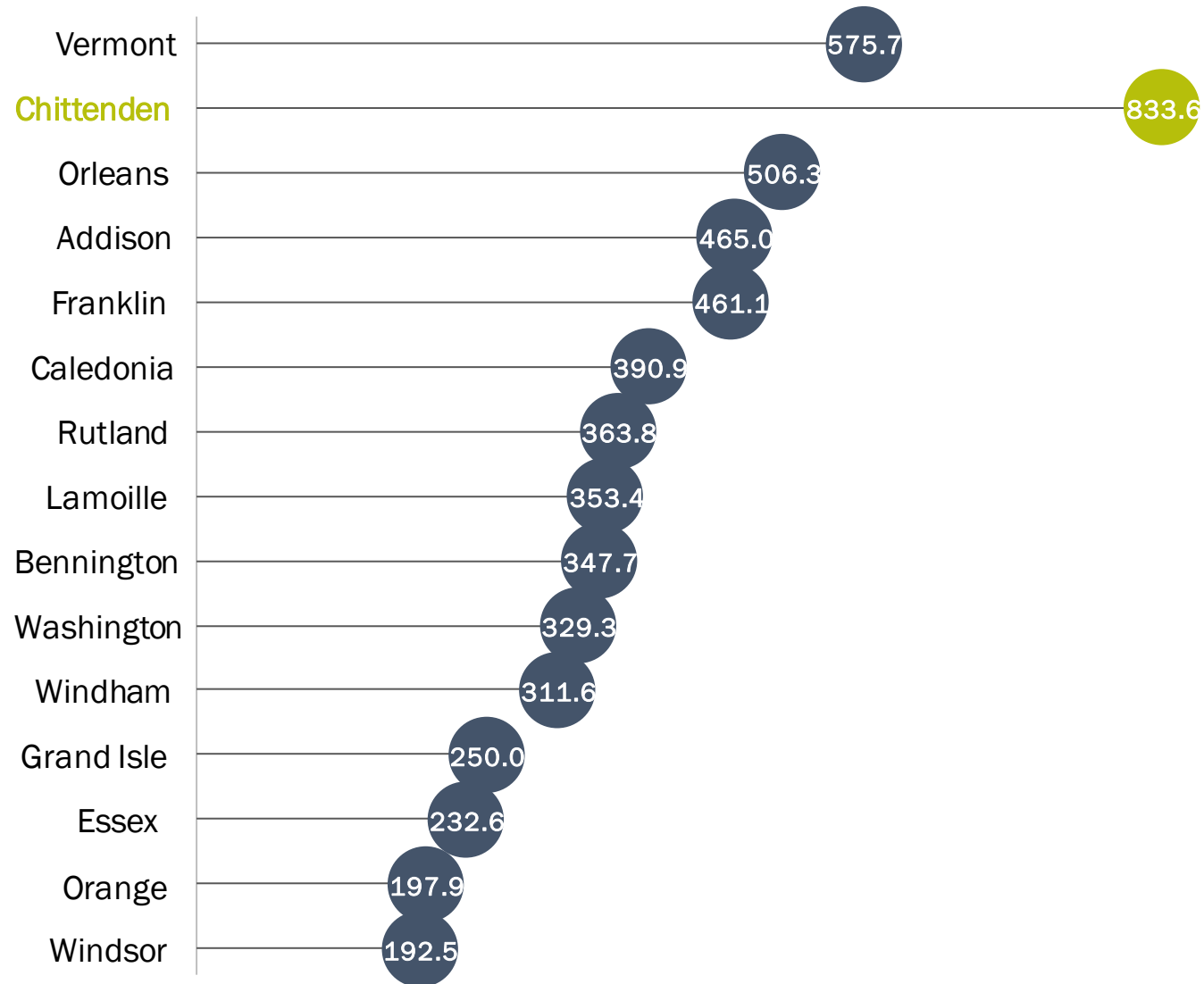
BIPOC with COVID-19 have a higher hospitalization rate than white non-Hispanic people with COVID-19.

