

Daily Epidemiologic Summary

COVID-19 in Ontario: January 15, 2020 to November 3, 2020

This report includes the most current information available from CCM and other case management systems (CCM plus) as of **November 3, 2020**.

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

A weekly summary report is available with additional information to complement the daily report.

This **daily** report provides an epidemiologic summary of recent COVID-19 activity in Ontario. The change in cases is determined by taking the cumulative difference between the current day and the previous day.

Highlights

- There are a total of 79,692 confirmed cases of COVID-19 in Ontario reported to date.
- Compared to the previous day, this represents:
 - An increase of 987 confirmed cases (percent change of -6.0%)
 - An increase of 16 deaths (percent change of +14.3%)
 - An increase of 945 resolved cases (percent change of +12.9%)

In this document, the term 'change in cases' refers to cases publicly reported by the province for a given day. Data corrections or updates can result in case records being removed and or updated from past reports and may result in subset totals for updated case counts (i.e., age group, gender) differing from the overall updated case counts.

The term public health unit reported date in this document refers to the date local public health units were first notified of the case.

Case Characteristics

Table 1a. Summary of recent confirmed cases of COVID-19: Ontario

	Change in cases November 2	Change in cases November 3	Percentage change November 3 compared to November 2	Cumulative case count as of November 3
Total number of cases	1,050	987	-6.0%	79,692
Number of deaths	14	16	+14.3%	3,182
Number resolved	837	945	+12.9%	68,189

Note: The number of cases publicly reported by the province each day may not align with case counts reported to public health on a given day; public health unit reported date refers to the date local public health was first notified of the case.

Table 1b. Summary of recent confirmed cases of COVID-19 by age group and gender: Ontario

	Change in cases November 2	Change in cases November 3	Cumulative case count as of November 3
Gender: Male	551	504	38,434
Gender: Female	492	488	40,862
Ages: 19 and under	171	157	8,490
Ages: 20-39	360	322	28,806
Ages: 40-59	317	316	22,735
Ages: 60-79	153	133	11,898
Ages: 80 and over	50	59	7,753

Note: Not all cases have a reported age or gender reported. Data corrections or updates can result in case records being removed and or updated from past reports and may result in subset totals (i.e., age group, gender) differing from past publicly reported case counts.

Data Source: CCM plus

Table 2. Summary of recent confirmed cases of COVID-19 in school aged children by age group, August 30 to November 3, 2020: Ontario

	Change in cases November 2	Change in cases November 3	Cumulative case count from August 30 to November 3	
Ages: 4 to 8	24	18	1,009	
Ages: 9 to 13	54	45	1,335	
Ages: 14 to 17	48	38	1,387	

Note: Includes all confirmed cases of COVID-19 for specified ages, regardless of school attendance. Data corrections or updates can result in case records being removed and or updated from past reports and may result in subset totals (i.e., age group) differing from past publicly reported case counts.

Table 3. Summary of recent confirmed cases of COVID-19 in long-term care homes: Ontario

Long-term care home cases	Change in cases November 2	Change in cases November 3	Cumulative case count as of November 3
Residents	35	44	7,042
Health care workers	7	28	2,926
Deaths among residents	8	11	2,035
Deaths among health care workers	0	0	8

Note: Information on how long-term care home residents and health care workers are identified is available in the technical notes. Also, the change in cases in these categories may represent existing case records that have been updated.

Time

Figure 1. Confirmed cases of COVID-19 by likely acquisition and public health unit reported date: Ontario, January 15, 2020 to November 3, 2020

