

Weekly Summary of Vermont COVID-19 Data

Reflecting cases identified between
March 5 – June 3, 2020



Date published: June 5, 2020. 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 27 through June 3

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.

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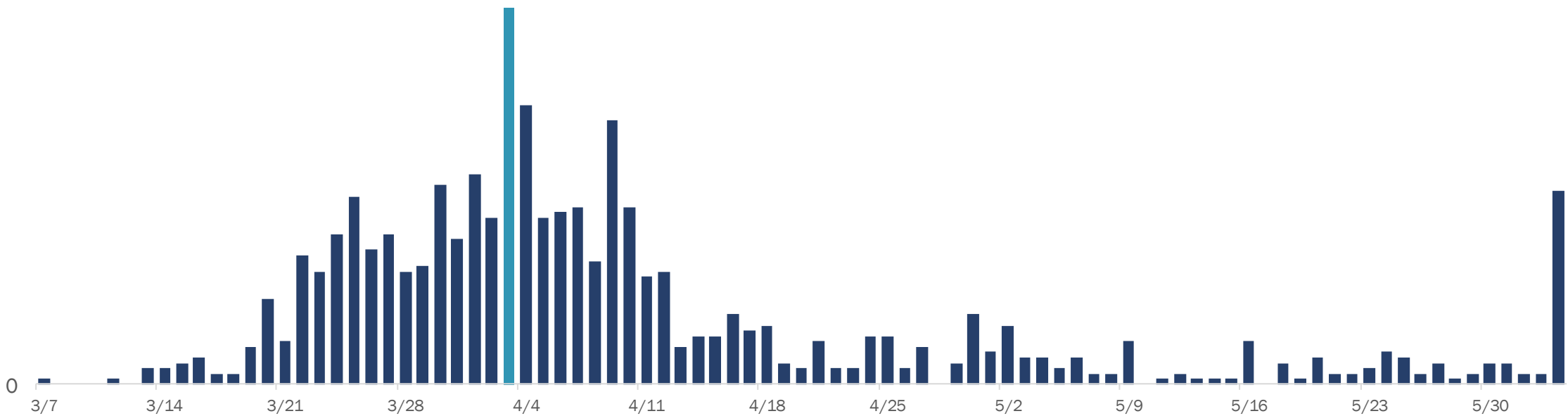
Syndromic Surveillance