Rate per 10,000 Vermont BIPOC and white non-Hispanic residents

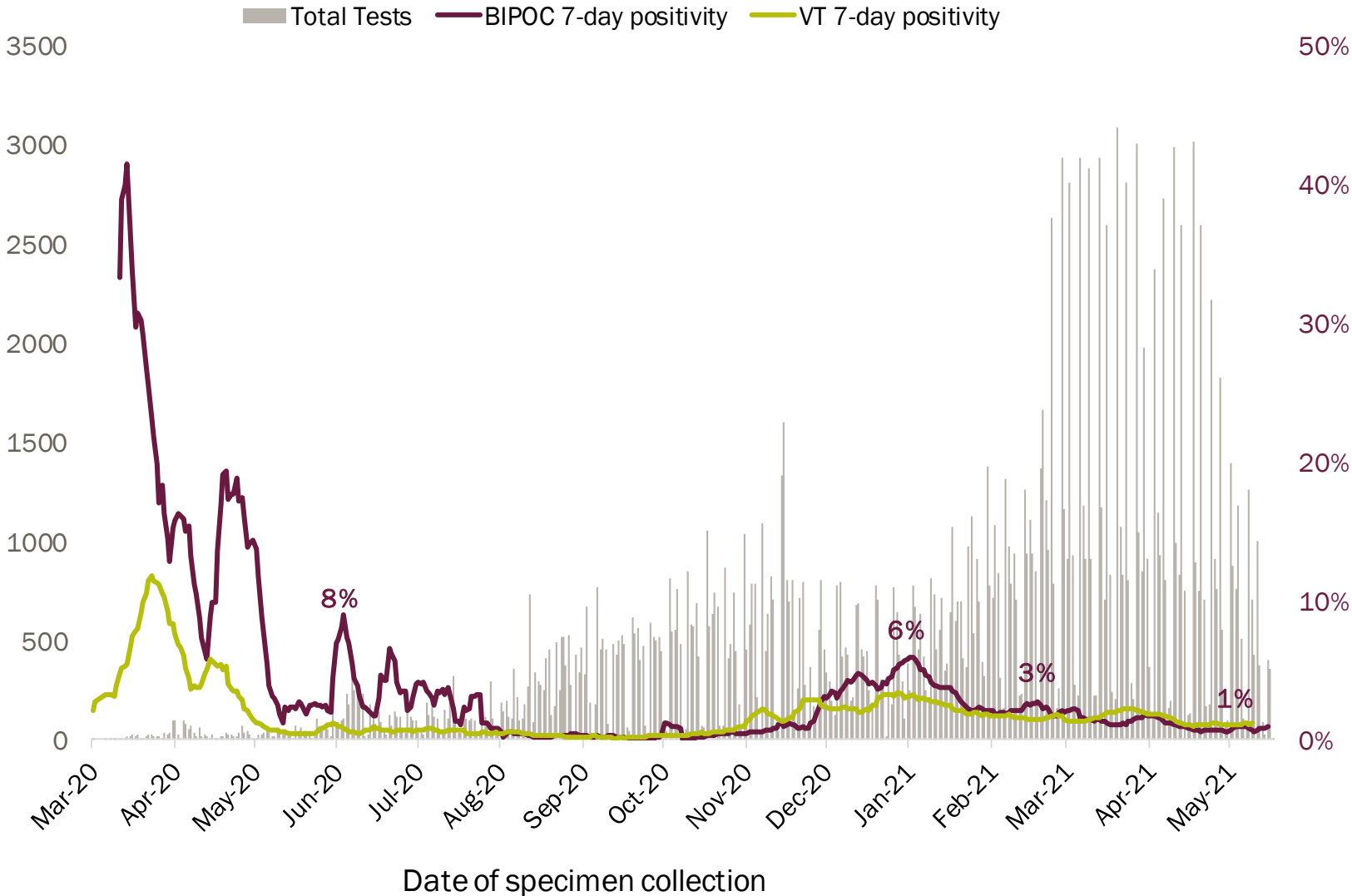


Chittenden County has the highest rate of COVID-19 among BIPOC.

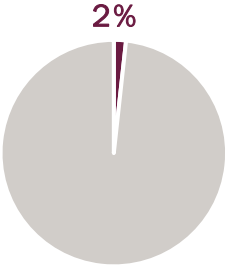
Rate per 10,000 BIPOC Vermonters



The percent positivity among BIPOC Vermonters may indicate how prevalent COVID-19 may be in the BIPOC community.



