

# MONTHLY COVID REPORT FOR EXTERNAL USE

JULY 7, 2022

<b>Key Takeaways</b>	<b>2</b>
<b>1.0 COVID-19 SNAP SHOT</b>	<b>4</b>
1.1 PCR Tests & PCR Percent Positivity by Health District	4
1.2 Confirmed & Probable Cases, Hospitalizations & Fatalities by County	4
1.3 Current COVID-19 Richmond Catchment Area Hospitalizations	5
Clinical Status of Richmond Catchment Area Hospitals	5
<b>2.0 COVID-19 TESTING ENCOUNTERS AND POSITIVITY</b>	<b>6</b>
2.1 Testing Summary	6
2.2 Number of PCR Tests	6
<b>3.0 COVID-19 CASES</b>	<b>7</b>
3.1 Summary of Cases	7
3.2 Cases by Age Group by County	8
3.3 Cases and Population Proportions by Race and Ethnicity by County	10
<b>4.0 COVID-19 Hospitalizations &amp; Fatalities</b>	<b>11</b>
4.1 Summary of Hospitalizations & Fatalities	11
4.2 COVID-19 Hospitalization, ICU, and Ventilator Utilization (VHASS)	
The 7-day moving average is a recurrent average of the number of cases for each consecutive 7-day period regardless of data availability. Data are zero-padded to reflect dates with no hospitalizations and/or fatalities.	11
4.3 Fatalities by Sex, Race, and Age by County	12
<b>5.0 VACCINATION</b>	<b>13</b>
5.1 Vaccine Summary	13
5.2 Percentage of Vaccination Goals Reached by Population as of July 7th, 2022	13
5.3 Vaccine by County & Age	14
5.4 Vaccine by County & Race	15
5.5 Census Tract Maps of Vaccine Uptake	16
Vaccination Uptake In Richmond & Henrico, VA -- July 7th, 2022	16
Cumulative Case Rates and Lowest Percent Vax by Census Tract -- July 7th, 2022	17
SVI Rank and Lowest Percentage Vaccinated by Census Tract -- July 7th, 2022	17
<b>6.0 Glossary</b>	<b>18</b>

## Key Takeaways

### Cases

Cases in both Richmond and Henrico plateaued in June, 2022. [CDC COVID-19 Community Level](#) is **High** in both localities

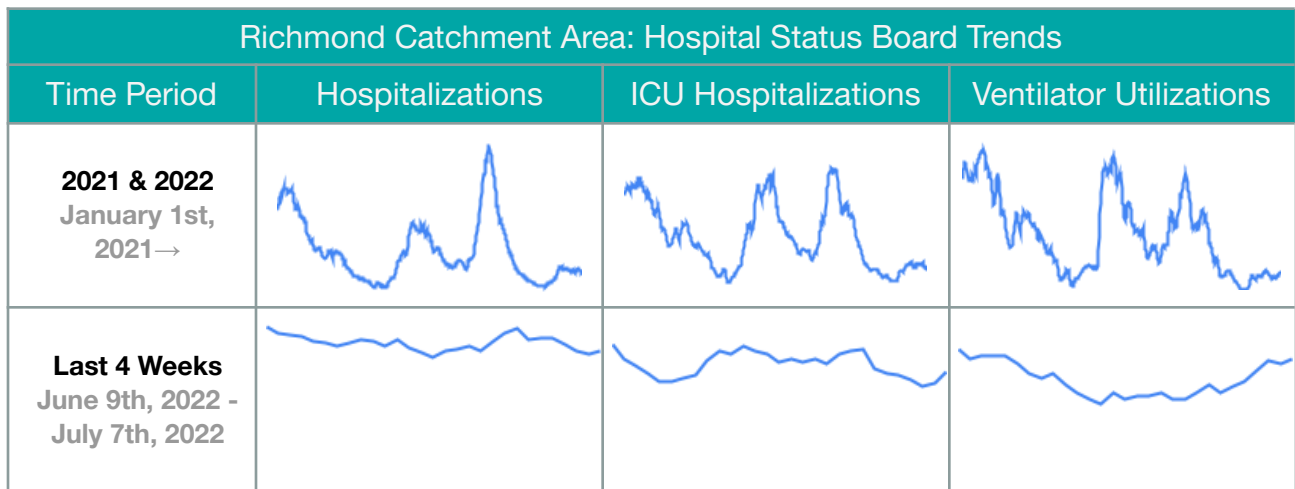
7-day total case rate per 100,00		
District	This Week	1 Month Ago
Henrico	<b>259.36</b>	248.17
Richmond	<b>256.47</b>	253.43

Richmond & Henrico		
Demographic	Cumulative Highest	Last Month
<b>Age</b>	20-29	20-49 80+
<b>Sex</b>	Female	Female
<b>Race</b>	Black Latino	Black

### Hospitalizations & Fatalities

Looking at the **11 hospitals** that comprise the Richmond catchment area, COVID-19 associated **hospitalizations, ICU hospitalizations and ventilator utilizations plateaued** in June, 2022.

**Fatality** rates are low and steady moving into the month of July, 2022. Several fatalities were reported during the month of May, 2022 in Henrico County, but none in Richmond City.



- \*9 out of 11 hospitals in the Richmond Catchment Area are operating at a 'Conventional' clinical status, while 3 are operating at a 'Contingency' status and 0 are operating at 'Crisis' status

**Fatality** rates are low and steady moving into the month of June, 2022. Several fatalities were reported during the month of May, 2022 in Henrico County.

Cumulative Demographic Trends		
Demographic Measure	Fatalities	
	Richmond	Henrico
<b>Median Age (range)</b>	74 (0-100)	78 (18-106)
<b>Sex</b>	Female	
<b>Race</b>	Black	White

## 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 & Regional Vaccination Stats Comparison			
Location	≥ 1 Dose	Complete	Booster
<b>Richmond &amp; Henrico</b>	<b>70.7%</b>	<b>66.3%</b>	<b>37.7%</b>
Region	71.6%	67.3%	37.8%

Vaccination Demographic Trends		
Demographic	Richmond	Henrico
<b>Age Groups</b>	65+	
<b>Sex</b>	Female	
<b>Race</b>	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 PCR Tests & PCR Percent Positivity by Health District

	RICHMOND CITY	HENRICO COUNTY
Cumulative PCR Tests	422,004	690,315
PCR Tests 6/27 - 7/3	1,445	2,751
7-Day Moving Average Positivity 6/27 - 7/3	23.9%	23.4%

