

2021 COVID-19 SUMMARY REPORT

Skagit County Public Health



Introduction

Skagit County, like the rest of the world, officially entered the second year of intense COVID-19 pandemic response in 2021. The following report focuses on Skagit County Public Health’s response to the ongoing pandemic during 2021 and presents data in a graphic form that can help provide insight into the impact the second year of the pandemic had on our county. We at Skagit County Public Health recognize that our role in pandemic response was one of many throughout our community. Each hospital, health care facility, pharmacy, EMS district, tribal government, county and city government, school, long-term care facility, community service site, child care facility, employer, business, gathering place, and family had their own critical response to the pandemic, and these responses helped Skagit County make it through one of our most challenging periods. We celebrate 2021 as the “year of vaccine” but also recognize the continued very high impact COVID-19 has on our community.

Over the course of 2021, safe and effective COVID-19 vaccines became available to everyone aged five and older. By the end of 2021, vaccines had helped to protect tens of thousands of Skagit County residents from serious illness and death from COVID-19. At the same time, by the fall, our community faced two successive waves of increasingly infectious variants, as well as the reality of waning immunity from prior infections and early vaccination. Our hospitals were stressed to capacity caring for COVID-19 patients resulting from the serious impact of the Delta variant while also dealing with a very high burden of delayed care for other serious health conditions in our community. Healthcare workers were exhausted and yet kept our critical care systems running week after week.

Skagit County Public Health (Public Health) employees, volunteers, and our community vaccine providers worked tirelessly throughout the year to bring no-cost vaccines to all eligible people in Skagit County and yet, by September of 2021, approximately 30% of our eligible population remained unvaccinated by choice or by lack of time or access to vaccine. In the fall of 2021, the number of new cases, hospitalizations, and deaths from COVID-19 reached the highest levels since the start of the pandemic, and many were preventable. The FDA was also authorizing new monoclonal antibody treatments and antiviral therapies that could help reduce the serious health impacts of COVID-19 infection, but timely access to treatment for high-risk people remained very limited by strict time criteria for starting therapy, the availability of doses, and the limited number of providers. Vaccination was the very best option for protection.

In addition to the new vaccination efforts, the Public Health response measures initiated in 2020 continued and evolved in 2021 according to the emerging science of COVID-19, federal and state guidance or requirements, and community need. Our Skagit County Health Officer remained committed to keeping Skagit County consistent with pandemic control orders and guidance issued at the state level and did not issue county-level, Skagit-specific control orders. Response efforts continued to focus on providing technical assistance and support to schools, long-term care facilities, health care providers, employers, and community partners. We continued to attempt to

reach every newly diagnosed case within 24 hours to ensure that the case and their family had access to accurate information on isolation and quarantine and that their needs could be met during this time. We continued to offer safe, no-cost isolation/quarantine accommodation at a local hotel for those in need. We offered no-cost PCR testing at the Skagit County Fairgrounds into March and worked with Northwest Laboratory for their opening of an alternative testing site when the Fairgrounds space was needed to focus on mass vaccination. When the Delta variant caused a fourth wave of infection in late summer, we reopened the Skagit County Fairgrounds to offer both rapid antigen testing and vaccination. For the second year, Skagit County Department of Emergency Management served as the conduit for hundreds of orders of critical PPE for long-term care facilities and other community partners in need.

Midway through 2021, the Skagit County COVID-19 response shifted from a Unified Command structure to a Skagit County Public Health response structure. We adapted to provide a sustainable long-term response to a multi-year pandemic. During the latter half of 2021, we worked to return some public health employees who had been redirected to pandemic response for more than a year back to their core public health work duties while still maintaining a robust pandemic response. Our Public Health work force expanded significantly in size and diversity during 2021, and our new employees brought additional strength and experience to both our COVID-19 response and overall public health work.

