



VERMONT

STATE REPORT

11.22.2020

Issue 23

SUMMARY

- Vermont is addressing an alarming viral surge. Vermont is in the red zone for cases, indicating 101 or more new cases per 100,000 population, with the 49th highest rate in the country. Vermont is in the green zone for test positivity, indicating a rate at or below 4.9%, with the 50th highest rate in the country.
- Vermont has seen another sharp increase in new cases and an increase in test positivity despite strongly increasing test volumes.
- The following three counties had the highest number of new cases over the last 3 weeks: 1. Washington County, 2. Chittenden County, and 3. Orange County. These counties represent 63.6% of new cases in Vermont.
- Mitigation measures: On Nov 14, intensified mitigation measures went into effect.
- 29% of all counties in Vermont have moderate or high levels of community transmission (yellow, orange, or red zones), with none having high levels of community transmission (red zone).
- During the week of Nov 9 - Nov 15, 3% of nursing homes had at least one new resident COVID-19 case, 9% had at least one new staff COVID-19 case, and none had at least one new resident COVID-19 death.
- Vermont had 115 new cases per 100,000 population, compared to a national average of 356 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 2 to support operations activities from FEMA and 1 to support operations activities from USCG.
- Between Nov 14 - Nov 20, on average, 3 patients with confirmed COVID-19 and 2 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Vermont. This is a minimal change in total COVID-19 hospital admissions.

RECOMMENDATIONS

- Referring to the national profiles in the back of the packet, there is aggressive, rapid, and expanding community spread across the country, reaching over 2,000 counties. In states with aggressive mitigation, we are beginning to see the impact of that mitigation despite the cooling weather. We are also seeing stabilization in many European countries that implemented strong public and private mitigation, but preserved schooling. However, in many areas of the country, mitigation efforts are inadequate or too recently implemented to see a significant impact. All states and all counties must flatten the curve to sustain the health system for both COVID and non-COVID emergencies.
- The silent community spread that precedes and continues to drive these surges can only be identified and interrupted through proactive, focused testing for both the identification of asymptomatic and pre-symptomatic individuals. This must be combined with significant behavior change of all Americans. Ensure masks at all times in public, increase physical distancing through significant reduction in capacity in public and private in door spaces, and ensure every American understands the clear risks of ANY family or friend interactions outside of their immediate household indoors without masks.
- We share the judgement of Vermont leaders that the situation has reached a critical stage with a change in trajectory needed to limit increased numbers of cases, hospitalizations, and deaths. Increased observance of intensified mitigation measures is temporarily needed to limit overrunning of hospital capacity and additional preventable deaths. The Governor's continued communication with the public is crucial and commended.
- Vermont has been extraordinarily successful with limiting transmission due to a well-designed set of graded mitigation measures and enhanced disease control capacity including greatly expanded testing and contact tracing capacity. Short term mitigation interventions, including restricting indoor dining and limiting or closing areas of congregation without masking, will continue to be needed, as has been successful in the USA and is currently showing effectiveness in Europe. At this point, the rapid increases in cases and hospitalizations support the need for additional measures. These measures help to control transmission in public settings but have had limited success in preventing spread at private gatherings. Additional measures should be taken, including augmented communications to reinforce messaging around social gatherings throughout the ongoing holiday season and a new asymptomatic surveillance approach to limit community spread.
- These increased mitigation measures are a short-term sacrifice to protect the vulnerable as the U.S. bridges to the rapid vaccination of vulnerable populations over the next few months. Maximizing control of transmission now will also allow for greater and earlier resumption of business activity in addition to limiting cases, hospitalizations, and deaths.
- Proactive weekly testing of groups representative of the community (teachers, community college students, county workers, staff in crowded or congregate settings, all hospital personnel, large private sector employers) will help identify the depth and breadth of community infection. These cases should be triangulated with cases among long-term care facility (LTCF) staff to identify geographic areas with high numbers of asymptomatic and pre-symptomatic cases, which should then trigger widespread testing, identification, and isolation of positive cases among community members, stopping ongoing spread. These efforts to identify and reduce asymptomatic transmission should run concurrently with testing of symptomatic persons and contact tracing of cases.
- Expanded strategic use of point-of-care antigen tests with immediate results will be critical to proactive testing in communities; these tests should be used among all individuals independent of symptoms in orange and red counties.
 - Antigen tests perform well in the highly infectious window and will be effective in identification of asymptomatic and pre-symptomatic infectious cases.
 - Antigen tests do not perform well after 8-10 days post infection when nucleic acid cycle times are >30.
 - All antigen results must be reported with both the number of positive results and total tests conducted; positives must be reported as COVID cases.
- Proactive testing must be part of the mitigation efforts inclusive of universal masking, physical distancing, hand hygiene, and the active promotion of activities in outdoor settings.
- Given increasing outbreaks and deaths in nursing homes, ensure increased frequency of LTCF testing and rapid implementation of vaccination into LTCFs as vaccine becomes available.
- Mitigation measures to limit transmission in personal gatherings need continued strengthening. This needs augmented communication from state and community leaders of a clear and shared message asking Vermonters to wear masks, physically distance, and avoid gatherings in both public and private spaces, especially indoors. Limiting exposure of additional households and vulnerable individuals at Thanksgiving and other holiday functions is critical. In addition, local influencers are critical; hospital personnel are frequently trusted in the community and have been successfully recruited to amplify these messages locally.
- Ensure all K-12 schools are following CDC guidelines, including mask wearing, and utilize the Abbot BinaxNOW tests to routinely test all teachers as another indicator of the degree of community spread.
- Ensure all clinical facilities, including mid-level and rural facilities, have expansion and contingency plans and up-to-date treatment protocols, including outpatient management; ensure all facilities, public and private, have maximal access to medications, supplies, and staffing and are accurately reporting current status of each resource. ensure support for platforms for efficient intra- and inter-state patient transfers as needed.
- Specific, detailed guidance on community mitigation measures can be found on the [CDC website](#).

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.