Percent Positive to Date BIPOC

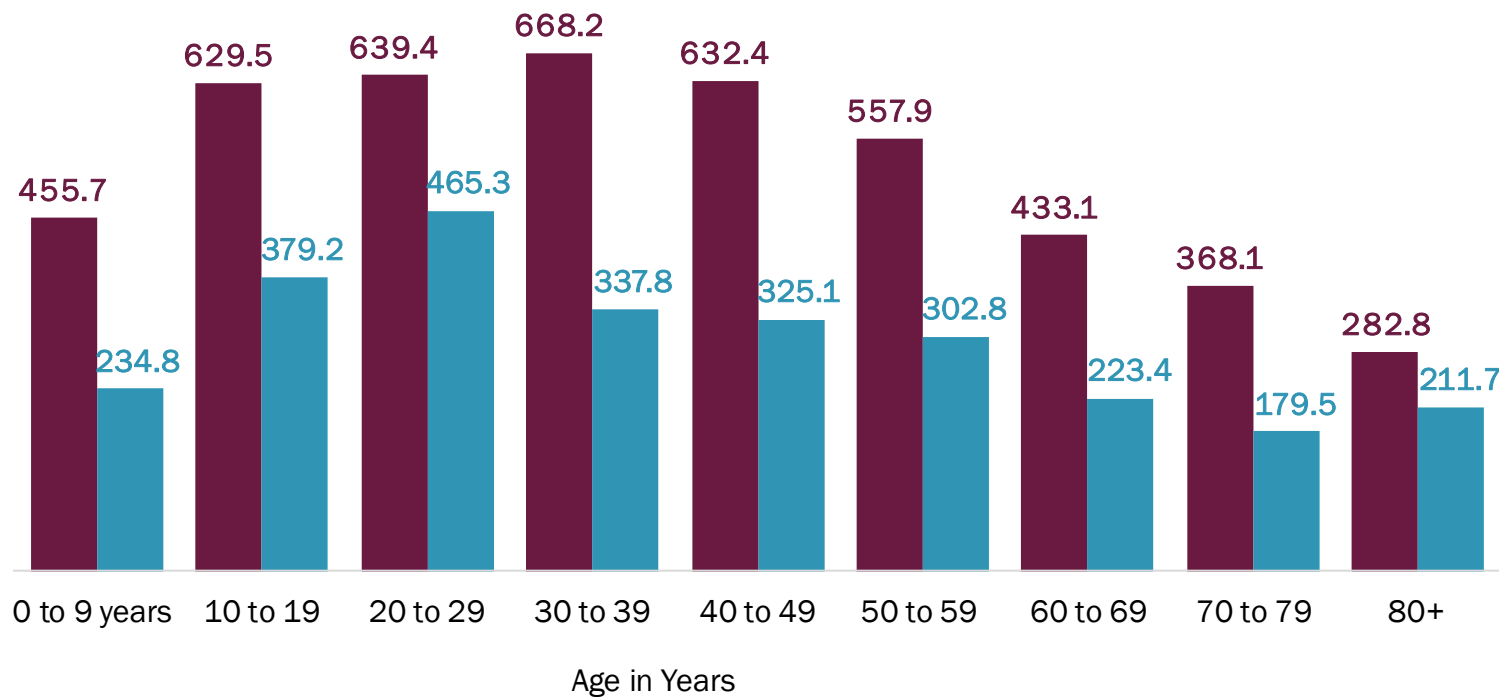


31,357
BIPOC
Vermonters
Tested to Date

201,849
Tests among
BIPOC
Vermonters
to Date

Rates of COVID-19 among BIPOC and white non-Hispanic Vermonters by age

Rates per 10,000 Vermont BIPOC or white non-Hispanic residents

