WEEKLY COVID-19 REPORT FOR EXTERNAL USE

Mon July 26 - Mon August 2, 2021

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KEY TAKEAWAYS

CASES

Cases in both districts have begun to increase over the past couple of weeks, with a **7-day average** of 16.2 new cases per day, per 100,000 population in Richmond and 16.4 new cases per day, per 100,000 population in Henrico.

Richmond City & Henrico County				
Demographic Highest Proportion				
Age 20-29 Year Olds				
Sex Females				
Race	Black			

HOSPITALIZATIONS & FATALITIES

Hospitalizations based on date of admission among Richmond residents are low with 0 hospitalizations in the last week. There have been **4 fatalities** in Richmond since the start of June.

In Henrico, **hospitalizations** are also low with 0 hospitalizations in the last week. **Deaths** in Henrico are also low and stable, with the last date of death being recorded during the week of July 5th. Henrico since the start of the month of June. *Hospitalizations & Deaths by subgroup (sex, age, and race) are reported on a monthly basis. Data may be impacted by a lag in reporting.*

Richmond Catchment Area: Hospital Status Board Trends					
Time Period	Hospitalizations ICU Hospitalizations		Ventilator Utilizations		
2021 January 1st, 2021→	m	m	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
Last 4 Weeks Aug 3rd, 2021→					

*11 out of 11 hospitals in the Richmond Catchment Area are operating at a 'Normal' clinical status.

VACCINATIONS

Richmond and Henrico Health Districts are in Phase 2 of vaccination; anyone 12 or older is eligible to receive a vaccine. Pharmacies currently appear to be administering the largest percentage of vaccines to Richmond and Henrico residents, compared with other providers.

Local Vaccination Stats & Regional Comparison					
Location ≥1 Dose Complete					
Richmond City & Henrico County 56.6% 49.7%					
Region	56.0%	49.5%			

Vaccination Demographic Trends						
Demographic	Demographic Richmond City Henrico County					
Age Groups ≥ 70% Vaccinated	65+ 50+					
Sex	Female					
Race	White					

In both Richmond and Henrico, older age groups have consistently been vaccinated at a higher rate than younger age groups. Section 4 includes an estimated breakdown of vaccination uptake by race and age subgroups.

1.0 COVID-19 SNAP SHOT

1.1 TOTAL TESTS AND PERCENT POSITIVITY BY MODALITY IN RICHMOND AND HENRICO

Total tests by testing modality and the associated 7-day average in percent positivity are summarized in the table below. Data are from the <u>VDH public dashboard</u> on August 2, 2021.

	RICHMOND CITY Tests Positivity		HENRICO COUNTY	
			Tests	Positivity
PCR*	270,068	6.0%	411,784	6.0%
Antigen	57,544	8.6%	113,067	7.9%
Total (PCR, antigen, and antibody)	332,203	6.8%	534,658	7.2%

1.2 Confirmed cases, hospitalizations, fatalities, and probable cases by county

CASE STATUS	RICHMOND CITY	HENRICO COUNTY	VIRGINIA
New cases this week (August 2)	212	305	7756
All cases	17708	26656	697939
Confirmed cases	14464	19537	540152
Hospitalizations	799	1062	29780
Deaths	242	572	9738
Probable cases	3244	7119	157787
Hospitalizations	20	47	1643
Deaths	39	70	1796
Case rate per 100,000	7684.6	8057.6	8176.9

Weekly cases added are estimated as the difference between the cases recorded from the current and prior week Case Rate per 100,000=(confirmed+probable)/population count *100,000.

Population estimates for the case rate are from 2019 data compiled by the National Center for Health Statistics (NCHS).

1.3 CURRENT COVID-19 HOSPITALIZATIONS IN THE RICHMOND CATCHMENT AREA ON AUGUST 2, 2021

The data included in this section comes from VHASS and it includes data from the following hospitals: VCU Health System, Retreat Doctors', Bon Secours Community, CWJ Chippenham, CWJ Johnson Willis, VA Medical Center, Bon Secours St. Mary's, Henrico Doctors, and Parham Doctors, Bon Secours St. Francis, and Memorial Regional Medical Center.

	TOTAL IN USE FOR COVID-19	CURRENTLY AVAILABLE	
Confirmed Hospitalizations	86	123	
Pending Hospitalizations	8	125	
Confirmed - ICU	19	77	
Pending - ICU	*	37	
Confirmed - Ventilators	5	300	
Pending - Ventilators	*	300	

Within these 11 hospitals that comprise the Richmond catchment area, there are currently 123 total available hospital beds, 37 available adult ICU beds, and 300 available ventilators. Based on the VHASS hospital dashboard on August 2, 2021, all 11 hospitals in the Richmond Catchment area are operating at normal clinical status.