### 1.2 Confirmed & Probable Cases, Hospitalizations & Fatalities by County

CASE STATUS	RICHMOND CITY	HENRICO COUNTY	VIRGINIA
New cases this month	2,546	3,753	81,650
New cases this week (July 7)	677	998	18,200
All cases	50,808	74,419	1,887,431
Confirmed cases	37,277	47,653	1,346,806
Hospitalizations	1,100	1,453	49,874
Deaths	442	836	17,276
Probable cases	13,531	26,766	540,625
Hospitalizations	39	70	3,230
Deaths	75	122	3,440
<b>Case rate</b> per 100,000	22048.6	22495.5	22112.7

*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:  $((\text{Confirmed Cases} + \text{Probable Cases}) / \text{Population Estimate}) * 100,000$*

### 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 County, & Richmond City): 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	127	95
Pending Hospitalizations	25	
Confirmed - ICU	28	39
Pending - ICU	*	
Confirmed - Ventilators	9	338
Pending - Ventilators	*	

\*This metric is unrelated to the CDC's measure of "Percent of staffed inpatient beds occupied by COVID-19 patients". The metrics are sourced differently and represent different geographic areas.

### Clinical Status of Richmond Catchment Area Hospitals



8 Hospitals operating at **Conventional** clinical status  
 2 Hospitals are operating at **Contingency** clinical status  
 0 Hospitals are operating at a **Crisis** clinical status.

- **Conventional** indicates that the spaces, staff, and supplies used are consistent with daily practices within the hospital.
- **Contingency** indicates that the spaces, staff, and supplies used are not consistent with daily care but provide care that is functionally equivalent to usual patient care. Healthcare practices utilize limited resources differently than usual with the expectation that such altered practices are developed and performed in accordance with normal standards of care. In contingency conditions, this standard of care is maintained by providing care within the range of functionally equivalent options to care in conventional conditions.
- **Crisis** indicates that Crisis Standards of Care apply. Care is no longer functionally equivalent to usual standards of care. Risk to the patient or provider may exist.

## 2.0 COVID-19 TESTING ENCOUNTERS AND POSITIVITY

### 2.1 Testing Summary

Current 7-day **PCR percent positivity** rate in **Richmond** has **decreased** to **23.8%**, **positivity** also has **increased** in **Henrico** to **24.2%**.

### 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
June 2022	6496	13133
May 2022	9638	13328
April 2022	6354	13245
March 2022	6210	14015
February 2022	8660	19815
January 2022	22833	47458
December 2021	19678	37857
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

Despite a downward trend in cases during late January, February, March, and early April, an increase and then plateau in cases can be seen during late April, May and June 2022. According to the [CDC Covid Data Tracker](#), in Richmond on June 7th, the 7-day total case rate was **256.47** new cases per 100,000 population, while in Henrico the 7-day total case rate was **259.36** new cases per 100,000 population.

Additionally, in both Richmond and Henrico, the [CDC COVID-19 Community Level](#) is **High**.

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

In both districts 20-29 year olds have the highest case rate cumulatively. In the last month, case rates were higher among those aged 20-49 in Richmond, and 80+ in Henrico.

Regarding race and ethnicity, the highest proportion of cases is still among Black individuals cumulatively. Black and Latino community members experienced the highest case rates in the past month.

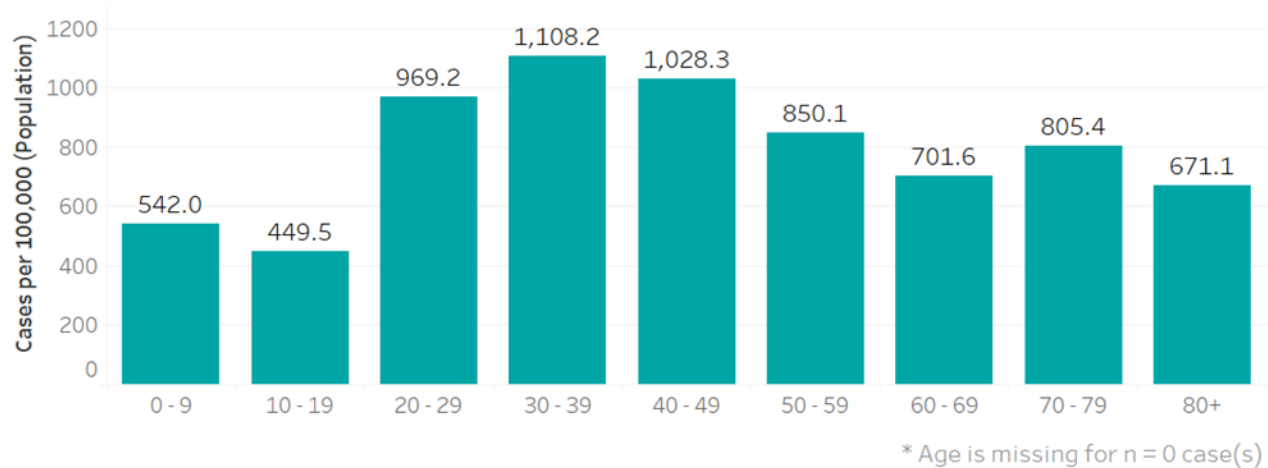
Time Series for case data at the state and locality level can be found on the [VDH website](#).