COVID-19 in Vermont

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

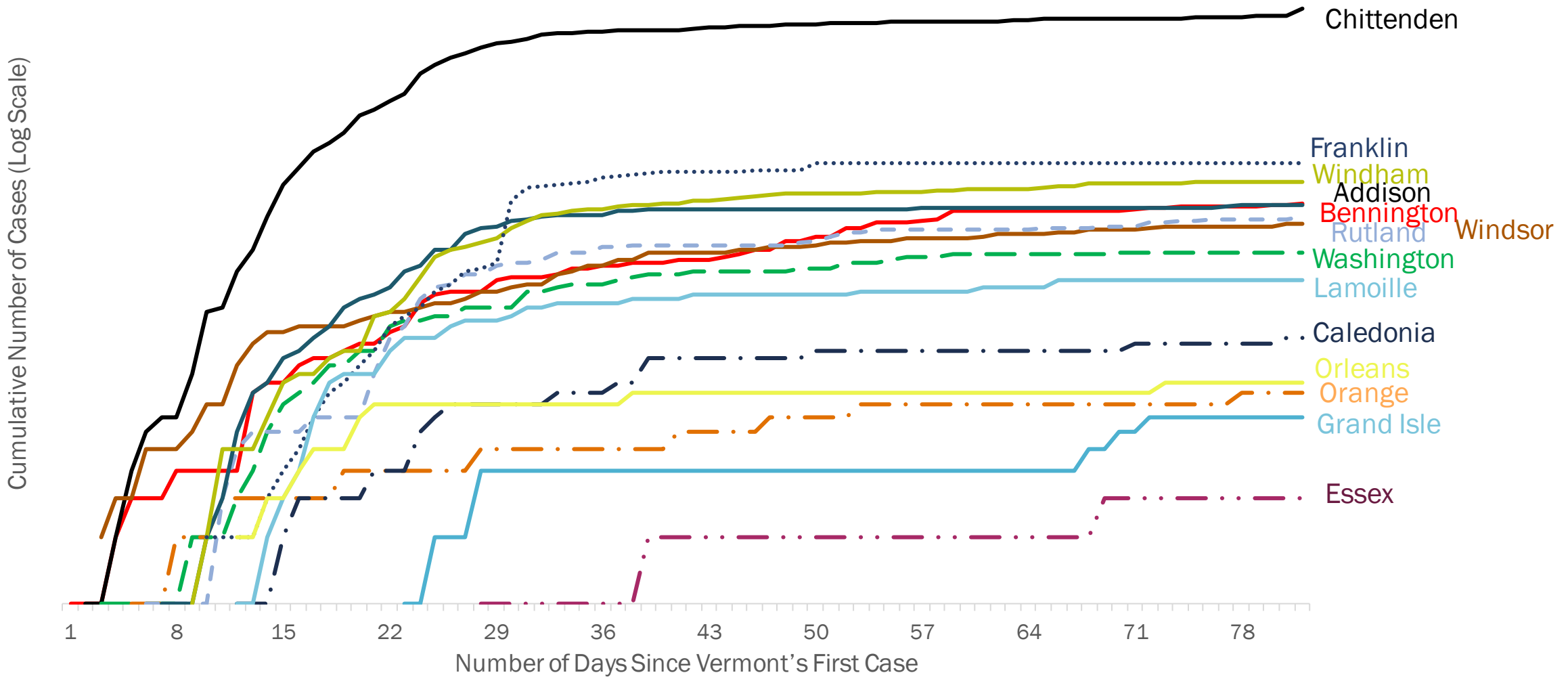
Total Number of Cases in Vermont: 1,025

80 The daily number of COVID-19 cases in Vermont peaked on April 3.

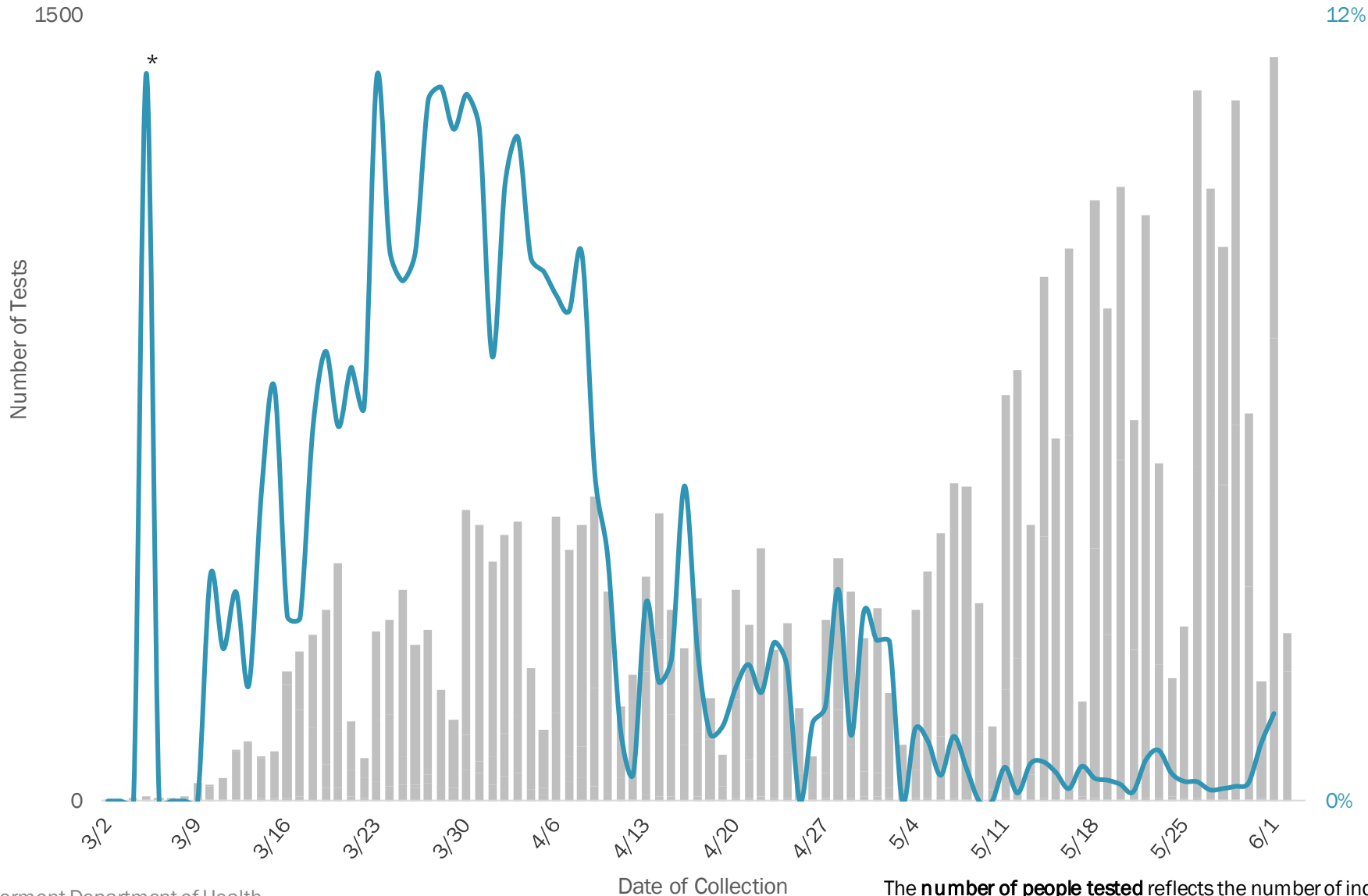


Most counties have reached a plateau in the number of new cases.

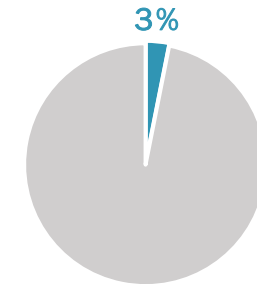
Growth over time by county (n=1021)



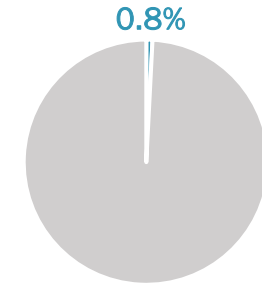
Percent of positive COVID-19 tests may indicate how prevalent the disease is in the population.



Percent Positive to Date



Percent Positive This Week (May 27 - June 3)



6,914 People Tested this Week	9,180 Tests this Week
37,834 People Tested to Date	43,630 Tests to Date

Vermont Department of Health

*Not a stable estimate due to small numbers. There were 9 total tests and 1 was positive.

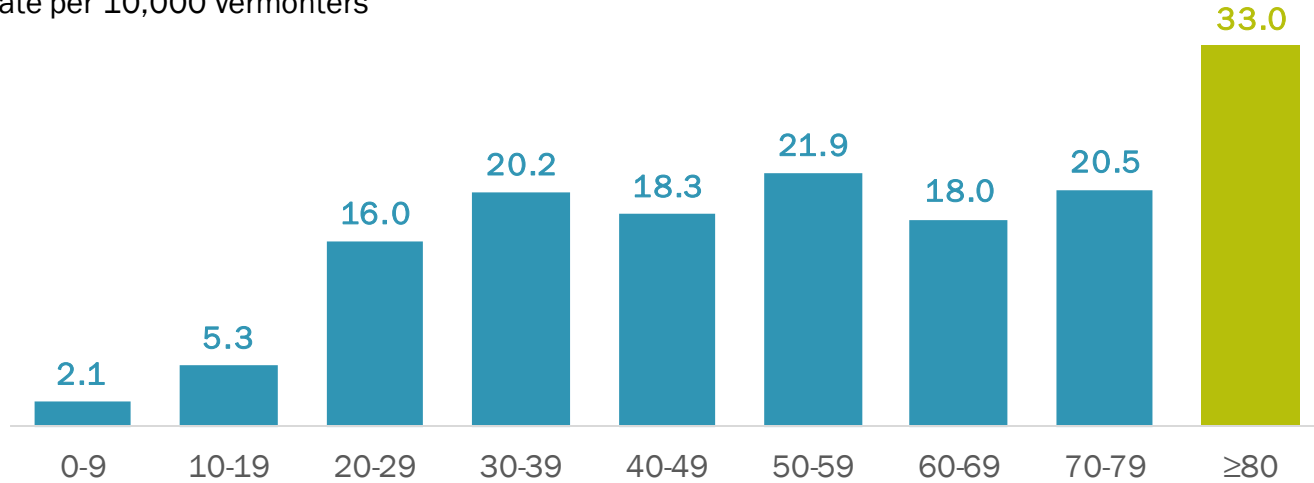
The **number of people tested** reflects the number of individual people who have had confirmatory testing for COVID-19 in Vermont. Each person is only counted once. The **number of tests** reflects the number of specimens that have had confirmatory for COVID-19 in Vermont. This number may include multiple specimens for one person, the same person tested multiple times, etc. Neither of these numbers include serology testing.

Case Demographics

Who has been impacted by COVID-19 in Vermont?

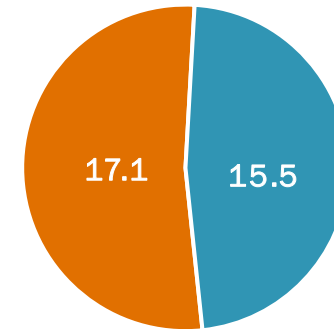
Rates of COVID-19 are disproportionately high among Vermonters 80 years and older.

