

# **Epidemiologic Summary**

### COVID-19 in Ontario: January 15, 2020 to May 10, 2020

This report includes the most current information available from the integrated Public Health Information System (iPHIS) as of **4 p.m. May 10, 2020,** from the Toronto Public Health Coronavirus Rapid Entry System (CORES) and the Ottawa Public Health COVID-19 Ottawa Database (The COD) as of **2 p.m. May 10, 2020.** 

Please vist the interactive <u>Ontario COVID-19 Data Tool</u> to explore recent COVID-19 data by public health unit, age group, sex, and view trends over time.

#### Purpose

• This daily report provides an epidemiologic summary of COVID-19 activity in Ontario to date.

## Highlights

- There are 20,546 confirmed cases of COVID-19 in Ontario reported to date. This represents an increase of 308 confirmed cases from the previous report.
  - 41.9% of cases are male, 57.3% are female.
  - 43.1% of cases are 60 years of age and older.
  - Greater Toronto Area public health units account for 61.8% of cases.
  - 12.5% of cases were hospitalized.
- 1,669 deaths have been reported (please note there may be a reporting delay for deaths). This is an increase of 35 deaths from the previous report.
- 245 outbreaks have been reported in long-term care homes. This is an increase of 6 outbreaks from the previous report.

# **Case Characteristics**

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	Number	Percentage
Number of cases <sup>1</sup>	20,546	N/A
Change from previous report	308	1.5% increase
Gender: Male	8,615	41.9
Gender: Female	11,768	57.3
Ages: 19 and under	538	2.6
Ages: 20-39	4,857	23.6
Ages: 40-59	6,287	30.6
Ages: 60-79	4,411	21.5
Ages: 80 and over	4,439	21.6
Number of cases in health care workers	3,407	16.6

<sup>1</sup> Cases and rates by public health units are provided in <u>Appendix A</u>.

**Note:** 163 cases did not specify male or female. 14 cases had an unknown age.

#### Time

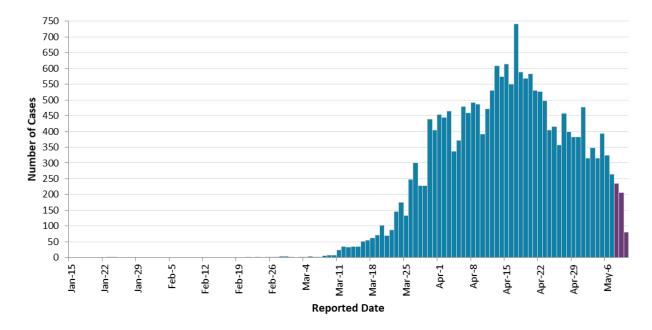


Figure 1. Confirmed cases (n=20,546) of COVID-19 by reported date: Ontario, January 15, 2020 to May 10, 2020<sup>1</sup>

<sup>1</sup> Interpret case counts for the most recent days (approximately 3 days, as shown in purple) with caution due to reporting lags.

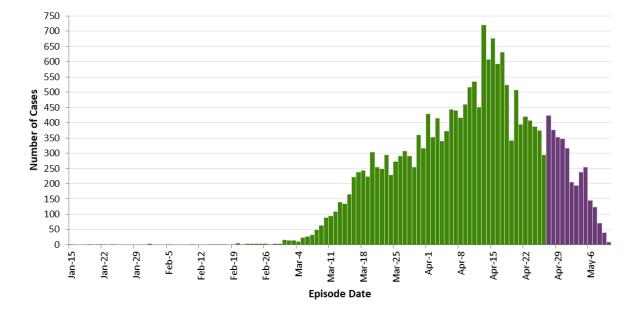
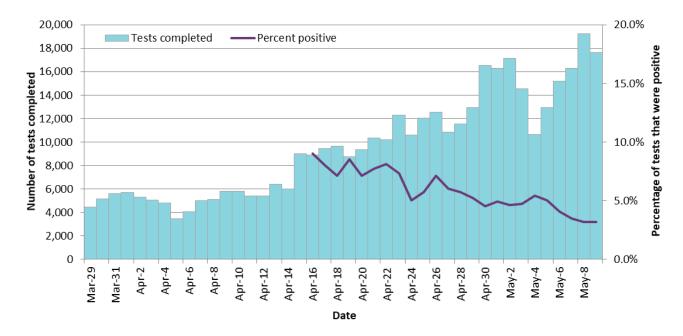