### 3.2 Cases by Age Group by County

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

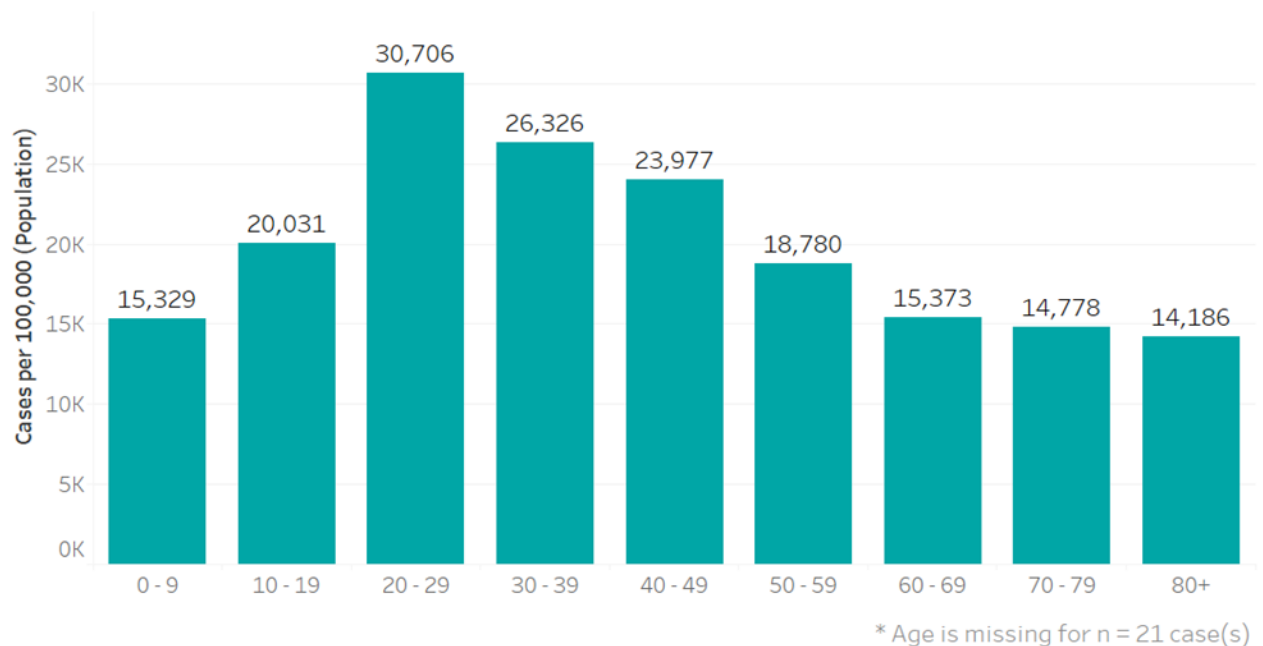
#### COVID-19 Case Distribution by Age in the Last 4 Weeks

Richmond City, VA (n = 1,934); June 10, 2022 - July 7, 2022



#### Cumulative COVID-19 Case Distribution by Age

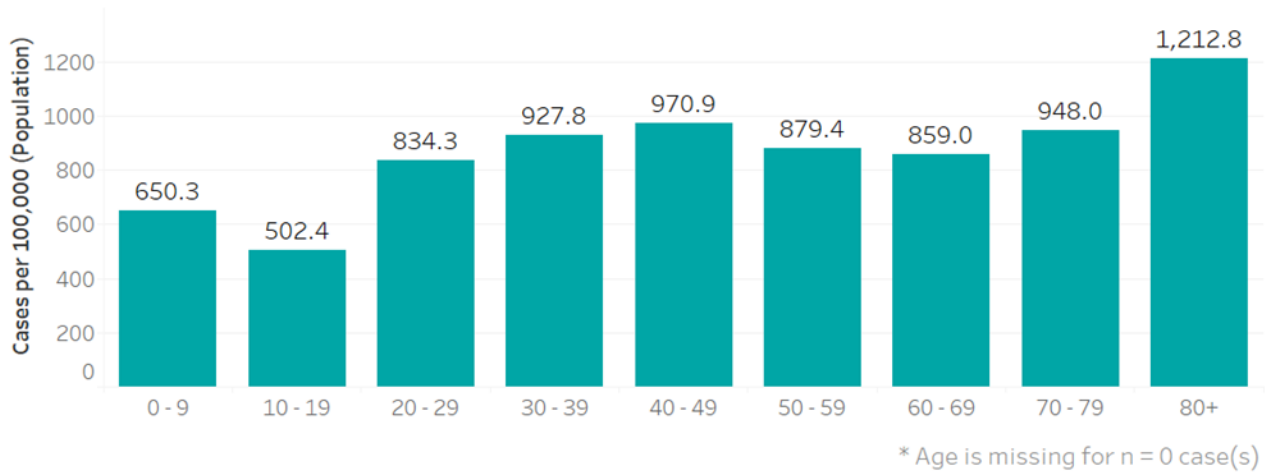
Richmond City, VA (N = 50,807); January 1, 2020 - July 7, 2022



In Richmond City, individuals aged 30-39 had the highest case rates in **June**, while individuals aged 20-29 have the highest case rate cumulatively.

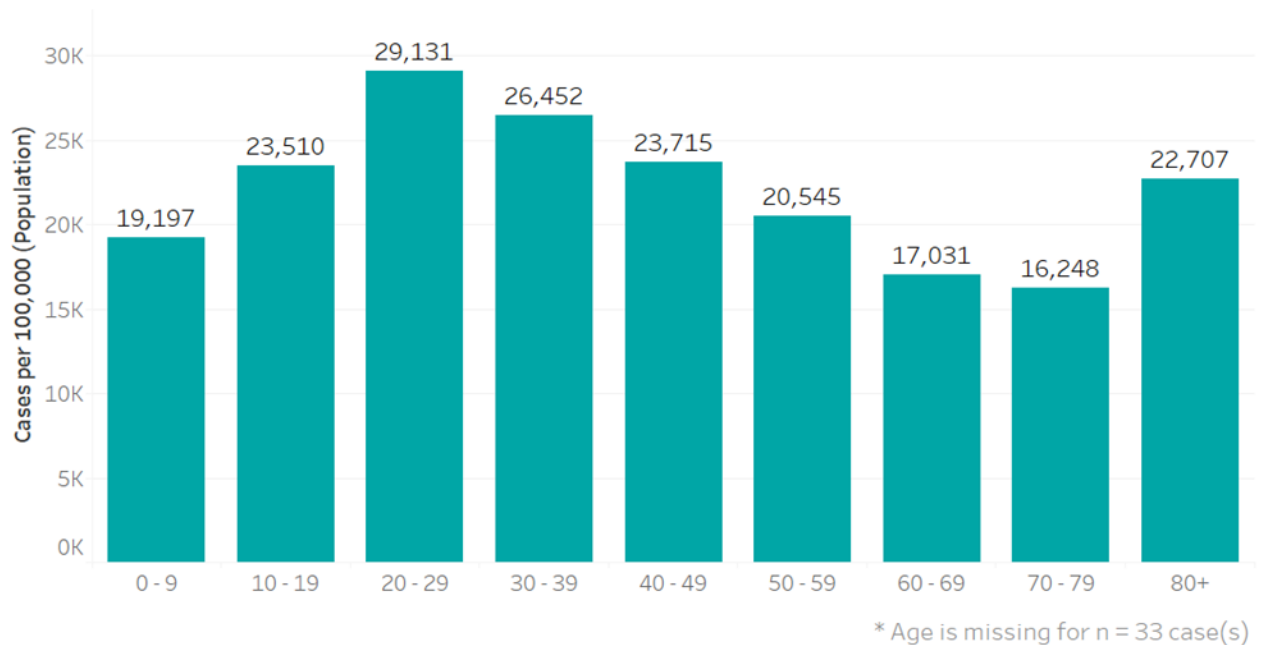
## COVID-19 Case Distribution by Age in the Last 4 Weeks

