Weekly Summary of Vermont COVID-19 Data

Reflecting cases identified between March 5, 2020 – April 14, 2021

Date published: April 16, 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 April 7 through April 14.

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.
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: 21,664
**Percent of positive COVID-19 tests** may indicate how prevalent the disease is in the population.

The highest percent of positive tests (15%) was on March 29.

The increase in percent positive is a combination of increased number of people testing positive, as well as a change in how UVM is reporting results due to their network issues.

Testing volume increased greatly at the end of August in preparation for the return of college students.

<table>
<thead>
<tr>
<th>Date of Collection</th>
<th>Number of Tests</th>
<th>Percent Positive to Date</th>
<th>Percent Positive This Week (April 7–April 14)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/2/20</td>
<td>17,500</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>6/2/20</td>
<td>14,000</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>9/2/20</td>
<td>10,500</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>12/2/20</td>
<td>800</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>3/2/21</td>
<td>7,299</td>
<td>2%</td>
<td>2%</td>
</tr>
</tbody>
</table>

*Not a stable estimate due to small numbers. There were 8 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 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.
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

- White: 91.0%
- American Indian or Alaskan Native: 0.3%
- Asian: 1.9%
- Black or African American: 1.9%
- Other Race: 4.8%

**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

- Non-Hispanic: 97.5%
- Hispanic: 2.5%

**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 25% of people tested (n = 90,917) and ethnicity is unknown in 37% of people tested (n = 136,536).
Contact tracers speak with both cases and their close contacts each week.

82
Number of full-time equivalent contact tracing staff trained

994
Cases interviewed last week
April 4 – April 10

3,028
Contacts named last week
April 4 – April 10

3.3
Average number of contacts per case*

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 March 28 to April 10):

- 86% of cases were interviewed within 24 hours.
- 85% of cases provided their close contacts.
- 64% of contacts were tested within 14 days of exposure.
- 11% of contacts became a case.

Vermont Department of Health
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

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>Rate per 10,000 Vermonters</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-9</td>
<td>249.9</td>
</tr>
<tr>
<td>10-19</td>
<td>437.2</td>
</tr>
<tr>
<td>20-29</td>
<td>526.9</td>
</tr>
<tr>
<td>30-39</td>
<td>385.6</td>
</tr>
<tr>
<td>40-49</td>
<td>371.2</td>
</tr>
<tr>
<td>50-59</td>
<td>337.3</td>
</tr>
<tr>
<td>60-69</td>
<td>249.7</td>
</tr>
<tr>
<td>70-79</td>
<td>201.3</td>
</tr>
<tr>
<td>80+</td>
<td>250.9</td>
</tr>
</tbody>
</table>

Females and males have similar rates of COVID-19. 
Rate per 10,000 Vermonters

<table>
<thead>
<tr>
<th>Gender</th>
<th>Rate per 10,000 Vermonters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>336.5</td>
</tr>
<tr>
<td>Male</td>
<td>355.3</td>
</tr>
</tbody>
</table>

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

*The Health Department has complete data about disabilities for 4,831 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

- **White**: 88.9%
- **American Indian or Alaskan Native**: 0.2%
- **Other Race**: 2.9%
- **Asian**: 4.3%
- **Black or African American**: 3.6%
- **Other Race**: 2.9%

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

Rate per 10,000 Vermonters

- **Hispanic**: 2.9%
- **Non-Hispanic**: 97.1%

**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 = 1,994) and ethnicity is unknown in 15% of cases (n = 3,170).

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 22% of Vermont’s cases.

25% 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 have been increasing. This most recent week the rates have decreased.
Older children have a higher rate of COVID-19 compared to younger children.
Rate per 10,000 Vermonters 0-19 years old

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

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 or African Americans have the highest rate.
Rate per 10,000 Vermonters 0 to 19 years

Vermont Department of Health
### Symptoms and How Children Contract COVID-19

<table>
<thead>
<tr>
<th>Sign or Symptom</th>
<th>Percent of Children with Symptom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Runny Nose</td>
<td>55%</td>
</tr>
<tr>
<td>Headache</td>
<td>46%</td>
</tr>
<tr>
<td>Cough</td>
<td>45%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>41%</td>
</tr>
<tr>
<td>Sore Throat</td>
<td>39%</td>
</tr>
<tr>
<td>Muscle Pain</td>
<td>25%</td>
</tr>
<tr>
<td>Loss of Smell/Taste</td>
<td>24%</td>
</tr>
<tr>
<td>Fever</td>
<td>19%</td>
</tr>
</tbody>
</table>

**Average illness duration among children:** 5 days

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

63% of children with COVID-19 had known contact with somebody else who had COVID-19.

22% 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.

