Weekly Summary of Vermont COVID-19 Data

Reflecting cases identified between March 5 – July 1, 2020

Date published: July 2, 2020 (due to July 4th holiday). 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 June 24 through July 1

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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COVID-19 in Vermont

An overview of our number of cases and laboratory testing to date.
Total Number of Cases in Vermont: 1,227

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=1227)

Cumulative cases are presented using a log scale to help compare the large number of cases in Chittenden County (n=617, roughly 50% of all cases) to other counties. Using a log scale also helps visualize percent change. For the number of cases by county, see the Data Dashboard.
The highest percent of positive tests (11%) was on March 23, 28, and 30. 

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

- White: 81.4%
- Black or African American: 9.6%
- Other Race: 1.8%
- American Indian or Alaskan Native: 0.2%
- Asian: 4.3%

Non-Hispanic Vermonters represent the majority of COVID-19 cases. Hispanic Vermonters have the higher rate.
Rate per 10,000 Vermonters

- Hispanic: 3.4%
- Non-Hispanic: 87.1%

Vermont Department of Health

Note: Race is unknown in 3% of cases (n = 33) and ethnicity is unknown in 9% of cases (n = 116).
Approximately 60% of people* with COVID-19 have a pre-existing condition.

*of the 928 people that the Health Department has pre-existing condition data for.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>130</td>
<td>14%</td>
</tr>
<tr>
<td>Chronic Lung Disease (includes asthma and COPD)</td>
<td>129</td>
<td>14%</td>
</tr>
<tr>
<td>Chronic Liver Disease</td>
<td>9</td>
<td>1%</td>
</tr>
<tr>
<td>Chronic Kidney Disease</td>
<td>26</td>
<td>3%</td>
</tr>
<tr>
<td>Current/Former Smoker</td>
<td>234</td>
<td>25%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>94</td>
<td>10%</td>
</tr>
<tr>
<td>Immunocompromised Condition</td>
<td>44</td>
<td>5%</td>
</tr>
<tr>
<td>Neurologic Condition/Intellectual Disability</td>
<td>33</td>
<td>4%</td>
</tr>
<tr>
<td>Other Chronic Condition**</td>
<td>276</td>
<td>30%</td>
</tr>
<tr>
<td>Pregnant</td>
<td>9</td>
<td>1%</td>
</tr>
</tbody>
</table>

47% 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 76% (928) of 1,227 total COVID-19 cases.

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

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage (COVID-19)</th>
<th>Percentage (Vermont)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiovascular Disease</td>
<td>14%</td>
<td>8%</td>
</tr>
<tr>
<td>Diabetes Mellitus</td>
<td>10%</td>
<td>9%</td>
</tr>
<tr>
<td>Chronic Lung Disease</td>
<td>14%</td>
<td>16%</td>
</tr>
</tbody>
</table>

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

- Female: 53%
- Male: 47%

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

<table>
<thead>
<tr>
<th>Age Range</th>
<th>COVID-19 Patients</th>
<th>Vermont Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-9</td>
<td>16</td>
<td>0</td>
</tr>
<tr>
<td>10-19</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>20-29</td>
<td>37</td>
<td>56</td>
</tr>
<tr>
<td>30-39</td>
<td>84</td>
<td>62</td>
</tr>
<tr>
<td>40-49</td>
<td>68</td>
<td>49</td>
</tr>
<tr>
<td>50-59</td>
<td>76</td>
<td>73</td>
</tr>
<tr>
<td>60-69</td>
<td>124</td>
<td>107</td>
</tr>
<tr>
<td>70-79</td>
<td>107</td>
<td>23</td>
</tr>
<tr>
<td>80+</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

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

- Hospitalized: 18%
- Not hospitalized: 3%
7 in 10 health care workers with COVID-19 are female.

34% of health care workers with COVID-19 are associated with an outbreak.

Health care workers with COVID-19 tend to be younger than non-health care workers with COVID-19.
White Vermonters represent the majority of health care workers with COVID-19.

Most health care workers with COVID-19 are not hospitalized.

Most health care workers with COVID-19 have symptoms.

<table>
<thead>
<tr>
<th>Sign or Symptom among Health Care Workers with COVID-19</th>
<th>Percent of Symptomatic Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cough</td>
<td>73%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>65%</td>
</tr>
<tr>
<td>Headache</td>
<td>61%</td>
</tr>
<tr>
<td>Loss of Smell or Taste</td>
<td>54%</td>
</tr>
<tr>
<td>Muscle Pain</td>
<td>51%</td>
</tr>
<tr>
<td>Runny nose</td>
<td>46%</td>
</tr>
<tr>
<td>Chills</td>
<td>45%</td>
</tr>
<tr>
<td>Fever</td>
<td>44%</td>
</tr>
</tbody>
</table>

There are no reported deaths among health care workers.
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.

<table>
<thead>
<tr>
<th>Sign or Symptom</th>
<th>Percent of Symptomatic Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cough</td>
<td>72%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>68%</td>
</tr>
<tr>
<td>Headache</td>
<td>53%</td>
</tr>
<tr>
<td>Muscle Pain</td>
<td>52%</td>
</tr>
<tr>
<td>Fever</td>
<td>51%</td>
</tr>
</tbody>
</table>

14 days
Average illness duration

Vermont Department of Health
Most Vermonters with COVID-19 are not hospitalized.

- Unknown = 84
- Hospitalized = 130
- Not hospitalized = 1013

16% Of those hospitalized were on a ventilator

35% Of those hospitalized were in the ICU

9 days Average hospital stay (range: 0-43 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. Hospitalization rates by race are similar.
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

Males and females have similar rates of COVID-19 death.
Rate per 10,000 Vermonters

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

White Vermonters represent a majority of COVID-19 deaths.
Death rates by race are similar.
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 ≥ 100.4°F), cough, difficulty breathing/shortness of breath

2. For other settings (residential communities, businesses):
   - Two or more epidemiologically-linked confirmed COVID-19 cases where there’s an opportunity to stop transmission
31% of COVID-19 cases are associated with an outbreak

277 cases among residents

102 cases among facility staff

Outbreaks
3 Active
10 Resolved*

*Outbreaks where it has been >28 days since the last known exposure to a confirmed COVID-19 case, with no new cases OR 2 rounds of negative facility-wide testing one week apart.
The daily number of cases associated with an outbreak peaked on April 9.

Vermont COVID-19 Cases Associated with an Outbreak Over Time

Vermont COVID-19 Deaths Associated with an Outbreak Over Time
11 of 13 outbreaks have occurred within facilities.

In facilities with outbreaks, 95% of residents have been tested.

In facilities with outbreaks, 86% of staff* have been tested.

Not Tested, 5%

Tested Positive, 23%

Tested Negative, 72%

Not Tested, 14%

Tested Positive, 9%

Tested Negative, 77%

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

Percentages by testing status are rounded to the whole number, but combined totals take into account the full percentages.

*Three facilities are excluded from this analysis due to missing information.

Examples of facilities include long-term care and other skilled nursing facilities, correctional facilities, and workplaces.

Community outbreaks, including those occurring in senior independent living communities, are not represented on this slide.

Source: Vermont Department of Health
Reflects confirmed data as of 7/1/2020.
While only 31% 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.

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 7/1/2020.
The percentage of females and males with COVID-19 that are associated with an outbreak is about even.

29% of females with COVID-19 are associated with an outbreak. 32% 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.

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. Percentages by outbreak type are rounded to the whole number, but combined totals take into account 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. Vermont has not experienced an outbreak in all health and non-health settings.

Source: Vermont Department of Health
Reflects case counts as of 7/1/20
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