Henrico County, VA (n = 2,756); June 10, 2022 - July 7, 2022



## Cumulative COVID-19 Case Distribution by Age

Henrico County, VA (N = 74,419); January 4, 2020 - July 7, 2022



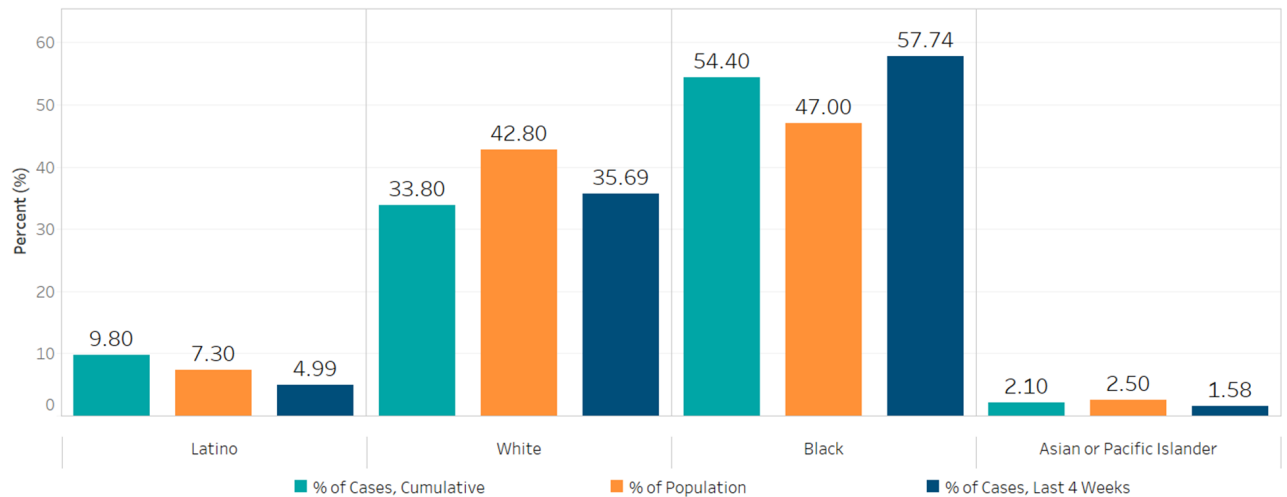
In Henrico, individuals aged 80 and over had the highest case rates in **June**, while cumulatively, individuals 20-29 have the highest case rate, followed by individuals 30-39 and 40-49.

### 3.3 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

Richmond City, VA; Cumulatively as of July 7, 2022 and in the Last 4 weeks (June 10, 2022 - July 7, 2022)



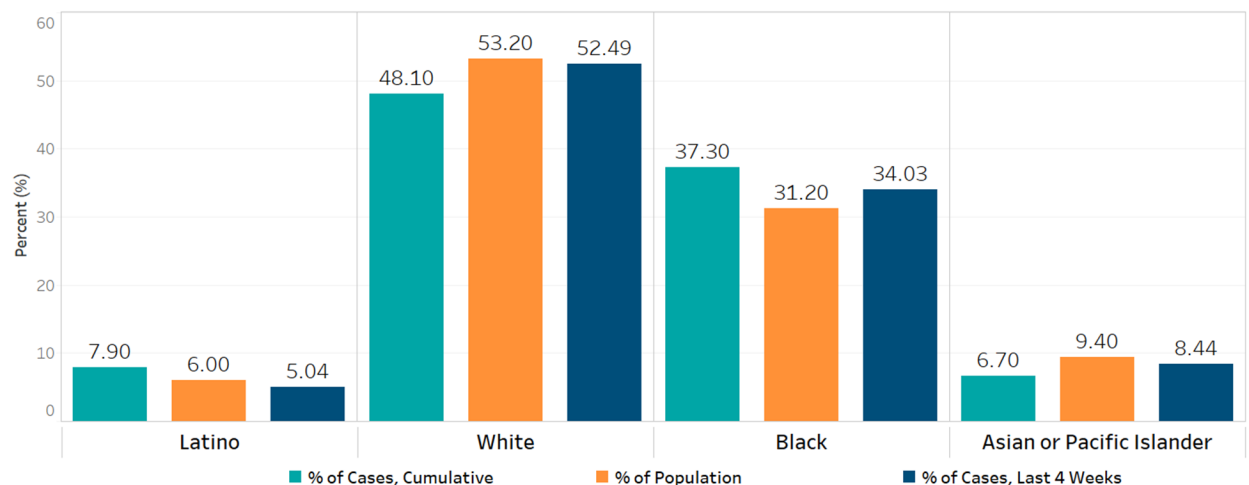
\* NCHS population estimates are not available for Two or More Races or for Other Race (1,751 total cases)

\* Missing or unknown ethnicities were assumed to be non-Hispanic.

- In Richmond, the case burden for White individuals, Latino individuals and Asian or Pacific Islander individuals over the last Month (42.8%, 5.0% and 1.6%, respectively) is low relative to their population percentages (42.8%, 7.3% and 2.5%, respectively), while the case burden for Black individuals is disproportionately low (57.7%) relative to their population percentage (47%).

#### COVID-19 Case Distribution by Race/Ethnicity

Henrico County, VA; Cumulatively as of July 6, 2022 and in the Last 4 weeks (June 9, 2022 - July 6, 2022)



\* NCHS population estimates are not available for Two or More Races or for Other Race (3,622 total cases)

\* Missing or unknown ethnicities were assumed to be non-Hispanic.

- In Henrico in the last month, the percent of all cases among Black individuals, White individuals and Asian Or Pacific Islanders (34.0%, 58.4% and 9.6%, respectively) is proportional to their proportion of the population (37.3%, 53.2% and 9.4%, respectively). Meanwhile, the percentage of cases amongst Latios (5.04%) is low relative to the population percent(6.0%).