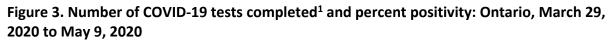
Figure 2. Confirmed cases (n=20,544<sup>1</sup>) of COVID-19 by an approximation of symptom onset date<sup>2</sup>: Ontario, January 15, 2020 to May 10, 2020<sup>3</sup>

<sup>1</sup> This count excludes 2 cases that did not have an episode date.

<sup>2</sup> This date, referred to as episode date, is intended to approximate symptom onset date. It is calculated based on either the date of symptom onset, specimen collection/test date, or the date reported to public health.

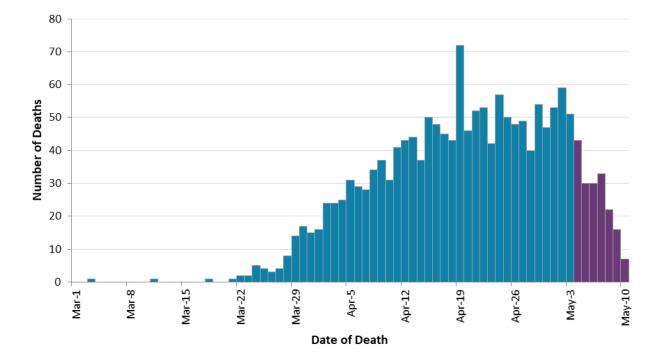
<sup>3</sup> Interpret case counts for the most recent days (approximately 14 days, as shown in purple) with caution due to reporting lags.





<sup>1</sup>The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive.

**Data Source:** The Provincial COVID-19 Diagnostics Network, data reported by member microbiology laboratories.





<sup>1</sup>This count excludes 7 cases that did not have a date of death reported.

<sup>2</sup> Interpret case counts for the most recent days (approximately 7 days, as shown in purple) with caution due to reporting lags.

#### Exposure

Table 2. Confirmed cases (n=20,546) of COVID-19 by exposure type: Ontario, January 15, 2020 to May 10, 2020

	Number	Percentage
Travel <sup>1</sup>	1,449	7.1
Close contact of a confirmed case	4,616	22.5
Community transmission	7,428	36.2
Information pending	7,053	34.3

<sup>1</sup>Travel within the 14 days prior to becoming ill.

### Severity

# Table 3. Confirmed cases (n=20,546) of COVID-19 by severity: Ontario, January 15, 2020 to May 10, 2020

	Number	Percentage
Cumulative deaths reported (please note there may be a reporting delay for deaths in iPHIS)	1,669	8.1
Change from previous report	35	2.1% increase
Deaths reported in ages: 19 and under	0	0.0
Deaths reported in ages: 20-39	7	0.1
Deaths reported in ages: 40-59	71	1.1
Deaths reported in ages: 60-79	417	9.5
Deaths reported in ages: 80 and over	1,174	26.4
Cumulative intensive care <sup>1</sup>	589	2.9
Cumulative hospitalized <sup>1</sup>	2,562	12.5
Number of resolved <sup>2</sup> cases	15,131	73.6

<sup>1</sup> These refer to all hospitalized or ICU admitted cases, not cases that are currently hospitalized or in ICU.

<sup>2</sup> Cases that are 14 days past symptom onset (if available) or 14 days past the episode date are classified as resolved for non-fatal cases that are not currently listed as hospitalized. Cases are also classified as resolved if the case is reported as "recovered" in iPHIS.

