DECEMBER MONTHLY COVID REPORT For External Use

Month of : December 6th, 2021 - January 10th, 2022

Key Takeaways

Cases

Following recent lows in October, cases slowly increased in both Richmond and Henrico over November and early December before surging in late December and early January to new all-time highs. Community transmission is considered **High** for both localities according to the CDC Covid Data Tracker.

7-day total case rate per 100,00		
District	This Week	4 weeks ago
Henrico	1,375.38	167.77
Richmond	1,391.71	130.19

Richmond & Henrico		
Demographic	Cumulative Highest	Last 4 Weeks Highest
Age	20-29 20-29, 80+	20-29
Sex	Female	Female
Race	Black Latino	Black

Hospitalizations & Fatalities

Among Richmond City and Henrico residents, the number of covid cases with confirmed **hospitalization** dates of admission has continued to fluctuate following an uptick during late September and October. Hospitalization counts show an increase in December, the true magnitude of which, however, is likely obscured due to a lag in surveillance data.

Fatalities appeared low and steady in both districts in December, but this count will likely increase in forthcoming weeks as data related to COVID-19 cases continues to come in for the month of December because **Data related to hospitalizations and deaths are subject to sizable amounts of lag.**

Cumulative Demographic Trends				
Demographic Measure	**Hospitalizations**		**Fatalities**	
	Richmond	Henrico	Richmond	Henrico
Median Age (range)	61 (0-98)	67 (0-104)	73 (3-98)	79 (18-106)
Sex	Female	Female	Male	Female
Race	Black	Black	Black	White

Richmond Catchment Area: Hospital Status Board Trends			
Time Period	Hospitalizations	ICU Hospitalizations	Ventilator Utilizations
2021 January 1st, 2021→			
Last 4 Weeks Dec 13th, 2021→			

- **8 out of 11 hospitals in the Richmond Catchment Area are operating at a 'Normal' clinical status. 1 Is operating at "Full" status, 1 is operating at "Level 1" surge condition and one is operating at "Level 2" surge condition.*

Vaccinations

Richmond and Henrico Health Districts are in Phase 2 of vaccination; anyone 5 or older is eligible to receive a vaccine. Health Department events/providers 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 & Henrico	**68.5%**	**61.5%**
Region	70.2%	63.9%

Vaccination Demographic Trends		
Demographic	Richmond	Henrico
Age Groups	65+	
Sex	Female	
Race	Asian/Pacific Islander & Latino	

In both Richmond and Henrico, older age groups have consistently had higher vaccination percentages than younger age groups. Vaccination percentages are still lowest among Black/African American individuals. The Vaccination Section 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 is from the VDH public dashboard on January 10, 2022.

	Richmond		Henrico	
	Tests	Positivity	Tests	Positivity
PCR*	370,073	33.5%	581,853	33.7%
Antigen	106,671	32.5%	213,381	37.8%
Total (PCR, antigen, and antibody)	482,243	32.6%	806,846	35.2%

**All testing metrics included in previous reports have been based on PCR tests*

1.2 Confirmed & Probable Cases, Hospitalizations & Fatalities by County

CASE STATUS	RICHMOND CITY	HENRICO COUNTY	VIRGINIA
New cases this month	7,539	10,651	295,684
New cases this week (January 10)	1,847	2,646	118,036
All cases	32,901	47,181	1,278,739
Confirmed cases	24,262	31,033	915,575
Hospitalizations	970	1,246	42,427
Deaths	339	666	13,086
Probable cases	8,639	16,148	363,164
Hospitalizations	29	57	2,546
Deaths	52	84	2,585
Case rate per 100,000	14277.7	14261.9	14981.4

Population totals are based on 2019 data from the National Center for Health Statistics (NCHS). Please note- this is a change from some previous reports which used aggregated Census data regarding population by age group.
*Case rate refers to the number of cases per 100,000 people in the population. Calculation: ((Confirmed Cases + Probable Cases)/Population Estimate)*100,000*

1.3 Current COVID-19 Richmond Catchment Area Hospitalizations

The following section utilizes data from the Virginia Healthcare Alerting & Status System (VHASS) COVID-19 Hospital Status Board. This data reflects the following hospitals in the Richmond Catchment Area (Chesterfield County, Hanover County, Henrico, & Richmond): 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	614	123
Pending Hospitalizations	34	
Confirmed - ICU	114	22
Pending - ICU	21	
Confirmed - Ventilators	41	307
Pending - Ventilators	*	

Within these 11 hospitals that comprise the Richmond catchment area, there are currently 123 total available hospital beds, 22 available adult ICU beds, and 307 available ventilators. Based on the VHASS hospital dashboard on January 11th, 2022, 8 hospitals are operating at a 'Normal' clinical status. 1 Is operating at "Full", 1 is operating at "Level 1" and one is operating at "Level 2" 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.

A clinical status of Level 1 indicates that hospital clinical resources are operating at Level 1 surge conditions. The hospital activates procedures to provide a rapid in-patient intake capability (i.e. stop elective procedures, expedite early discharges and utilize 100 percent of staffed beds).

A clinical status of Level 2 indicates that hospital clinical resources are operating at Level 2 surge conditions. Activate procedures to provide maximum hospital based in-patient treatment facilities within the region (i.e. activate all available beds, utilize Healthcare Facility Surge Areas (HFSA) i.e. out-patient services areas [same-day surgery, sleep study], and activate planned overflow areas [i.e. conference rooms, semi-private conversions]), Medical Office Buildings.

2.0 COVID-19 TESTING ENCOUNTERS AND POSITIVITY

2.1 Testing Summary

PCR percent positivity in Richmond has increased to 34.2 from 5.8%, with the highest values found in zip codes 23223, 23226, and 23222. Percent positivity also increased in Henrico to 34.1% from 7.4%, with the highest values found in zip codes 23075 and 23231. The number of PCR tests administered across providers has increased significantly in both Richmond and Henrico after relative decreases in the previous three months. Testing has increased in Richmond, particularly in 23226. Zip codes 23220 and 23219 in Richmond and 23230 in Henrico had the highest testing rate per ZCTA population, consistent with the last 6 months.

2.2 Number of PCR Tests

The counts below are based on the total number of testing encounters provided by the Virginia Department of Health for Richmond and Henrico. **It is important to note that the number of testing encounters is different from the number of people tested, as some individuals may be tested more than once**.

MONTH	TOTAL PCR TESTS/MONTH	
	Richmond	Henrico
December 2021	25103	31824
November 2021	19427	20875
October 2021	23026	24555
September 2021	24874	28596
August 2021	22384	24945
July 2021	11206	13790
June 2021	9371	12128
May 2021	11890	13960
April 2021	16945	20134

The testing date was not reported for 483 PCR testing encounters in Richmond and not reported for 909 PCR testing encounters in Henrico, inclusive of all PCR tests since January 2020.

3.0 COVID-19 CASES

3.1 Summary of Cases

AAfter recent lows in October, reported case counts slowly increased over November and early December, before surging in late December and early January to all-time highs. In Richmond, the current 7-day total case rate is 1,391.71 new cases per 100,000 population, while in Henrico the 7-day total case rate is currently 1,375.38 new cases per 100,000 population. Additionally, in both Richmond and Henrico, the level of community transmission has been considered **High** for weeks, according to the CDC Covid Data Tracker.