## 4.0 COVID-19 Hospitalizations & Fatalities

### 4.1 Summary of Hospitalizations & Fatalities

Looking at the 11 hospitals that comprise the Richmond catchment area, COVID-19 associated hospitalizations increased dramatically until the middle of January before falling gradually throughout the end of winter. Recently, an uptick can be seen in COVID-19 Hospitalizations, while ICU hospitalizations and ventilator utilizations have followed a similar pattern, although less dramatic. Currently, **9** Hospitals in the Richmond Catchment area are operating at “**Conventional**” clinical status, **2** are operating at “**Contingency**” clinical status, and **0** are operating at “**Crisis**” clinical status.

**Fatalities** appeared to rise from December to January, but not as sharply as cases or hospitalizations rose during the same period. Deaths have slowed month over month since January and as of the 6th of June, no fatalities were reported in Richmond City, with relatively low fatality counts in Henrico County. Fatality data is subject to sizable amounts of lag.

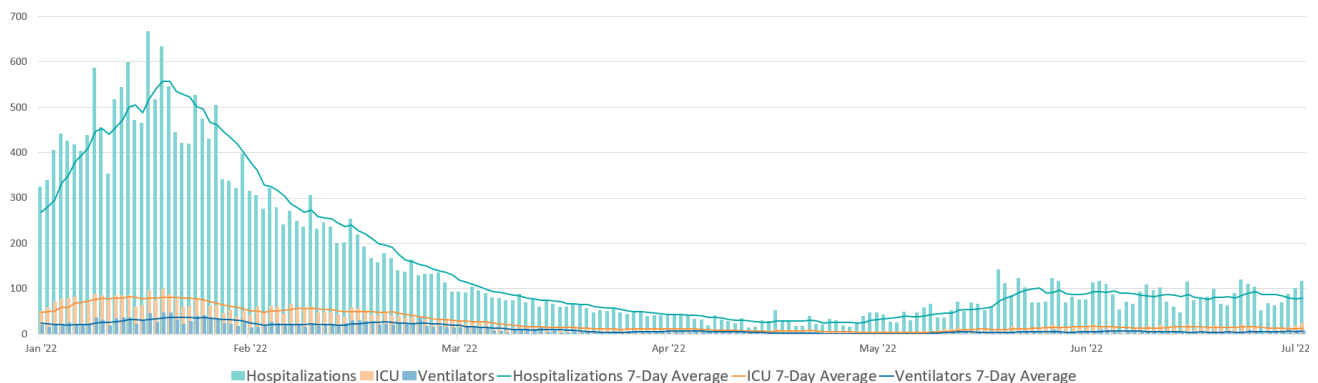
Cumulatively, deaths are highest among Female individuals in both districts. The median age of death is around 74 in Richmond and 78 in Henrico.

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

*The 7-day moving average is a recurrent average of the number of cases for each consecutive 7-day period regardless of data availability. Data are zero-padded to reflect dates with no hospitalizations and/or fatalities.*

#### Total Daily COVID-19 Hospitalizations, ICU Hospitalizations, and Ventilator Utilizations

Richmond Catchment Area, January 1st, 2021 - July 7th, 2022



\*Sum of Daily Counts displayed above- Hospitalizations: 28607 of 130871 (All Time), ICU Hospitalizations: 5074 of 30235, Ventilator Utilizations: 2167 of 15900

- COVID-19 Hospitalizations peaked during January, 2022, but showed a decrease throughout late April, 2022. An increase can be seen in COVID-19 Hospitalizations starting in late April and early May, a trend that appears to shift to plateau that has continued into July. ICU hospitalizations and COVID-19 related ventilator utilizations have followed a similar, albeit dampened trend.

### 4.3 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		Fatalities	
		Richmond (n=515)	Henrico (n=941)
Gender	Male	49% (254)	48% (454)
	Female	51% (260)	52% (487)
	Missing/Unknown		
Age	Median (range)	74 (0-100)	78 (10-106)
Race/Ethnicity	White	29% (149)	58% (543)
	Black	64% (328)	35% (334)
	Latino	5% (25)	3% (27)
	Asian or Pacific Islander	1% (7)	3% (24)
	Other Race	*	*
	Two or more races	*	*
	Not reported	2% (11)	1% (6)

*\*counts under 5 suppressed*

## 5.0 VACCINATION

### 5.1 Vaccine Summary

As of July 7th, **71.6%** of the region's population has received **at least one dose** of the vaccine and **67.3%** of the region's population has been **fully vaccinated** and **37.8%** of the region's total population has received a **booster**. Approximately **70.7%** of the combined Richmond and Henrico population has received **at least one dose** and **66.3%** of the two districts' combined population has been **fully vaccinated** and **37.7%** 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 as of July 7th, 2022

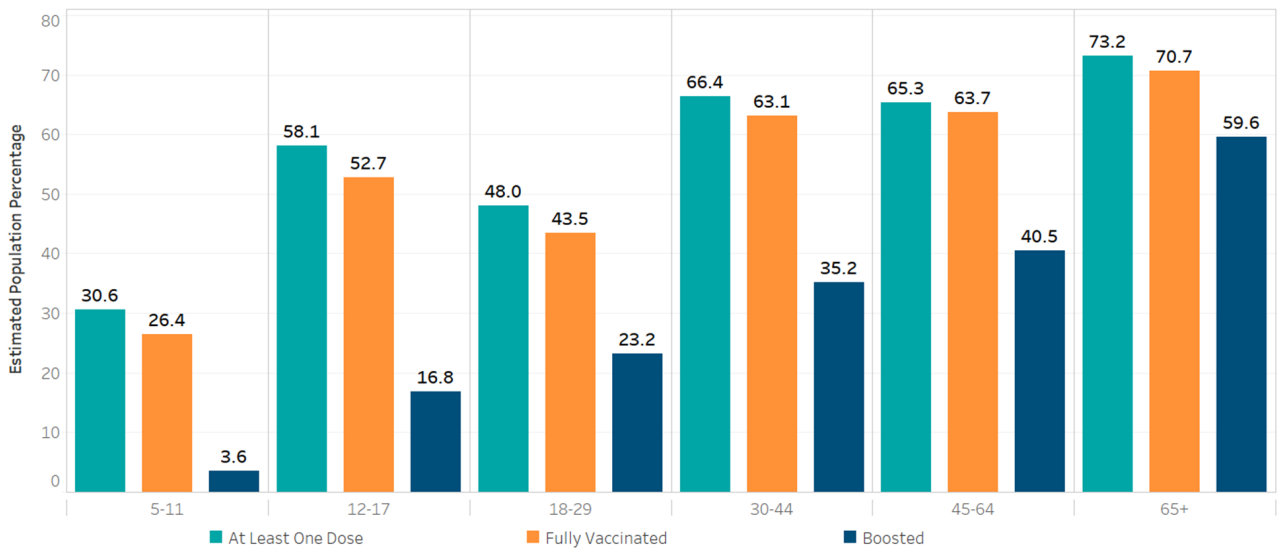
County	Age Group	POPULATION	PEOPLE WITH AT LEAST ONE DOSE	PEOPLE FULLY VACCINATED	PEOPLE WITH BOOSTER
Richmond	5-11	15,198	5,343 (35.2%)	4,414 (29%)	577 (3.8%)
	12-17	11,150	7,310 (65.6%)	6,445 (57.8%)	1,941 (17.4%)
	18+	190,750	132,865 (69.7%)	123,848 (64.9%)	74,856 (39.2%)
	65+	31,809	26,036 (81.9%)	24,807 (78%)	20,057 (63.1%)
Henrico	5-11	28,406	14,151 (49.8%)	12,190 (42.9%)	1,383 (4.9%)
	12-17	25,954	20,576 (79.3%)	18,940 (73%)	6,670 (25.7%)
	18+	256,660	216,640 (84.4%)	206,456 (80.4%)	126,334 (49.2%)
	65+	52,720	50,010 (94.9%)	48,382 (91.8%)	39,780 (75.5%)