COVID-19



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	STATE, % CHANGE FROM PREVIOUS WEEK		FEMA/HHS REGION	UNITED STATES
	STATE	WEEK		
NEW COVID-19 CASES (RATE PER 100,000)	717 (115)	+72%	41,664 (281)	1,169,615 (356)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	2.4%	+0.7%*	4.4%	10.5%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	38,128** (6,110**)	+25%**	839,030** (5,652**)	10,032,677** (3,057**)
COVID-19 DEATHS (RATE PER 100,000)	3 (0.5)	+200%	358 (2.4)	9,981 (3.0)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	3%	+3%*	12%	22%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	9%	+6%*	29%	43%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	0%	N/A*	3%	7%
TOTAL NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	32 (4)	+0% (-1%)	4,018 (12)	136,015 (19)

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES – Additional data details available under METHODS

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020; previous week is 11/7 - 11/13.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020. Previous week is 11/5 - 11/11.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data are reported separately for cases among residents and staff. Data is through 11/15/2020, previous week is 11/2-11/8. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.

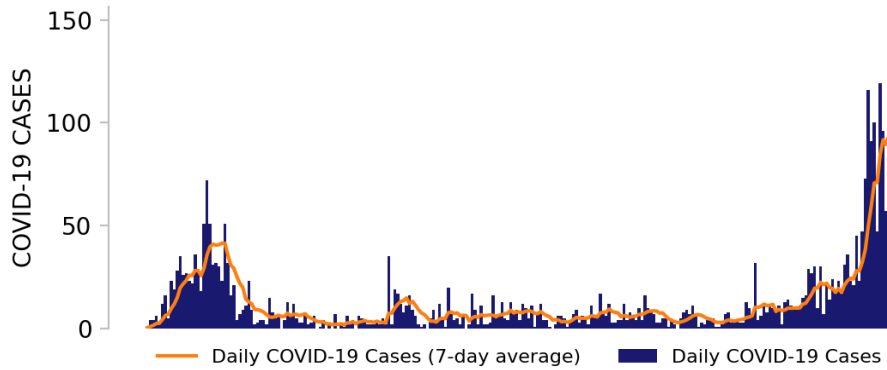
Admissions: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the totals. Totals include confirmed and suspected COVID-19 admissions.



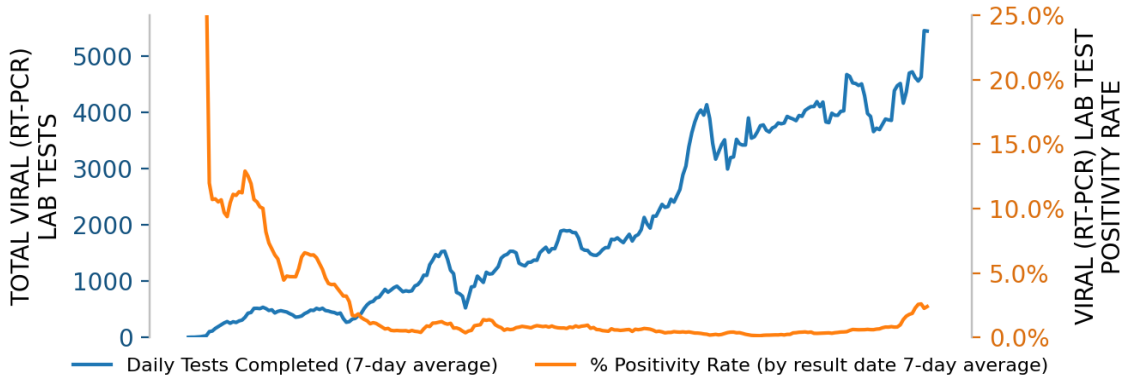
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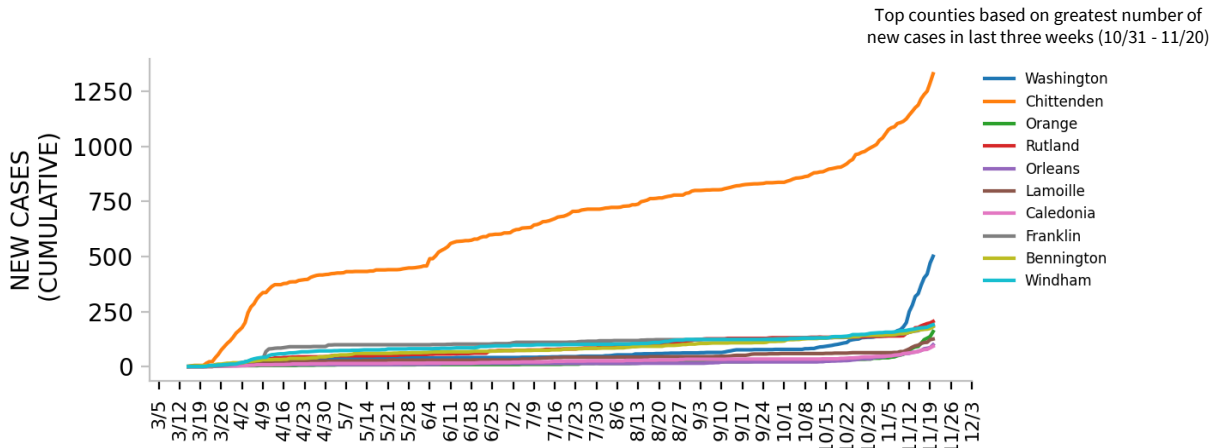
NEW CASES



TESTING



TOP COUNTIES



DATA SOURCES – Additional data details available under METHODS

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

Cases: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020.