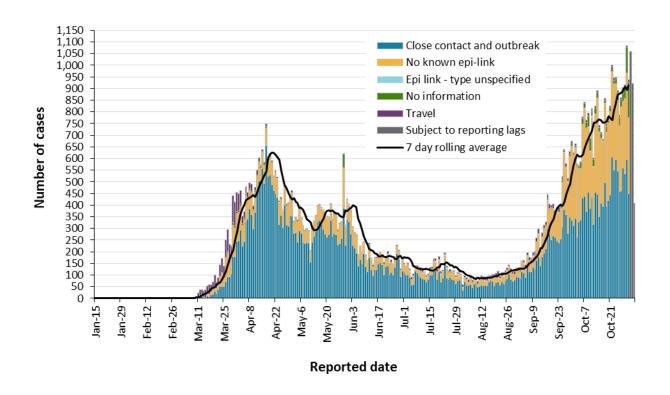
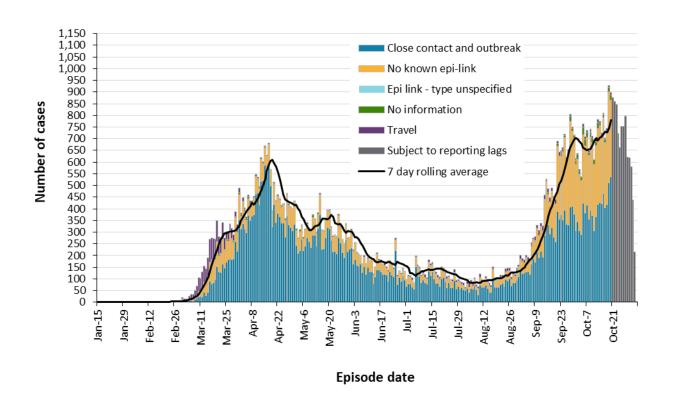
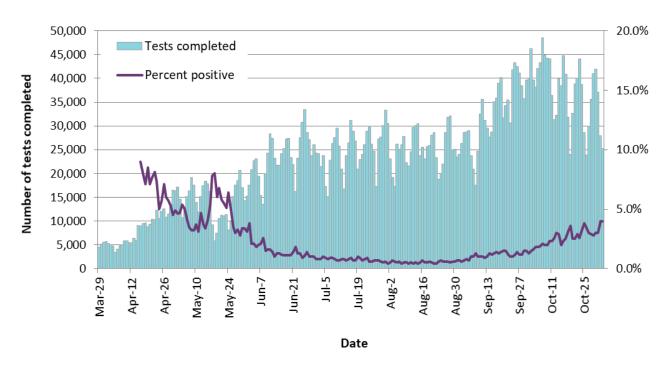


Figure 2. Confirmed cases of COVID-19 by likely acquisition and approximation of symptom onset date: Ontario, January 15, 2020 to November 3, 2020



Note: Not all cases may have an episode date and those without one are not included in the figure. Episode date is defined and available in the technical notes.

Figure 3. Number of COVID-19 tests completed and percent positivity: Ontario, March 29, 2020 to November 2, 2020

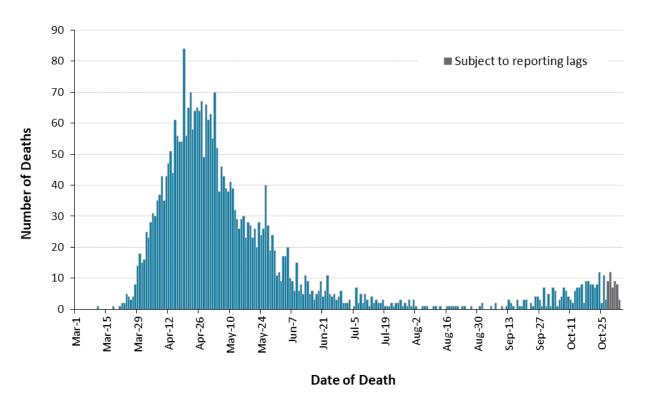


Note: The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive.

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

Severity

Figure 4. Confirmed deaths among COVID-19 cases by date of death: Ontario, March 1, 2020 to November 3, 2020



Note: Cases without a death date are not included in the figure.

Table 4. Confirmed cases of COVID-19 by severity: Ontario

	Cumulative case count as of November 3	Percentage of all cases
Cumulative deaths reported (please note there may be a reporting delay for deaths)	3,182	4.0%
Deaths reported in ages: 19 and under	1	0.0%
Deaths reported in ages: 20-39	11	0.0%
Deaths reported in ages: 40-59	132	0.6%
Deaths reported in ages: 60-79	852	7.2%
Deaths reported in ages: 80 and over	2,186	28.2%
Ever in ICU	1,253	1.6%
Ever hospitalized	6,126	7.7%

Note: Not all cases have an age reported. Data corrections or updates can result in case records being removed and/or updated and may result in totals differing from past publicly reported case counts.

Geography

Table 5. Summary of recent confirmed cases of COVID-19 by public health unit and region: Ontario

Public Health Unit Name	Change in cases November 2	Change in cases November 3	Cumulative case count	Cumulative rate per 100,000 population
Northwestern Health Unit	0	1	74	84.4
Thunder Bay District Health Unit	0	0	117	78.0
TOTAL NORTH WEST	0	1	191	80.4
Algoma Public Health	0	2	46	40.2
North Bay Parry Sound District Health Unit	0	0	45	34.7
Porcupine Health Unit	0	0	99	118.6
Public Health Sudbury & Districts	1	3	131	65.8
Timiskaming Health Unit	0	0	17	52.0
TOTAL NORTH EAST	1	5	338	60.4
Ottawa Public Health	34	48	7,271	689.4
Eastern Ontario Health Unit	11	2	637	305.2
Hastings Prince Edward Public Health	0	0	79	46.9
Kingston, Frontenac and Lennox & Addington Public Health	1	0	180	84.6
Leeds, Grenville & Lanark District Health Unit	0	0	453	261.6
Renfrew County and District Health Unit	3	0	110	101.3