Rate per 10,000 Vermonters



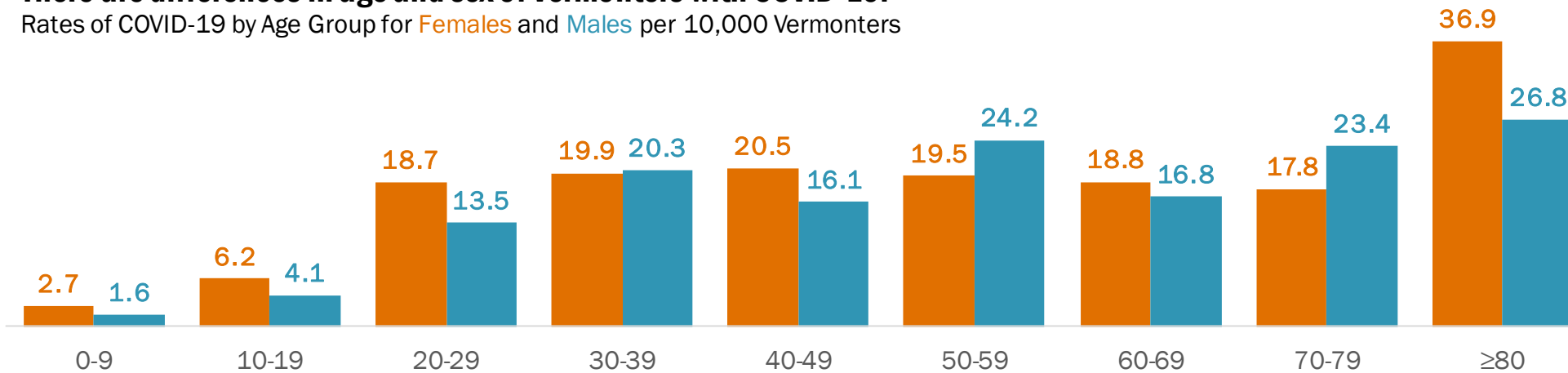
Females and males have similar rates of COVID-19.

Rate per 10,000 Vermonters



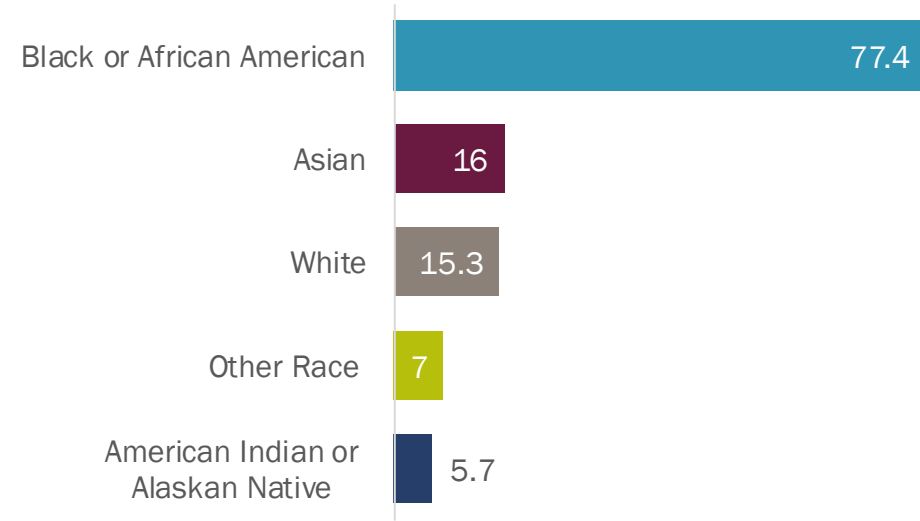
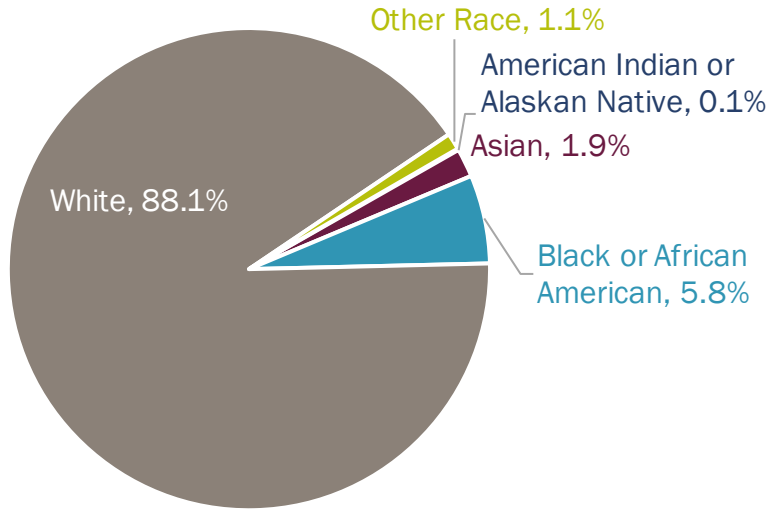
There are differences in age and sex of Vermonters with COVID-19.

Rates of COVID-19 by Age Group for Females and Males per 10,000 Vermonters



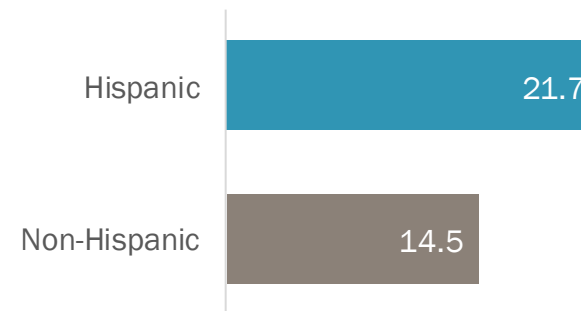
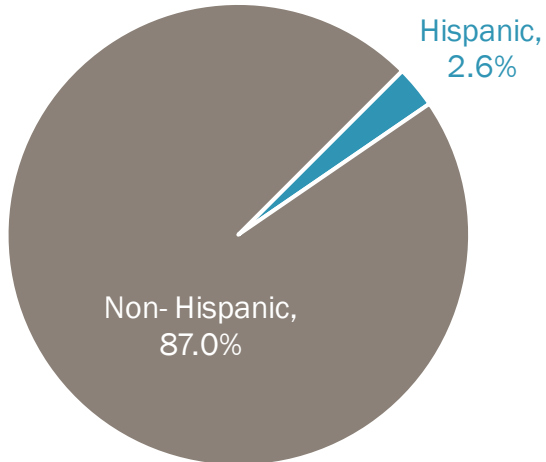
White Vermonters represent the majority of COVID-19 cases. African American Vermonters have the highest rate.

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



Approximately 63% of people* with COVID-19 have a pre-existing condition.

*of the 785 people that the Health Department has pre-existing condition data for.

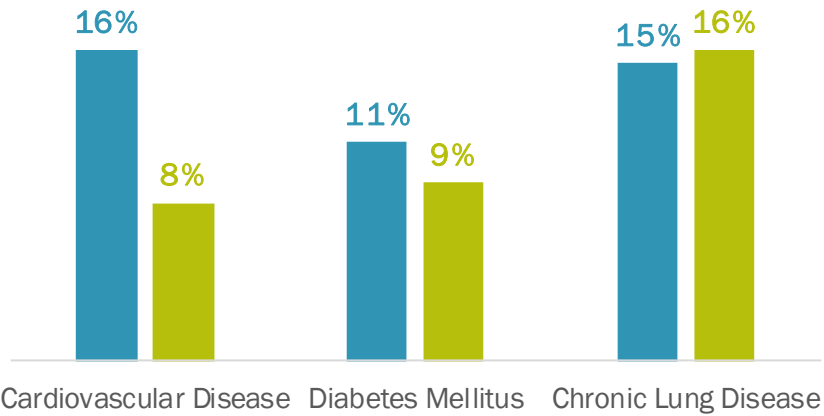
Condition	Count	Percentage
Heart Disease	118	16%
Chronic Lung Disease (includes asthma and COPD)	113	15%
Chronic Liver Disease	7	1%
Chronic Kidney Disease	22	3%
Current/Former Smoker	209	27%
Diabetes	83	11%
Immunocompromised Condition	42	6%
Neurologic Condition/Intellectual Disability	32	4%
Other Chronic Condition**	254	34%
Pregnant	8	1%

50% of people with a pre-existing condition have two or more conditions.