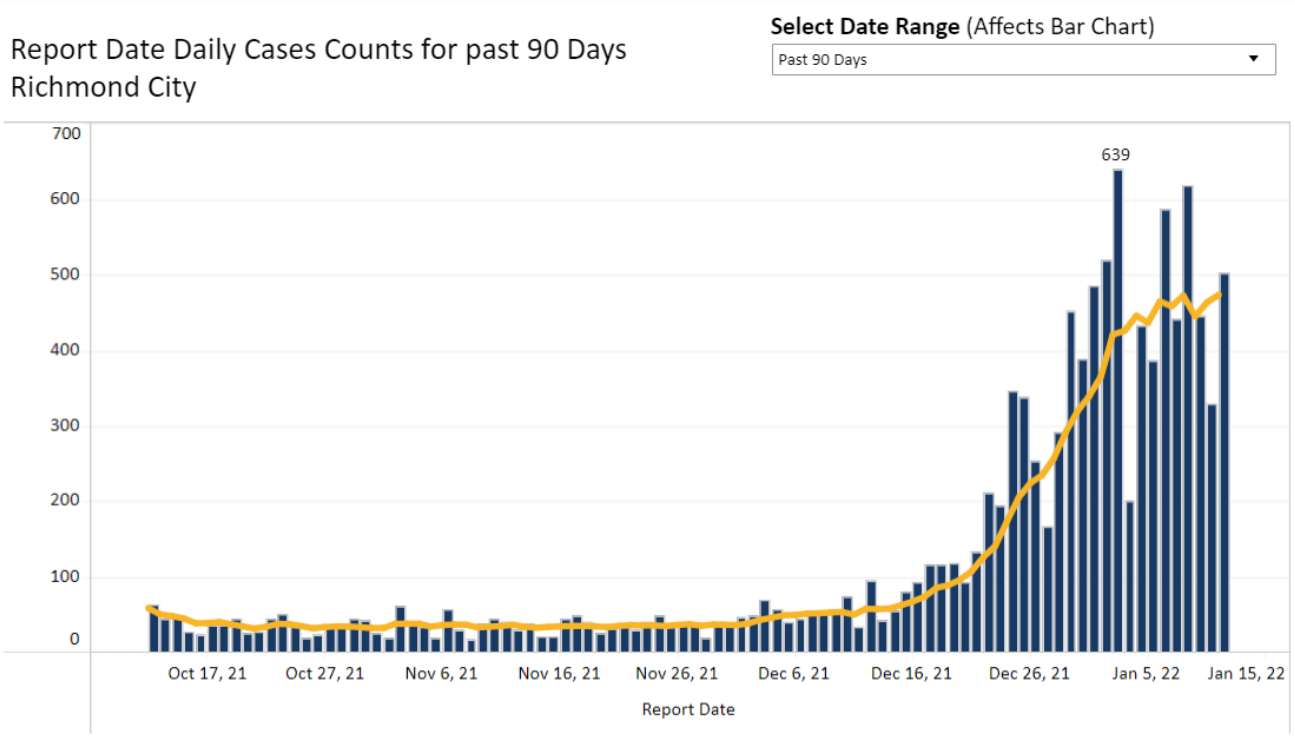
Female individuals in both Richmond and Henrico comprise a higher proportion of cases compared to male individuals, both in the last four weeks and cumulatively.

In Richmond, 20-29 year olds have the highest case rate by age group both overall and in the last four weeks, followed by 10-19 year olds in the last four weeks. Meanwhile, in Henrico, individuals over the age of 80 years show the highest cumulative case rate but now followed closely by 20-29 year olds, who have the highest case rate in the last four weeks.

Regarding race and ethnicity, the highest proportion of cases is still among Black individuals cumulatively and in the last four weeks in Richmond. In Henrico, White individuals may comprise the highest proportion of cases both cumulatively and in the last four weeks, but cases are disproportionately low relative to their population while cases for Black individuals are disproportionately high relative to their population, both cumulatively and in the last four weeks. In both localities, cases are disproportionately high cumulatively for Latino individuals but generally in line with their population proportion in the last four weeks. Sections 3.6 and 3.7 show weekly trends in cases by age group and race and ethnicity, respectively.

3.2 Case Reports Trends By Date (Source-VDH Website)

Number of New Cases Reported^	7-Day Average Number of Daily New Cases Reported	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
502	473	206.8	2,811



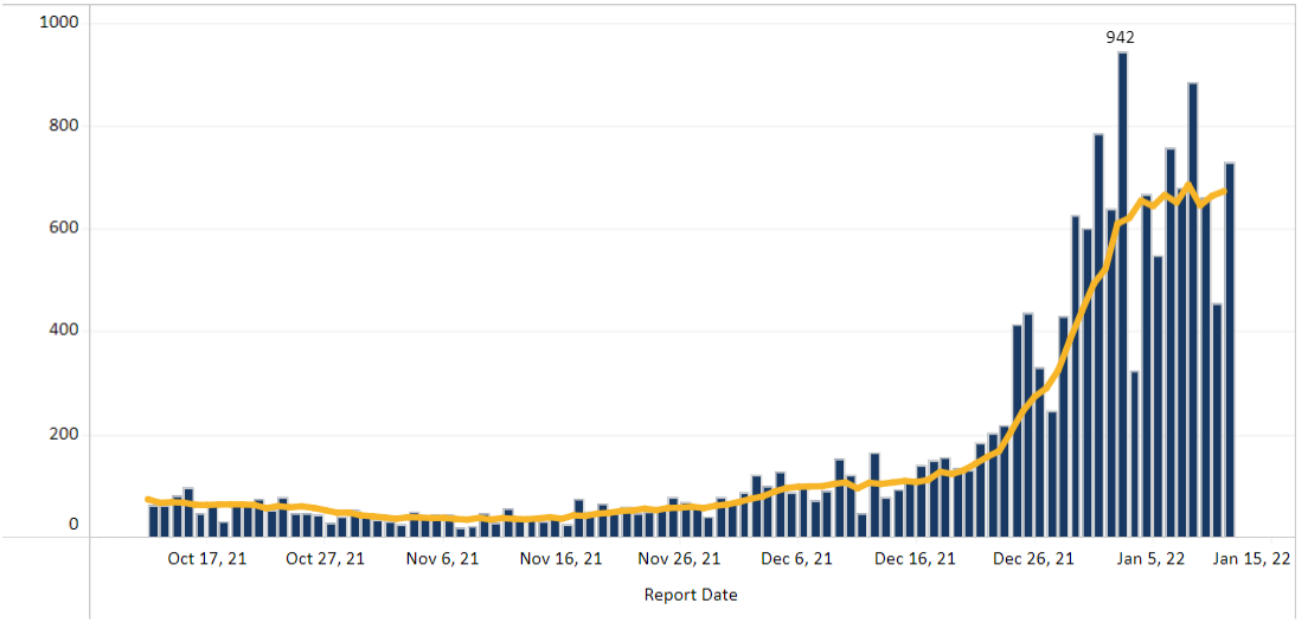
- In Richmond, from October through mid December, daily case counts plateaued with minor fluctuations.
- Daily counts in cases rose considerably starting in mid-December, rising higher than seen previously in the pandemic.
- All data is subject to lags in reporting.

Number of New Cases Reported^	7-Day Average Number of Daily New Cases Reported	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
727	672	204.1	2,818

Report Date Daily Cases Counts for past 90 Days
Henrico

Select Date Range (Affects Bar Chart)

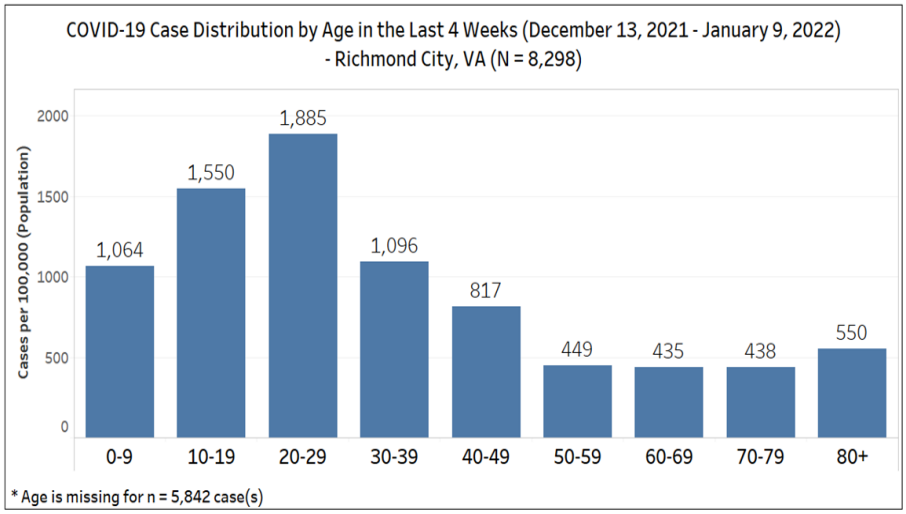
Past 90 Days



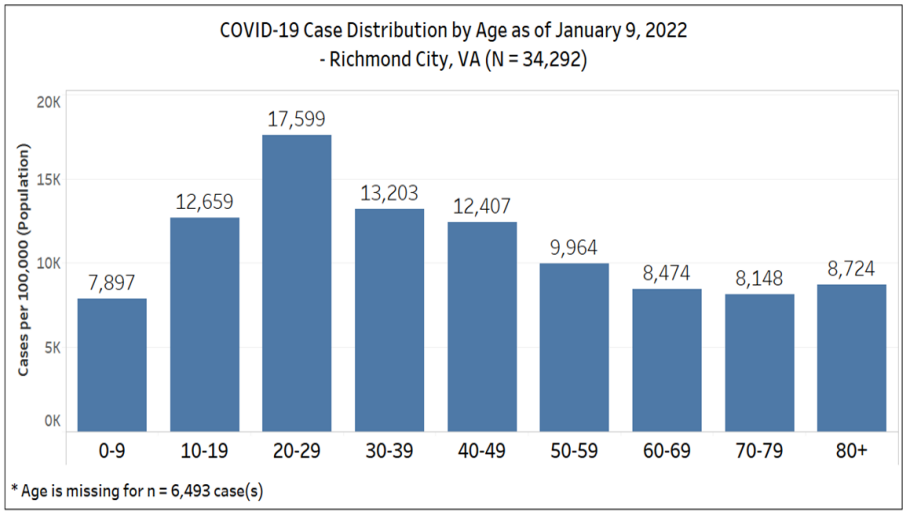
- In Henrico, from October through early December, daily case counts plateaued with minor fluctuations.
- Throughout the first half of December cases counts rose gradually.
- Starting in the second half of December daily case counts rose dramatically to new heights not seen previously in the pandemic.
- All data is subject to lags in reporting.