### Geography

Figure 5. Confirmed cases (n=20,546) of COVID-19 by public health unit: Ontario, January 15, 2020 to May 10, 2020

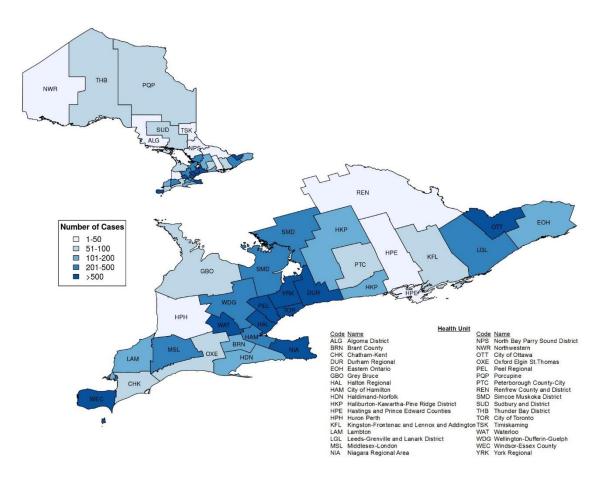
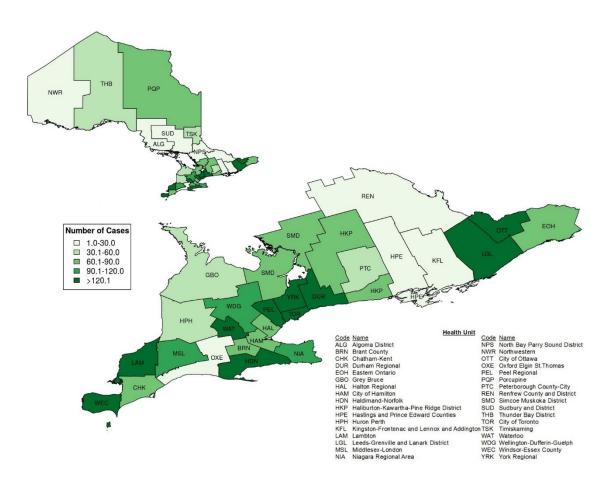


Figure 6. Rate of confirmed cases of COVID-19 by public health unit: Ontario, January 15, 2020 to May 10, 2020



# **Outbreaks in Institutions and Public Hospitals**

Table 4. Confirmed COVID-19 outbreaks reported in long-term care homes, retirement homesand hospitals and total number of associated cases: Ontario, January 15, 2020 to May 10,2020

Indicator	Long-Term Care Homes	Retirement Homes	Hospitals
Cumulative number of confirmed COVID-19 outbreaks	245	95	73
Total number of cases <sup>1,2,3</sup> reported as part of the confirmed COVID-19 outbreaks	4,430	817	597
Cases reported among residents/patients	2,895	524	286
Cases reported among staff	1,530	293	304
Total number of deaths <sup>1,2,3</sup> reported as part of the confirmed COVID-19 outbreaks	797	104	50
Deaths reported among residents/patients	796	104	50
Deaths reported among staff	2	0	0

<sup>1</sup> Includes all outbreak-related cases and deaths reported in aggregate outbreak summary counts, regardless of whether the case was laboratory confirmed (deaths among non-laboratory confirmed cases reported here are not included in Table 3).

<sup>2</sup> May include cases and deaths other than residents/patients or staff, such as volunteers. As a result, the total number of cases and deaths may be greater than the number of cases and deaths reported in residents or staff.

<sup>3</sup> Counts may fluctuate from previous reports due to updates made by health units as additional information about the outbreak is reported.

Data Source: integrated Public Health Information System (iPHIS) database.

# **Technical Notes**

#### **Data Sources**

- The data for this report were based on:
  - Information extracted from the Ontario Ministry of Health (MOH) integrated Public Health Information System (iPHIS) database, as of **May 10, 2020 at 4 p.m.**
  - Information successfully uploaded to the Ministry from Local Systems: the Toronto Public Health (Coronavirus Rapid Entry System) CORES and The Ottawa Public Health COVID-19 Ottawa Database (The COD), as of May 10, 2020 at 2 p.m.
- iPHIS, CORES and The COD are dynamic disease reporting systems, which allows ongoing updates to data previously entered. As a result, data extracted from iPHIS and the Local Systems represent a snapshot at the time of extraction and may differ from previous or subsequent reports.
- Ontario population projection data for 2020 were sourced from Ontario Ministry of Health, IntelliHEALTH Ontario. Data were extracted on November 26, 2019.
- COVID-19 test data were based on information from The Provincial COVID-19 Diagnostics Network, reported by member microbiology laboratories.