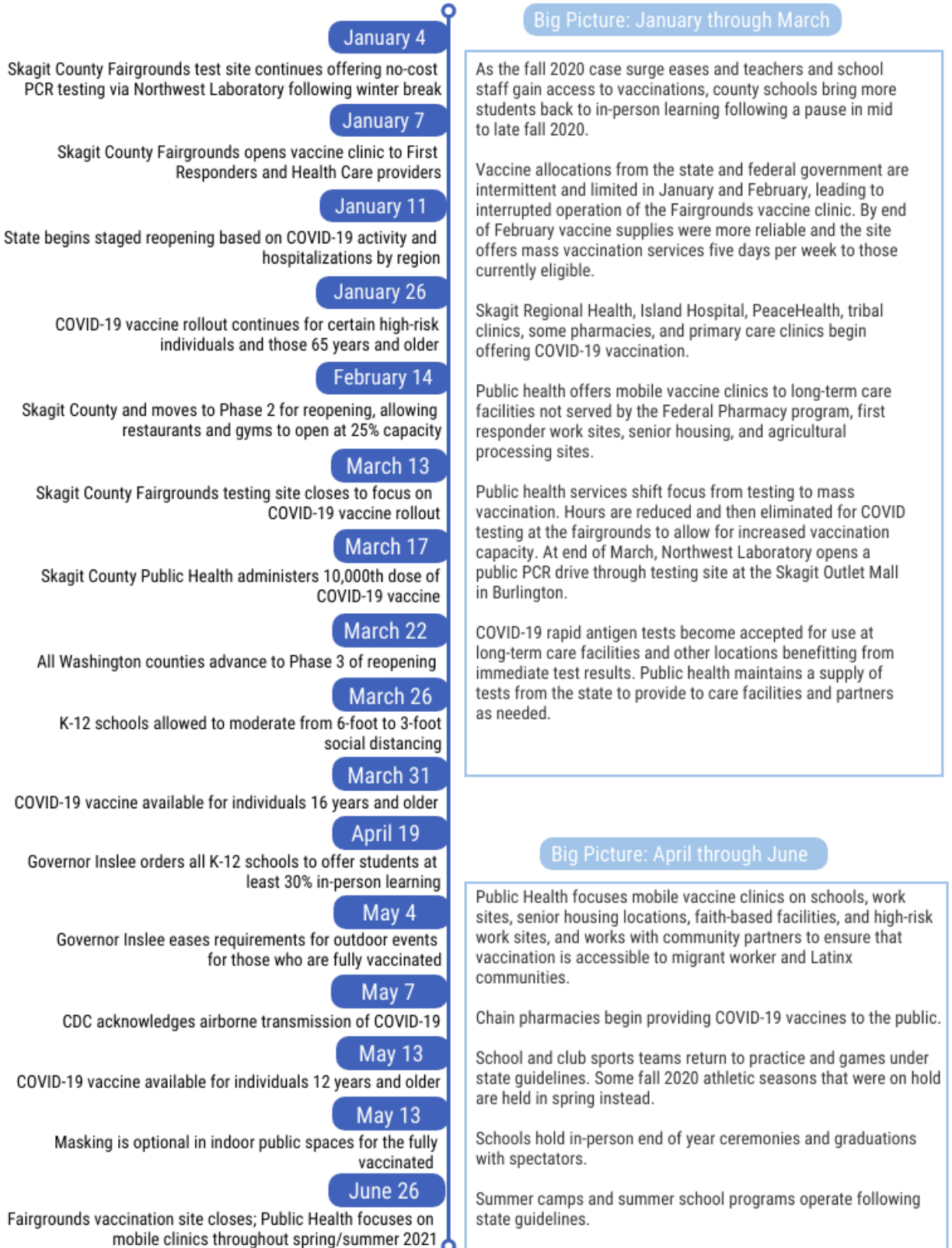
The second year of the pandemic continued to highlight the unequal impact of COVID-19 on our community members by race, ethnicity, and geography. Throughout 2021, we worked toward equitable access to COVID-19 services for all in Skagit County and to ensure our outreach, education, and services were appropriate for our culturally, linguistically, and geographically diverse community. We increased our communication efforts with a dedicated communications coordinator working with our multilingual community health workers to create internet, social media, advertising, and outreach content that could effectively reach all Skagit County residents. Equitable access to public health information, education, and services will remain a critical ongoing priority.

We hope you find the following timeline and data summaries informative and useful as we look toward pandemic recovery in Skagit County.

Timeline of COVID-19 Events

For a review of 2020 COVID-19 events, please read the 2020 COVID-19 report:

<https://www.skagitcounty.net/Departments/HealthDiseases/2020COVIDdatareport.htm>



Big Picture: July through September

July 15

First case of Delta variant identified in Skagit County

August 21

Statewide mask mandate expands to include those who are vaccinated

August 28 - September 8

K-12 Schools are open for full in-person learning and fall athletics operating under state requirements

August 30

Public Health reopens Skagit County Fairgrounds for COVID-19 rapid antigen testing and vaccination

September 29

Pfizer vaccine booster doses approved for those 65 years and older as well as those 18 years and older at increased risk

Public Health response efforts intensify again due to the rapid rise of the Delta variant.

Public Health reopens the fairgrounds to serve community testing and vaccination needs. Rapid antigen testing increases in use and popularity and is shown to provide accurate results.

Public Health case investigation team returns to staffing seven days per week in August after brief break from weekend work in July.

Schools experience COVID-19 outbreaks at the highest levels during the pandemic due to the Delta variant. School nurses and response teams work diligently to maintain safe in-person learning.

COVID at-home test kits become available to the public. Schools increasingly offer on-site testing to students and staff under the state Learn to Return Program.

The state and county COVID-19 response focuses on masking, testing, support for isolation and quarantine, case follow-up, outbreak investigation and control, and monoclonal antibody therapies for those eligible.

October 12

10,000 COVID-19 cases and 100 COVID-19-related deaths reported in Skagit County

October 15

Per state requirements, individuals 12 years and older who attend certain large events is required to show proof of COVID-19 vaccination or a negative test result

November 3

Pediatric COVID-19 vaccine available for kids age 5-11 years

December 9

Pfizer COVID-19 boosters are authorized for 16- and 17-year-olds

December 14

Public Health gives notice of an expected sharp increase in cases in the next 2 weeks due to the Omicron variant

December 16

First case of Omicron variant identified in Skagit County

December 20

The Say Yes! COVID Test at-home, free, rapid test kit program is available in Skagit County

December 27

The CDC shortens recommended COVID-19 isolation and quarantine period for the general population from 10 to 5 days

Big Picture: October through December

By October, hospitalizations and deaths have risen sharply due to the Delta variant, mainly in those that remained unvaccinated and those with waning immunity.

Public Health orders home test kits to distribute to vulnerable populations that will struggle to access testing. State encourages the use of home test kits and works to make them more available.

Most county K-12 schools or school districts offer on-site rapid antigen testing to students and staff.

Long-term care facilities start to ease out of serious Delta variant-caused outbreaks during November and are then faced with the impact of Omicron starting by end of December. Public Health and Department of Emergency Management continue to support facilities with testing supplies and PPE.

Public Health plans transition of all case investigation to Washington State Department of Health starting December 17 to allow additional staff to return to critical core public health work.

A steep rise in cases due to Omicron is evident by December 20.