3.3 Cases by Age Group by County

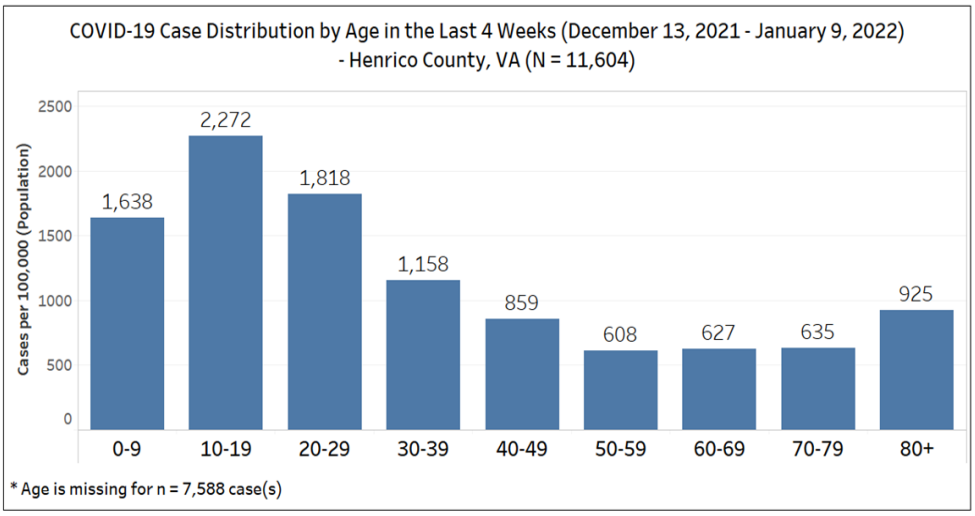
Population totals are based on 2019 data from the National Center for Health Statistics (NCHS).



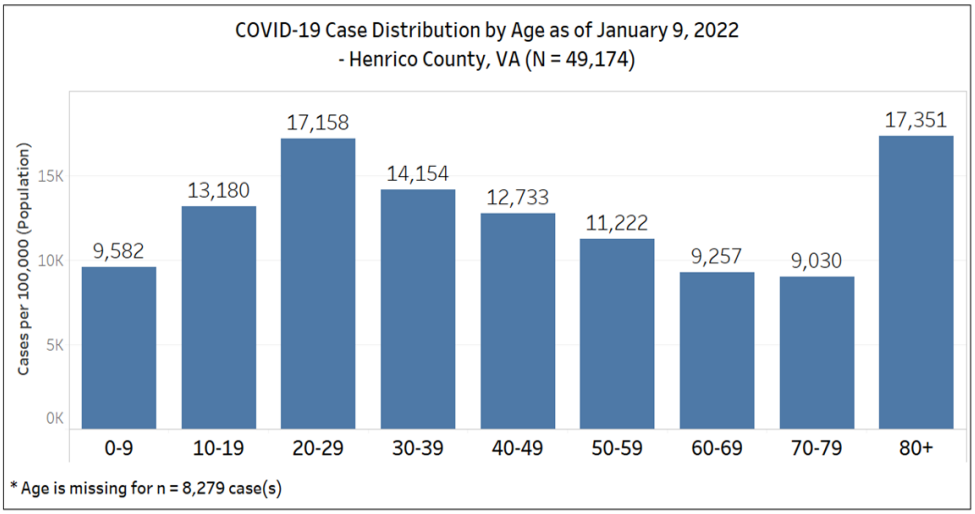
In Richmond City, individuals aged 20-29 have the highest case rates in the last four weeks, followed by individuals aged 10-19.



Individuals aged 20-29 have the highest case rates cumulatively. Case counts for individuals aged 50 and over are low in the last four weeks compared to cumulatively.



In Henrico, case rates over the past four weeks show a high frequency of cases occurring in individuals aged 10-19, followed by those aged 20-29, and then 0-9.

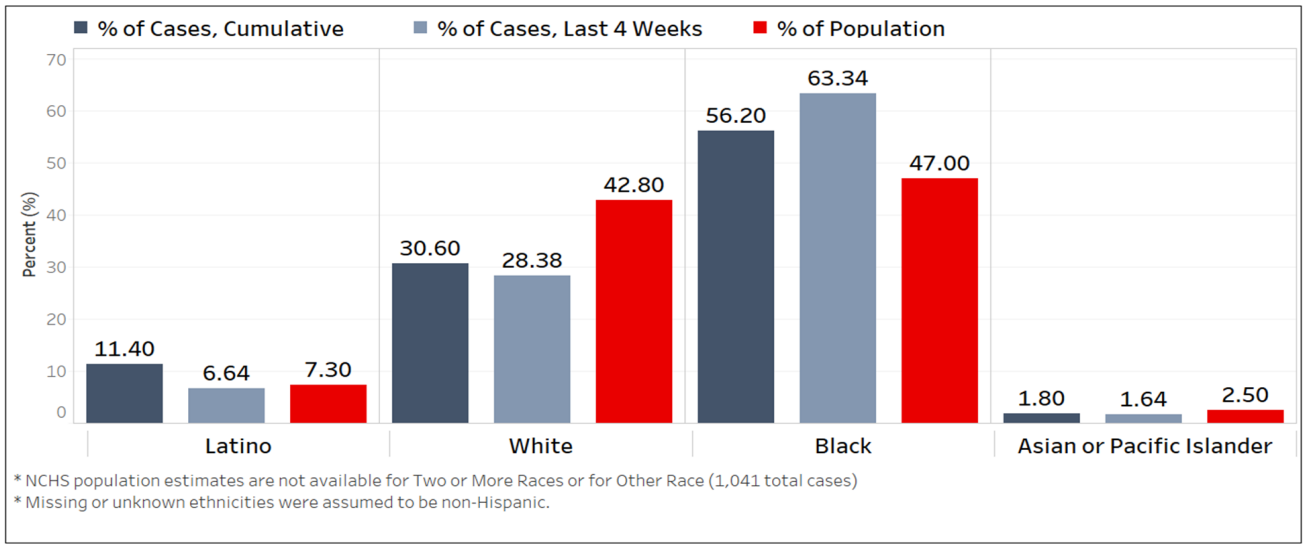


In contrast to recent data, cumulative figures show greater rates amongst individuals aged 80 and over and those aged 20-29.

3.4 Cases and Population Proportions by Race and Ethnicity by County

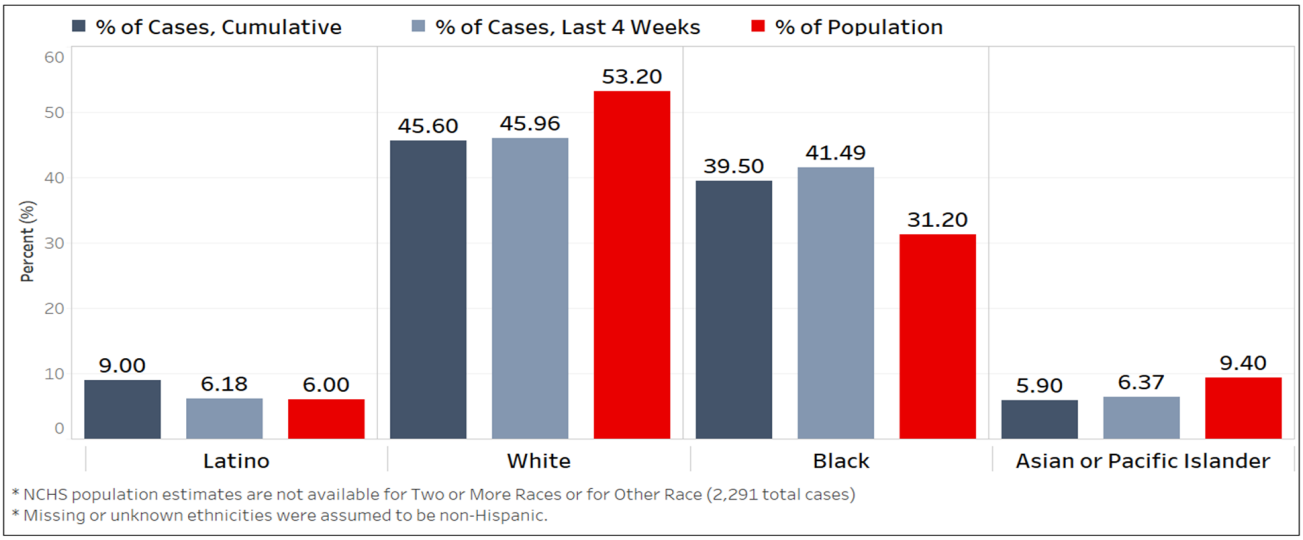
Population totals are based on 2019 data from the National Center for Health Statistics (NCHS).