*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 Vaccine by County & Age

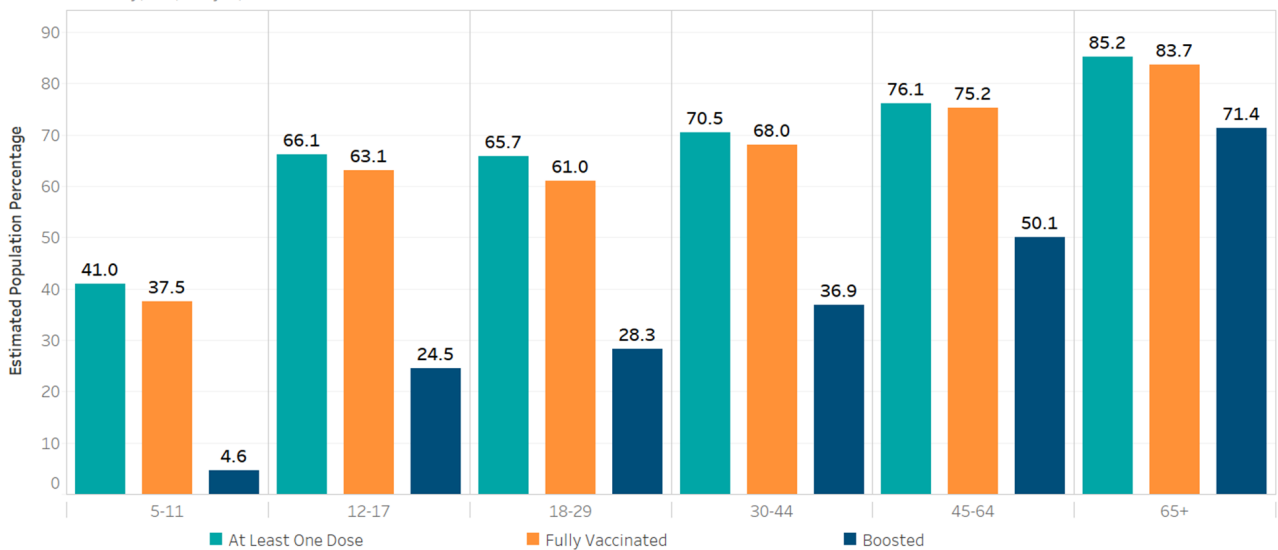
### Vaccination Uptake Estimations by Vaccination Status & Age Group