Public Health Unit Name	Change in cases November 2	Change in cases November 3	Cumulative case count	Cumulative rate per 100,000 population
TOTAL EASTERN	49	50	8,730	453.2
Durham Region Health Department	57	62	3,170	445.0
Haliburton, Kawartha, Pine Ridge District Health Unit	1	1	257	136.0
Peel Public Health	212	299	14,855	925.0
Peterborough Public Health	0	2	152	102.7
Simcoe Muskoka District Health Unit	21	25	1,482	247.2
York Region Public Health	76	85	7,070	576.8
TOTAL CENTRAL EAST	367	474	26,986	602.3
Toronto Public Health	408	319	28,275	906.1
TOTAL TORONTO	408	319	28,275	906.1
Chatham-Kent Public Health	5	0	417	392.2
Grey Bruce Health Unit	0	1	170	100.1
Huron Perth Public Health	0	1	156	111.6
Lambton Public Health	0	0	372	284.0
Middlesex-London Health Unit	4	3	1,153	227.2
Southwestern Public Health	20	3	359	169.7
Windsor-Essex County Health Unit	4	3	2,861	673.4
TOTAL SOUTH WEST	33	11	5,488	324.6
Brant County Health Unit	10	1	374	241.0

Public Health Unit Name	Change in cases November 2	Change in cases November 3	Cumulative case count	Cumulative rate per 100,000 population
City of Hamilton Public Health Services	34	32	1,916	323.6
Haldimand-Norfolk Health Unit	0	6	538	471.6
Halton Region Public Health	86	47	2,205	356.2
Niagara Region Public Health	31	16	1,527	323.2
Region of Waterloo Public Health and Emergency Services	20	21	2,234	382.3
Wellington-Dufferin-Guelph Public Health	11	4	890	285.3
TOTAL CENTRAL WEST	192	127	9,684	339.9
TOTAL ONTARIO	1,050	987	79,692	536.1

Notes: Health units with data corrections or updates could result in records being removed from totals resulting in negative counts.

Outbreaks

Table 6. Summary of recent confirmed COVID-19 outbreaks reported in long-term care homes, retirement homes and hospitals by status: Ontario

Institution type	Change in outbreaks November 2	Change in outbreaks November 3	Number of ongoing outbreaks	Cumulative number of outbreaks reported
Long-term care homes	2	6	76	587
Retirement homes	4	7	57	290
Hospitals	1	2	19	130

Note: Ongoing outbreaks includes all outbreaks that are 'Open' in iPHIS without a 'Declared Over Date' recorded.

Data Source: iPHIS

Technical Notes

Data Sources

- The data for this report were based on:
 - Information extracted from the Ontario Ministry of Health (Ministry) integrated Public Health Information System (iPHIS) database for Toronto Public Health as of **November 3**, **2020 at 3 p.m.**
 - Information successfully uploaded to the Ministry from Local Systems: Toronto Public Health (Coronavirus Rapid Entry System) CORES, The Ottawa Public Health COVID-19 Ottawa Database (The COD) and Middlesex-London COVID-19 Case and Contact Management Tool (CCMtool) as of November 3, 2020 at 2 p.m.
 - Information successfully uploaded to the Ministry from the Public Health Case and Contact Management Solution (CCM) for all other PHUs as of **November 3, 2020 at 1 p.m.**
- CCM and CCM plus (which includes CCM, iPHIS, CORES, The COD and COVID-19 CCMtool) are
 dynamic disease reporting systems, which allow ongoing updates to data previously entered. As
 a result, data extracted from CCM 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 Ministry, IntelliHEALTH Ontario.
 Data were extracted on November 36, 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 units and recorded in CCM plus. 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 CCM plus data entry due to 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 CCM plus. This includes persons with a positive
 detection of serum/plasma immunoglobulin G (IgG) antibodies to SARS-CoV-2, which was added
 to the confirmed case definition on August 6, 2020.
- 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.