COVID-19 Case Distribution by Race/Ethnicity in the Last 4 Weeks (December 14, 2021 - January 10, 2022)
and Cumulatively through January 10, 2022 - Richmond City, VA



- In Richmond, the case burden for Black individuals over the last 4 weeks (63.3%) is high relative to the population percentage (47%), while the case burden for White individuals is disproportionately low (28.4%) relative to their population percentage (42.8%).

COVID-19 Case Distribution by Race/Ethnicity in the Last 4 Weeks (December 14, 2021 - January 10, 2022)
and Cumulatively through January 10, 2022 - Henrico County, VA



- In Henrico in the last four weeks, the percent of all cases among Black individuals (41.5%) is higher than the proportion of the population (31.2%). Meanwhile, the percentage of cases amongst White individuals (46%) is low relative to the population percent (53.2%). Amongst the Asian American and Latino population, cases remain relatively low (6.5% and 6.1%) compared to their populations (9.4% and 6.0%, respectively).

4.0 COVID-19 HOSPITALIZATIONS & FATALITIES

4.1 Summary of Hospitalizations & Fatalities

Among Richmond City and Henrcio residents, the number of covid cases with confirmed **hospitalization** dates of admission has continued to fluctuate following an uptick during late September and October. Hospitalization counts show an increase in December, the true magnitude of which, however, is likely obscured due to a lag in surveillance data.
Looking more broadly at the 11 hospitals that comprise the Richmond catchment area, COVID-19 associated hospitalizations, ICU hospitalizations and ventilator utilizations have all increased since the start of December, although ICU hospitalizations and ventilator utilization have not risen as much as general COVID-19 hospitalizations. Currently, 8 of the 11 hospitals are operating at a normal clinical status, with the other 3 operating at a "Full", "Level 1", or "Level 2" clinical status.

Fatalities appeared low and steady in both districts in December, but this count will likely increase in forthcoming weeks as data related to COVID-19 cases continues to come in for the month of December.

Regarding hospitalization demographics, cumulative hospitalizations are highest among females and Black individuals in both districts. The median age of hospitalization has not changed.

Cumulatively, deaths are highest among male and Black individuals in Richmond and highest among female and White individuals in Henrico. The median age of death has fallen over the past month from 76 to 73 in Richmond but remains 79 in Henrico.

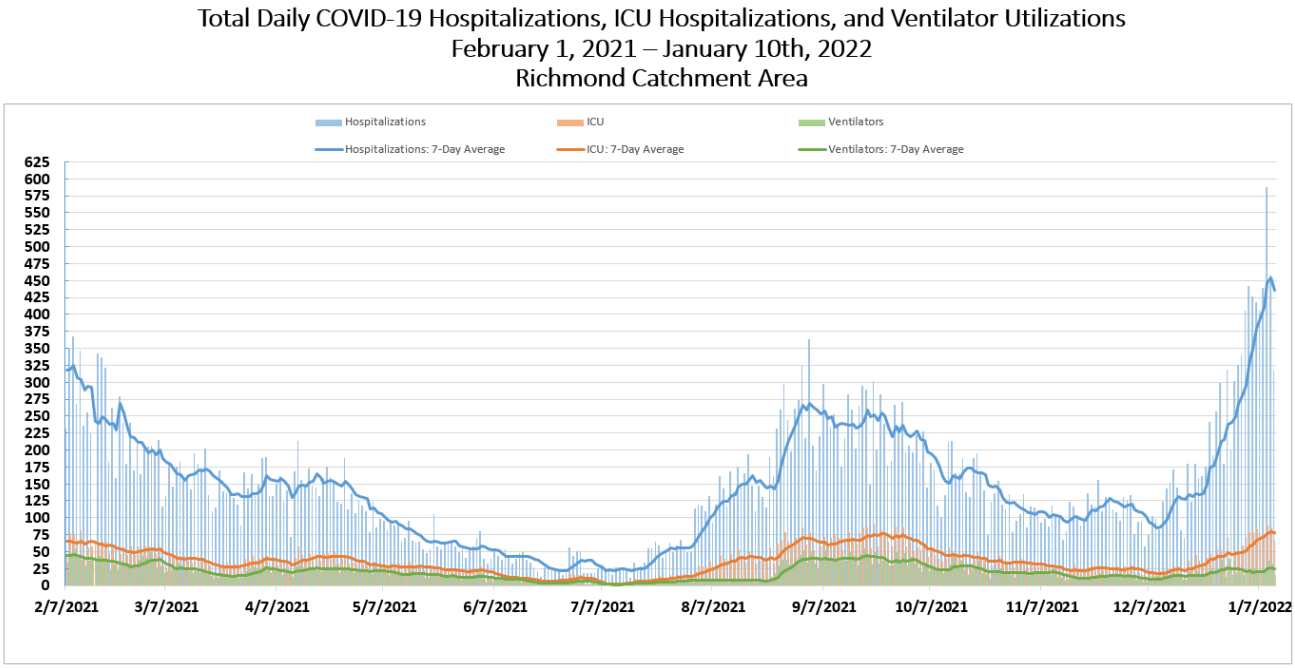
4.2 Hospitalizations & Fatalities by Sex, Race, and Age by County

The minimum age ranges correspond to ages in months, which have been converted to years.

Confirmed and Probable		Hospitalizations		Fatalities	
		Richmond (n=999)	Henrico (n=1303)	Richmond (n=391)	Henrico (n=750)
Gender	Male	48% (477)	48% (623)	51% (199)	45% (341)
	Female	52% (522)	52% (680)	49% (192)	55% (409)
	Missing/Unknown				
Age	**Median (range)**	61 (0-98)	67 (0-104)	73 (0-100)	79 (18-106)
Race/ Ethnicity	White	15% (147)	42% (545)	28% (111)	56% (422)
	Black	67% (667)	44% (567)	64% (252)	37% (277)
	Latino	15% (145)	7% (89)	6% (22)	3% (25)
	Asian or Pacific Islander	1% (12)	3% (40)	*	2% (18)
	Other Race	1% (10)	3% (44)	*	*
	Two or more races	1% (7)	1% (11)	*	*
	Not reported	1% (10)	*	*	1% (5)

** Counts under 5 are suppressed*

4.3 COVID-19 Hospitalization, ICU, and Ventilator Utilization (VHASS)



*Sum Of Daily Counts Displayed in Above Metric - Hospitalizations: 51,035 of 106,828 ALL TIME, ICU Hospitalizations: 12,566 of 25,961 Ventilator Utilizations:6,873 of 13,985

- Covid-19 Hospitalizations have risen considerably in the past month. ICU hospitalizations have also risen, but not as dramatically as Hospitalizations overall. Covid-19 related ventilator utilizations have risen modestly during the same time period.

5.0 VACCINATION

5.1 Vaccine Summary

As of January 10th, **70.2%** of the region's population has received **at least one dose** of the vaccine and **63.2%** of the region's population has been **fully vaccinated** and **26.7%** of the region's total population has received a **booster**. Approximately **68.5%** of the combined Richmond and Henrico population has received **at least one dose** and **61.5%** of the two districts' combined population has been **fully vaccinated** and **26.4%** of the two districts' combined population has received a **booster**. Pharmacies and Local Health Departments have delivered the majority of vaccines to individuals in both districts.

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.This section includes an estimated breakdown of vaccination uptake by race, sex, and age subgroups.

5.2 Percentage of Vaccination Goals Reached by Population

		POPULATION	PEOPLE WITH AT LEAST ONE DOSE	PEOPLE FULLY VACCINATED	PEOPLE WITH BOOSTER
Richmond	**5-11**	**15,198**	**3,797 (25%)**	**2,708 (17.8%)**	**NA**
	12-17	11,150	6,797 (61%)	5,921 (53.1%)	519 (4.7%)
	18+	**190,750**	**127,884 (67%)**	**114,671 (60.1%)**	**53,871 (28.2%)**
	65+	31,809	25,636 (80.6%)	23,606 (74.2%)	15,459 (48.6%)
Henrico	**5-11**	**28,406**	**10,062 (35.4%)**	**7,087 (24.9%)**	**NA**
	12-17	25,954	19,460 (75%)	17,437 (67.2%)	1,558 (6%)
	18+	**256,660**	**211,129 (82.3%)**	**192,601 (75%)**	**92,453 (36%)**
	65+	52,720	49,375 (93.7%)	45,616 (86.5%)	31,895 (60.5%)

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.