**A clinical status of "normal" indicates that hospital clinical resources are operating within normal conditions. A clinical status of "full" indicates that hospital clinical resources are exceeded and acceptable care cannot be provided to additional patients. Diversion or Community surge response is required.

2.0 COVID-19 CASES

2.1 SUMMARY OF CASES

Cases

Cases in both districts have begun to increase over the past couple of weeks, with a 7-day average of 38 new cases per day, per 100,000 population in Richmond and 53 new cases per day, per 100,000 population in Henrico.

In both districts, females comprise a higher proportion of cases. 20-29 year olds continue to lead case counts cumulatively. Regarding race and ethnicity, the highest incidence of cases in both districts is still among Black individuals. Additionally, in both districts, the percentage of cases among the Latino population is disproportionately high as compared to their population percentage.

2.2 Case Reporting Trends by Date (source-vdh website)

*** Disclaimer ***

In recent weeks, case investigators have made significant efforts to reallocate past cases to appropriate localities (e.g. a case originally listed in Richmond City might be moved to Henrico County, Chesterfield County, etc.). This has led to sometimes significant discrepancies between reported cases and actual new cases. The report date and its count corresponds to the date the case count was reported publicly (or reallocated publicly). The report date does not have any equivalent variable in VEDSS and cannot be directly linked to case-specific dates (e.g. event dates or lab report dates).

Case counts by report date are estimated by subtracting the cumulative cases on the previous day from that of the current day. If the number of cases reallocated to another locality on a day is higher than the cases added for that day (either as new cases or via reallocation), a **negative** count will be displayed. Meanwhile, if the number of cases reallocated to a specific locality is a high number on a given day, reported cases counts can be noticeably **inflated** for that day beyond the actual case counts. The table below clarifies the weekly total deviation of actual new case counts from the reported counts.

Interpretation: On the week of June 21, 2021 - June 27, 2021, there were 26-50 more cases than were reported in Richmond City, and between 0 and 25 fewer cases than were reported in Henrico County.

Week	Deviation of Actual New Case Counts from Reported Counts Week			
Richmond		Henrico		
07/05 to 07/11	151-175 Lower Count than Reported	51-75 Higher Count than Reported		
07/12 to 07/18	0-25 Lower Count than Reported	0-25 Higher Count than Reported		
07/19 to 07/25	0-25 Higher Count than Reported	0-25 Higher Count than Reported		
07/26 to 08/01	0-25 Higher Count than Reported	26-50 Higher Count than Reported		

While the table reports the **weekly** total discrepancy between the actual new case count and the reported case count, the plots below display the **daily** reported case count. The corresponding 7-day moving average is a recurrent average of the reported case count for each 7-day data sequence. Number of New Cases Reported^

7-Day Average Number of Daily New Cases Reported

38

7-Day Average Number of New Daily Cases Reported, Rate per 100,000 Population Total Number of New Cases per 100,000 Population within last 14 days

74

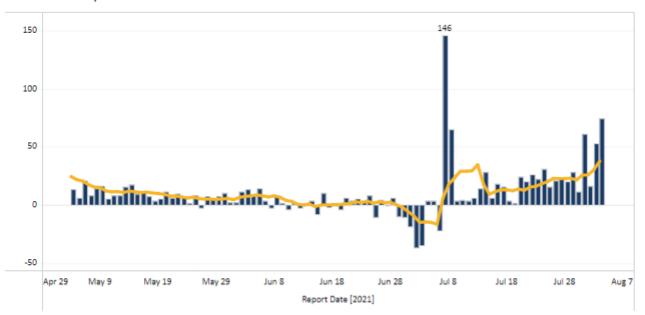
16.4

184.0

•

Report Date Daily Cases Counts for past 90 Days Richmond City

Select Date Range (Affects Bar Chart) Past 90 Days



- In Richmond, the number of daily new cases reported is influenced by cases being reallocated to different localities. The daily plot trends should be compared with the weekly corrections reported in the table above.
- For the week of July 5 to July 11, we see a massive spike in reported cases, but this can be mostly explained by older cases being reallocated to the Richmond locality rather than actual new cases occurring, with between 151 and 175 fewer new cases for the week than the reported counts.
- For the week of July 12 to July 18 the amount of "noise" in the data is still high and now the actual case count for the week is 0 to 25 cases fewer than the graph presents.
- For the week of July 19 through July 25, there were between 0 and 25 more new cases than what was reported. Together with the uptick in the daily curve, this indicates an increase in cases recently.
- This increase in cases has continued over the week of July 26 through August 1, with the daily counts showing an increase in cases compared to previous weeks and the table indicating that the actual count for the week is between 0 and 25 higher than the reported counts show.