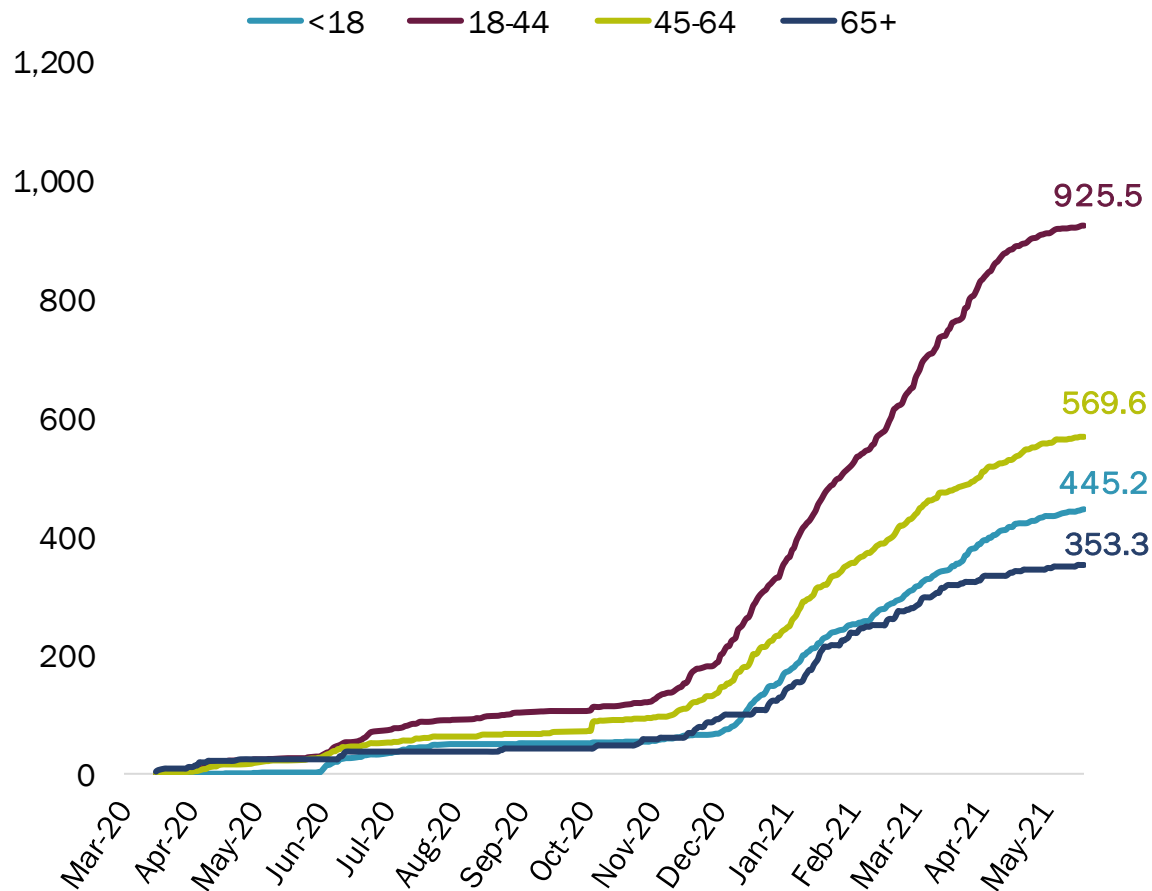


31
BIPOC case
average age

39
White non-Hispanic case
average age

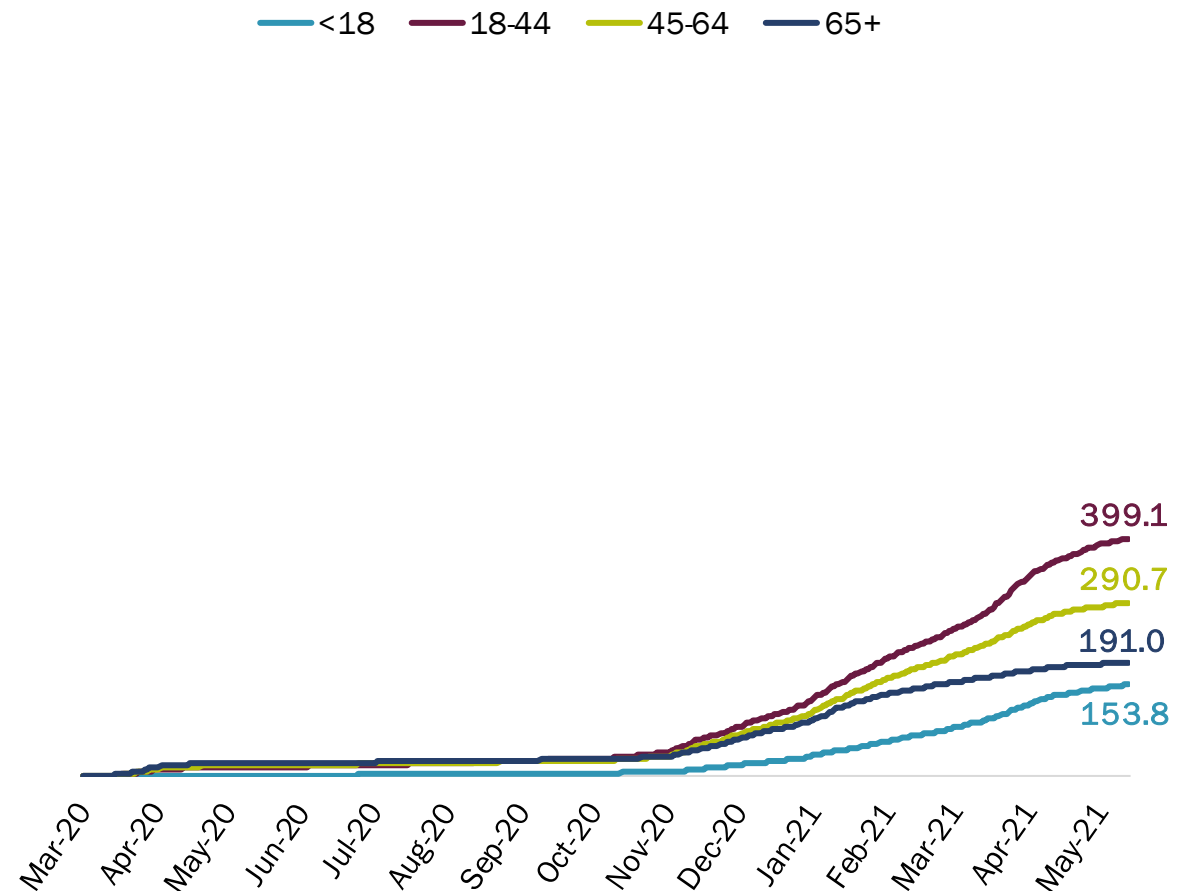
Rates among younger BIPOC Vermonters are higher compared to older BIPOC Vermonters.