**Not mutually exclusive, includes things like arthritis, thyroid conditions, multiple free text entries.

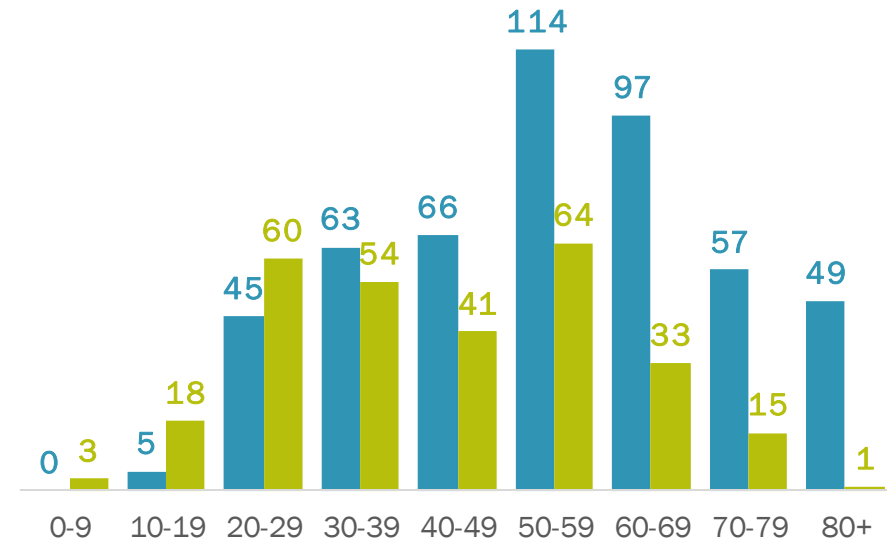
The Health Department has information about pre-existing conditions in 77% (785) of 1,025 total COVID-19 cases

Prevalence of select conditions in COVID-19 patients and Vermont adults.



Data Source: Cardiovascular disease and diabetes, BRFSS 2018 annual report. Chronic lung disease, 3-4-50 Community profile (2016-2017 BRFSS).

COVID-19 patients with pre-existing conditions tend to be older than those without pre-existing conditions.

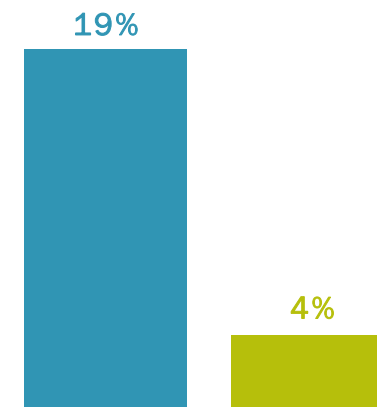


Prevalence of pre-existing conditions is approximately equal between female and male COVID-19 patients.



Vermont Department of Health

A higher percentage of COVID-19 patients with pre-existing conditions have been hospitalized than those without pre-existing conditions.

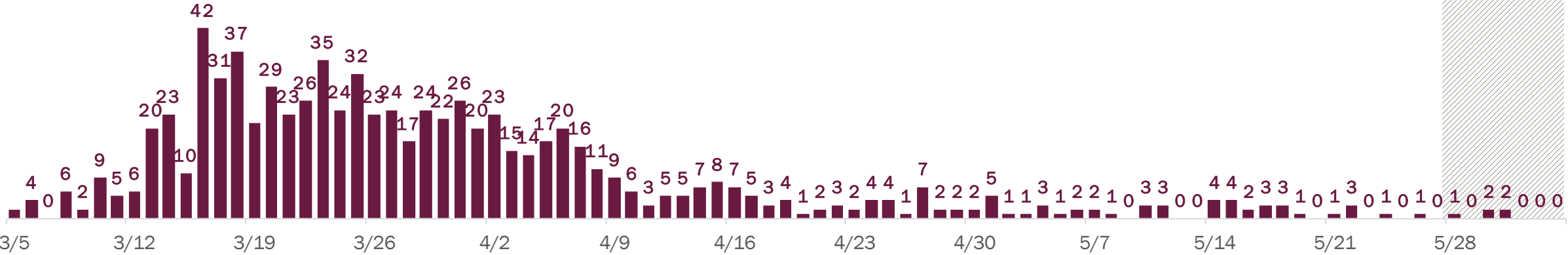


Clinical Course

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

The day **symptoms start** is important to know when people with **COVID-19** become infectious.

Illnesses occurring in this window may not be reported yet; median reporting lag = 6 days →

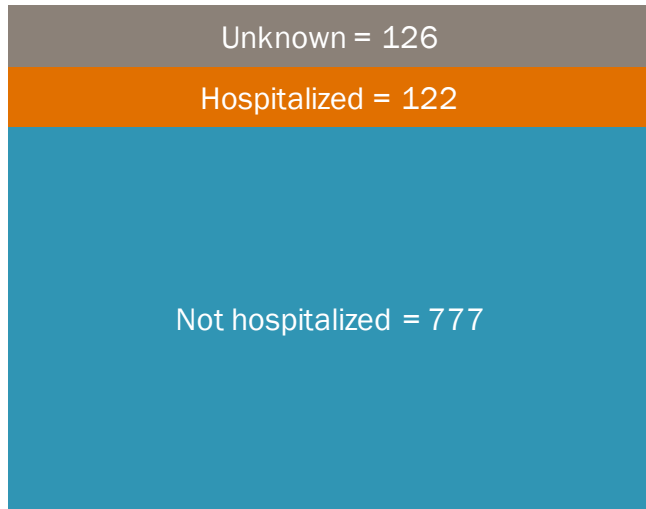


Note: Date of symptom onset is not always known.

14 days
Average illness duration

Sign or Symptom	Percent of Symptomatic Cases
Cough	74%
Fatigue	69%
Headache	54%
Fever	54%
Muscle Pain	53%

Most Vermonters with COVID-19 are not hospitalized.