Epidemiological data

A total of 10,791 cases of COVID-19 were reported in Skagit County in 2021 and occurred in three distinct waves: the original viral strain (January 2021 – August 2021), Delta variant (August 2021 – December 2021), and Omicron (December 2021 – February 2022). An increase in case rates occurred with each new variant (Figures 1, 2). This compares with a total of 3,399 cases diagnosed in Skagit County residents in 2020. The significant increase in cases during 2021 compared with 2020 was due to many factors. These included the State-directed easing of pandemic restrictions, the rapid spread of the highly transmissible Delta variant and the even more transmissible Omicron variant, and pandemic fatigue on the part of our community. At all levels of government came the acceptance that we would not be able to eliminate COVID-19 but would need to work to mitigate serious harm from the virus while keeping our society and economy functioning.

Figure 1. Reported COVID-19 cases – Skagit County, 2021

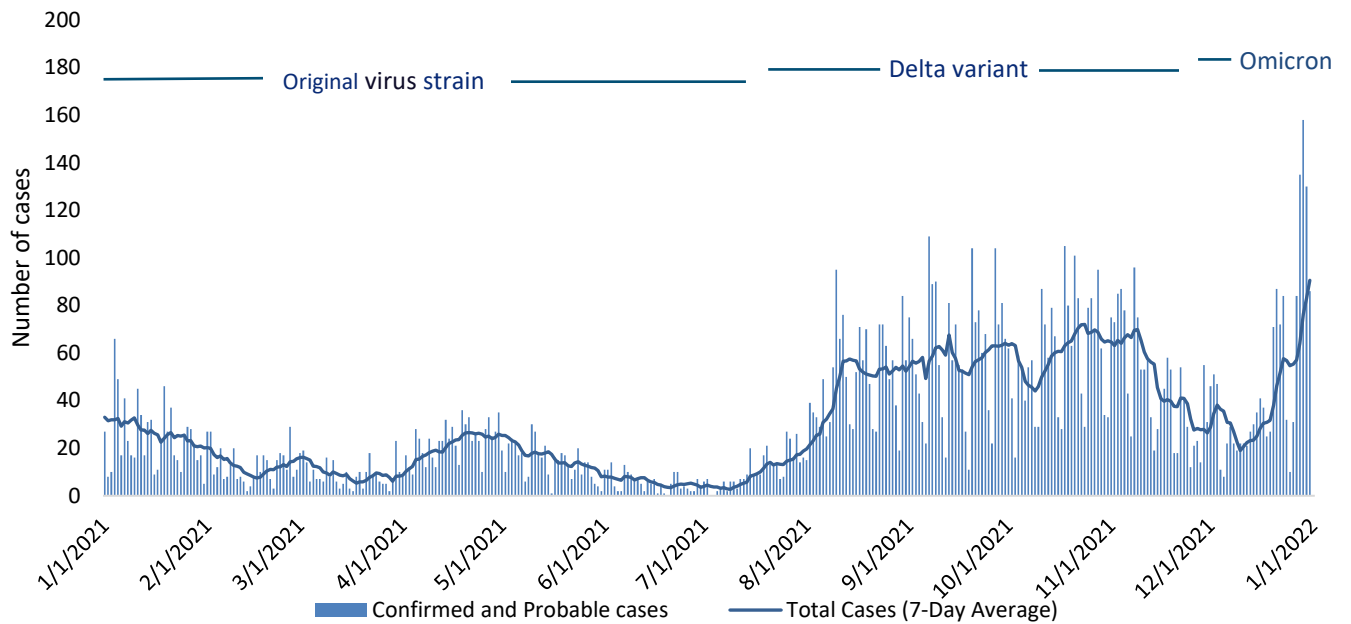
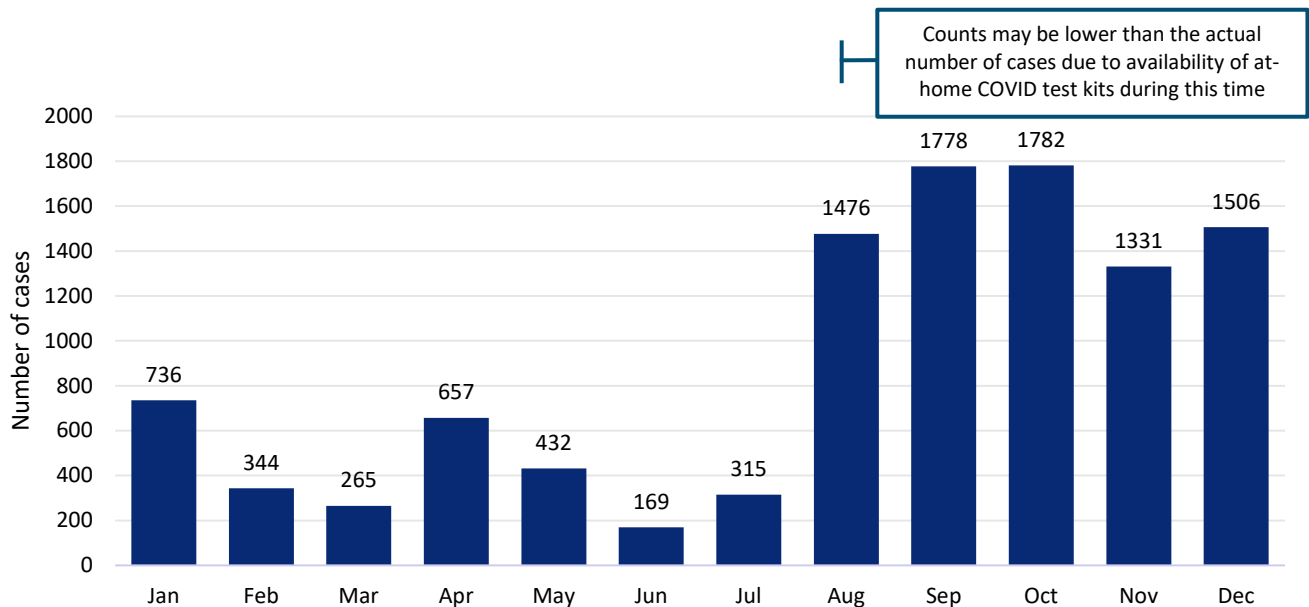