5.3 Vaccinations by Locality as of January 9, 2022

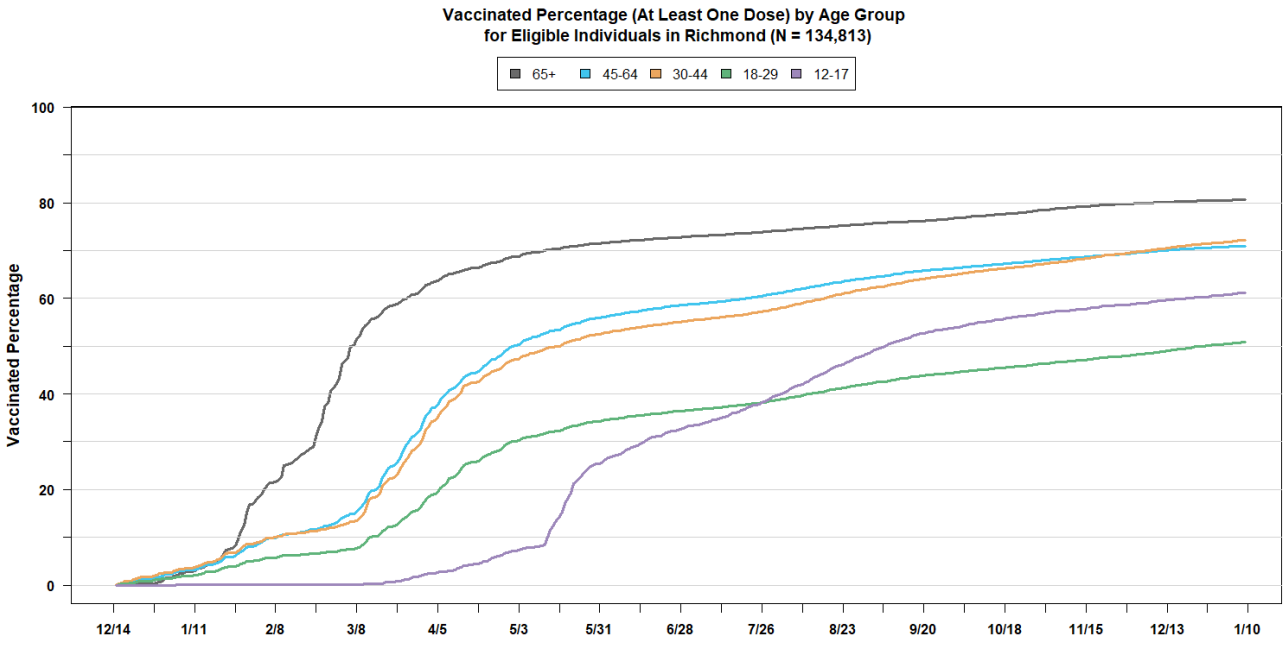
HEALTH DISTRICT	LOCALITY	TOTAL POPULATION	PEOPLE WITH AT LEAST ONE DOSE	PEOPLE FULLY VACCINATED	PEOPLE WITH BOOSTERS
Chesterfield	Chesterfield	352,802	255,834	228,647	94,900
	Colonial Heights	17,370	11,015	9,563	3,849
	Powhatan	29,652	17,856	16,247	7,189
Chickahominy	Charles City	6,963	7,017	6,671	1,596
	Goochland	23,753	18,456	17,093	7,746
	Hanover	107,766	78,310	72,511	30,027
	New Kent	23,091	15,017	13,757	5,657
Henrico	Henrico	330,818	244,092	219,701	94,011
Richmond	Richmond City	230,436	140,477	125,194	54,390
Total		**1,122,651**	**788,074**	**709,384**	**299,365**

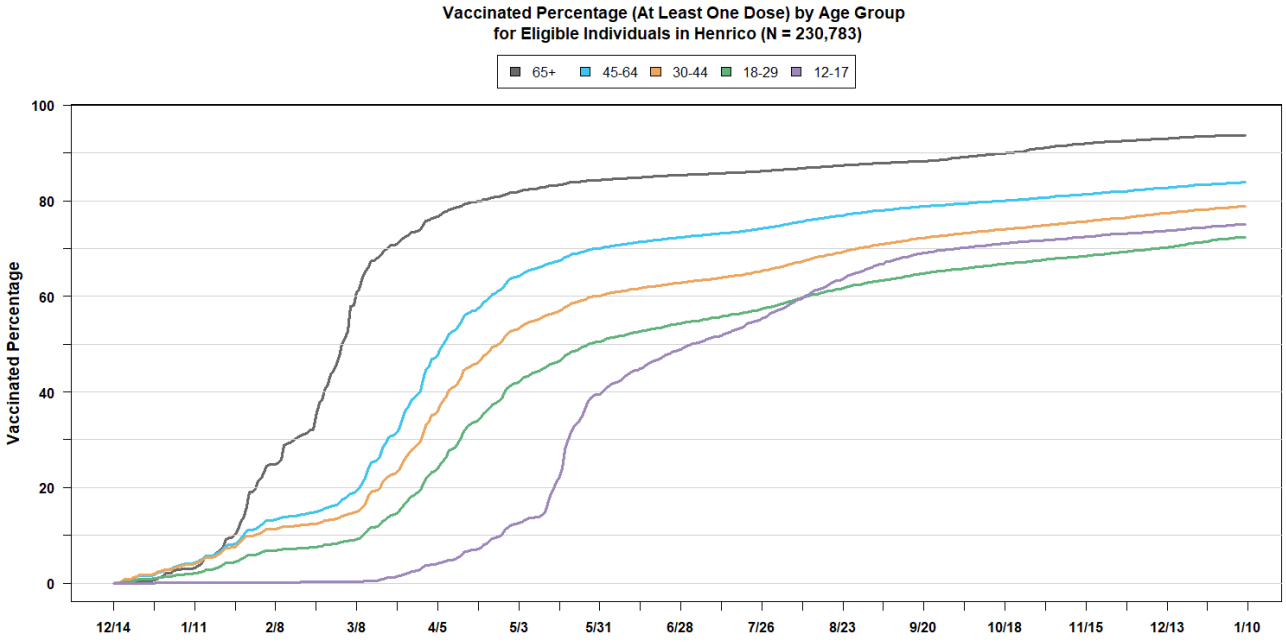
Population totals are based on 2019 data from the National Center for Health Statistics (NCHS).

5.4 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 of 2020.

- Individuals 65 and over in Richmond, 45 and over in Henrico, and 65 and over in Henrico represent the three highest vaccination percentages, with percentages all over 80%.
- In most cases, older age groups within a locality have achieved higher vaccination rates than younger age groups in the same locality.
- Henrico age groups have achieved higher vaccination rates than their corresponding Richmond age groups and many younger age groups in Henrico have achieved higher rates than older age groups in Richmond.
- In Richmond, individuals 30-44 and individuals 45-64 have had virtually the same vaccination trends over time and both now sit just above 70% in vaccination percentage.
- Vaccination percentage is somewhat more consistent across age groups under 65 for Henrico than for Richmond, with only about a 10% range across these age groups in Henrico but a 20% range in Richmond.
- After later access to vaccination, individuals 12 to 17 have seen a notable increase in vaccination rates while individuals 18 to 29 have slowed in their rate of new vaccinations (outside a minor increased rate in August), leading to the younger age group surpassing the older one in both Richmond and in Henrico.
- New vaccinations among 12-17 year olds has slowed since September, while new vaccinations among 18-29 year olds have remained steady, suggesting that the older age group will catch back up to the younger age group in both localities but particularly in Henrico where they are only separated by a small percentage.
- All data is subject to lags in reporting, particularly in recent weeks.