Richmond City, VA; July 6, 2022



### Vaccination Uptake Estimations by Vaccination Status & Age Group

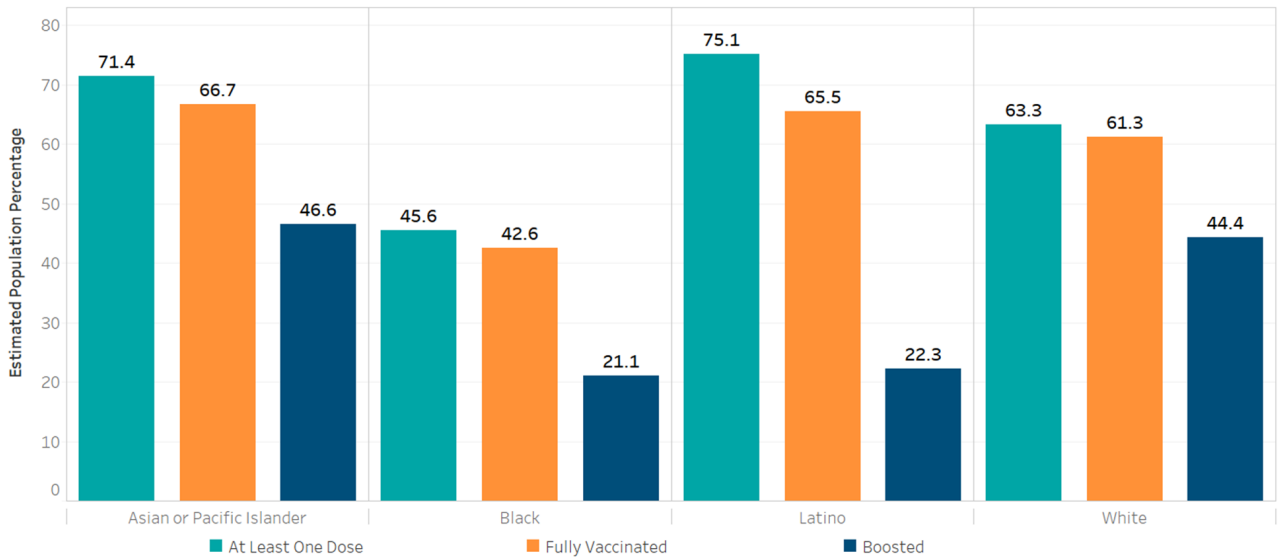
Henrico County, VA; July 6, 2022



## 5.4 Vaccine by County & Rac

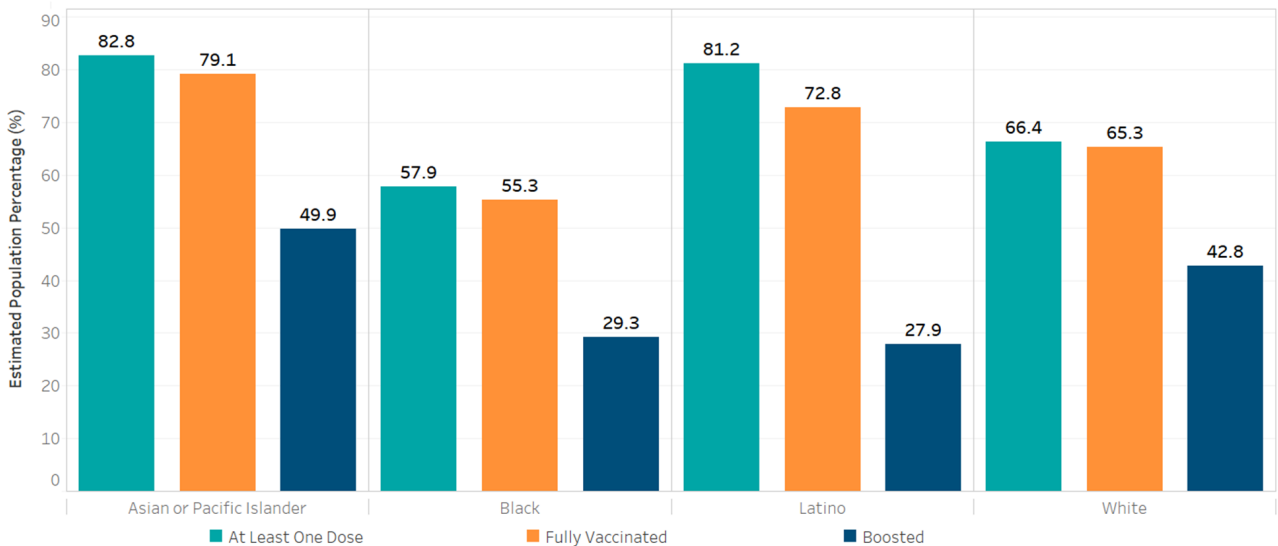
### Vaccination Uptake Estimations by Vaccination Status & Racial/Ethnic Group

Richmond City, VA; July 6, 2022



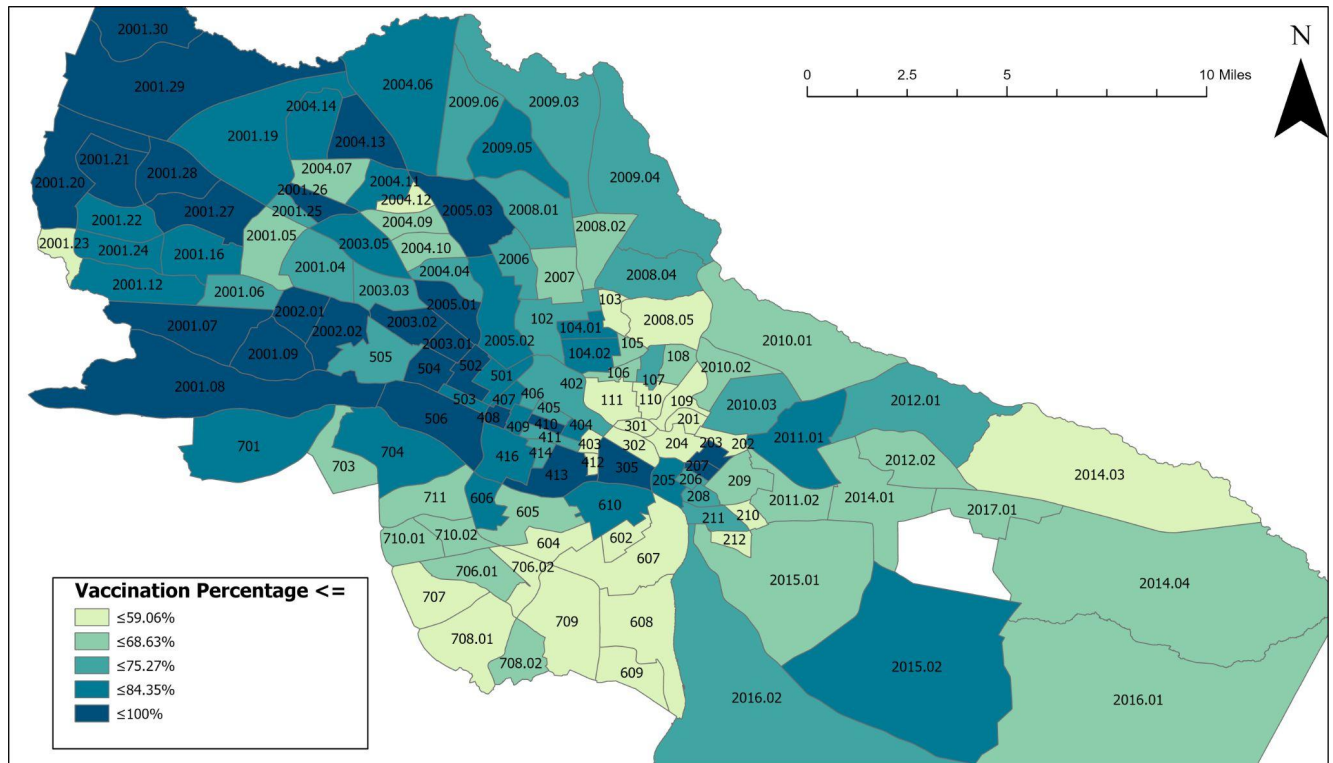
### Vaccination Uptake Estimations by Vaccination Status & Racial/Ethnic Group