Number of New Cases Reported^

7-Day Average Number of Daily New Cases Reported

53

7-Day Average Number of New Daily Cases Reported, Rate per 100,000 Population Total Number of New Cases per 100,000 Population within last 14 days

84

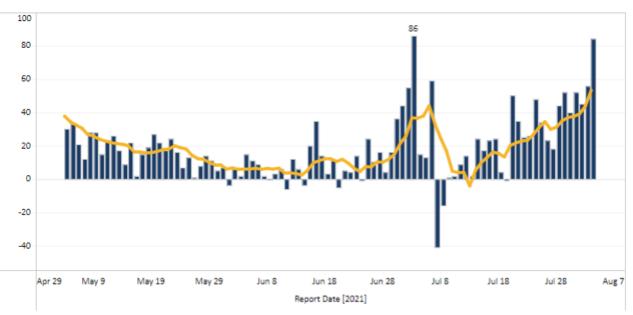
16.2

176.8

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Report Date Daily Cases Counts for past 90 Days Henrico

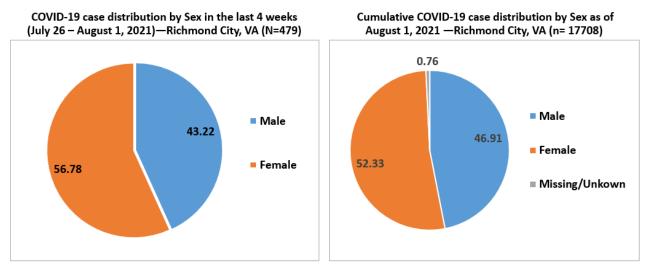
Select Date Range (Affects Bar Chart) Past 90 Davs



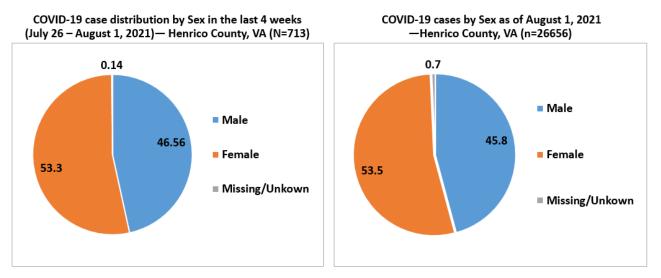
- In Henrico, the number of new cases reported per day is also fluctuating due to recent efforts to reallocate older cases to appropriate localities. The plot trends should be compared with the weekly corrections reported in the table above.
- In the week of July 5 to July 11, a large negative spike and a smaller negative spike together can • mostly be explained by the fact that the new case count was between 51 and 75 higher than the reported case count, suggesting that overall case numbers were low positive counts for the week.
- For the week of July 12 to July 18 the amount of "noise" in the data is still present, and there were • between 0 and 25 more new cases than actually reported in the graph, suggesting an increase in cases from the previous week.
- For the week of July 19 to July 25, there were between 26 and 50 new cases than actually reported • while the daily counts are higher, demonstrating a notable rise in cases compared to previous weeks.
- The trend upward in cases has continued over the week of July 26 through August 1, with daily • cases reported increasing from previous weeks and the table indicating that the weekly count is actually between 26 and 50 higher than the reported count.

2.3 CASES BY SEX BY COUNTY

All percentages are based on overall case distribution, rather than the proportion of known cases for each measure, and therefore may not correspond directly with VDH percentages.



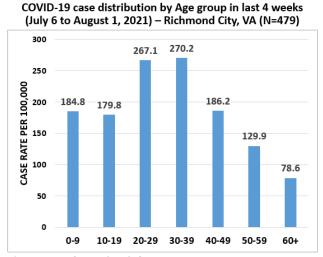
• In Richmond City, over the last four weeks, females have comprised a majority of cases (56.78%) when compared to males (43.2%). No sex data has been deemed 'Missing/Unknown' over the last four weeks.