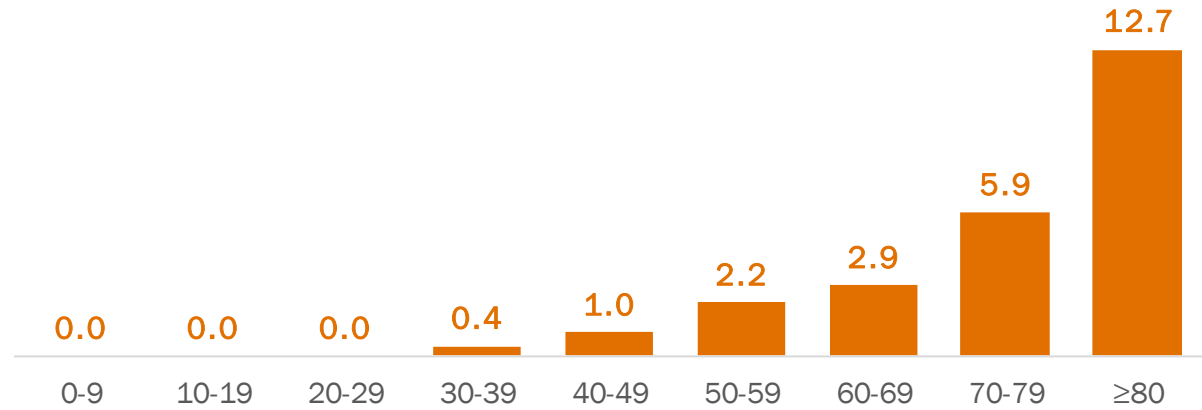
16%
Of those hospitalized who were on a ventilator

37%
Of those hospitalized who were in the ICU

8 days
Average hospital stay (range: 0-39 days)

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

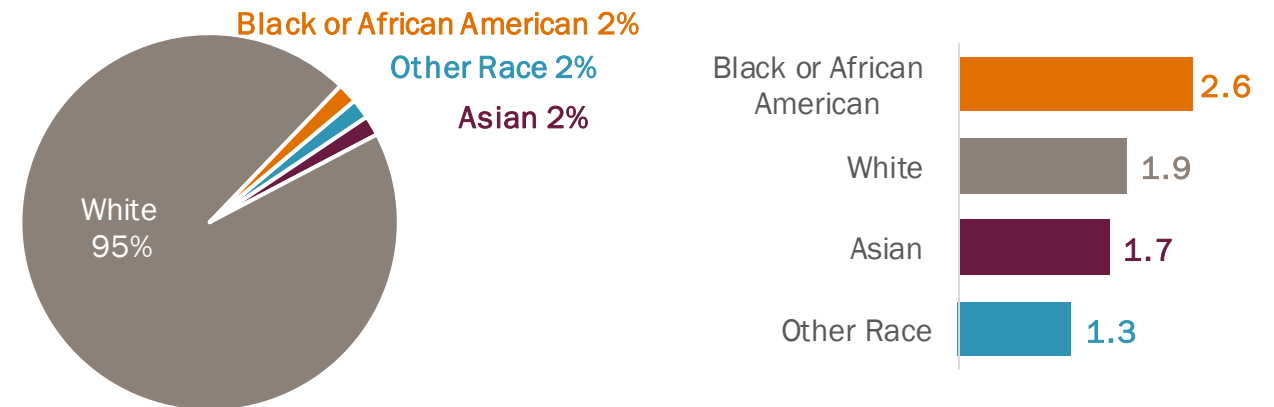
Rate per 10,000 Vermonters



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

African American Vermonters have the highest rate of COVID-19 hospitalizations.

Rate per 10,000 Vermonters

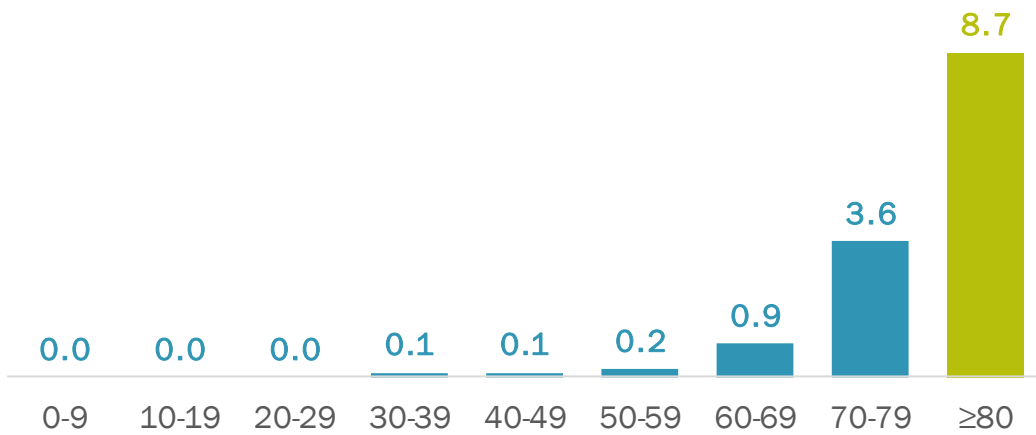


Please note 5 hospitalized persons are missing race information.

*The number of Asian, black, and persons in the other race category is less than 5.

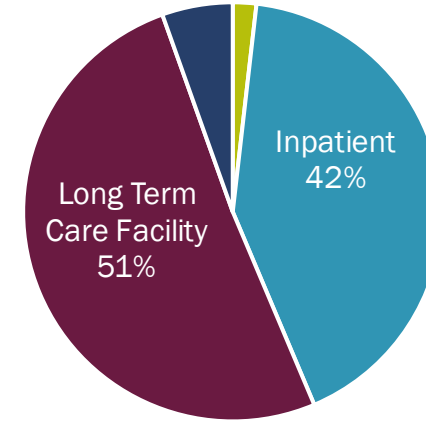
Vermonters 80 years and older have higher rates of COVID-19 death than other age groups.

Rate per 10,000 Vermonters



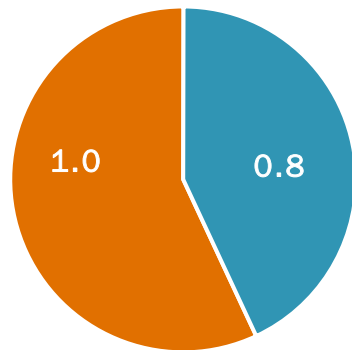
Most COVID-19 deaths occurred in an **inpatient hospital setting** or a **long-term care facility**.

Out of state facility 5% At Home 2%



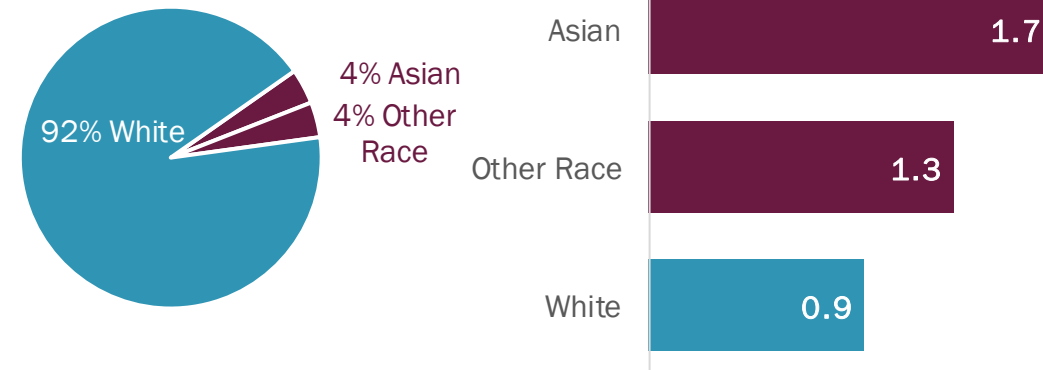
Males and females have similar rates of COVID-19 death.

Rate per 10,000 Vermonters



White Vermonters represent a majority of COVID-19 deaths. However the rate is higher among **racial minorities**.

Rate per 10,000 Vermonters



Note: No deaths have identified as Hispanic or Latino.

Outbreaks

How is COVID-19 impacting group settings?