Figure 2. COVID-19 cases by month of diagnosis – Skagit County, 2021

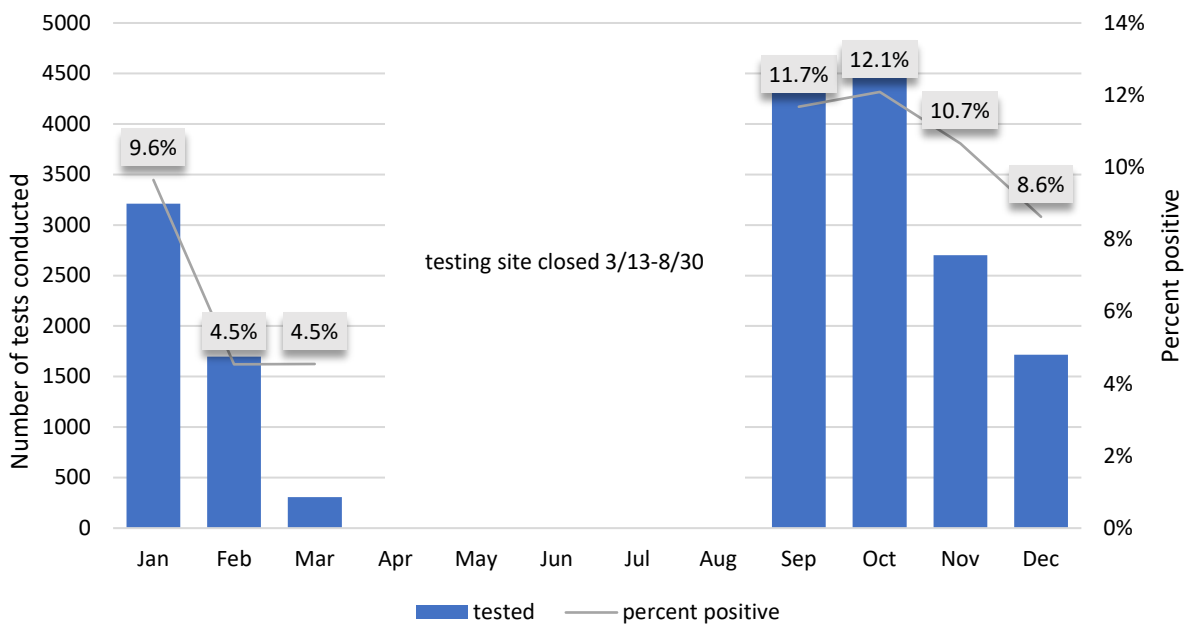


Testing and staff outreach

Skagit County’s COVID-19 test site opened in April of 2020 and was the longest continuously running low-barrier site in the state. Testing operations were halted between mid-March and late August 2021 so that Public Health could focus on vaccination efforts, then reinstated to meet community testing needs during the Delta and Omicron surges. While the test site was in operation in 2021, Public Health provided 19,214 PCR and rapid antigen tests (Figure 3). Positivity rates varied from 4.5% to 12.1%; however, this was site-specific. During the latter part of 2021, many used available home test kits, so the actual positivity rate in the county was likely higher.

Skagit County Public Health also provided testing support to community partners as requested. We maintained a supply of point-of-care rapid antigen test kits provided by the state through federal funding. We were able to provide these test kits to long-term care facilities, clinics, and community partners that were required or able to provide testing but often struggled to obtain testing supplies. At times, we dispatched Public Health teams to locations such as shelters or other congregate facilities to conduct rapid antigen testing when facilities were at risk of outbreaks. During 2021, many locations throughout the county were approved to be able to conduct their own rapid antigen testing, and this helped provide critical information to control outbreaks.

Figure 3. COVID-19 testing data and positivity rates – Skagit County Fairgrounds testing site, 2021



Case investigation and contact tracing

Throughout 2021, case follow-up and contact tracing remained one of several methods used to control the spread of COVID-19. The Public Health Investigations Team continued to follow a hybrid approach to case outreach that was initiated in November 2020. Investigators attempted to reach all newly diagnosed cases within 24 hours to ensure that the case and household’s needs were met, that cases had access to accurate information on isolation and quarantine, and to evaluate risk of outbreaks in high-risk settings. We relied on the Central Investigations Teams with Washington State Department of Health for detailed case and contact interviews and, during late December 2021, turned all case outreach over to state investigators.

While we maintained a very robust team of case investigators working seven days per week through most of 2021, we were unable to sustain the level of case investigation and contact tracing that we conducted through most of 2020. During the peak Delta and Omicron case surges in the fall of 2021 through winter of 2022, the state teams had to prioritize case outreach by risk level due to capacity issues. Congregate settings were impacted by outbreaks during the fall of 2021. K-12 school nurses and COVID response teams worked extremely hard during the fall of the school year to respond to COVID-19 cases within their facilities. State K-12 requirements specified that schools and districts conduct contact tracing for all potential exposures to infectious cases within their facilities and ensure that proper isolation and quarantine were followed. Requirements allowed close contacts who were fully vaccinated to continue to attend school, but more than half of the student population remained unvaccinated by lack of age eligibility or family choice through the fall of 2021. Hundreds of county students were impacted by isolation and quarantine during the fall of 2021.