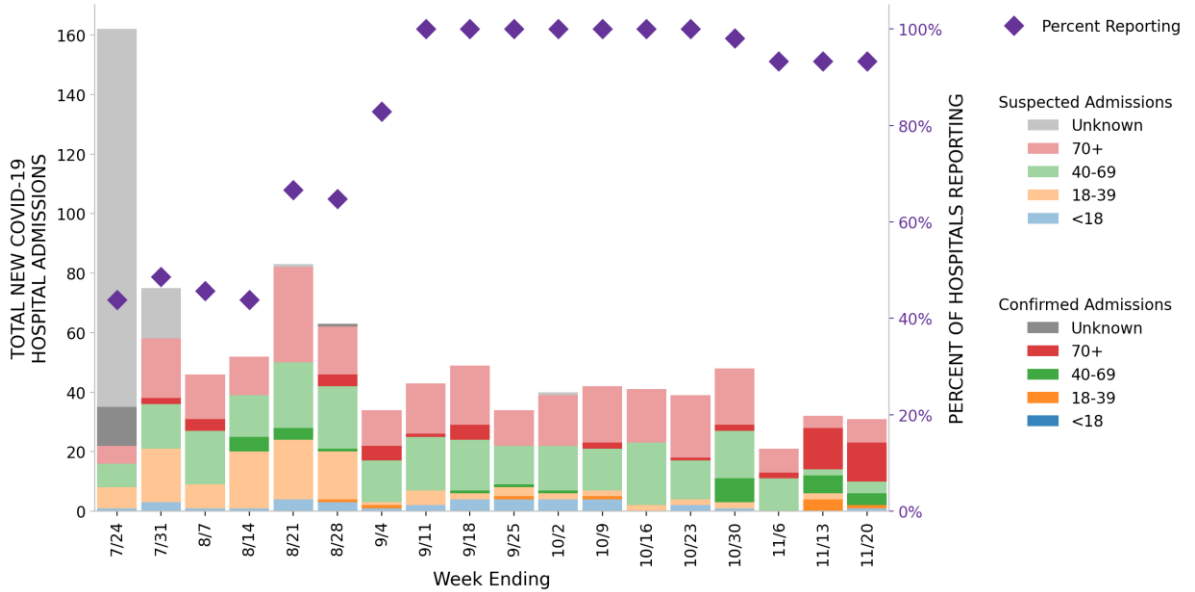


VERMONT

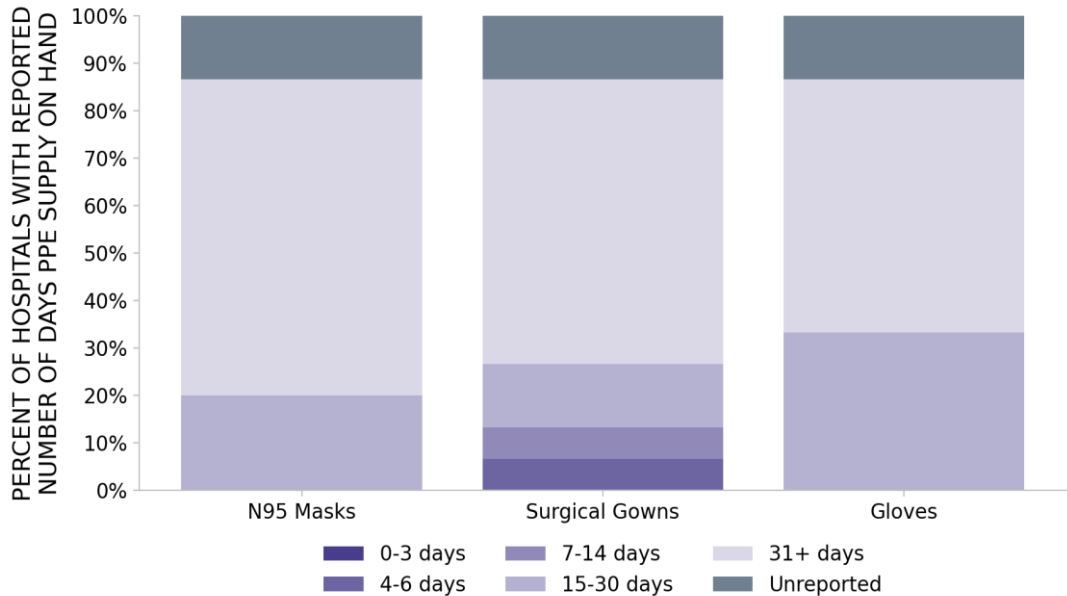
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15 hospitals are expected to report in Vermont

HOSPITAL ADMISSIONS



HOSPITAL PPE SUPPLIES



DATA SOURCES – Additional data details available under METHODS

Hospitalizations: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure.

PPE: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Values presented show the latest reports from hospitals in the week ending 11/18/2020.



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COVID-19 COUNTY AND METRO ALERTS*

Top 12 shown in table (full lists below)

METRO AREA (CBSA)

COUNTIES

LOCALITIES IN RED ZONE	0 ■ (+0)	N/A	0 ▼ (-1)	N/A
LOCALITIES IN ORANGE ZONE	0 ■ (+0)	N/A	1 ■ (+0)	Orange
LOCALITIES IN YELLOW ZONE	1 ■ (+0)	Barre	3 ▲ (+1)	Washington Orleans Lamoille
Change from previous week's alerts:		▲ Increase	■ Stable	▼ Decrease

* Localities with fewer than 10 cases last week have been excluded from these alerts.

Note: Lists of red, orange, and yellow localities are sorted by the number of new cases in the last 3 weeks, from highest to lowest. Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

DATA SOURCES – Additional data details available under METHODS

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020.