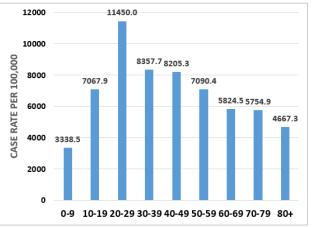


■ In Henrico, over the last four weeks, females have comprised 53.3% of known cases, whereas males have comprised 46.56% of known cases.

2.4 CASES BY AGE GROUP BY COUNTY

Population totals are based on 2019 data from the National Center for Health Statistics (NCHS). Please note - this is a change from previous reports which used Census data to estimate population by age group.



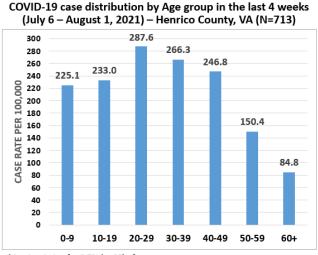


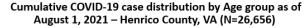
Cumulative COVID-19 case distribution by Age group as of July 26, 2021 – Richmond City, VA (N=17,708)

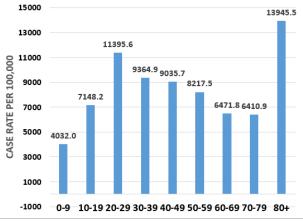
*Age is missing for 9.0% (n=43) of cases

*Age is missing for 0.3% (n=46) of cases

- In Richmond City, individuals aged 30-39 and 20-29 have the highest case rates in the last four weeks, while individuals aged 20-29 have the highest case rate cumulatively.
- Case burdens for individuals aged 60 and over are notably down in the last four weeks compared to cumulatively.







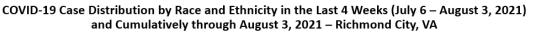
- In Henrico, case rates over the past four weeks indicate a majority of cases occurring in individuals aged 20-29, followed by those aged 30-39 and 40-49 respectively, whereas cumulative case rates indicate a large burden being placed on individuals aged 20-29 and 80 and over.
- Case rates are notably down for individuals aged 60 and over in the last four weeks compared to cumulatively.

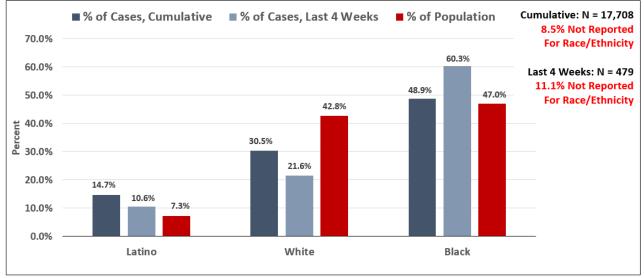
^{*}Age is missing for 6.7% (n=48) of cases

^{*}Age is missing for 0.2% (n=59) of cases

2.5 CASES AND POPULATION PROPORTIONS BY RACE AND ETHNICITY BY COUNTY

Population totals are based on 2019 data from the National Center for Health Statistics (NCHS). Please note - this is a change from previous reports which used Census data to estimate population by race and ethnicity group. The categories for NCHS population estimates do not include one for "Other Race" or "Two or More Races."

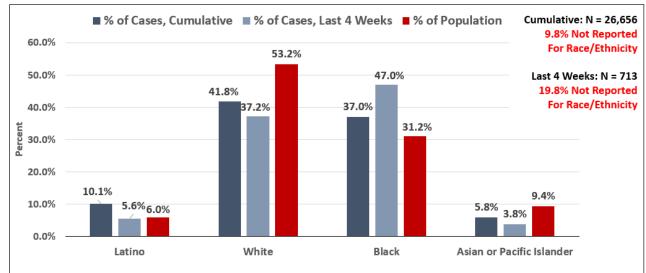




* NCHS population estimates are not available for Two or More Races (235 total cases) or Other Race (394 total cases) and thus they are absent from the plots. * Missing and Unknown Ethnicities were assumed to be of Non-Hispanic ethnicity.

* Cases among individuals identifying as Asian or Pacific Islander or Native American are suppressed (counts < 5)

 In Richmond, the case burden for Black individuals over the last 4 weeks (60.3%) is disproportionately high relative to their population percentage (47%), while the case burden for White individuals is disproportionately low (21.6%) relative to their population percentage (42.8%).



COVID-19 Case Distribution by Race and Ethnicity in the Last 4 Weeks (July 6 to August 1, 2021) and Cumulatively through August 1, 2021 – Henrico County, VA

* NCHS population estimates are not available for Two or More Races (375 total cases) or Other Race (849 total cases) and thus they are absent from the plots.