Other congregate facility administrators at skilled nursing and assisted living facilities, hospitals, treatment centers, and shelters also responded robustly to cases within their facilities. Testing and contact tracing were conducted quickly by these facilities to try to limit the spread of disease. Delta and Omicron transmission was very challenging to control within congregate housing facilities because of the highly infectious nature of these variants. While we continued to monitor high risk settings and respond quickly to outbreaks, by late 2021, the national and state public health response for the public had shifted toward a long-term strategy that encouraged vaccination, testing, and safe behaviors over full case investigation and contact tracing.

In 2021, Public Health interviewed 82% of all reported cases, with 18% of cases lost to follow-up or refusing to be interviewed (Table 1). The percent of cases successfully interviewed decreased as the surge in cases continued in the fall and winter months. Public Health also assisted cases and their contacts to help limit transmission in households. In total, 312 individuals in need were provided temporary housing and meals in the isolation and quarantine hotel. Midway through 2021, our partners at the Northwest Accountable Communities of Health created a regional care coordination team and assisted our response by providing food and care kit support to cases and close contacts expressing need.

Table 1. Percent of COVID-19 cases that were interviewed by month – Skagit County, 2021

Month	Interviewed	Within 24 hours	Within 48 hours
January	93%	88%	91%
February	95%	88%	92%
March	92%	86%	89%
April	92%	85%	90%
May	93%	84%	90%
June	89%	80%	85%
July	84%	79%	80%
August	81%	70%	76%
September	81%	73%	79%
October	82%	73%	80%
November	78%	58%	71%
December*	59%	1%	37%
Total	82%	67%	73%

*Due to assistance with CICT in December, data was compiled from PUBLIC HEALTH and CREST (WA DOH).

Demographic distribution of cases

Distribution of cases varied in Skagit County, with the highest rates occurring in Burlington, Mount Vernon, and Sedro-Woolley (Table 2). These communities along the I-5 corridor were consistently the first impacted by case surges that started in large counties to the south.

Table 2. COVID-19 Cases, by Geography of Residence – Skagit County, 2021

City	Case count	Population	Overall Rate per 100,000
Anacortes	1,205	20,429	5,899
Bow	286	3,920	7,296
Burlington	1,704	14,871	11,459
Concrete*	427	4,699	9,087
La Conner	300	4,134	7,257
Mount Vernon*	4,387	45,518	9,638
Sedro-Woolley*	2,473	26,781	9,234
Total	10,782	120,352	8,959

*Nine cases were missing specific geography. Due to small numbers, some geographies are combined. Sedro Woolley data include Hamilton & Lyman. Mount Vernon data include Clearlake & Conway. Concrete data include Marblemount & Rockport. Population estimates from the American Community Survey 2019 5-year estimates.

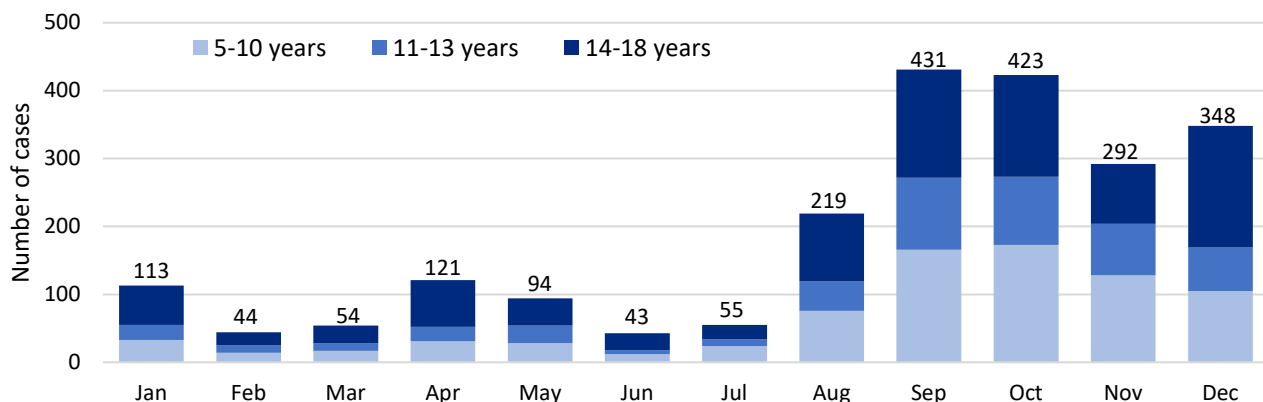
As in 2020, COVID-19 did not affect the Skagit County community equally. Those older than 60 years of age accounted for more than half of all hospitalizations and 75% of all COVID-19 deaths but only 16% of reported cases (Table 3).

Table 3. COVID-19 Cases, Hospitalizations and Deaths, by age – Skagit County, 2021

Age	Cases		Hospitalizations		Deaths	
	Count	Percent	Count	Percent	Count	Percent
0-19	2,849	27%	24	4%	1	1%
20-39	3,693	34%	98	16%	6	6%
40-59	2,589	24%	172	28%	20	18%
60-79	1,380	13%	232	38%	46	42%
80+	280	3%	86	14%	36	33%
Total	10,791	100%	612	100%	109	100%

COVID-19 case rates were highest in the 0-19- and 20-39-year age groups, and the number of school-aged cases climbed in the fall when schools resumed full in-person instruction (Figure 4).