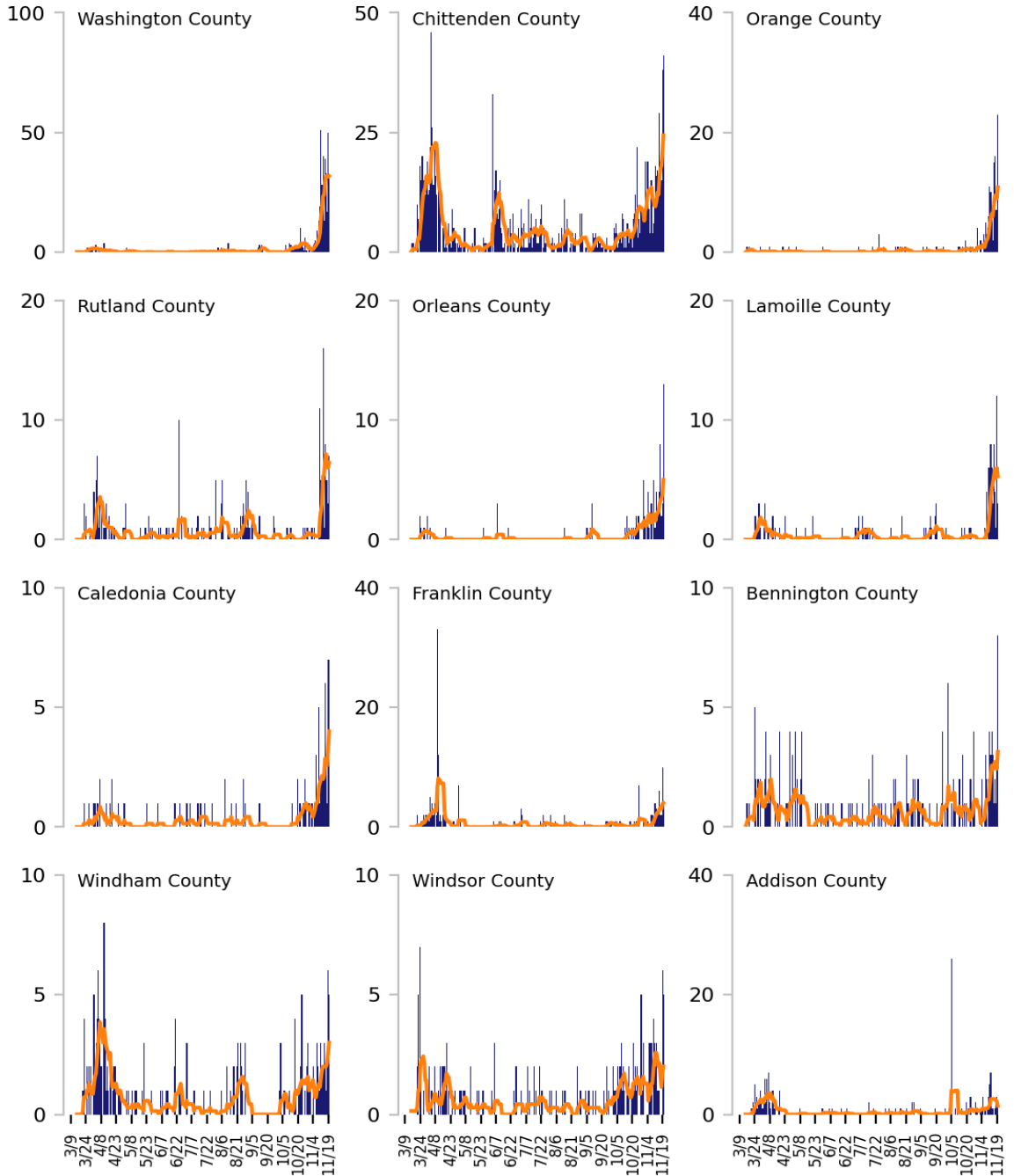
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020.



Top 12 counties based on number of new cases in the last 3 weeks

— Daily COVID-19 Cases (7-day average) ■ Daily COVID-19 Cases

TOTAL DAILY CASES



DATA SOURCES – Additional data details available under METHODS

Cases: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020. Last 3 weeks is 10/31 - 11/20.

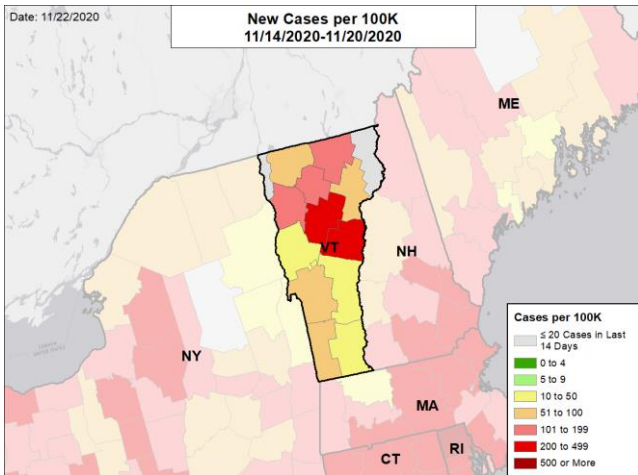


VERMONT

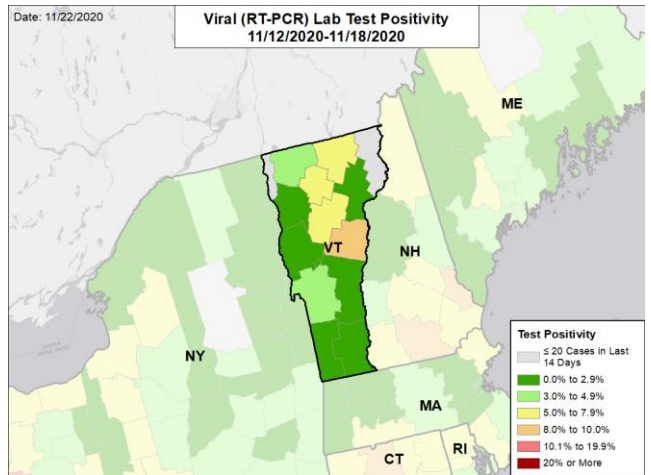
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CASE RATES AND VIRAL LAB TEST POSITIVITY