* Missing and Unknown Ethnicities were assumed to be of Non-Hispanic ethnicity. * Cases among individuals identifying as Native American are suppressed (counts < 5)

11

In Henrico in the last four weeks, the case burden for Latino individuals (9%) is disproportionately high relative to their proportion of the population (6%), as is the case burden for Black individuals (47.0%) relative to their proportion of the population (31.2%). Meanwhile, the case burdens for White individuals (37.2%) and Asian or Pacific Islander individuals (3.8%) are relatively low compared to their proportions of the population (53.2% and 9.4%, respectively).

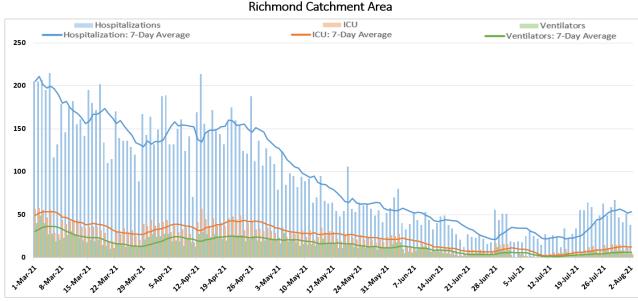
3.0 HOSPITALIZATIONS & FATALITIES

3.1 SUMMARY OF HOSPITALIZATIONS & FATALITIES

Hospitalizations based on date of admission among Richmond residents are low with 0 hospitalizations in the last week. Hospitalizations among Henrico residents are also low, with 0 hospitalizations in the last week.

Looking more broadly at health systems within the Richmond catchment area, hospitalizations, ICU hospitalizations, and ventilator utilizations are increasing, but are generally at a lower level as compared to January of this year. *Hospitalizations by subgroup (sex, age, and race) are reported on a monthly basis. basis.*

3.2 COVID-19 Hospitalizations, ICU Hospitalizations, & Ventilator Utilizations in the Richmond Catchment Area



Total Daily COVID-19 Hospitalizations, ICU Hospitalizations, and Ventilator Utilizations March 1, 2021 – August 2, 2021 Richmond Catchment Area

*Counts Displayed in Above Metric - Hospitalizations: 14,004 of 84,540; ICU Hospitalizations: 3,684 of 18,744; Ventilator Utilizations: 2,179 of 9,524

• Hospitalizations, ICU Hospitalizations, and Ventilator Utilizations in the Richmond Catchment area mostly followed a downward trend through the middle of July from the most recent notable peak during the last week of April but have since seen increases over the last two weeks of July.

4.0 VACCINATION

*** Disclaimer ***

Counts of vaccinated individuals in Richmond, Henrico, and neighboring localities are slightly lower than previously reported. We believe this is due to efforts at the state and local level to improve accuracy of counts by ensuring individuals are not counted twice, and are assigned to the proper locality, but we are investigating.

4.1 VACCINE SUMMARY

Richmond and Henrico Health Districts are in Phase 2 of vaccination. Anyone 12 or older is eligible to receive a vaccine. As of August 2, 56% of the region's population has received at least one dose of the vaccine and 49.5% of the region's population has been fully vaccinated. Approximately 56.6% of Richmond and Henrico's combined population has received at least one dose and 49.7% of the two districts combined population has been fully vaccinated. Local health departments have administered the largest percentage of vaccines to Richmond and Henrico residents, compared with other providers. However, pharmacies have delivered the majority of vaccines in the last 4 week. Due to data quality efforts, some duplicate first dose records have been removed, leading to minor changes in vaccination counts in certain areas.

The majority of vaccine recipients in both districts have been female. In both Richmond and Henrico, older age groups have consistently been vaccinated at a higher rate than younger age groups, with individuals in Richmond 65 and over, in Henrico 65 and over, and in Henrico between 50 and 64 all reaching the 70% goal for vaccinated percentage. Page 22 includes an estimated breakdown of vaccination uptake by race, sex, and age subgroups.

		POPULATION	POPULATION GOAL (70%)	PEOPLE WITH AT LEAST ONE DOSE	PEOPLE FULLY VACCINATED
	12-17	11,150	7,805	4,379 (39.3%)	3,511 (31.5%)
Richmond	18+	190,750	133,525	106,214 (55.7%)	96,023 (50.3%)
	65+	31,809	22,266	23,509 (73.9%)	21,743 (68.4%)
	12-17	25,954	18,168	14,673 (56.5%)	12,185 (46.9%)
Henrico	18+	256,660	179,662	182,999 (71.3%)	167,057 (65.1%)
	65+	52,720	36,904	45,384 (86.1%)	42,643 (80.9%)

4.2 PERCENTAGE OF VACCINATION GOALS REACHED BY POPULATION

Population totals are based on 2019 data from the National Center for Health Statistics (NCHS). Please note - this is a change from previous reports which used Census data to estimate population by age group.