Henrico County, VA; July 6, 2022

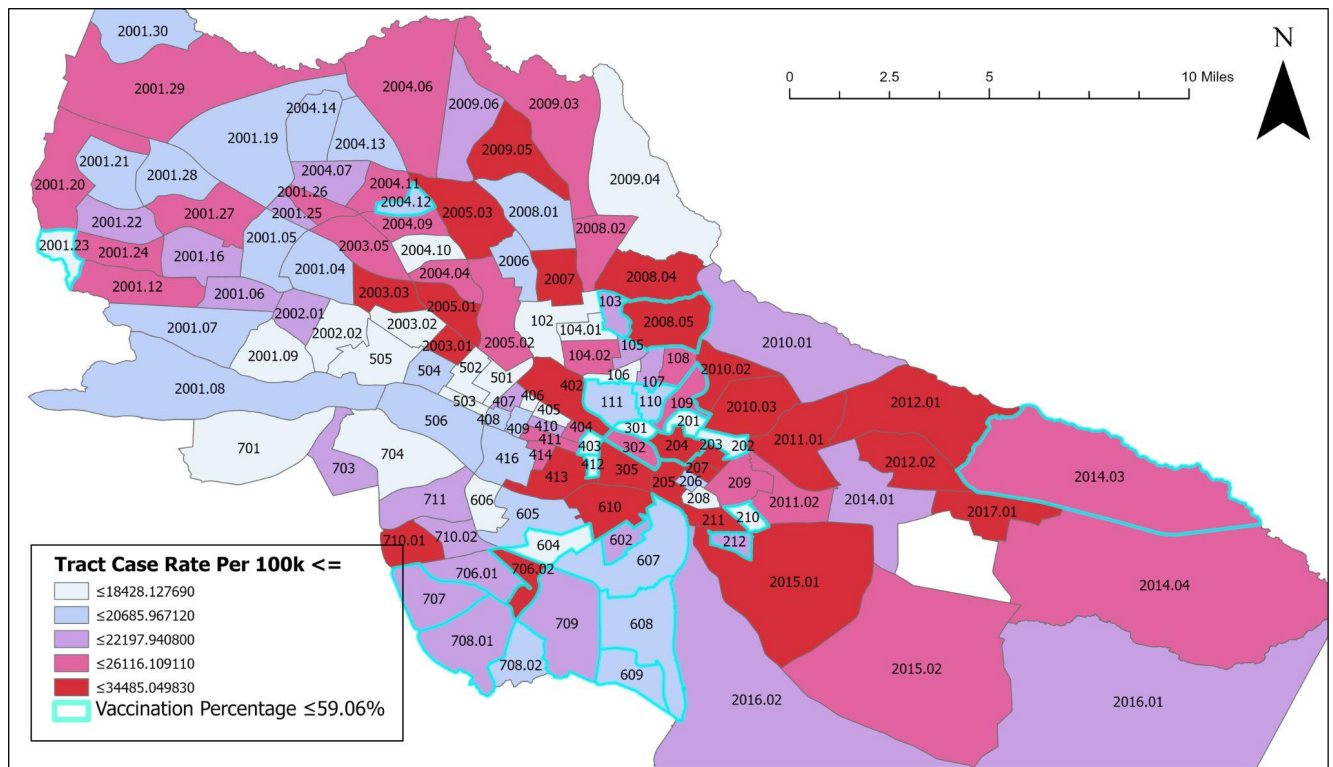


These maps are intended to guide further outreach and vaccination planning only.

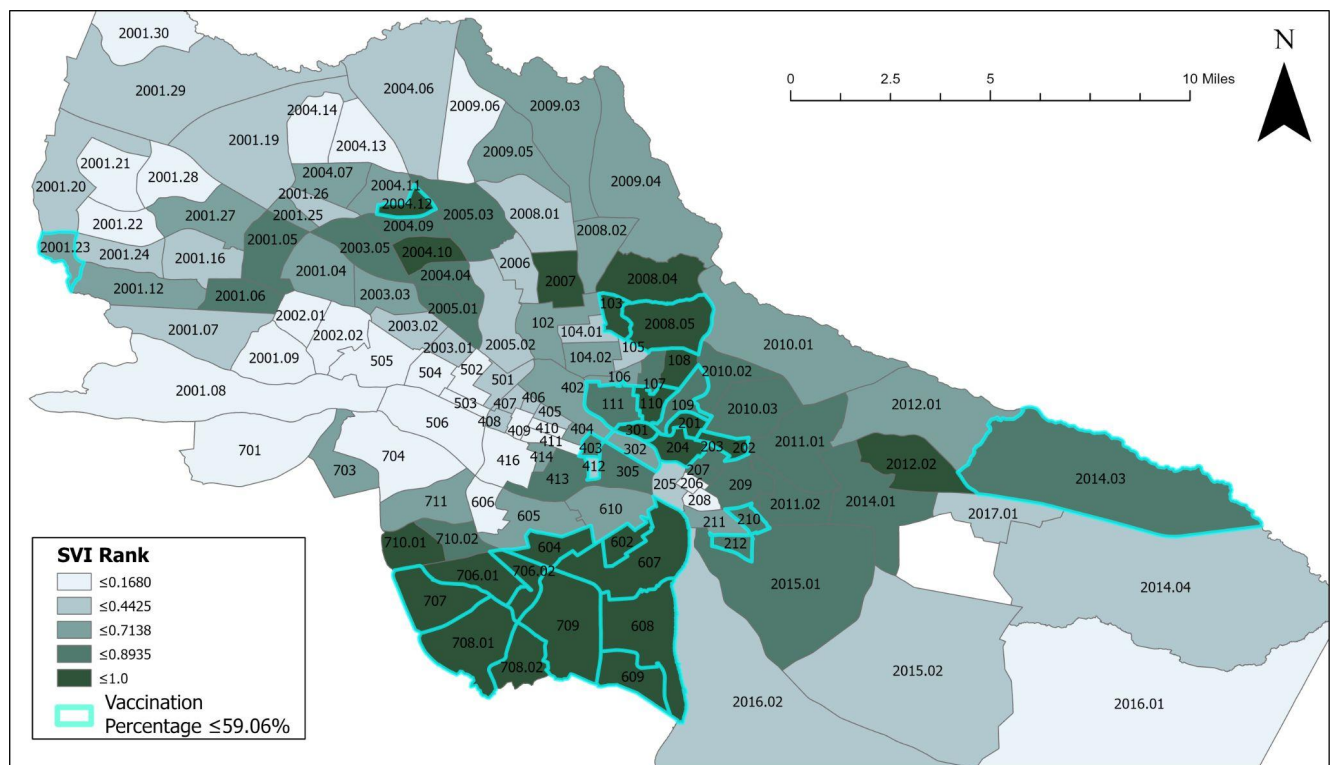
## Vaccination Uptake In Richmond & Henrico, VA -- July 7th, 2022



Cumulative Case Rates and Lowest Percent Vacc by Census Tract -- July 7th, 2022



SVI Rank and Lowest Percentage Vaccinated by Census Tract -- July 7th, 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:  $((\text{Confirmed Cases} + \text{Probable Cases}) / \text{Population Estimate}) * 100,000$

### **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 occurred 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](mailto: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.