There have been 295,173 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?
### Symptoms Among COVID-19 Cases

**8 days**  
Average illness duration

**73%**  
Cases with symptoms

<table>
<thead>
<tr>
<th>Sign or Symptom</th>
<th>Percent of Symptomatic Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cough</td>
<td>61%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>58%</td>
</tr>
<tr>
<td>Headache</td>
<td>57%</td>
</tr>
<tr>
<td>Runny Nose</td>
<td>55%</td>
</tr>
<tr>
<td>Muscle Pain</td>
<td>47%</td>
</tr>
<tr>
<td>Sore Throat</td>
<td>39%</td>
</tr>
<tr>
<td>Loss of Smell/Taste</td>
<td>37%</td>
</tr>
<tr>
<td>Felt Feverish</td>
<td>36%</td>
</tr>
</tbody>
</table>

Vermont Department of Health
Vermonters 80 years and older are more likely to be hospitalized for COVID-19.
Rate per 10,000 Vermonters

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>0-9</th>
<th>10-19</th>
<th>20-29</th>
<th>30-39</th>
<th>40-49</th>
<th>50-59</th>
<th>60-69</th>
<th>70-79</th>
<th>80+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rate</td>
<td>2.9</td>
<td>3.4</td>
<td>6.0</td>
<td>10.5</td>
<td>15.1</td>
<td>28.3</td>
<td>47.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Vermont Department of Health

Number of Hospitalizations Over Time

- 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.

American Indian or Alaskan Native *
Other Race *
Black or African American 2%
Asian 4%

Please note 29 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 Vermonners

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

Number of Deaths Over Time
Rate per 10,000 Vermonners

White Vermonters represent a majority of COVID-19 deaths.
Death rates by race are similar.
Rate per 10,000 Vermonners

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.

Note: No deaths have 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:

<table>
<thead>
<tr>
<th>Outbreak Setting</th>
<th>Healthcare and Supportive Residential</th>
<th>Education</th>
<th>Businesses/Workplaces</th>
</tr>
</thead>
</table>
| **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: *
|                                   |                                                                                                |  • have an illness start or a positive test collection date within 14 days, **and**             | Three or more COVID-19 cases among employees or customers at the same business, and the cases:          |
|                                   |                                                                                                |  • do not live together or have close contact with each other in another setting, **and**      |  • had contact with each other in the business, **and**                                               |
|                                   |                                                                                                |  • there is no other more likely source of exposure.                                          |  • have an illness start or positive test collection date within 14 days, **and**                      |
| **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:

<table>
<thead>
<tr>
<th>Outbreak Definition</th>
<th>Social Gatherings/Events</th>
<th>Senior Independent Living and Income-Restricted Multifamily Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Three or more COVID-19 cases involving more than one family or household where the cases:</td>
<td>Three or more COVID-19 cases involving different households or staff where the cases:</td>
</tr>
<tr>
<td></td>
<td>• have an illness start date or positive test collection date within 14 days, and</td>
<td>• have an illness start date or positive test collection date within 14 days, and</td>
</tr>
<tr>
<td></td>
<td>• are linked through contact or location, and</td>
<td>• live, work, or provide services at the same multifamily housing facility, and</td>
</tr>
<tr>
<td></td>
<td>• are not linked to another outbreak, and</td>
<td>• had contact with each other at the facility, and</td>
</tr>
<tr>
<td></td>
<td>• attended a social event/gathering, and</td>
<td>• there is no other more likely source of exposure.</td>
</tr>
<tr>
<td></td>
<td>• there is no other more likely source of exposure.</td>
<td></td>
</tr>
</tbody>
</table>

**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**

- Social Gatherings/Events: Parties, meetings, celebrations, recreational sports, fitness classes, etc.
- Senior Independent Living and Income-Restricted Multifamily Housing: Senior independent living facilities and other high risk community independent living settings (not meant for general community multifamily independent living settings).
22% of people testing positive for COVID-19 are associated with an outbreak.

**Outbreaks**

<table>
<thead>
<tr>
<th>Active</th>
<th>Resolved*</th>
</tr>
</thead>
<tbody>
<tr>
<td>105</td>
<td>351</td>
</tr>
</tbody>
</table>

94 Primary
11 Secondary

*See previous page for definitions of resolved outbreaks.

**Congregate Care & Living**

- 786 cases among residents
- 400 cases among facility staff

**Acute & Outpatient Healthcare**

- 90 cases

**Schools & Child Care**

- 1524 cases among children & staff

**Workplaces/Businesses**

- 1005 cases among employees

**Community**

- 903 cases

Source: Vermont Department of Health
Reflects confirmed data as of 4/14/2021

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.
34 primary outbreaks have led to 60 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 23 for setting descriptions.
Vermont COVID-19 Cases Associated with an Outbreak Over Time

Vermont COVID-19 Deaths Associated with an Outbreak Over Time

Source: Vermont Department of Health
Reflects confirmed data as of 04/14/2021
While only 22% of all people testing positive for COVID-19 are associated with an outbreak, 62% 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.

Source: Vermont Department of Health
Reflects confirmed data as of 4/14/2021
A similar percentage of females and males with COVID-19 are associated with outbreaks.

20% of females with COVID-19 are associated with an outbreak.

23% 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.

Source: Vermont Department of Health
Reflects case counts as of 4/14/2021
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.

Source: Vermont Department of Health
Reflects case counts as of 4/14/2021
Learn more about COVID-19 in Vermont:

Web:  www.healthvermont.gov/COVID-19
Email:  AHS.VDHPublicCommunication@vermont.gov
See more data:  Weekly Data Summaries