

Recent data are preliminary and subject to change.

The term “long-term care facility” (LTCF) refers to several types of group living settings that provide various levels of medical and personal care to people who are unable to take care of themselves independently in the community. These include nursing homes/skilled nursing facilities, assisted living residences, residential care homes, and therapeutic community residences. Vermont has 201 LTCFs licensed through the Department of Disabilities, Aging, and Independent Living (DAIL) with a total of 6,950 licensed beds.

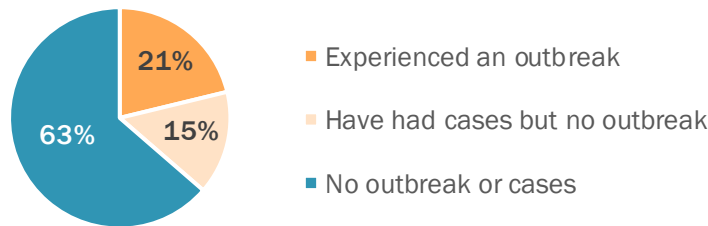
KEY POINTS

- In March, there were 20.9 cases per 10,000 long-term care facility staff and residents.
- Since March 2020, 21% of facilities have had an outbreak.
- Since March 2020, 37% of facilities have had a case.
- It has been 14 days since the last resident death.

Incidence

Since the beginning of the pandemic, 37% of LTCFs (74 facilities) have had cases of COVID-19. Only 21% of LTCFs (43 facilities) have experienced or are experiencing an outbreak. See the section on [Outbreaks](#) for more information on active outbreaks.

Nearly Two-thirds of LTCFs (63%) have not had any outbreaks or cases of COVID-19.

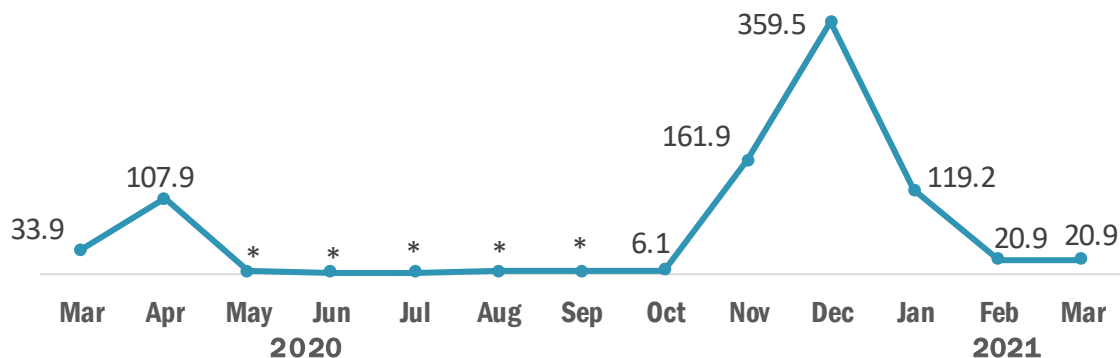


Values are rounded to the nearest whole number and may therefore not always add up to 100%.

December had the highest monthly incidence of COVID-19 in LTCFs and November the second highest rate. The incidence among LTCF staff and residents has descended sharply through February. In March 2021 there were 24 COVID-19 cases among LTCF staff and residents. The COVID-19 incidence among LTCF staff and residents in March 2021 was the same as February.

Monthly COVID-19 Incidence in LTCFs

Rate per 10,000 LTCF staff & residents

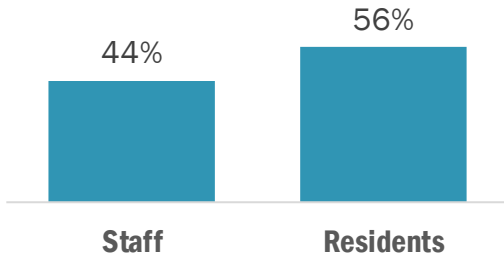


*Value suppressed due to small numbers.

Cases and Mortality

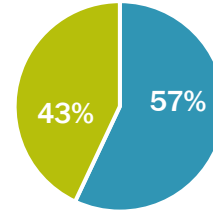
Three in five cases (56%) in LTCFs have been among residents, while two in five cases (44%) have been among staff.

Percent of LTCF Cases among Residents and Staff



Nearly three in five (57%) COVID-19-related deaths are associated with LTCFs. All LTCF associated deaths have occurred among residents.

LTCF and Non-LTCF COVID-19 Related Deaths



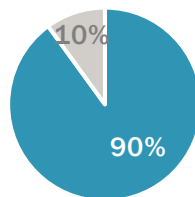
Data include deaths with a primary or contributing cause of COVID-19.