- Reported date is the date the case was reported to the public health unit.
- 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 the public health unit.
- Resolved cases are determined only for COVID-19 cases that have not died. Cases that have died are considered fatal and not resolved. The following cases are classified as resolved:
 - Cases that are reported as 'recovered' in CCM
 - Cases that are not hospitalized and are 14 days past their episode date
 - Cases that are currently hospitalized (no hospital end date entered) and have a status of 'closed' in CCM (indicating public health unit follow-up is complete) and are 14 days past their symptom onset date or specimen collection date
- Hospitalization includes all cases for which a hospital admission date was reported at the time of
 data extraction. It includes cases that have been discharged from hospital as well as cases that
 are currently hospitalized. Emergency room visits are not included in the number of reported
 hospitalizations.
- ICU admission includes all cases for which an ICU admission date was reported at the time of data extraction. It is a subset of the count of hospitalized cases. It includes cases that have been treated or that are currently being treated in an ICU.
- 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.
- Likely source of acquisition is determined by examining the epidemiologic link and epidemiologic link status fields in CCM and local systems. If no epidemiologic link is identified in those fields the risk factor fields are examined to determine whether a case travelled, was associated with an outbreak, was a contact of a case, had no known epidemiological link (sporadic community transmission) or was reported to have an unknown source/no information was reported. Some cases may have no information reported if the case is untraceable, was lost to follow-up or referred to FNIHB. Cases with multiple risk factors were assigned to a single likely acquisition source group which was determined hierarchically in the following order:
 - For cases with an episode date on or after April 1, 2020: Outbreak-associated > close contact of a confirmed case > travel > no known epidemiological link > information missing or unknown
 - For cases with an episode date before April 1, 2020: Travel > outbreak-associated > close contact of a confirmed case > no known epidemiological link > information missing or unknown

- Deaths are determined by using the outcome field in CCM plus. Any case marked 'Fatal' is included in the deaths data. The CCM field Type of Death is not used to further categorize the data.
 - The date of death is determined using the outcome date field for cases marked as 'Fatal' in the outcome field.
- CCM/iPHIS cases for which the Disposition Status was reported as ENTERED IN ERROR, DOES
 NOT MEET DEFINITION, DOES NOT MEET, IGNORE, DUPLICATE-DO NOT USE, or any variation on
 these values have been excluded. The provincial case count for COVID-19 includes cases that are
 counted once across all systems from which the case data are obtained. Duplicate records may
 exist if these records were not identified and resolved prior to data upload to the Ministry.
- Ongoing outbreaks are those that are reported in iPHIS as 'Open' without a 'Declared Over Date' recorded.
- 'Long-term care home residents' includes cases that reported 'Yes' to the risk factor 'Resident of a long-term care home'; or 'Yes' to the risk factor 'Resident of nursing home or other chronic care facility' and reported to be part of an outbreak assigned as a long-term care home (via the Outbreak number or case comments field); or were reported to be part of an outbreak assigned as a long-term care home (via the outbreak number or case comments field) with an age over 70 years and did not report 'No' to the risk factors 'Resident of long-term care home' or 'Resident of nursing home or other chronic care facility'. 'Long-term care home residents' excludes cases that reported 'Yes' to any of the health care worker occupational risk factors.
- The 'health care workers' variable includes cases that reported 'Yes' to any of the occupation of health care worker, doctor, nurse, dentist, dental hygienist, midwife, other medical technicians, personal support worker, respiratory therapist, first responder.
- 'Health care workers associated with long-term care outbreaks' includes 'health care workers'
 reported to be part of an outbreak assigned as a long-term care home (via the outbreak number
 or case comments field). Excludes cases that reported 'Yes' to risk factors 'Resident of long-term
 care home' or 'Resident of nursing home or other chronic care facility' and 'Yes' to the
 calculated 'health care workers' variable.
- Percent change is calculated by taking the difference between the current period (i.e., daily count or sum of the daily count over a 7-day period) and previous period (i.e., daily count or sum of the daily count over a 7-day period), divided by the previous period.

Appendix A

Table A1. Weekly rates of confirmed COVID-19 cases per 100,000 population over recent rolling 7-day periods, by reported date and public health unit: Ontario, October 19, 2020 to October 31, 2020