Nationally, the Biden administration is using the **percentage of adults (individuals 18 and over)** to track progress in vaccination.

Though the percentage of the population needed to reach herd immunity is still uncertain, in line with federal guidance, we have set an overall goal of vaccinating 70% of the population. First and second doses of the Pfizer vaccine must be administered at least 21 days apart. First and second doses of the Moderna vaccine must be administered at least 28 days apart. People who received the Johnson & Johnson vaccine, which is a single dose, are included in the count of first doses administered.

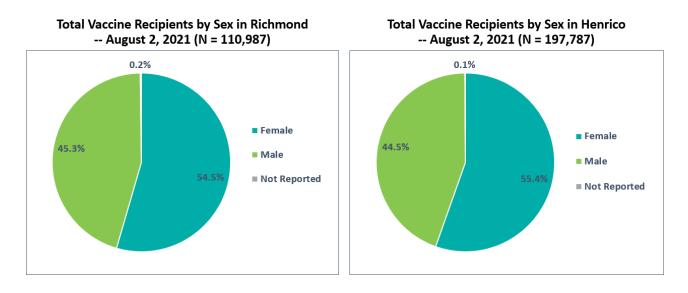
HEALTH DISTRICT	LOCALITY	TOTAL POPULATION	FIRST DOSES ADMINISTERED	SECOND DOSES ADMINISTERED
Chesterfield	Chesterfield	352,802	198,334	175,554
	Colonial Heights	17,370	8,422	7,178
	Powhatan	29,652	14,543	12,556
Chickahominy	Charles City	6,963	3,811	2,788
	Goochland	23,753	15,374	14,245
	Hanover	107,766	64,346	59,353
	New Kent	23,091	11,654	10,691
Henrico	Henrico	330,818	197,476	175,744
Richmond	Richmond City	230,436	110,447	97,753
Total		1,105,281	624,407	555,862

4.3 VACCINATIONS BY LOCALITY AS OF JULY 19, 2021 - SOURCE: VDH.VIRGINIA.GOV

Population totals are based on 2019 data from the National Center for Health Statistics (NCHS). Please note - this is a change from previous reports which used Census data to estimate population by age group.

4.4 VACCINE DISTRIBUTION BY SEX BY COUNTY

UPDATE: Population estimates for age subgroups and for race and ethnicity subgroups have been changed for this report from the U.S. Census Bureau's American Community Survey (ACS) 2019 5-year estimates to the National Center for Health Statistics (NCHS) 2019 estimates to align with estimates used by other VDH metrics. This change also involves new race and ethnicity categories: Latino or Hispanic, Non-Hispanic White, Black or African-American, Asian or Pacific Islander, and Native American. Racial groups such as Two or more Races and Other Race have been excluded from the following metrics as they are without corresponding NCHS estimates, but the counts for these groups can be seen in the footnotes immediately below.



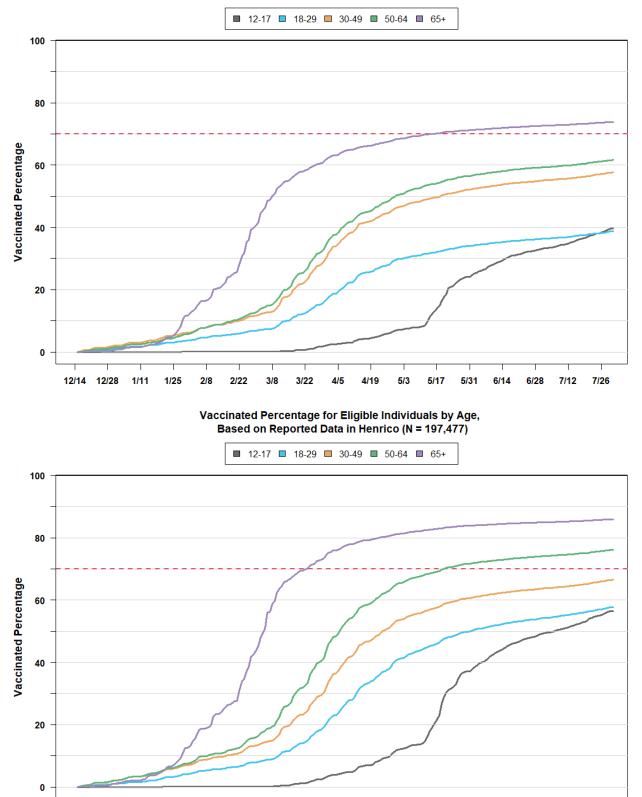
In both Richmond and Henrico, a majority of vaccinated individuals have been female.