What is an outbreak?

1. For congregate care facilities (long term care facility or skilled nursing facility):
 - A single resident with a positive COVID-19 laboratory test and one or more additional residents with respiratory illness
 - OR
 - Two or more residents with at least two of the following symptoms: fever (temp \geq 100° F), cough, difficulty breathing/shortness of breath
2. For other settings (senior residential communities, businesses):
 - Two or more epidemiologically-linked confirmed COVID-19 cases where there's an opportunity to stop transmission

Community outbreaks, with the exception of senior independent living communities, are not represented in this section.



24% of COVID-19 cases are associated with an outbreak



Outbreaks

3 Active

7 Resolved



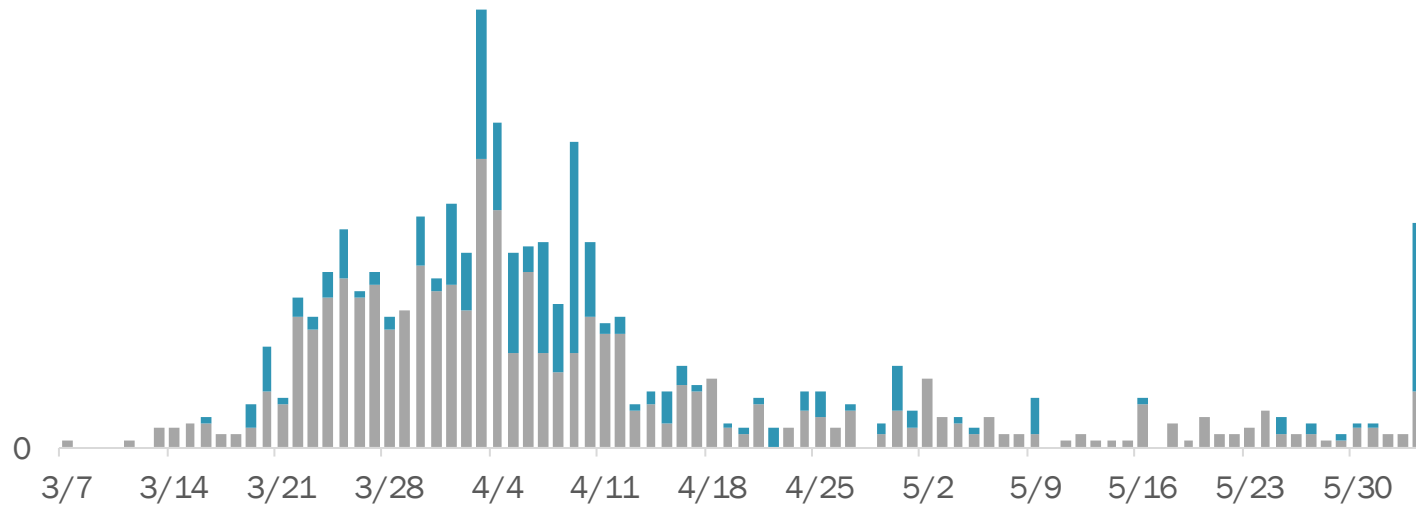
159 cases among residents



90 cases among staff

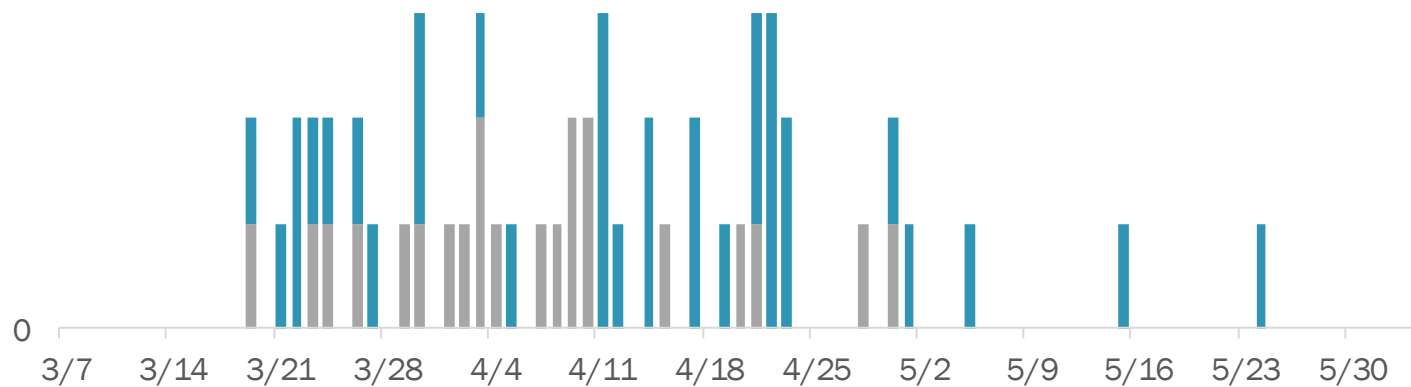
Vermont COVID-19 Cases Associated with an **Outbreak** Over Time

90



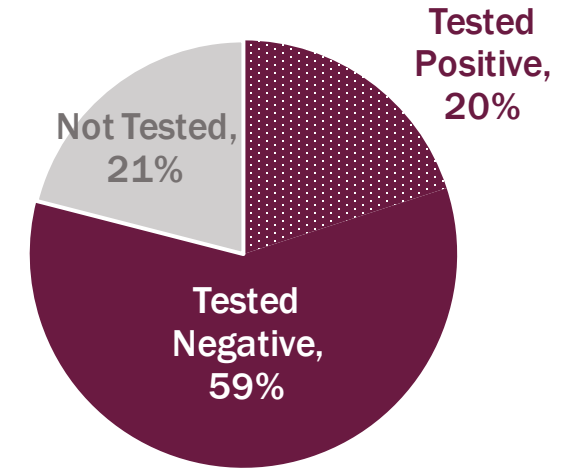
Vermont COVID-19 Deaths Associated with an **Outbreak** Over Time

4

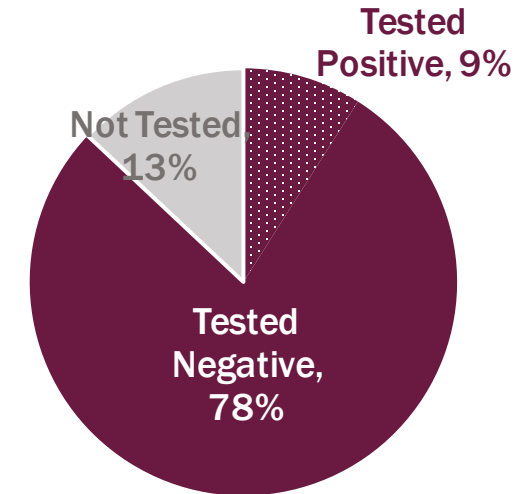


Vermont Department of Health

In facilities with an outbreak, **79% of residents** have been **tested**.