Figure 4. School-aged COVID-19 cases by age group and month – Skagit County, 2021



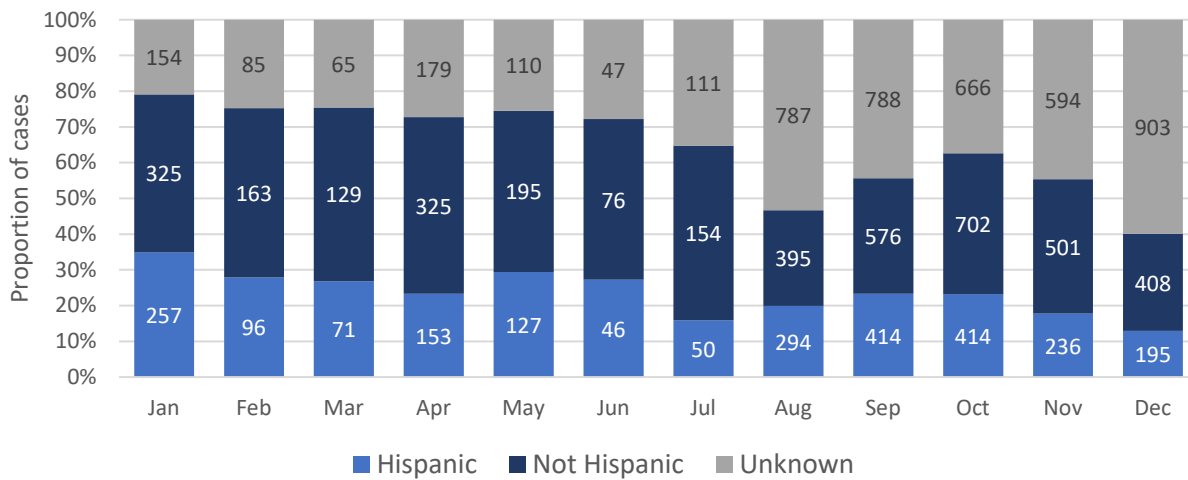
From the available data, unequal impact from COVID-19 among different ethnic and racial groups in Skagit County continued in 2021. People identifying as Hispanic or as a race other than white or Asian had higher burdens of disease and hospitalizations. The COVID-19 case rate for the Native Hawaiian/Pacific Islander community was nearly six times that of the white non-Hispanic rate. Rates for the American Indian/Alaska Native community were approximately 2.7 times higher than the white non-Hispanic rate. In addition, those who identified as Hispanic had 1.7 times the number of cases compared to white non-Hispanic residents (Table 5). During the Delta and Omicron surges, the reporting of race and ethnicity information decreased, and complete data was missing for more than 40% of the cases in 2021 (Table 5, Figure 5).

Table 5. COVID-19 case and hospitalization rates per 100,000 population by race and ethnicity – Skagit County, 2021

Race/Ethnicity*	Estimated Population	Case rate per 100,000	Hospitalization rate per 100,000
Native Hawaiian/Pacific Islander, non-Hispanic	186	32,795.7	537.6
Other race, non-Hispanic	351	29,629.6	1,709.4
American Indian/Alaska Native, non-Hispanic	2,042	13,418.2	489.7
Black, non-Hispanic	809	13,102.6	1,236.1
Hispanic, all races	23,730	9,915.7	434.0
White, non-Hispanic	93,874	5,707.7	419.7
Asian, non-Hispanic	2,252	5,328.6	177.6

*2566 cases were missing information on race and 4489 were missing ethnicity. Population estimates from the American Community Survey 2019 5-year estimates.

Figure 5. COVID-19 cases by ethnicity and month of diagnosis - Skagit County, 2021



Outbreaks

COVID-19 outbreak criteria are established by Washington State Department of Health and can vary by setting. A single case in a resident of a long-term care facility triggered outbreak status in 2021, but in other settings, outbreak reporting was triggered by two or more cases linked in transmission by time and place. In 2021, Public Health investigated and reported 142 COVID-19 outbreaks to the state Department of Health. Collectively these outbreaks involved 926 cases, 32 hospitalizations, and 16 deaths. The most common outbreak settings were long-term care facilities (N=25) which include nursing homes, assisted living, memory care, and adult family homes;

schools (N=23); and retail businesses (N=17) [Figures 6, 7]. The number of identified outbreaks does not include cases where transmission occurred within households, families, or private gatherings. In addition, it is likely that most outbreaks were undefined when community transmission levels were so high that cases had multiple possible transmission sources.