#### Data Caveats:

- The data only represent cases reported to public health and recorded in iPHIS and the Local Systems (e.g., CORES, The COD). As a result, all counts will be subject to varying degrees of underreporting due to a variety of factors, such as disease awareness and medical care seeking behaviours, which may depend on severity of illness, clinical practice, changes in laboratory testing, and reporting behaviours.
- Lags in iPHIS and Local Systems data entry due to reduced holiday and weekend staffing may result in lower case counts than would otherwise be recorded.
- Only cases meeting the confirmed case classification as listed in the MOH <u>COVID-19 case</u> <u>definition</u> are included in the report counts from iPHIS the Local Systems.
- Case episode date is based on an estimate of the best date of disease onset. This date is calculated based on either the date of symptom onset, specimen collection/test date, or the date reported to public health.
- Orientation of case counts by geography is based on the diagnosing health unit (DHU). DHU refers to the case's public health unit of residence at the time of illness onset and not necessarily the location of exposure. Cases for which the DHU was reported as MOH (to signify a case that is not a resident of Ontario) have been excluded from the analyses.
  - GTA health units include: Durham Region Health Department, Peel Public Health, Toronto Public Health and York Region Public Health

- Exposure type is determined by examining the exposure and risk factor fields from iPHIS to determine whether a case travelled, was a contact of a case or neither. A hierarchy has been applied as follows: Travel-related > Close contact of a confirmed case > Community transmission > Information pending.
- Exposure type is determined from Local Systems by examining the risk factor fields from Local Systems to determine whether a case travelled, was a contact of a case or neither. A hierarchy has been applied as follows: Travel-related > Close contact of a confirmed case > Community transmission > Information pending
- Deaths are determined by using the outcome field in iPHIS or Local Systems. Any case marked 'Fatal' is included in the deaths data. Deaths are included whether or not COVID-19 was determined to be a contributing or underlying cause of death as indicated in the iPHIS field Type of Death.
  - The date of death is determined using the outcome date field for cases marked as 'Fatal' in the outcome field.
- iPHIS cases for which the Disposition Status was reported as ENTERED IN ERROR, DOES NOT MEET DEFINITION, DUPLICATE-DO NOT USE, or any variation on these values have been excluded.
- To provide a measure of the impact of COVID-19 on long-term care homes and hospitals, the number of outbreaks and the associated cases are reported. To obtain the case and deaths data for these outbreaks, the aggregate counts recorded by public health units in the outbreak's summary counts section of iPHIS is used. This information is presented in table 4.
  - Previously only a select number of persons in institutional outbreaks would be tested for COVID-19, and there could still be circumstances where not all individuals end up being tested (e.g., the person dies before they can be tested).
  - These counts may not be updated as frequently as the information for laboratory-confirmed cases.
  - The information in the aggregate counts can not necessarily be reconciled with the laboratory-confirmed case data.

# Appendix A

Table 1. Confirmed cases (n=20,546) of COVID-19 by public health unit: Ontario, January 15,2020 to May 10, 2020

Public Health Unit Name	Cases	Rate per 100,000 population
Northwestern Health Unit	15	17.1
Thunder Bay District Health Unit	80	53.3
TOTAL NORTH WEST	95	40.0
Algoma Public Health	16	14.0
North Bay Parry Sound District Health Unit	18	13.9
Porcupine Health Unit	64	76.7
Public Health Sudbury & Districts	59	29.6
Timiskaming Health Unit	18	55.1
TOTAL NORTH EAST	175	31.3
Ottawa Public Health	1,671	158.4
Eastern Ontario Health Unit	131	62.8
Hastings Prince Edward Public Health	42	24.9
Kingston, Frontenac and Lennox & Addington Public Health	60	28.2
Leeds, Grenville & Lanark District Health Unit	324	187.1
Renfrew County and District Health Unit	18	16.6
TOTAL EASTERN	2,246	116.6
Durham Region Health Department	1,155	162.1
Haliburton, Kawartha, Pine Ridge District Health Unit	157	83.1
Peel Public Health	2,919	181.8