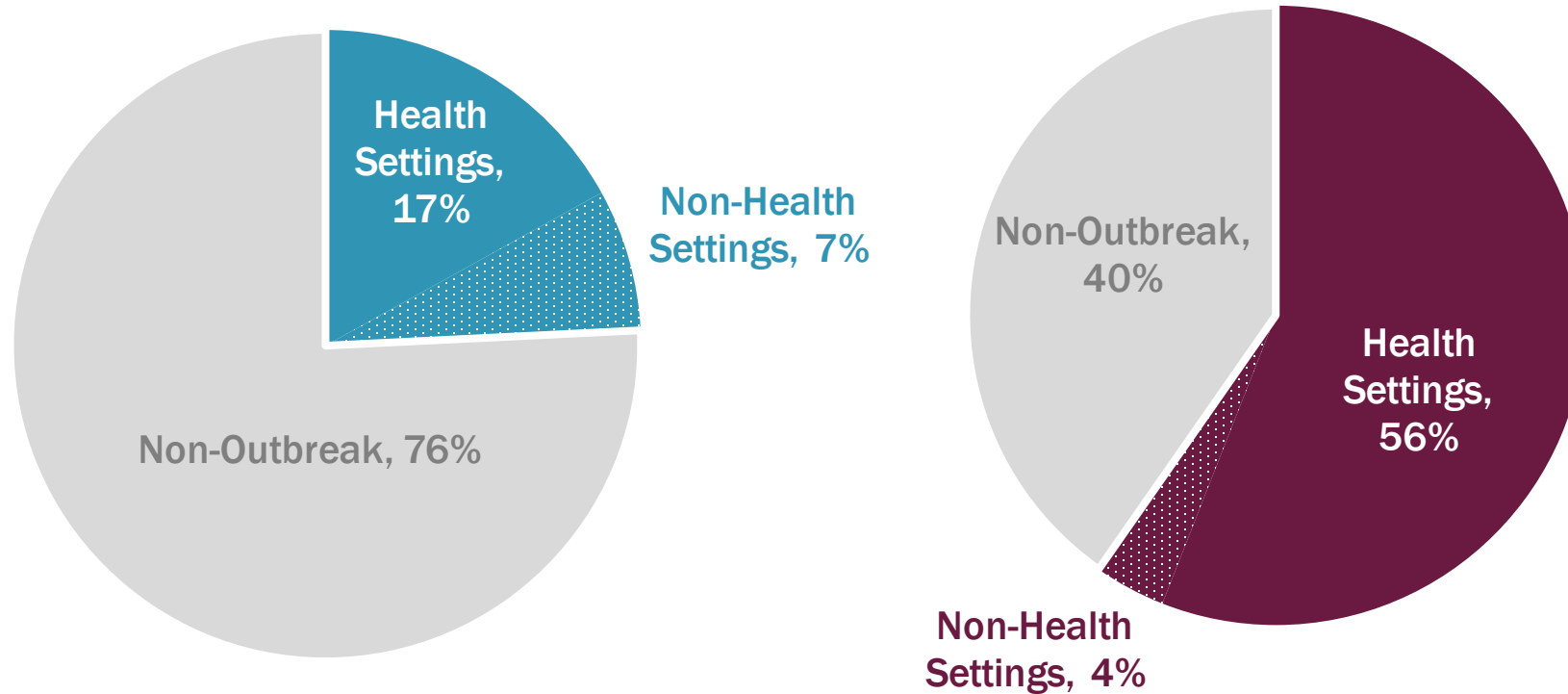
In facilities with an outbreak **87% of staff*** have been **tested**.



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.

*One outbreak is excluded from this analysis missing information. 20

While only 24% of all COVID-19 cases are associated with outbreaks, more than half of COVID-19-related deaths occur in outbreak settings.

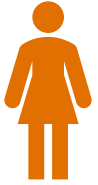


Values in these charts are rounded to the nearest whole number and therefore may not always add to 100% due to error introduced in rounding.

Source: Vermont Department of Health
Reflects confirmed data as of 6/03/2020.

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.

The percentage of **females** and **males** with COVID-19 that are associated with an outbreak is about even.

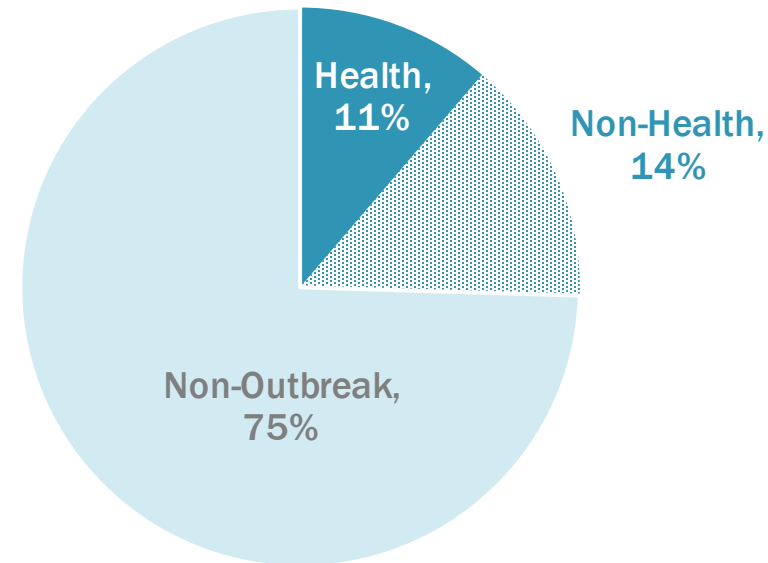
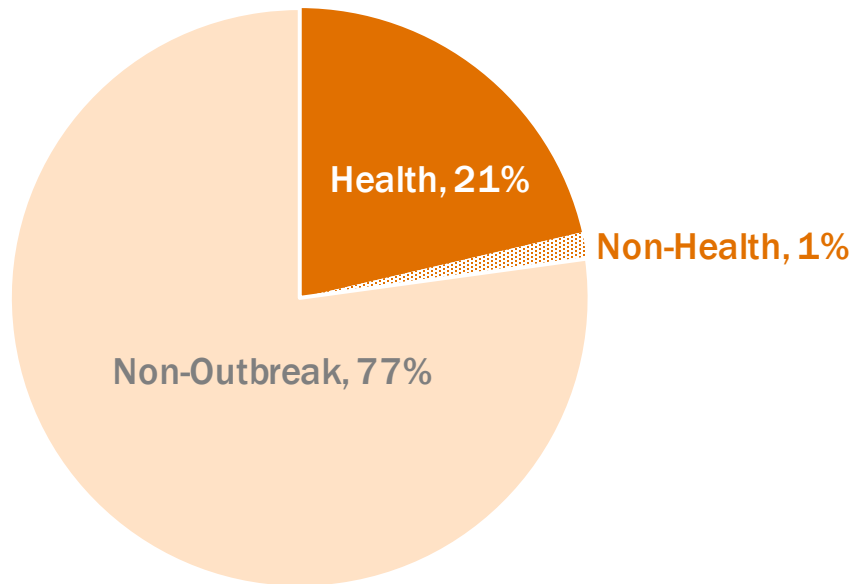


22% of **females** with COVID-19 are associated with an outbreak.



25% of **males** with COVID-19 are associated with an outbreak.