Figure 6. COVID-19 Outbreaks by setting – Skagit County, 2021

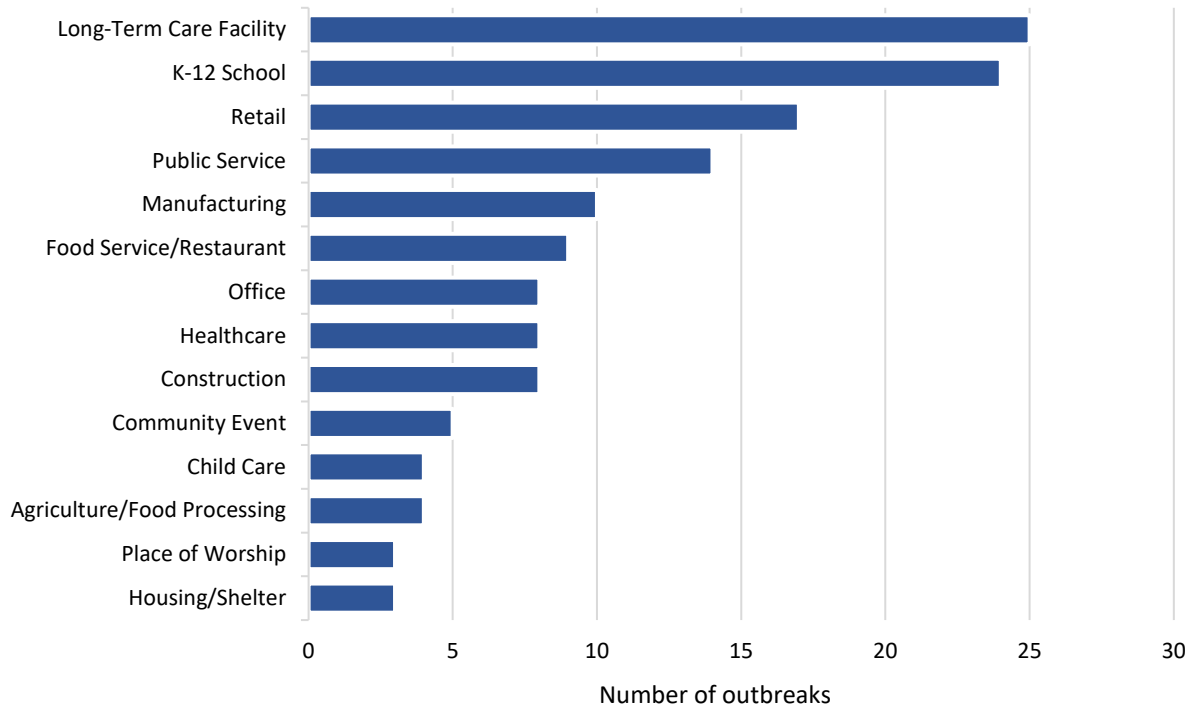
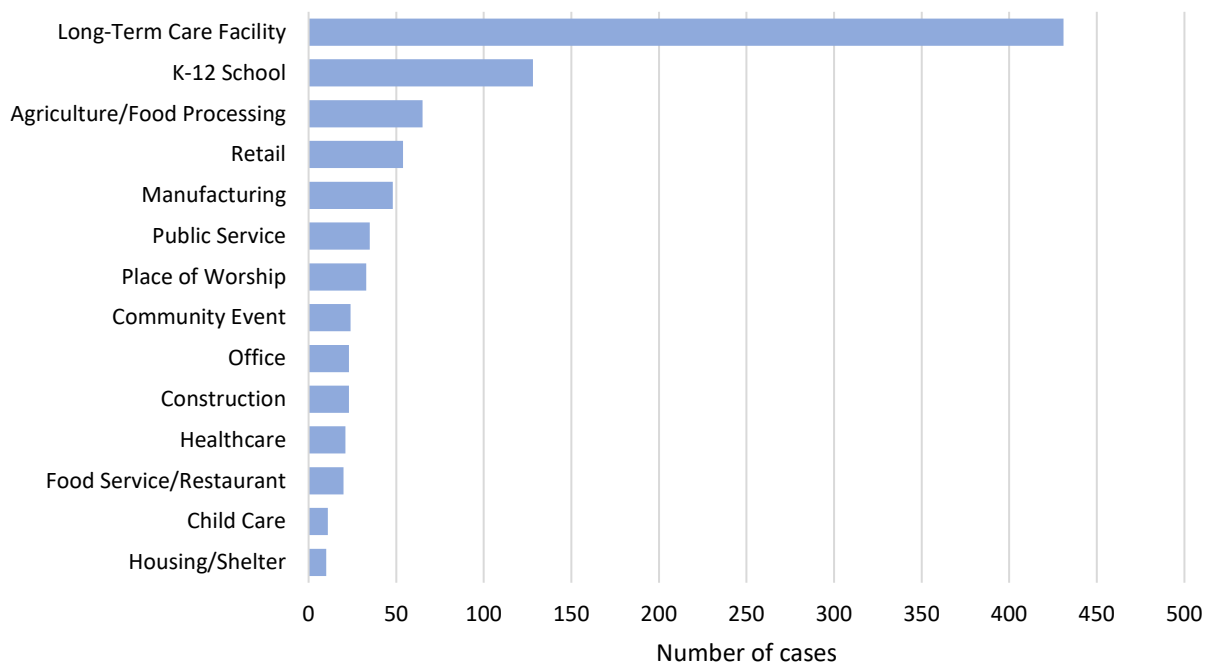


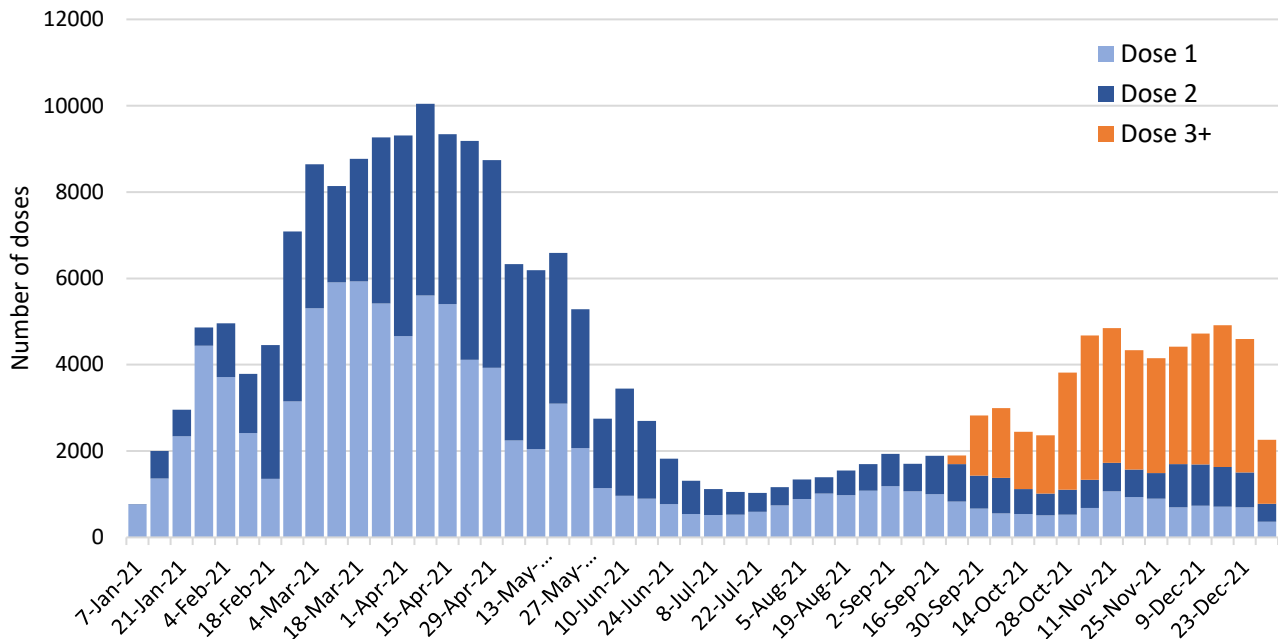
Figure 7. COVID-19 Outbreak-associated cases by setting – Skagit County, 2021