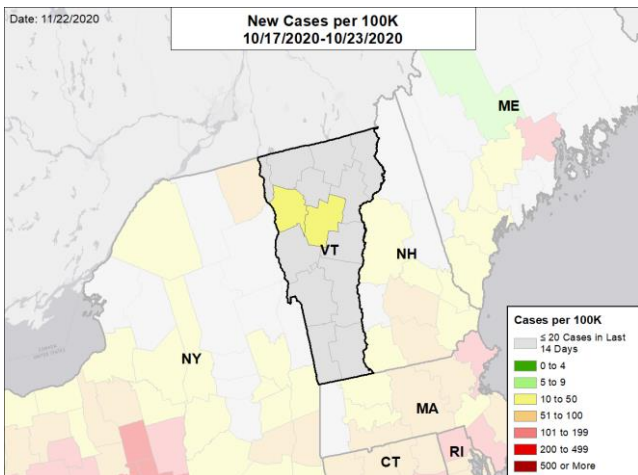
NEW CASES PER 100,000



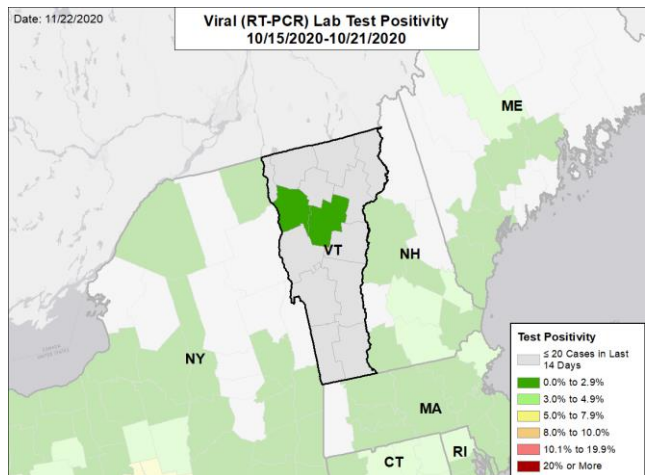
VIRAL (RT-PCR) LABORATORY TEST POSITIVITY



NEW CASES PER 100,000 ONE MONTH BEFORE



VIRAL (RT-PCR) LABORATORY TEST POSITIVITY ONE MONTH BEFORE



DATA SOURCES – Additional data details available under METHODS

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

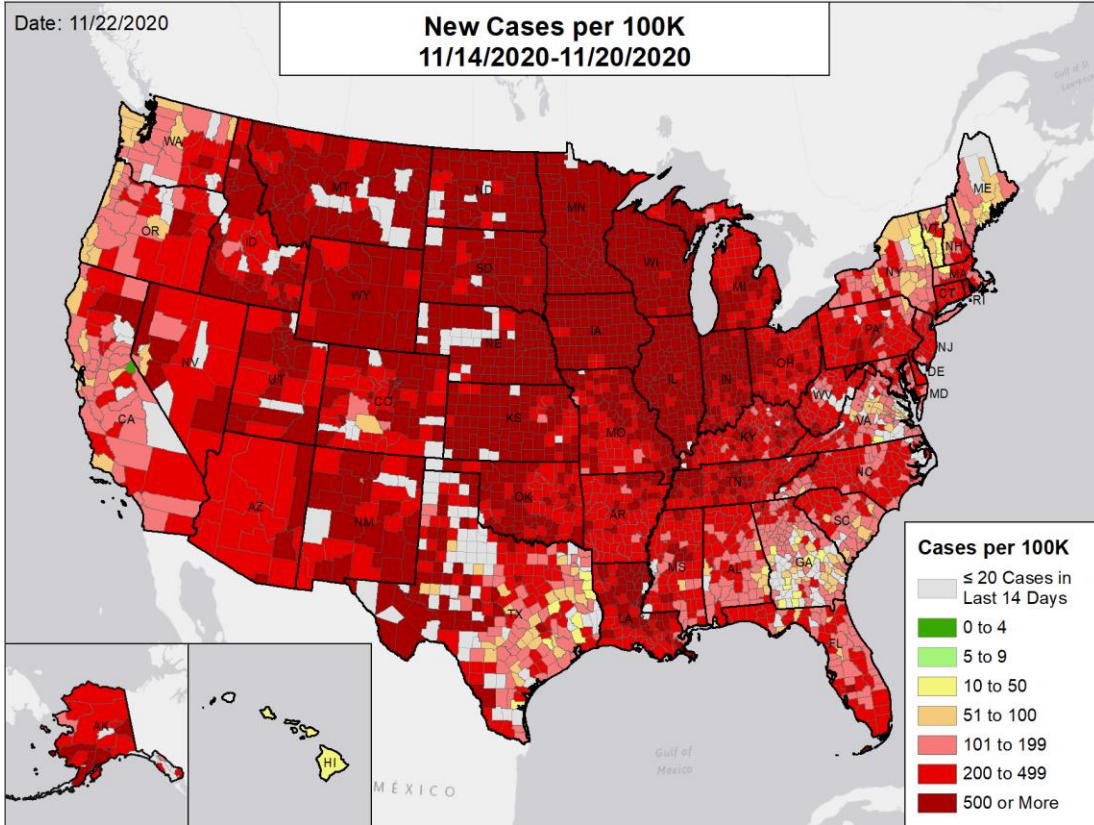
Cases: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 11/20/2020. The week one month before is 10/17 - 10/23.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 11/18/2020. The week one month before is 10/15 - 10/21.



National Picture

NEW CASES PER 100,000



NATIONAL RANKING OF NEW CASES PER 100,000

National Rank	State
1	ND
2	WY
3	SD
4	MN
5	IA
6	NE
7	MT
8	WI
9	UT
10	NM
11	IN
12	KS
13	IL
14	RI
15	CO
16	AK
17	ID
18	MO
19	MI
20	OK
21	LA
22	TN
23	OH
24	KY
25	NV
26	AR
27	WV
28	CT
29	PA
30	AZ
31	NJ
32	DE
33	MS
34	TX
35	MA
36	MD
37	FL
38	AL
39	NC
40	SC
41	NH
42	CA
43	WA
44	NY
45	OR
46	VA
47	DC
48	GA
49	VT
50	ME
51	HI

Europe is experiencing a fall surge similar to the USA and is showing early signs of improvement through country-specific mitigation efforts.

- 80% (48/60 countries) require wearing masks in all public settings
 - Most countries have imposed fines for non-compliance
- 93% (56/60) have significant restrictions on gathering size
- 63% (38/60) have some form of nonessential business closures, initially focused on bars and reducing restaurant capacity
- 60% (37/60) have some form of entertainment or public space restriction
- 65% (39/60) have deployed a contact tracing app

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

Cases: County-level data from USAFacts through 11/20/2020.