Values are rounded to the nearest whole number and may therefore not always add up to 100%.

Outbreaks

Not all cases in LTCFs lead to outbreaks but some do. **An outbreak in a LTCF is a situation where two or more residents or staff members with COVID-19 have known connections to each other in the facility setting.** Outbreaks in LTCFs account for 10% of all outbreaks that have occurred in Vermont. The majority of outbreaks in LTCFs occurred in December 2020 followed closely by January 2021.

The majority of LTCF cases are associated with an outbreak.



Outbreak Count

42 outbreaks have occurred in LTCFs.*

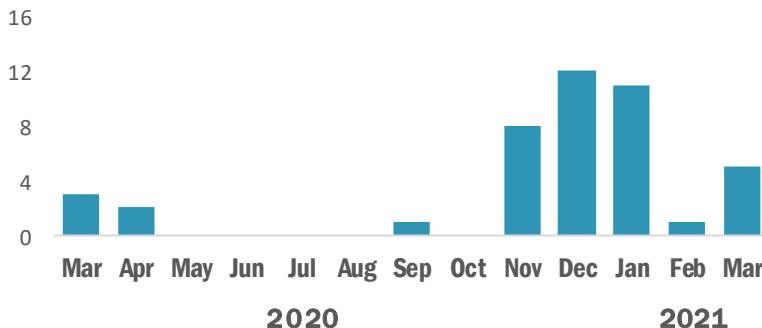
39 Primary, **3** Secondary^

5 Active, **37** Resolved

*35 unique facilities have experienced an outbreak; 4 facilities have experienced more than one.

^Secondary outbreaks are those that occur because of a different outbreak.

Number of Outbreaks by Month



864

LTCF cases associated with an outbreak

540

Outbreak-associated cases among residents

324

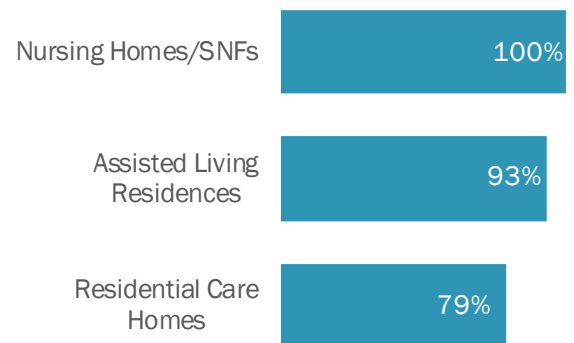
Outbreak-associated cases among staff

Outbreak Prevention

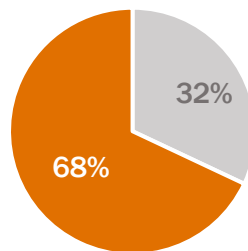
The Health Department works with LTCFs to prepare for and prevent COVID-19, and to identify cases early to contain the spread in facilities through a specialized facility-wide testing strategy.

LTCFs have systematically been offered the opportunity to complete telephonic COVID-19 Infection Control Assessment and Response (Tele-ICAR) assessment with Health Department staff. Tele-ICARs have been prioritized by facility type; therapeutic treatment residences have not yet been prioritized but will be in the near future. This 150-question tool covers topics such as visitor restrictions; educating, monitoring, and screening staff and residents; personal protective equipment (PPE) and other supply availability; infection prevention and control practices; and how to communicate with the Health Department and other health care facilities. The goal of the assessment is to keep COVID-19 out of facilities, identify infections early, prevent spread within the facility, and assess and optimize PPE. **Assessments have been completed** among 69% of LTCFs.

Percent of LTCFs with Completed ICARS, by Facility Type



68% of LTCFs that identified a positive case from surveillance testing did not result in an outbreak.



The LTCF testing strategy seeks to identify situations early to contain spread within the facility. When a new positive case is identified at a facility from surveillance testing, further testing is conducted. At 92 different facilities, 131 new positives were identified by following the normal testing strategy. Among the 131 new cases identified, 89 of those, at 55 different LTCFs, **did not lead to additional spread** within the facility.

Key Takeaways

While some Vermont LTCFs have had outbreaks, with several of them having large numbers of cases, 63% of LTCFs have **not** had an outbreak or had cases. The highest percentage of COVID-19 cases among LTCF staff and residents are associated with outbreaks. December 2020 had the highest incidence rate and the greatest number of outbreaks among LTCFs to date.

63% of Vermont LTCFs have not experienced an outbreak or had cases of COVID-19.

References:

Data Source: Vermont Department of Health – data reflect case counts as of March 31, 2021.

This report will be updated the first Tuesday of every month.

For more information about COVID-19 data in this report: contact COVID-19 Public Health Inquiries, ahs.vdhpubliccommunication@vermont.gov