Public Health Unit Name	Oct 19 to 25	Oct 20 to 26	Oct 21 to 27	Oct 22 to 28	Oct 23 to 29	Oct 24 to 30	Oct 25 to 31	% change from Oct 19-25 to Oct 25-31
NORTH WEST								
Northwestern Health Unit	4.6	4.6	4.6	1.1	1.1	0.0	0.0	-100.0%
Thunder Bay District Health Unit	4.0	4.0	4.0	4.0	0.7	1.3	1.3	-67.5%
NORTH EAST								
Algoma Public Health	1.7	2.6	2.6	2.6	1.7	1.7	2.6	52.9%
North Bay Parry Sound District Health Unit	1.5	0.8	0.0	0.0	0.0	0.0	0.0	-100.0%
Porcupine Health Unit	4.8	4.8	4.8	4.8	6.0	6.0	4.8	0.0%
Public Health Sudbury & Districts	6.0	7.0	5.0	4.5	3.5	1.5	2.5	-58.3%
Timiskaming Health Unit	0.0	0.0	0.0	0.0	0.0	0.0	0.0	N/A
EASTERN								
Ottawa Public Health	47.5	47.9	49.3	51.7	49.5	52.2	54.1	13.9%
Eastern Ontario Health Unit	56.5	57.0	51.7	59.4	42.2	35.0	34.0	-39.8%
Hastings Prince Edward Public Health	5.3	5.3	4.2	3.0	3.0	2.4	2.4	-54.7%
Kingston, Frontenac and Lennox & Addington Public Health	4.2	3.3	4.2	3.3	2.8	2.8	2.4	-42.9%

Public Health Unit Name	Oct 19 to 25	Oct 20 to 26	Oct 21 to 27	Oct 22 to 28	Oct 23 to 29	Oct 24 to 30	Oct 25 to 31	% change from Oct 19-25 to Oct 25-31
Leeds, Grenville & Lanark District Health Unit	11.5	12.1	12.7	14.4	13.3	11.0	9.8	-14.8%
Renfrew County and District Health Unit	13.8	13.8	13.8	12.9	17.5	9.2	10.1	-26.8%
CENTRAL EAST								
Durham Region Health Department	38.3	37.1	37.2	35.7	30.9	30.6	28.4	-25.8%
Haliburton, Kawartha, Pine Ridge District Health Unit	1.6	2.1	2.1	2.1	2.6	2.1	2.1	31.3%
Peel Public Health	82.6	83.6	83.6	88.6	89.6	95.5	94.3	14.2%
Peterborough Public Health	6.1	6.8	6.8	4.1	5.4	5.4	6.1	0.0%
Simcoe Muskoka District Health Unit	19.8	19.3	19.7	20.7	21.7	23.5	24.0	21.2%
York Region Public Health	54.8	58.5	60.9	59.9	60.8	57.6	56.9	3.8%
TORONTO								
Toronto Public Health	72.2	72.7	74.0	73.2	71.4	71.7	72.2	0.0%
SOUTH WEST								
Chatham-Kent Public Health	27.3	24.5	19.8	19.8	19.8	21.6	12.2	-55.3%
Grey Bruce Health Unit	4.7	4.7	4.1	4.1	4.7	5.3	4.7	0.0%
Huron Perth Public Health	2.1	2.1	2.1	4.3	5.0	7.9	8.6	309.5%
Lambton Public Health	3.8	3.1	3.1	3.1	2.3	2.3	2.3	-39.5%
Middlesex-London Health Unit	12.4	11.6	10.0	11.0	9.9	10.0	9.9	-20.2%

Public Health Unit Name	Oct 19 to 25	Oct 20 to 26	Oct 21 to 27	Oct 22 to 28	Oct 23 to 29	Oct 24 to 30	Oct 25 to 31	% change from Oct 19-25 to Oct 25-31
Southwestern Public Health	6.1	5.2	5.7	6.1	6.6	6.6	7.6	24.6%
Windsor-Essex County Health Unit	7.1	9.7	10.4	10.8	12.2	12.9	13.9	95.8%
CENTRAL WEST								
Brant County Health Unit	27.7	24.5	24.5	27.1	25.8	27.7	38.0	37.2%
City of Hamilton Public Health Services	24.7	24.8	24.1	24.0	26.7	30.6	30.4	23.1%
Haldimand-Norfolk Health Unit	21.0	21.9	22.8	23.7	25.4	24.5	18.4	-12.4%
Halton Region Public Health	30.7	28.1	30.9	29.6	31.7	31.8	29.7	-3.3%
Niagara Region Public Health	16.9	15.7	16.1	18.2	20.5	24.8	25.0	47.9%
Region of Waterloo Public Health and Emergency Services	15.1	13.7	13.7	14.2	14.2	15.7	16.4	8.6%
Wellington-Dufferin- Guelph Public Health	19.9	18.9	21.5	18.9	15.4	16.0	15.4	-22.6%
TOTAL ONTARIO	41.3	41.6	42.1	42.7	42.1	43.0	42.9	3.9%

Note: Rates are based on the sum of the daily case counts during the date ranges specified in each column.

Disclaimer

This document was developed by Public Health Ontario (PHO). PHO provides scientific and technical advice to Ontario's government, public health organizations and health care providers. PHO's work is guided by the current best available evidence at the time of publication.

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For Further Information

For more information, email cd@oahpp.ca.

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