Rate of COVID-19 per 10,000 BIPOC Vermonters

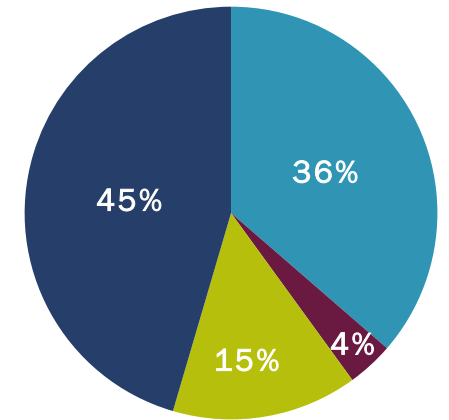
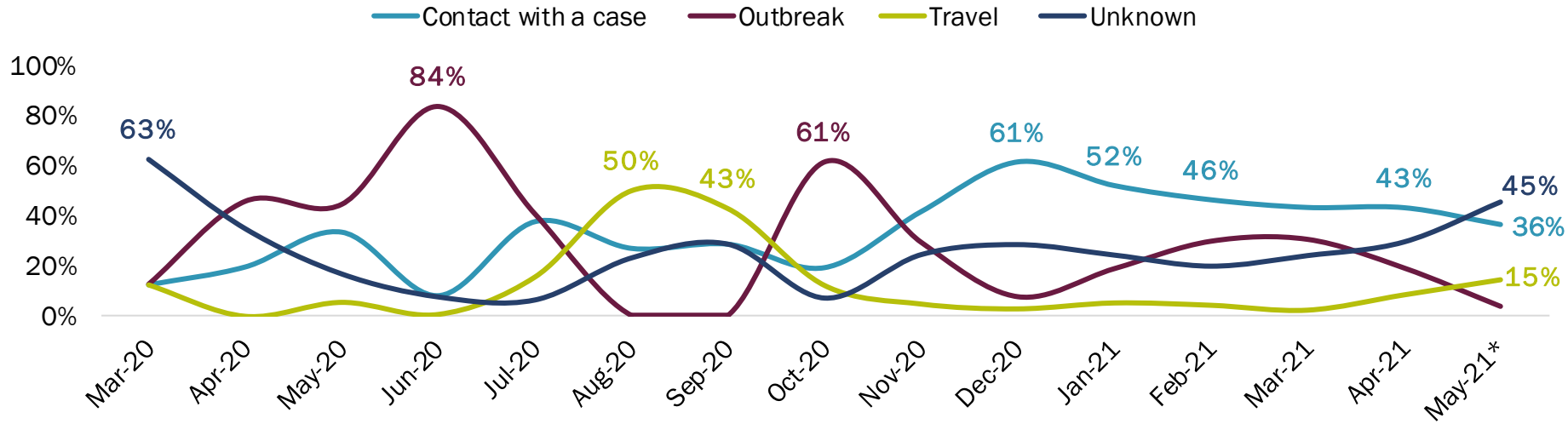


Rates among white non-Hispanic people are highest among 18-44 year olds.