Public Health Unit Name	Cases	Rate per 100,000 population
Peterborough Public Health	73	49.3
Simcoe Muskoka District Health Unit	372	62.0
York Region Public Health	1,852	151.1
TOTAL CENTRAL EAST	6,528	145.7
Toronto Public Health	6,768	216.9
TOTAL TORONTO	6,768	216.9
Chatham-Kent Public Health	90	84.7
Grey Bruce Health Unit	84	49.4
Huron Perth Public Health	50	35.8
Lambton Public Health	200	152.7
Middlesex-London Health Unit	461	90.8
Southwestern Public Health	61	28.8
Windsor-Essex County Health Unit	719	169.2
TOTAL SOUTH WEST	1,665	98.5
Brant County Health Unit	108	69.6
City of Hamilton Public Health Services	480	81.1
Haldimand-Norfolk Health Unit	194	170.1
Halton Region Public Health	516	83.3
Niagara Region Public Health	557	117.9
Region of Waterloo Public Health and Emergency Services	890	152.3
Wellington-Dufferin-Guelph Public Health	324	103.9
TOTAL CENTRAL WEST	3,069	107.7
TOTAL ONTARIO	20,546	138.2

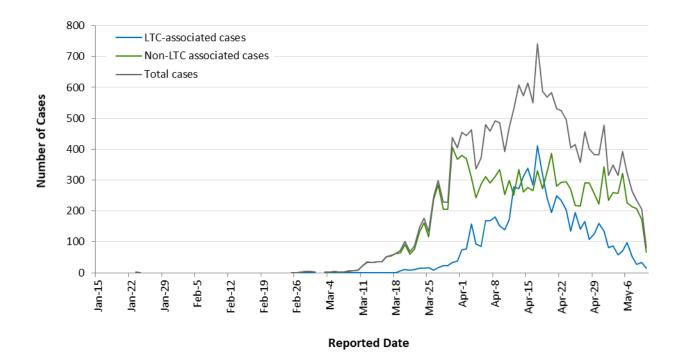
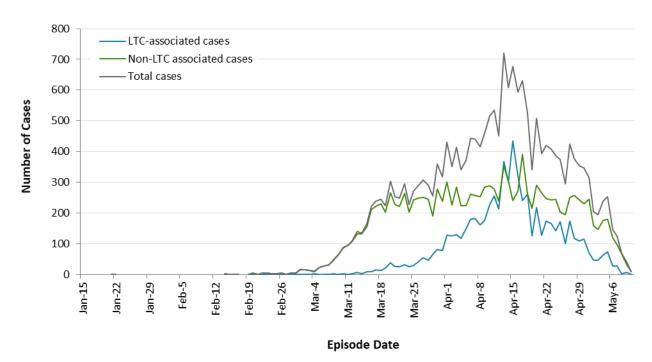


Figure 1. Confirmed cases (n=20,546) of COVID-19 by reported date and association with long-term care homes (LTC)<sup>1</sup>: Ontario, January 15, 2020 to May 10, 2020<sup>2</sup>

<sup>1</sup> LTC associated cases includes those that reported 'yes' to the risk factor 'Resident of nursing home or other chronic care facility' or were included in an outbreak in a long-term care home (may be residents or staff). Non-LTC associated cases includes those who did not meet the conditions above.

<sup>2</sup> Interpret case counts for the most recent days (approximately 3 days) with caution due to reporting lags.

Figure 2. Confirmed cases (n=20,544<sup>1</sup>) of COVID-19 by an approximation of symptom onset date<sup>2</sup> and association with long-term care homes (LTC)<sup>3</sup>: Ontario, January 15, 2020 to May 10, 2020<sup>4</sup>



<sup>1</sup>This count excludes 2 cases that did not have an episode date

<sup>2</sup> This date, referred to as episode date, is intended to approximate symptom onset date. It is calculated based on either the date of symptom onset, specimen collection/test date, or the date reported to public health.

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<sup>4</sup> Interpret case counts for the most recent days (approximately 14 days) with caution due to reporting lags.

# Disclaimer

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## For Further Information

For more information, email <u>cd@oahpp.ca</u>.

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