4.5 VACCINE DISTRIBUTION BY AGE GROUP OVER TIME

The following charts track vaccination rates by age group over time since vaccinations first began in mid-December.

- We can see a steep increase in vaccination rates in February and early March for individuals 65 and over such that over 70% of this age group is now vaccinated but new vaccinations are rising slowly.
- Individuals aged 18 to 29, 30 to 49, and 50 to 64 in Richmond saw sharp increases in vaccination rates in mid-March through April, with a steady but slower increase in vaccinations from May through June. These same age groups in Henrico saw a similar pattern, but the dropoff to a slower increase did not occur until later May.
- Among individuals aged 12 to 17, vaccination rates increased at a slow pace until vaccine opportunities opened up to the general population and individuals aged 12 to 15 were able to get vaccinated, at which point we have seen a sharp increase in vaccination rates that has not yet noticeably slowed. This age group now matches 18 to 29 year olds in vaccination rates.
- Individuals in Henrico between 50 and 64 reached the 70% threshold in mid-May, while the same age group in Richmond is still well short of this goal.
- Individuals in Henrico have seen consistently higher vaccination rates across all age groups as compared to Richmond.
- All data is subject to lags in reporting, particularly in recent weeks.

Vaccinated Percentage for Eligible Individuals by Age, Based on Reported Data in Richmond (N = 110,828)



3/22

4/19

4/5

5/3

5/17

5/31

6/14

6/28

7/12

7/26

3/8

12/14 12/28

1/11

1/25

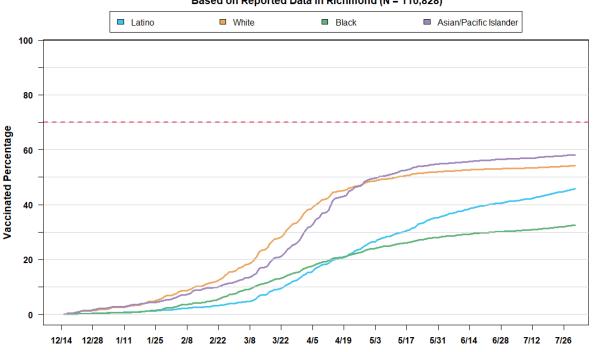
2/8

2/22

4.6 VACCINE DISTRIBUTION BY RACE/ETHNICITY OVER TIME

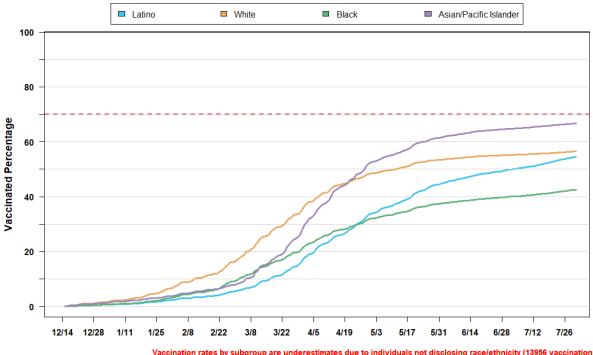
The following charts track vaccination rates by race and ethnicity over time since vaccinations first began in mid-December.

- In Richmond, the rate of increase of vaccinations among White individuals and Asian or Pacific Islander individuals have been fairly consistent, with close to 60% of both groups vaccinated.
- In both Richmond and Henrico, Latino individuals and Black individuals saw a slower increase in vaccination rates through early March, but the rate of new vaccinations for Latino individuals began sharply increasing then and now represents the fastest increasing vaccination rates among all groups.
- In Henrico, Asian or Pacific Islander individuals saw slower uptake similar to Black individuals and Latino individuals through early March before seeing a sharp increase in March and April. Although new vaccinations have somewhat slowed in June, this group is the closest to the 70% vaccination goal as of July 19.
- In Henrico, White individuals represented the highest vaccination rate through the middle of April, but the rate of new vaccinations decreased noticeably since then, falling to a similar rate of new vaccinations as Black individuals in this same time period and behind the new vaccination rates for both Asian or Pacific Islander individuals and Latino individuals.
- Rates in both localities and among all groups except that of Latino individuals have leveled off and have shown slow growth in recent weeks.