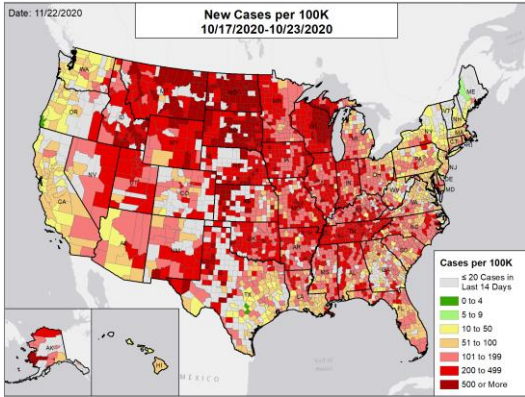
European community mitigation information sourced from European CDC — Situation Update Worldwide.



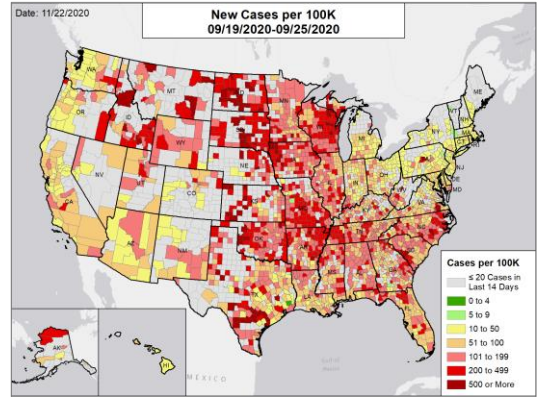
National Picture

NEW CASES PER 100,000 IN THE WEEK:

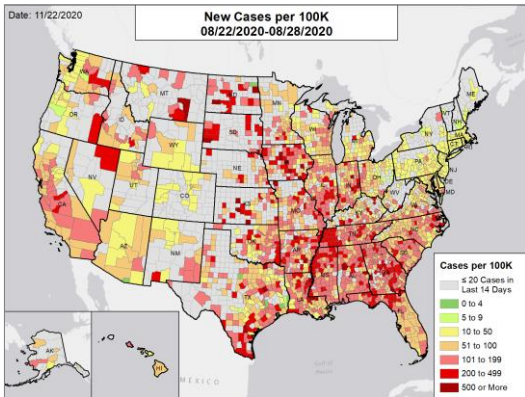
ONE MONTH BEFORE



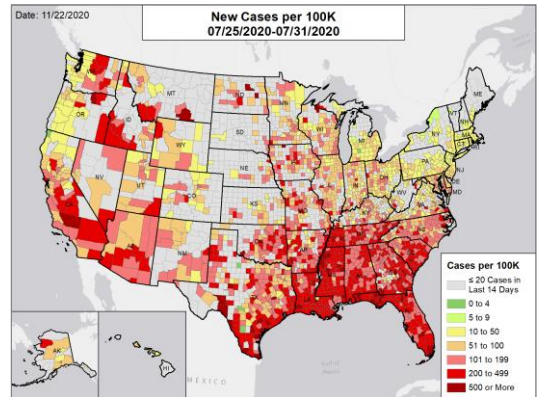
TWO MONTHS BEFORE



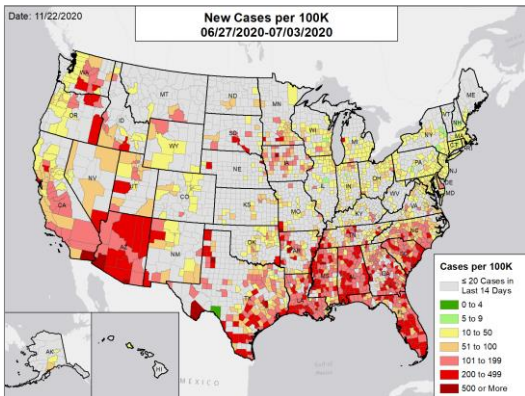
THREE MONTHS BEFORE



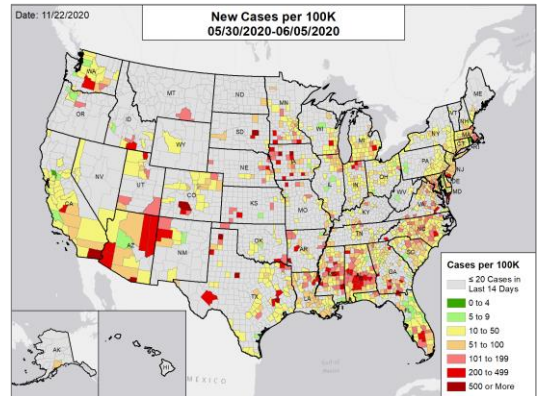
FOUR MONTHS BEFORE



FIVE MONTHS BEFORE



SIX MONTHS BEFORE



DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

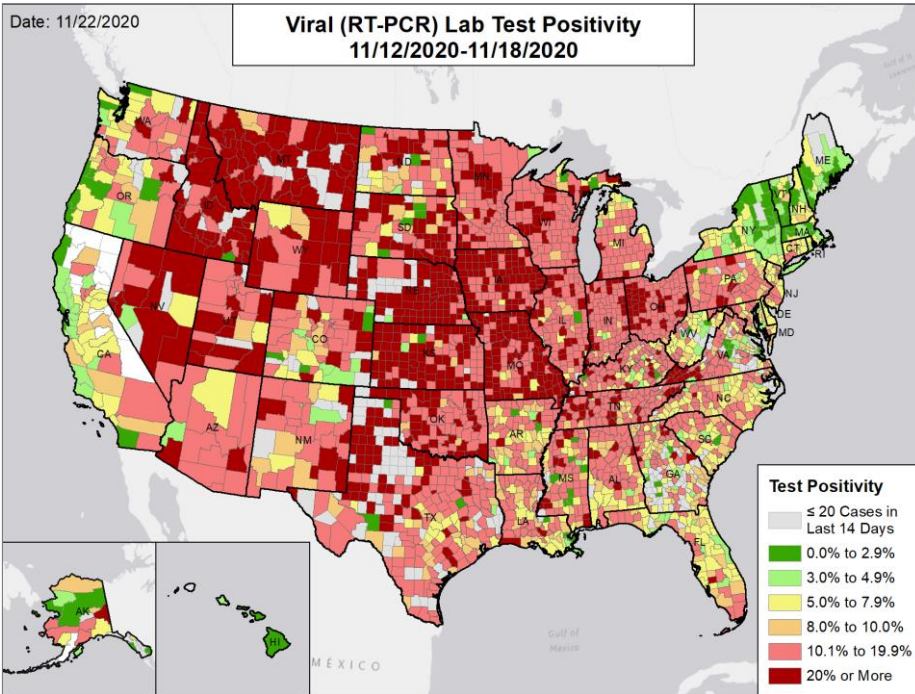
Cases: County-level data from USAFacts through 11/20/2020. The week one month before is 10/17 - 10/23; the week two months before is 9/19 - 9/25; the week three months before is 8/22 - 8/28; the week four months before is 7/25 - 7/31; the week five months before is 6/27 - 7/3; the week six months before is 5/30 - 6/5.