Vaccination

The first COVID-19 vaccinations in Skagit County occurred in December of 2020 and were initially available to front-line healthcare workers and first responders. The vaccine rollout continued through 2021 and, by the end of the year, included residents aged five years and older as well as recommendations for a third dose for immunocompromised people and booster doses for those 12 years and older who met the time criteria from their primary doses (Figure 8).

Figure 8. First, second, and third COVID-19 doses administered -- Skagit County, 2021



In 2021, 99,651 first doses and 86,228 second doses were administered to eligible Skagit County residents. Most vaccine doses were administered during the spring. Once booster doses were approved in September of 2021, an additional 35,666 doses were given to those aged 12 years and older.

As the largest vaccine provider in Skagit County, Skagit County Public Health employees and volunteers administered 41,812 total doses of COVID-19 vaccine to eligible individuals in 2021. We served the community by providing a low-barrier, no-cost, bilingual drive-through vaccine site at the Skagit County Fairgrounds and offered mobile vaccine services to meet community need.

Most of the vaccine doses provided by Public Health were administered at the Skagit County Fairgrounds, but in 2021, Public Health also conducted 148 mobile vaccine clinics at 74 different locations across the county. When the Fairgrounds vaccine site was closed during the summer of 2021, the Public Health Vaccine Team went completely mobile, sometimes offering clinics in 3 different locations around the county in a single day in their effort to reach people across all communities.

In addition, Public Health vaccinators conducted home visits for homebound residents. Homebound vaccinators worked more than 51 days in the summer and fall of 2021 to reach homebound residents who requested vaccination assistance.

Public Health also provided support to state-contracted mobile vaccine teams working in our region and served as a regional vaccine depot to store larger quantities of vaccine and transfer right-sized amounts to providers.

In addition to providing vaccine, Public Health volunteers and staff operated a vaccine call center through the winter and spring of 2021, providing bilingual and trilingual assistance to community members who had questions regarding vaccination or who needed assistance with registering for vaccine appointments. Public Health continued to offer bilingual and trilingual education and outreach throughout the year, linking eligible community members to no-cost COVID-19 vaccines.

Public Health was one of many vaccine providers in Skagit County. We recognize the incredible contributions of our partner vaccine clinics, including Skagit Regional Health, Island Hospital, Peace Health United General, Sea Mar, Skagit Family Health, Family Care Network, Schaffner Pharmacy, La Conner Drug, Hilltop Pharmacy, Skagit Pediatrics, Swinomish Medical Clinic, didg^wálič Wellness Center, Upper Skagit Tribal Clinic, Valley Roots Family Care, Creelman Family Practice, Birds Eye Medical, and the federal pharmacy program providers including Costco, Haggen, Rite Aid, Safeway, Walgreens, and Walmart. Our mobile clinics were also the result of community partnerships with the 74 locations around the county that welcomed our mobile vaccine teams. COVID-19 vaccination was indeed a massive community effort in 2021!

Summary

We will remember 2021 as a year of incredible community service on the part of hundreds of Public Health volunteers and community members, all working together to help Skagit County survive and recover during an increasingly challenging pandemic. We grieved together as ever more infectious strains of the virus impacted our community members, and we celebrated together as human ingenuity and scientific discovery provided additional tools to help prevent serious illness and death from COVID-19. We ended 2021 amid the most significant case surge in the pandemic caused by the Omicron variant and yet still we witnessed community service, hope, and resilience moving forward into our third year of pandemic response. Thank you, Skagit County, for your support.

Resources

Skagit County COVID-19 information: www.skagitcounty.net/coronavirus

Washington Department of Health (WA DOH) COVID-19 information: https://coronavirus.wa.gov/?gclid=Cj0KCQjwxtSSBhDYARIsAEn0thRHI73aedKt565J-lwQgqolzlk_t85LVhUHCbeRm1bnNi-EJfpFxGcaAmVXEALw_wcB

WA DOH COVID-19 Data Dashboard: <https://doh.wa.gov/emergencies/covid-19/data-dashboard>

WA DOH COVID-19 School and Child Care Guidance: <https://doh.wa.gov/sites/default/files/2022-03/821-165-K12SchoolsChildCare.pdf>

CDC COVID-19 information: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

CDC COVID-19 Data Tracker: <https://covid.cdc.gov/covid-data-tracker/#datatracker-home>

If you have questions or need additional information about the data presented in this report, please contact the Health Department at communicabledisease@co.skagit.wa.us or at 360-416-1500.