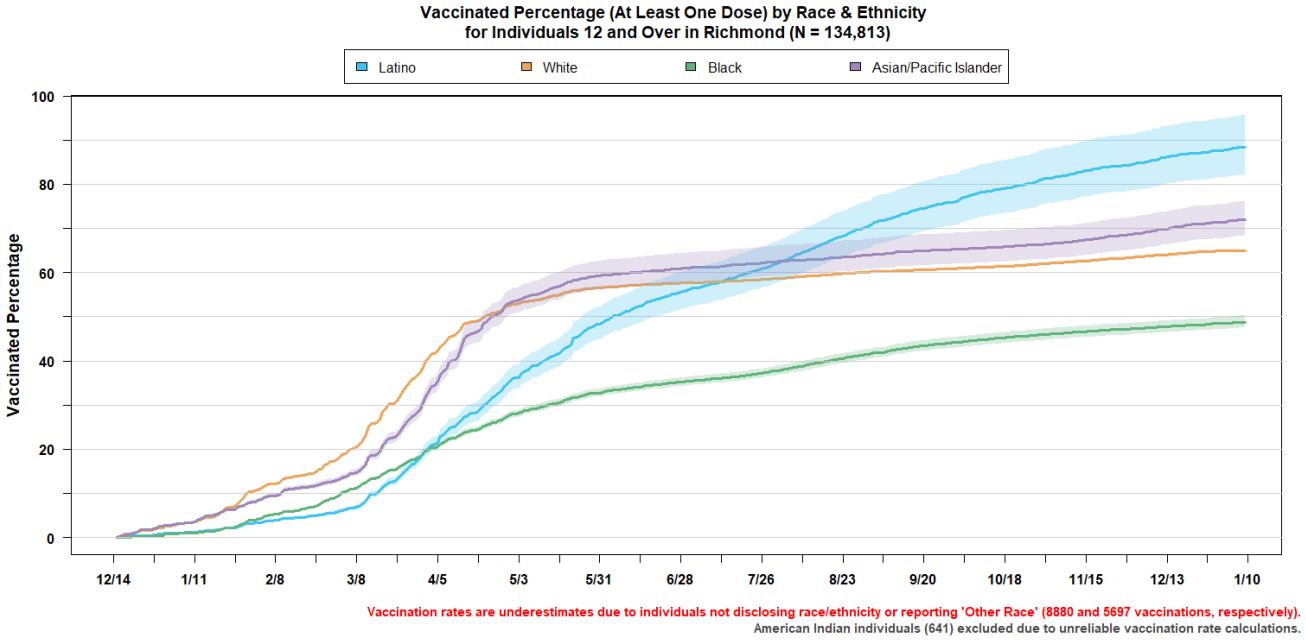


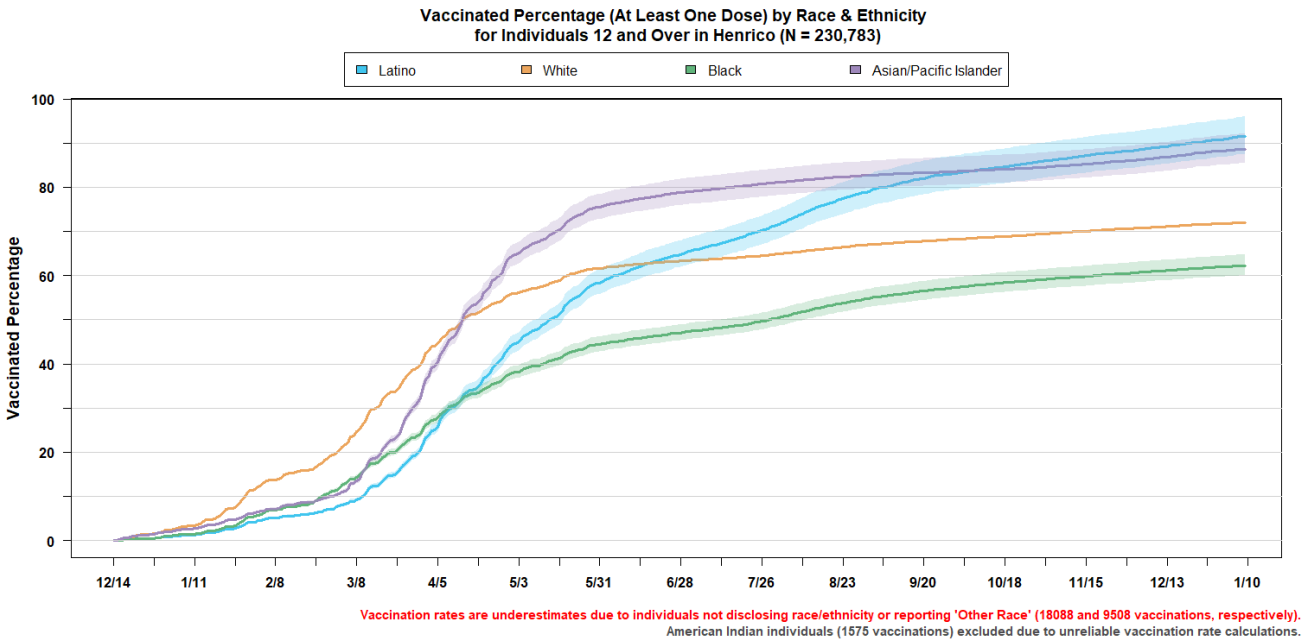
5.5 Vaccine Distribution by Race/Ethnicity over Time

The following charts track vaccination rates by race and ethnicity over time since vaccinations first began in mid-December of 2020.

- Through spring, White individuals and Asian or Pacific Islander individuals generally had higher vaccination rates in both Richmond and Henrico
- White individuals maintained the highest vaccination rates through early April in Richmond and late April in Henrico before Asian or Pacific Islander individuals surpassed them for the highest rates.

- In early months, vaccination rates of both Latino and Black individuals were lower, with Black individuals still comprising the lowest vaccine uptake as of today.
- Latino individuals saw an acceleration in vaccination rates beginning in early March after a slow start and have since surpassed White individuals in vaccine uptake in both Richmond and Henrico. They also possess the highest vaccination rate overall in Richmond, falling between about 85% and 95%.
- In Henrico, Asian or Pacific Islander individuals and Latino individuals have reached vaccination rates between 85% and 95%, while White individuals have surpassed 70% and Black individuals have surpassed 60%.
- Vaccination percentages are lower for Black individuals in both Richmond and Henrico but especially in Richmond.
- All data is subject to lags in reporting, particularly in recent weeks.