National Picture

VIRAL (RT-PCR) LAB TEST POSITIVITY

NATIONAL RANKING OF TEST POSITIVITY



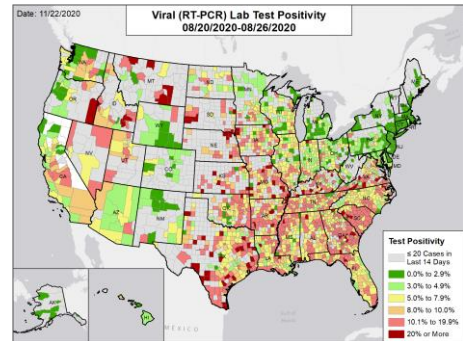
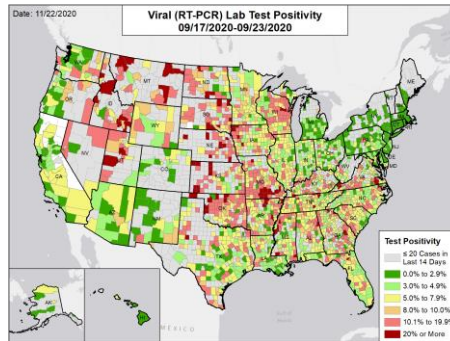
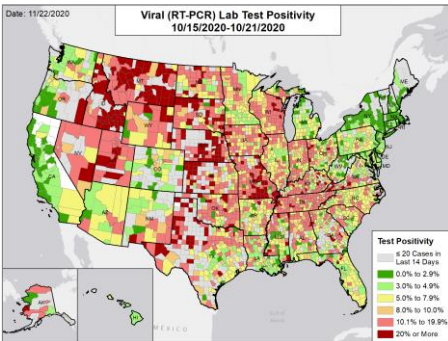
National Rank	State	National Rank	State
1	MT	27	AZ
2	ID	28	SC
3	IA	29	AR
4	KS	30	CT
5	MO	31	VA
6	NE	32	NJ
7	OK	33	MD
8	UT	34	AK
9	SD	35	OR
10	NM	36	NC
11	IN	37	FL
12	NV	38	LA
13	TN	39	GA
14	MN	40	WV
15	WI	41	WA
16	WY	42	NH
17	IL	43	RI
18	MI	44	DE
19	ND	45	CA
20	KY	46	NY
21	TX	47	MA
22	CO	48	ME
23	OH	49	DC
24	MS	50	VT
25	AL	51	HI
26	PA		

VIRAL (RT-PCR) LAB TEST POSITIVITY IN THE WEEK:

ONE MONTH BEFORE

TWO MONTHS BEFORE

THREE MONTHS BEFORE



DATA SOURCES

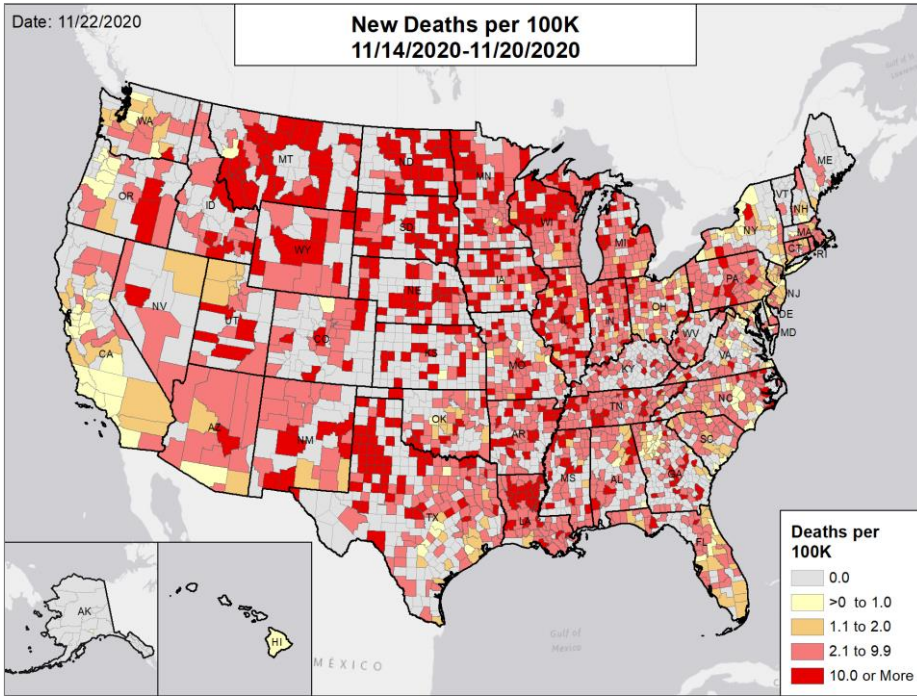
Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 11/18/2020. The week one month before is 10/15 - 10/21; the week two months before is 9/17 - 9/23; the week three months before is 8/20 - 8/26.



