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## **Eastern Highlands Health District COVID-19 Update**

DATE: 2/18/2022 TIME: 8:00 AM COMPLETED BY: A. Bloom

## **TOWN LEVEL DATA**

TOWN	Andover	Ashford	Bolton	Chaplin	Columbia	Coventry	Mansfield	Non- student	Scotland ++	Tolland	Willington	EHHD Totals
Cumulative Cases	414	629	620	394	833	1,751	2,526		118	1,928	691	9,904
Change from last week	9	5	6	4	2	13	19	(15)	0	23	5	86
Two week change	16	12	13	10	18	36	60	(36)	1	64	17	247
Deaths	6	5	5	2	10	11	31	(31)	2	22	4	98

**CONNECTICUT TOTALS (February 17, 2022)** 

Number of cumulative cases	Change from last week	Change from two weeks	Current hospitalizations*	Two week change in hospitalizations	Deaths	
718,064	6,369	13,193	325	-544	10,324	

Data Sources: CTEDSS and CT DPH; cumulative town counts as of 2/17/2022; reporting period for two week town level case counts is 1/30/2022 through 2/12/2022.

\*Current (net) number of hospitalizations; it is not a cumulative count. ++ Scotland case count likely lower than actual positive cases due to residents using Baltic, North Windham and Hampton as a mailing address.

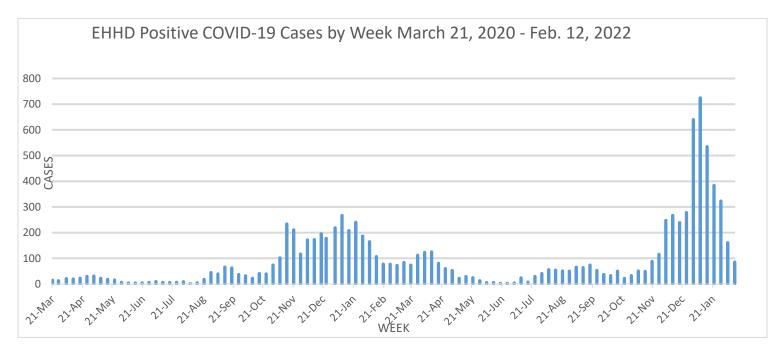
EHHD residents who received COVID-19 vaccine <sup>+</sup>												
TOWN	Andover	Ashford	Bolton	Chaplin	Columbia	Coventry	Mansfield^	Scotland	Tolland	Willington	EHHD Totals	Connecticu t Totals
Estimated pop.	3,236	4,255	4,884	2,239	5,379	12,407	25,487	1,672	14,618	5,864	80,041	3,631,470
Received 1 <sup>st</sup> dose COVID vaccine % of pop.	2,451 76%	3,060 72%	3,949 81%	1,562 70%	4,164 77%	9,662 78%	22,072 87%	1,055 63%	12,056 82%	4,005 68%	64,036 80%	79%
Fully vaccinated % of pop.	2,307 71%	2,862 67%	3,714 76%	1,446 65%	3,912 73%	9,093 73%	20,848 82%	1,008 60%	11,411 78%	3,706 63%	60,307 75%	72%
Received 1st dose COVID vaccine % 5-11	25%	34%	48%	32%	41%	43%	52%	22%	39%	33%	41%	46%
Fully vaccinated % 5-11	21%	29%	42%	24%	35%	39%	48%	19%	36%	30%	36%	38%
Received 1st dose COVID vaccine % 12-17	58%	70%	73%	78%	58%	65%	76%	46%	75%	59%	69%	**
Fully vaccinated % 12-17	56%	65%	71%	70%	55%	62%	71%	43%	73%	54%	65%	**
Received 1st dose COVID vaccine % 18-24	77%	68%	74%	59%	72%	68%	90%	66%	94%	33%	83%	**
Fully vaccinated % 18-24	69%	61%	70%	53%	67%	63%	86%	57%	86%	30%	79%	**
Received 1st dose COVID vaccine % 25-44	77%	67%	90%	68%	80%	83%	94%	53%	85%	85%	83%	90%
Fully vaccinated % 25-44	72%	62%	82%	63%	73%	77%	85%	50%	79%	77%	77%	78%
Received 1st dose COVID vaccine % 45-64	77%	74%	77%	68%	77%	81%	87%	72%	84%	72%	80%	94%
Fully vaccinated % age 45-64	74%	70%	73%	63%	74%	77%	82%	69%	80%	67%	76%	86%
Fully vaccinated % 65+	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	95%

Data Source: Connecticut immunization registry CT DPH as of 2/16/2022; "Vaccination data for Mansfield includes current 2/16/2022 data from UCONN (https://coviddashboard.uconn.edu/). +Downward changes are likely due to de-duplication & re-assignment of cases to different towns associated with UConn student residency changes. \*\*At this time the state vaccination numbers are not broken down into the same age groups as the town level data and cannot be reported here. NOTE: census estimates for 65 and older is likely low, resulting in 100% rates based on actual number of vaccines provided to this age group.

## EHHD TOWN LEVEL CASE RATES JANUARY 30, 2022 – FEBRUARY 12, 2022

Town	Total Cases 2 weeks	Case Rate	Total Tests	% Positive	Previous Case Rate	Previous % Positivity
Andover	16	35.3	172	10.5	64	18
Ashford	12	20.1	179	10.1	53.7	16.8
Bolton	13	19	218	7.4	41	12.1
Chaplin	10	31.9	105	12.4	54.2	18.8
Columbia	18	23.9	206	11.2	58.4	19.1
Coventry	36	20.7	460	10.9	36.3	14.6
Mansfield	60	16.8	1475	5.3	40.1	7.1
Scotland +	1	4.3	23	8.7	21.4	20
Tolland	64	31.3	568	13.3	45.4	15.9
Willington	17	20.7	186	11.3	36.5	13.6

NOTE: case rates are per 100,000 population; + Scotland case counts likely lower than actual due to residents using Baltic, North Windham and Hampton as a mailing address.



NOTE: All counts by town are cumulative and include confirmed cases and antigen-positive cases; counts can change from previous weeks due to the state reassigning a case to a different town once further information is gathered on the case, or due to lab reporting delays.