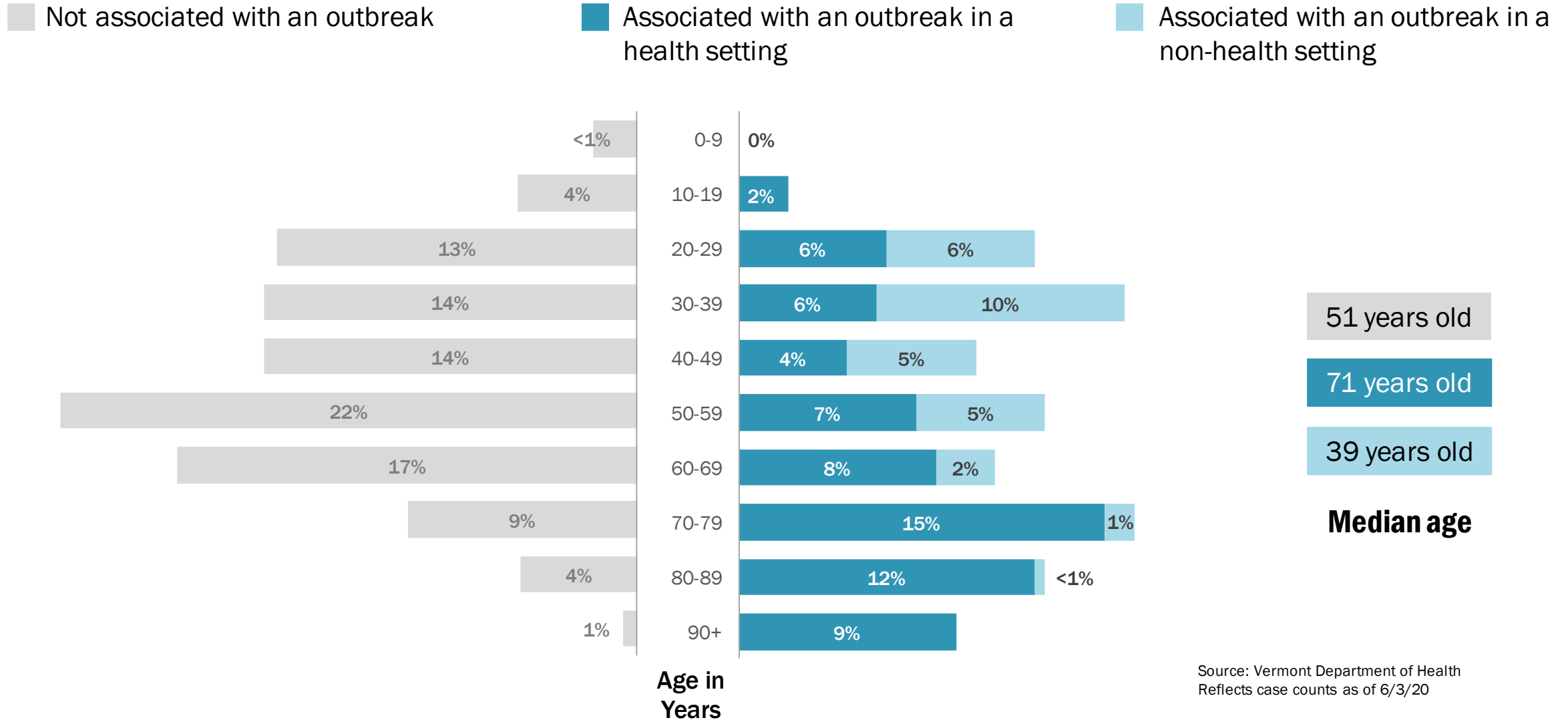
But in outbreak settings, **females with COVID-19 are more likely to be associated with a health setting than non-health settings.**



Source: Vermont Department of Health
Reflects case counts as of 6/3/20

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.

Percent of Cases by Outbreak Status and Age



51 years old

71 years old

39 years old

Median age

Source: Vermont Department of Health
Reflects case counts as of 6/3/20

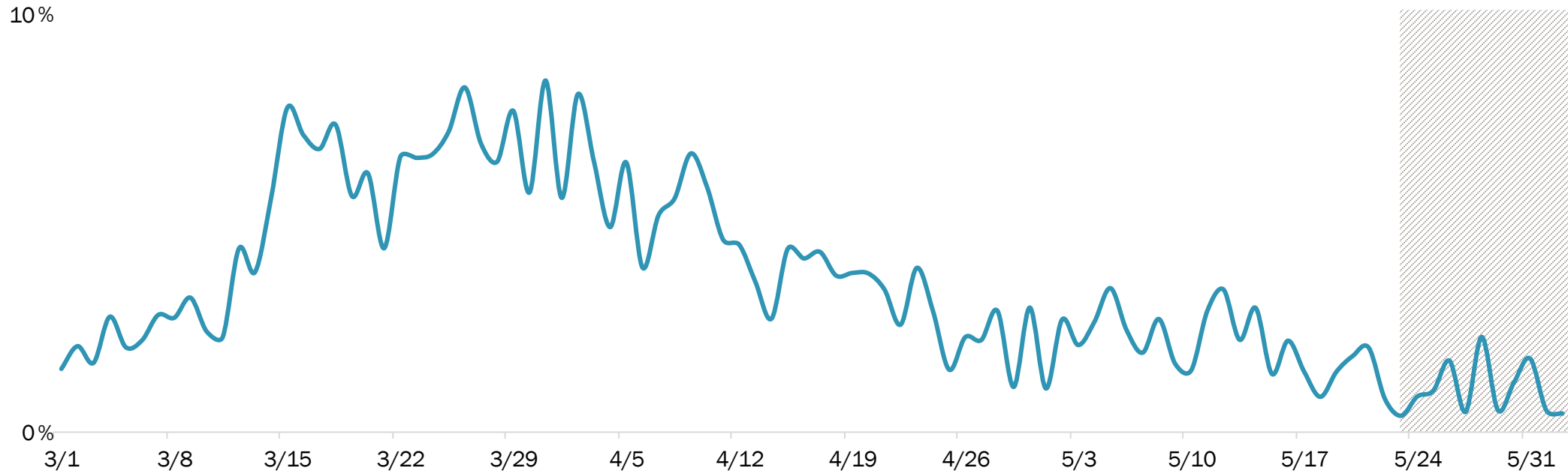
Note: Examples of a health setting include long-term care or assisted living facilities, therapeutic treatment centers, and behavioral health institutions. Examples of a non-health setting include correctional facilities, senior housing communities, businesses, and homeless shelters. Vermont has not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


Syndromic Surveillance

What we can learn from emergency room and urgent care centers?

The percent of emergent care visits for COVID-19-like illness is decreasing.

Syndromic surveillance from 13 of 14 Vermont hospitals and 2 urgent care centers. Monitoring this data acts as an early indicator of potential spikes of COVID-19 in the community.



 Interpret with caution, there is a chance for over or underestimation given the lag in reporting.

COVID-19-like illness diagnosis is determined using the patient's chief complaint and/or discharge diagnosis.

COVID-19-like illness is the presence of a fever with the addition of shortness of breath, difficulty breathing, or cough.

COVID-19-like illness excludes patients with an influenza discharge diagnosis.

*Please note: the query used to identify COVID-19-like illness in syndromic surveillance data changed on 5/28. This was to be consistent with the most up-to-date national definition provided by the CDC.



Learn more about COVID-19 in Vermont:

Web: www.healthvermont.gov/COVID-19

Email: AHS.VDHPublicCommunication@vermont.gov