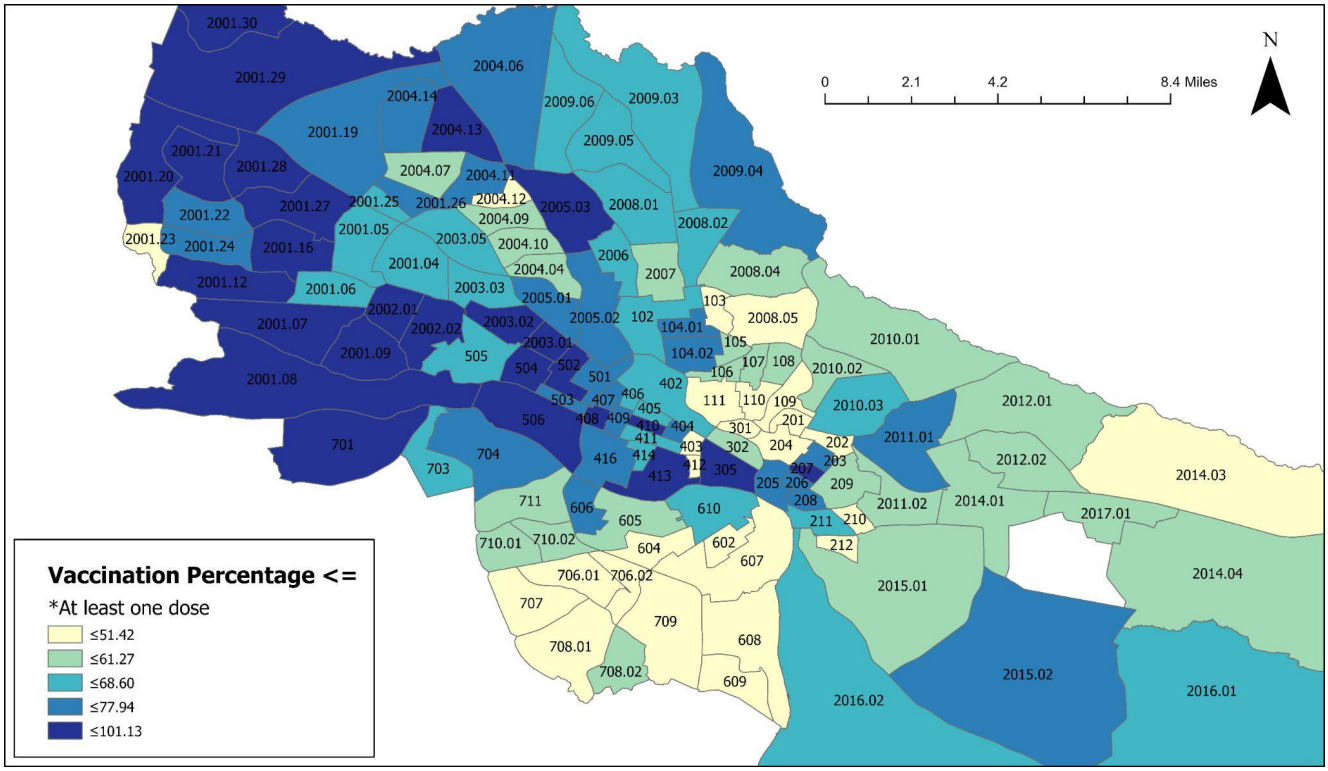


5.6 Census Tract Maps of Vaccine Uptake

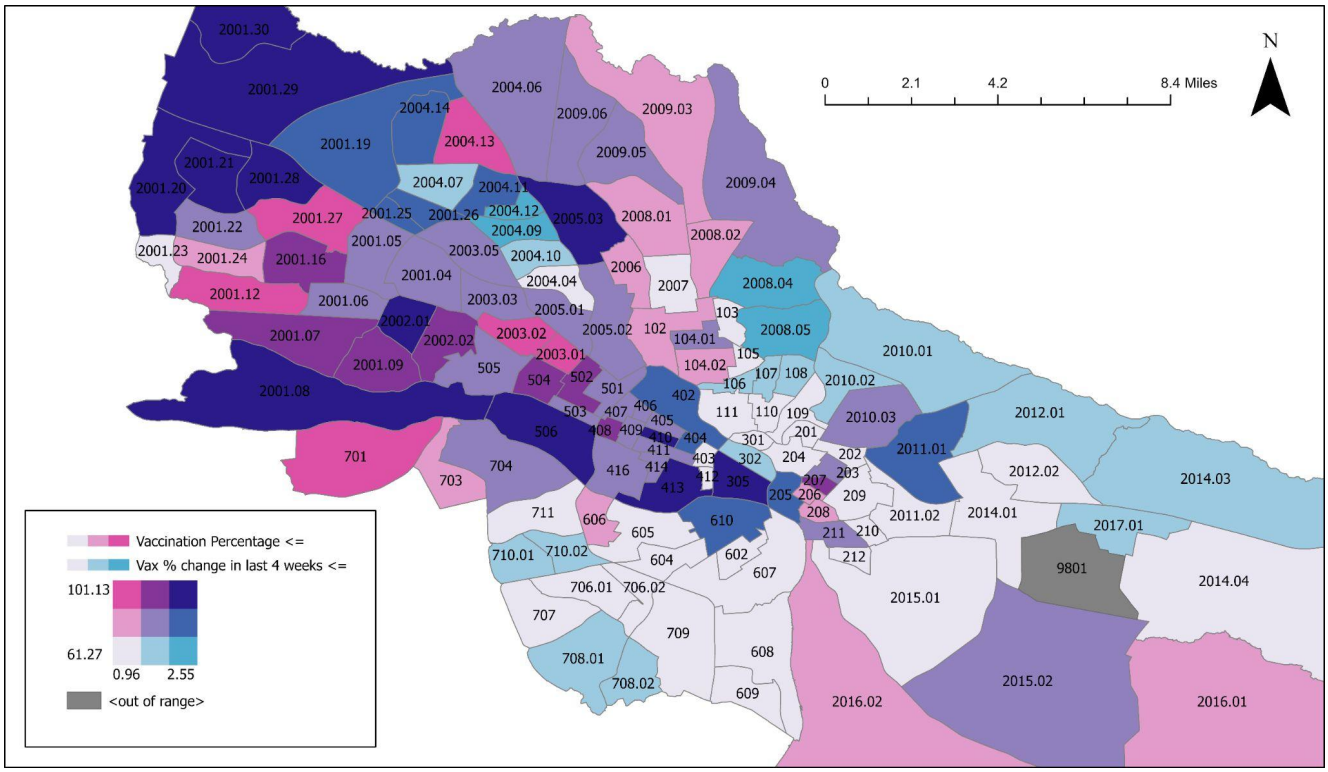
The following 3 maps visualize vaccination uptake (percentage of total population receiving at least one dose within each census tract), case burden (cumulative cases per 100,000 by census tract) and social vulnerability (defined by the CDC's social vulnerability index).

These maps are intended to guide further outreach and vaccination planning only..

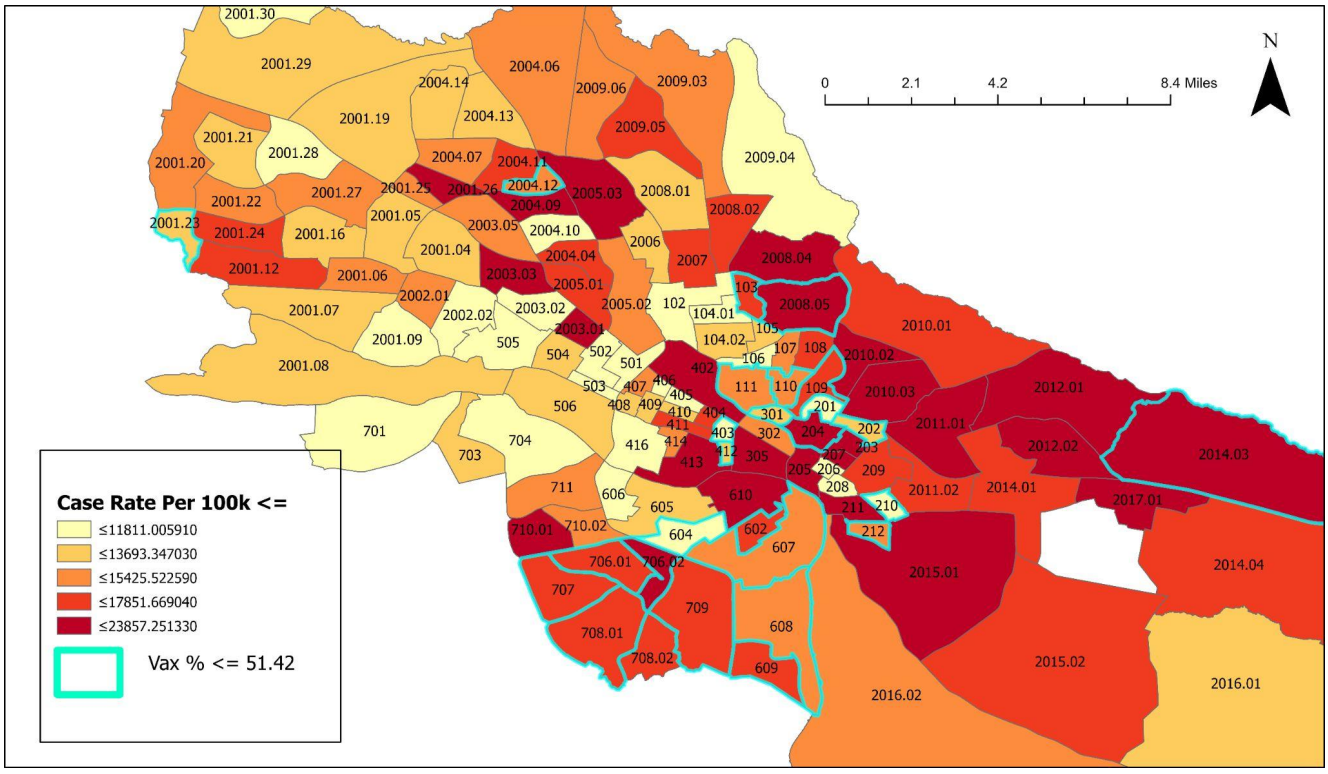
Vaccination Uptake By Census Tract -- Jan 10th, 2022



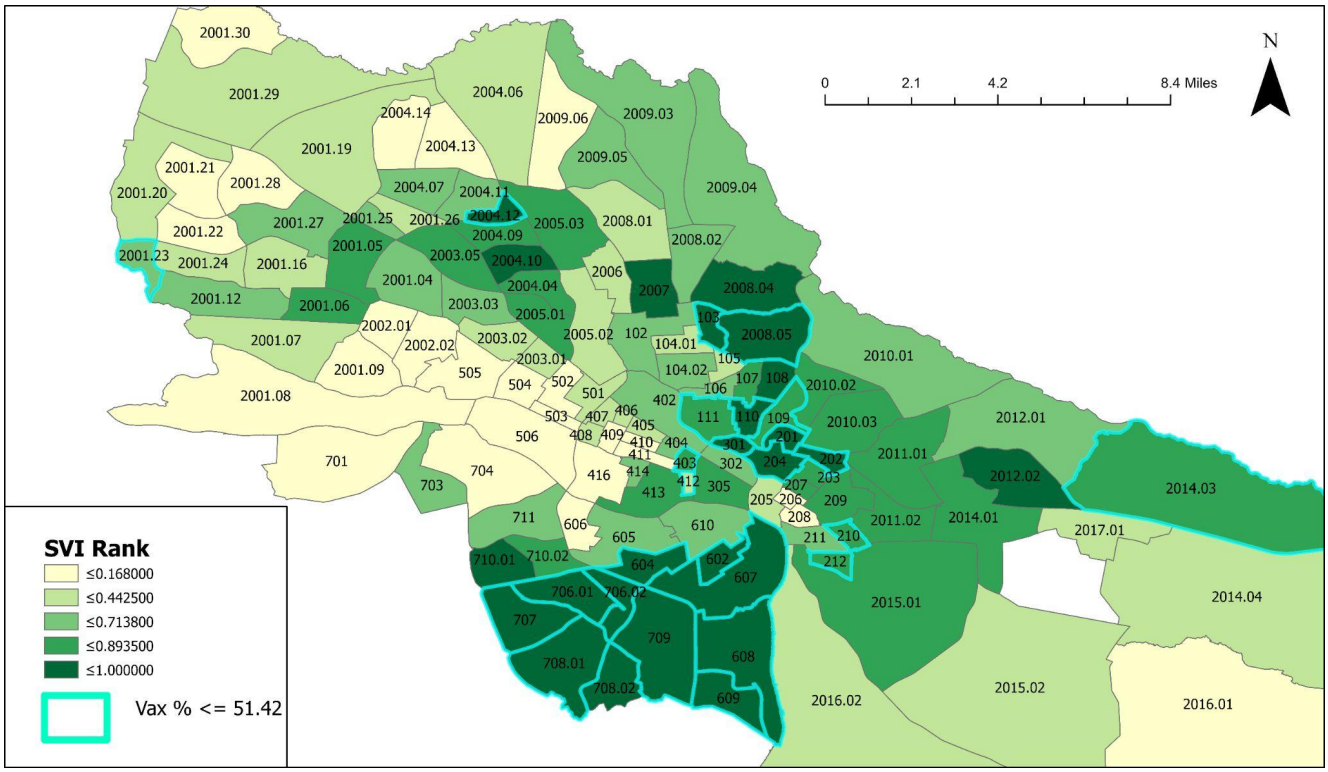
Recent Vaccination Uptake By Census Tract -- Jan 10th, 2022



Cumulative COVID-19 Cases and Low Vaccination by Census Tract - Jan 10th, 2022



Social Vulnerability Rank and Low Vaccination by Census Tract -- Jan 10th, 2022



6.0 Glossary

7-day average number of new daily cases
Recurrent average of the number of cases for each consecutive 7-day period regardless of data availability.