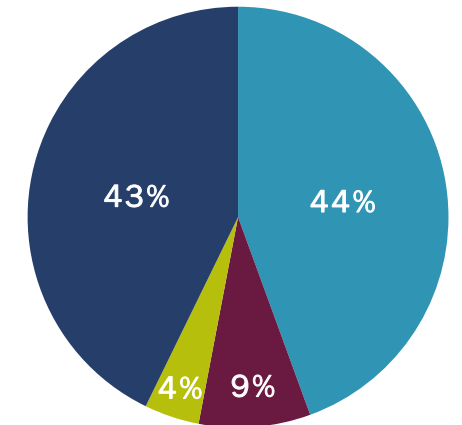
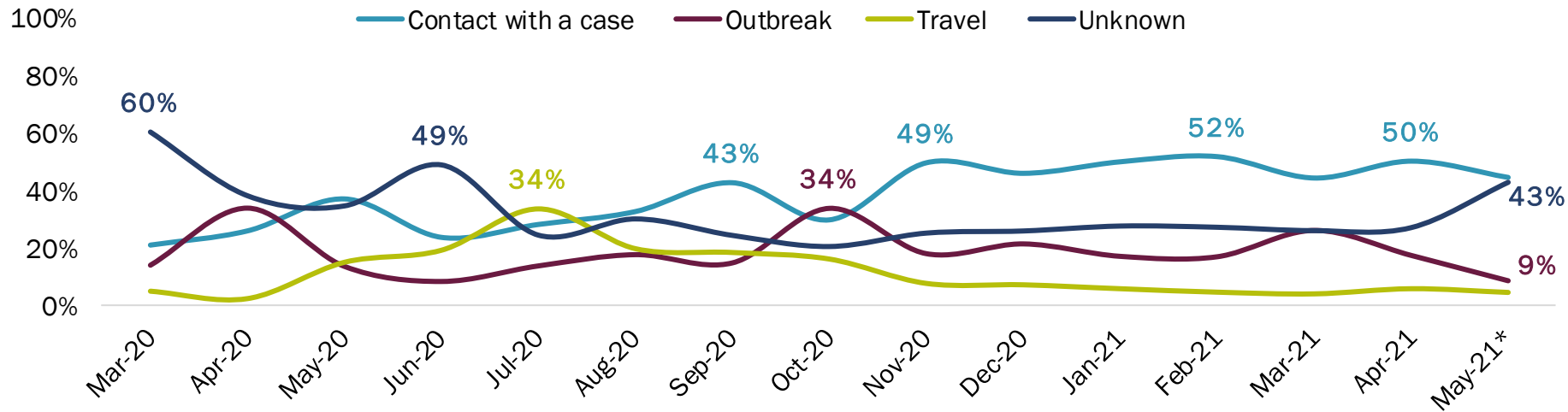
Rate per 10,000 White Non-Hispanic Vermonters



Percent of BIPOC Cases by Source of Exposure



Percent of White Non-Hispanic Cases by Source of Exposure



What are some contributing factors that led to the disparities we see for Black, Indigenous and people of color?

Systemic and structural racism, and oppressive systems affect the conditions in which people are born, grow, live and work.

People in communities that are underserved may:

- have higher rates of underlying medical conditions.
- work in jobs with higher risk for exposure and have less paid sick time.
- be more likely to live in multi-generational housing or congregate living spaces.
- have less access to personal protective equipment and hand sanitizer.

What must be done about the Black, Indigenous and people of color disparities we see?

- Fund racial justice advocacy organizations
- Fund community health workers
- Focus on primary prevention efforts
- Acknowledge that Vermont Department of Health messages and services miss many Vermonters
- Engage the community in determining the most effective ways to reach all people



Learn more about COVID-19 in Vermont:

Web: www.healthvermont.gov/COVID-19

Email: AHS.VDHPublicCommunication@vermont.gov

See more data: [Weekly Data Summaries](#)