Vaccinated Percentage for Eligible Individuals by Race/Ethnicity, Based on Reported Data in Richmond (N = 110,828)

Vaccination rates by subgroup are underestimates due to individuals not disclosing race/ethnicity (6301 vaccinations). American Indian individuals (544 vaccinations) excluded due to unreliable vaccination rate calculations.



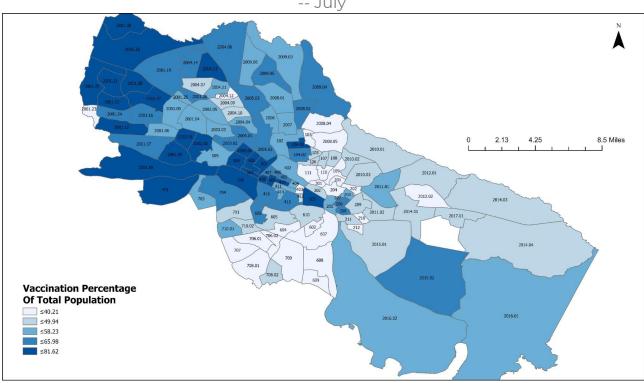
Vaccinated Percentage for Eligible Individuals by Race/Ethnicity, Based on Reported Data in Henrico (N = 197,478)

t<mark>tion rates by subgroup are underestimates due to individuals not disclosing race/ethnicity (13956 vaccinations).</mark> American Indian individuals (1319 vaccinations) excluded due to unreliable vaccination rate calculations.

4.7 VACCINE DISTRIBUTION MAPS

Below are maps that compare vaccination uptake percentage and COVID-19 burden by census tract. The data collected is consistent with statewide and national data trends; lower income communities of color tend to experience more severe outcomes of COVID-19, yet are disproportionately undervaccinated. RHHD monitors this data as part of its equity-driven approach; this data is used to assist program managers in strategically standing up vaccination opportunities, outreach, and education efforts in areas that are in highest need.

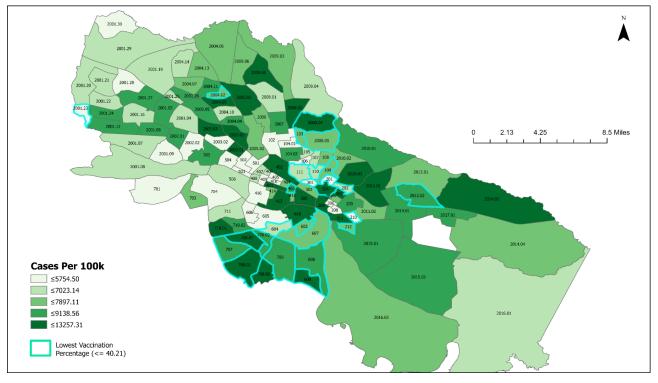
These percentages are estimations, and are solely intended for use in the planning and facilitation of outreach event



Percentage of Population Vaccinated By Census Tract: Richmond & Henrico, VA -- July

Current data suggests that vaccination rates still vary significantly at the census tract level. With the highest uptake percentage (80.62%) seen in Census Tract 504, and the lowest uptake percentage (17.02%) seen in Census Tract 201.

COVID-19 Case Rate and Low Vaccination Uptake by Census Tract in Richmond & Henrico, VA -- Cumulative Cases and Vaccinations July 2021



- **COVID-19 vaccination percentages** reflect the percentage of the **Total Population** within each tract that has been vaccinated. Data are sourced from the Virginia Immunization Information System (VIIS).
- COVID-19 case rates reflect Cumulative cases per 100,000 census tract population and are sourced from the Virginia Electronic Disease Surveillance System (VEDSS).
- **Population estimates** are from the US Census 2019 ACS Community Survey 5-year estimates.

- **COVID-19 vaccination percentages** reflect the percentage of the **Total Population** within each tract that has been vaccinated. Data are sourced from the Virginia Immunization Information System (VIIS).
- **COVID-19 case rates** reflect **Cumulative** cases per 100,000 census tract population and are sourced from the Virginia Electronic Disease Surveillance System (VEDSS).
- **Population estimates** are from the US Census 2019 ACS Community Survey 5-year estimates.