7-day total case rate per 100,000
Calculated by adding the number of new cases in the county (or other administrative level) in the last 7 days divided by the population in the county (or other administrative level) and multiplying by 100,000. **7-day total case rate per 100,000** is considered to have a transmission level of Low (0-9.99), Moderate (10.00-49.99), Substantial (50.00-99.99), or High (greater than or equal to 100.00).

Antigen
Antigens are molecules capable of stimulating an immune response. Antigen tests are commonly used in the diagnosis of respiratory pathogens such as the COVID virus.

Assisted living facilities
A housing facility designed for people with disabilities or adults who cannot/decide not to live independently

At least one dose
This metric includes everyone who has received only one dose [including those who received one dose of the single-shot Johnson and Johnson's Janssen COVID-19 vaccine] and those who received more than one dose.

Case rate
the number of cases per 100,000 people in the population. Calculation: ((Confirmed Cases + Probable Cases)/Population Estimate)*100,000

Community Transmission
Refers to when an individual is infected with the COVID in an area, including some who are not sure how or where they became infected. Community Transmission is low when less than 10 new cases per 100,000 persons in the past 7 days OR <5% of positive NAATs tests during the past 7 days. Nucleic Acid Amplification Test, or NAAT, is a type of viral diagnostic test for SARS-CoV-2, the virus that causes COVID-19

Confirmed Case
A confirmed case is an individual who had a confirmatory viral test performed by way of a throat swab, nose swab or saliva test and that specimen tested positive for SARS-CoV-2, which is the virus that causes COVID-19.

Congregate settings
A setting where a number of people reside, meet or gather in close proximity for a period of time. Examples include homeless shelters, prisons, detention centers, schools and workplaces.

Cumulative
Consisting of accumulated parts created by successive additions - In the context of this report "cumulative" refers to the total number of things (cases, vaccinations, deaths, ect) that have occured during the time frame referenced.

Fully Vaccinated
For the purposes of this report an individual is considered fully vaccinated after receiving two doses of either the Pfizer-BioNTech COVID-19 vaccine (COMIRNATY) or the Moderna COVID-19 vaccine, or after receiving one dose of the Janssen (Johnson & Johnson) COVID-19 vaccine.

High density workplaces
Workplace settings in which individuals are there for long time periods (e.g., for 8-12 hours per shift), and have prolonged close contact (within 6 feet for 15 minutes or more).

Hospitalizations
Number of confirmed & pending COVID-19 patients receiving inpatient hospital care or utilizing an inpatient hospital bed (e.g., observation status) AND being treated for COVID-19 related complications. This metric is not cumulative; only report current counts at the time the user updates VHASS. This metric excludes confirmed inpatients in the hospital for primary reasons other than COVID complications.

ICU hospitalizations
Number of confirmed & pending COVID-19 patients receiving inpatient hospital care and are utilizing an Intensive Care Unit (Adult CC) bed for treatment related to COVID-19 complications. This metric is not cumulative; only report current counts at the time the user updates VHASS. This metric excludes confirmed inpatients in the hospital for primary reasons other than COVID complications.

Independent living facilities
Housing arrangements and communities for older adults that range from apartment-style communities to housing co-ops. It is designed for seniors who can still live independently

Locality
A community in which people live. The Commonwealth of Virginia is divided into 95 counties, along with 38 independent cities that are considered county-equivalents for census purposes. For the purpose of this report, the term “Locality” is used to refer to one of these 133 independent communities. The boundaries of the Richmond City Health Department and Henrico Health Department closely align with the boundaries of the Richmond City and Henrico County localities, but that is not the case with many other health districts across the state.

Long-term care facilities
Housing facilities for people with disabilities or for adults who cannot or who choose not to live independently.

NCHS
The National Center for Health Statistics who releases bridged-race population estimates of the resident population of the United States for use in calculating the Nation’s official vital statistics

PCR
PCR stands for polymerase chain reaction. The test isolates genetic material from a patient sample and duplicates it many times, allowing for the presence of Covid-19 genetic material to be detected if present. The PCR test is the strongest and most reliable Covid-19 test currently available.

Percent positivity
For each event is calculated by dividing the number of tests yielding a 'Detected' result by the summed number of 'Detected' and 'Not Detected' results, and then multiplying this number by 100 to get a percent.

Population Estimate
Unless otherwise stated, population totals are based on 2019 data from the National Center for Health Statistics (NCHS). Please note- this is a change from some previous reports which used aggregated Census data regarding population by age group.

Probable Case
A probable case is an individual who has not had a confirmatory test performed but has: a positive antigen test, or clinical criteria of infection and is at high risk for COVID-19 infection (e.g. healthcare worker)

Provider Category
Health Department, Pharmacy, Health System, Community Provider, Safety Net, Other Locality

Race/Ethnicity
Prioritizes Hispanic Ethnicity over Patient stated Race, consolidates into groups: Hispanic, Asian & Pacific Islanders, White, Black, Native American & Unreported

Resident
Person(s) who self indicate, through census enumeration, medical documentation, or registration information that their primary residence is within the locality or health district referenced

Richmond catchment area
Hospital jurisdictions that serve the population of the greater Richmond metropolitan area: these include the hospital jurisdictions of Hanover, Henrico, Chesterfield, and Richmond City.

Sara Alert
Virginia based voluntary contact monitoring platform; individuals can update local health departments on their health status during the period of time they are participating in public health monitoring. The Sara Alert system is secure and always contacts users from the same phone number or email: 844-957-2721 or notifications@saraalert.org.

Social Vulnerability
The potential negative effects on communities caused by external stresses on human health. Such stresses include natural or human-caused disasters, or disease outbreaks. Reducing social vulnerability can decrease both human suffering and economic loss. More information on the CDC's Social Vulnerability Index can be found at https://svi.cdc.gov/

Spread
COVID-19 spreads when an infected person breathes out droplets and very small particles that contain the virus. These droplets and particles can be breathed in by other people or land on their eyes, noses, or mouth.

In some circumstances, they may contaminate surfaces they touch. People who are closer than 6 feet from the infected person are most likely to get infected.

Suspect Case
Meets supportive laboratory evidence, with no prior history of being a confirmed or probable case.
For suspect cases, jurisdictions may opt to place them in a registry for other epidemiological analyses or investigate to determine probable or confirmed status.

Tested Count
Represents all individuals who received a 'Detected', 'Not Detected', or 'Inconclusive' result (Records from individuals who registered for an event but who were not tested were removed prior to this analysis).

Testing Encounter
Instance where COVID-19 test is administered to a person in the community via a known provider.

Vaccination Percentage
The number of individuals vaccinated divided by estimated population of a referenced community, locality or health district - Whether "Vaccinated" refers to "Fully vaccinated" or "At least one dose" should be clarified in the specific metric.

VEDSS
Virginia Electronic Disease Surveillance System (VEDSS) is the primary data system used by the Virginia Department of Health (VDH) for disease surveillance. VEDSS is used to track COVID-19 cases and laboratory reports.

Ventilator utilizations
The number of Ventilators currently in use to treat patients diagnosed with Covid-19 amongst hospitals within the Richmond Catchment Area.

VHASS
The Virginia Healthcare Alerting and Status System (VHASS) is the data system used to collect information on hospital status, resources, and critical care capabilities. VHASS helps in the distribution of critical emergency management information needed by Virginia hospitals and healthcare providers.

VIIS
The Virginia Immunization Information System (VIIS) is Virginia's statewide immunization registry that contains immunization data of persons of all ages.

ZCTA
ZIP Code Tabulation Areas (ZCTAs) are generalized areal representations of United States Postal Service (USPS) ZIP Code service areas.