National Picture

NEW DEATHS PER 100,000

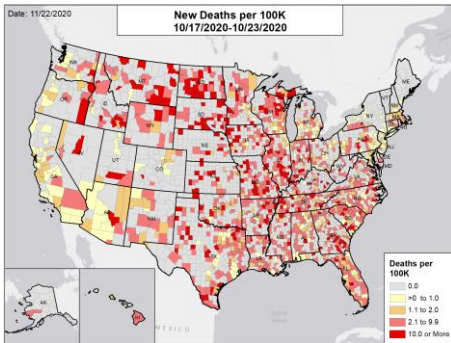


NATIONAL RANKING OF NEW DEATHS PER 100,000

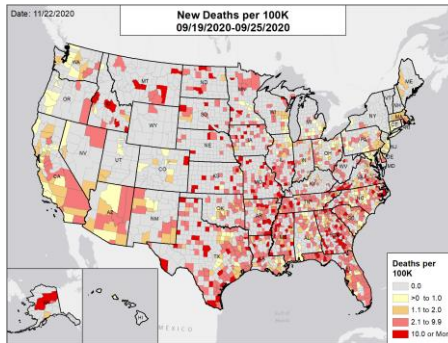
National Rank	State	National Rank	State
1	SD	27	NV
2	ND	28	OK
3	MT	29	KY
4	WY	30	CT
5	LA	31	SC
6	WI	32	NC
7	IL	33	AZ
8	NE	34	UT
9	NM	35	OH
10	AR	36	NJ
11	IA	37	FL
12	MN	38	MD
13	KS	39	GA
14	ID	40	DC
15	TN	41	VA
16	IN	42	OR
17	MI	43	NY
18	AL	44	WA
19	CO	45	DE
20	MS	46	CA
21	WV	47	ME
22	RI	48	NH
23	PA	49	VT
24	TX	50	AK
25	MA	51	HI
26	MO		

NEW DEATHS PER 100,000 IN THE WEEK:

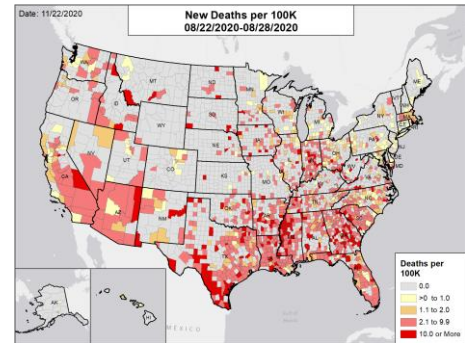
ONE MONTH BEFORE



TWO MONTHS BEFORE



THREE MONTHS BEFORE



DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

Deaths: County-level data from USAFacts through 11/20/2020. The week one month before is 10/17 - 10/23; the week two months before is 9/19 - 9/25; the week three months before is 8/22 - 8/28.



METHODS

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Metric	Dark Green	Light Green	Yellow	Orange	Light Red	Red	Dark Red
New cases per 100,000 population per week	≤4	5 – 9	10 – 50	51 – 100	101 – 199	200 – 499	≥500
Percent change in new cases per 100,000 population	≤-26%	-25% – -11%	-10% – 0%	1% – 10%	11% – 99%	100% – 999%	≥1000%
Diagnostic test result positivity rate	≤2.9%	3.0% – 4.9%	5.0% – 7.9%	8.0% – 10.0%	10.1% – 19.9%		≥20.0%
Change in test positivity	≤-2.1%	-2.0% – -0.6%	-0.5% – 0.0%	0.1% – 0.5%	0.6% – 2.0%		≥2.1%
Total diagnostic tests resulted per 100,000 population per week	≥2001	1001 – 2000	750 – 1000	500 – 749	250 – 499		≤249
Percent change in tests per 100,000 population	≥26%	11% – 25%	1% – 10%	-10% – 0%	-25% – -11%		≤-26%
COVID-19 deaths per 100,000 population per week	0.0		0.1 – 1.0	1.1 – 2.0	2.1 – 3.0		≥3.1
Percent change in deaths per 100,000 population	≤-26%	-25% – -11%	-10% – 0%	1% – 10%	11% – 25%		≥26%
Skilled Nursing Facilities with at least one resident COVID-19 case, death	0%		1% – 5%		≥6%		
Change in SNFs with at least one resident COVID-19 case, death	≤-2%		-1% – 1%		≥2%		
Total new COVID-19 hospital admissions per 100 beds	≤2	3 – 5	6 – 10	11 – 20	21 – 30		≥31
Change in total new COVID-19 hospital admissions per 100 beds	≤-26%	-25% – -11%	-10% – 0%	1% – 10%	11% – 25%		≥26%

- Some dates may have incomplete data due to delays and/or differences in state reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible. Figures and values may also differ from state reports due to differing methodologies.
- Color threshold values are rounded before color classification.
- **Cases and deaths:** County-level data from USAFacts as of 19:25 EST on 11/22/2020. State values are calculated by aggregating county-level data from USAFacts. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted.
- **Testing:** The data presented represent viral COVID-19 laboratory diagnostic and screening test (reverse transcription polymerase chain reaction, RT-PCR) results—not individual people—and exclude antibody and antigen tests, unless stated otherwise. CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe county-level viral COVID-19 RT-PCR result totals when information is available on patients’ county of residence or healthcare providers’ practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Because the data are deidentified, total RT-PCR tests are the number of tests performed, not the number of individuals tested. RT-PCR test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 11/12 to 11/18; previous week data are from 11/5 to 11/11; the week one month before data are from 10/15 to 10/21. HHS Protect data is recent as of 12:03 EST on 11/22/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EST on 11/21/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 18:06 EST on 11/22/2020.
- **Hospital PPE:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Data is recent as of 18:25 EST on 11/21/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident and staff cases independently. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analyses. Data presented in this report are more recent than data publicly posted by CMS. Last week is 11/9-11/15, previous week is 11/2-11/8. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.
- **County and Metro Area Color Categorizations**
 - **Red Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases at or above 101 per 100,000 population, and a lab test positivity result at or above 10.1%.
 - **Orange Zone:** Those CBSAs and counties that during the last week reported both new cases between 51–100 per 100,000 population, and a lab test positivity result between 8.0–10.0%, or one of those two conditions and one condition qualifying as being in the “Red Zone.”
 - **Yellow Zone:** Those CBSAs and counties that during the last week reported both new cases between 10–50 per 100,000 population, and a lab test positivity result between 5.0–7.9%, or one of those two conditions and one condition qualifying as being in the “Orange Zone” or “Red Zone.”