

DAILY EPIDEMIOLOGICAL SUMMARY

COVID-19 in Ontario: January 15, 2020 to May 5, 2022

Due to changes in the Ministry of Health's [updated guidance on testing](#) and [case and contact management](#), case counts in this report are an underestimate of the true number of individuals with COVID-19 in Ontario. In addition, data for hospitalizations, intensive care unit (ICU) admission and deaths in the most recent reporting period should be interpreted with caution due to data entry and reporting lags.

Introduction

This report includes the most current information available from CCM as of **May 5, 2022**.

A [weekly summary report](#) is available with additional information to complement the daily report.

Please visit the interactive [Ontario COVID-19 Data Tool](#) to explore recent COVID-19 data by public health unit, age group, sex, and trends over time. For more information about whole genome sequencing, please see the [SARS CoV-2 Whole Genome Sequencing in Ontario 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.

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, sex) 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.

Highlights

- There are a total of 1,270,808 confirmed cases of COVID-19 in Ontario reported to date.
- Compared to the previous day, this represents:
 - An increase of 2,418 confirmed cases (percent change of -10.4%)
 - An increase of 17* deaths (percent change of -46.9%)
 - An increase of 3,086 resolved cases (percent change of -15.2%)

*This number only includes deaths that have occurred in the last month.

Case Characteristics

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

	Change in cases May 4, 2022	Change in cases May 5, 2022	Percentage change May 5, 2022 compared to May 4, 2022	Cumulative case count as of May 5, 2022
Total number of cases	2,700	2,418	-10.4%	1,270,808
Number of deaths	32	17	-46.9%	12,938
Number resolved	3,641	3,086	-15.2%	1,232,482

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. Data corrections or updates can result in case records being removed and or updated from past reports. The number of deaths presented in the change in cases column for each day only includes deaths that occurred in the last 30 days.

Data Source: CCM

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

	Change in cases May 4, 2022	Change in cases May 5, 2022	Cumulative case count as of May 5, 2022
Sex: Male	1,008	924	591,748
Sex: Female	1,661	1,470	671,341
Ages: 0-4	59	48	37,787
Ages: 5-11	68	51	73,719
Ages: 12-19	106	82	104,460
Ages: 20-39	732	718	479,543
Ages: 40-59	739	700	355,769
Ages: 60-79	517	460	157,915
Ages: 80 and over	476	355	61,205

Note: Not all cases have an age or sex 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, sex) differing from past publicly reported case counts.

Data Source: CCM

Table 2. Summary of recent confirmed cases of COVID-19 in long-term care homes: Ontario

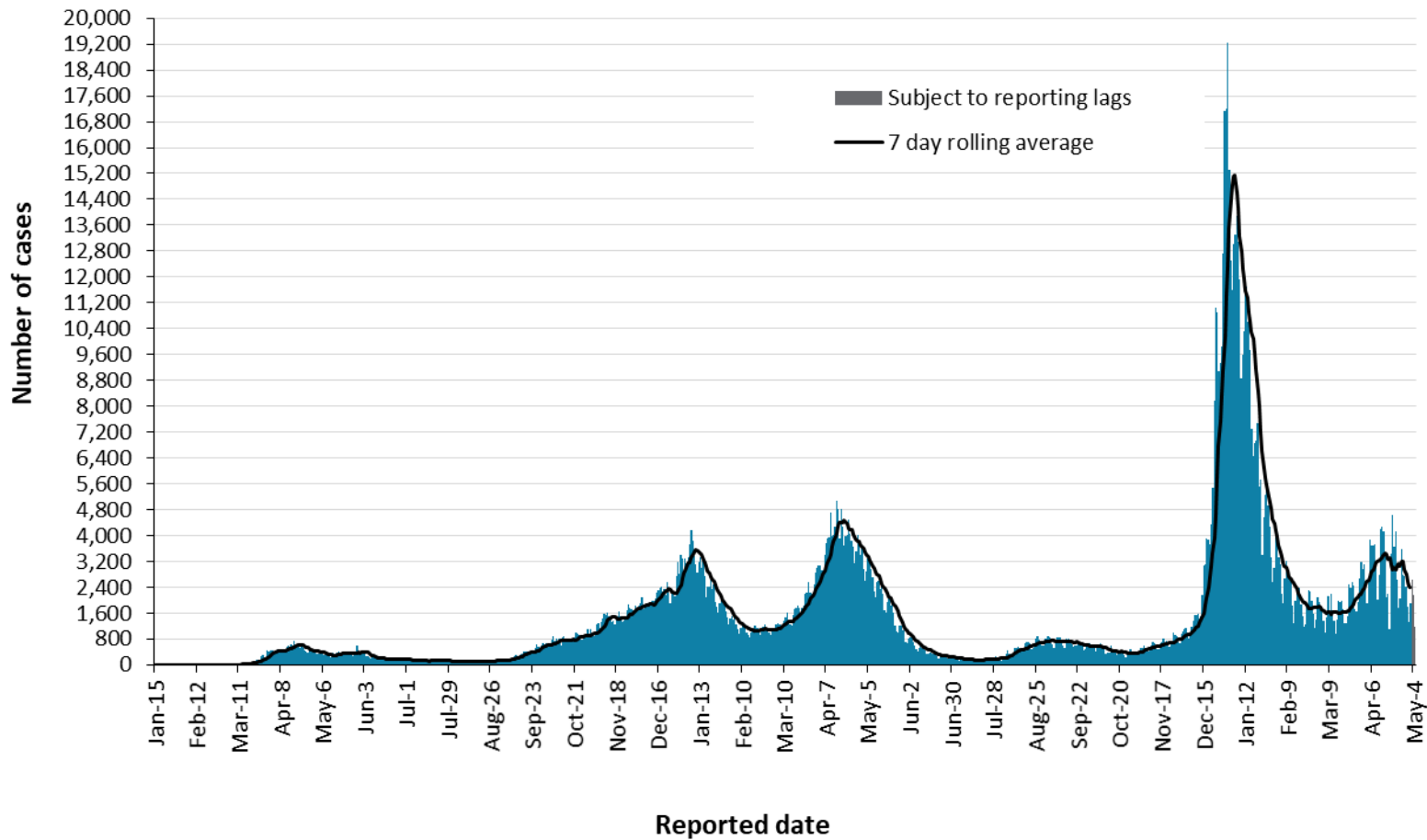
Long-term care home cases	Change in cases May 4, 2022	Change in cases May 5, 2022	Cumulative case count as of May 5, 2022
Residents	210	105	29,633
Health care workers	59	75	12,749
Deaths among residents	10	3	4,493
Deaths among health care workers	0	0	10

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.

Data Source: CCM

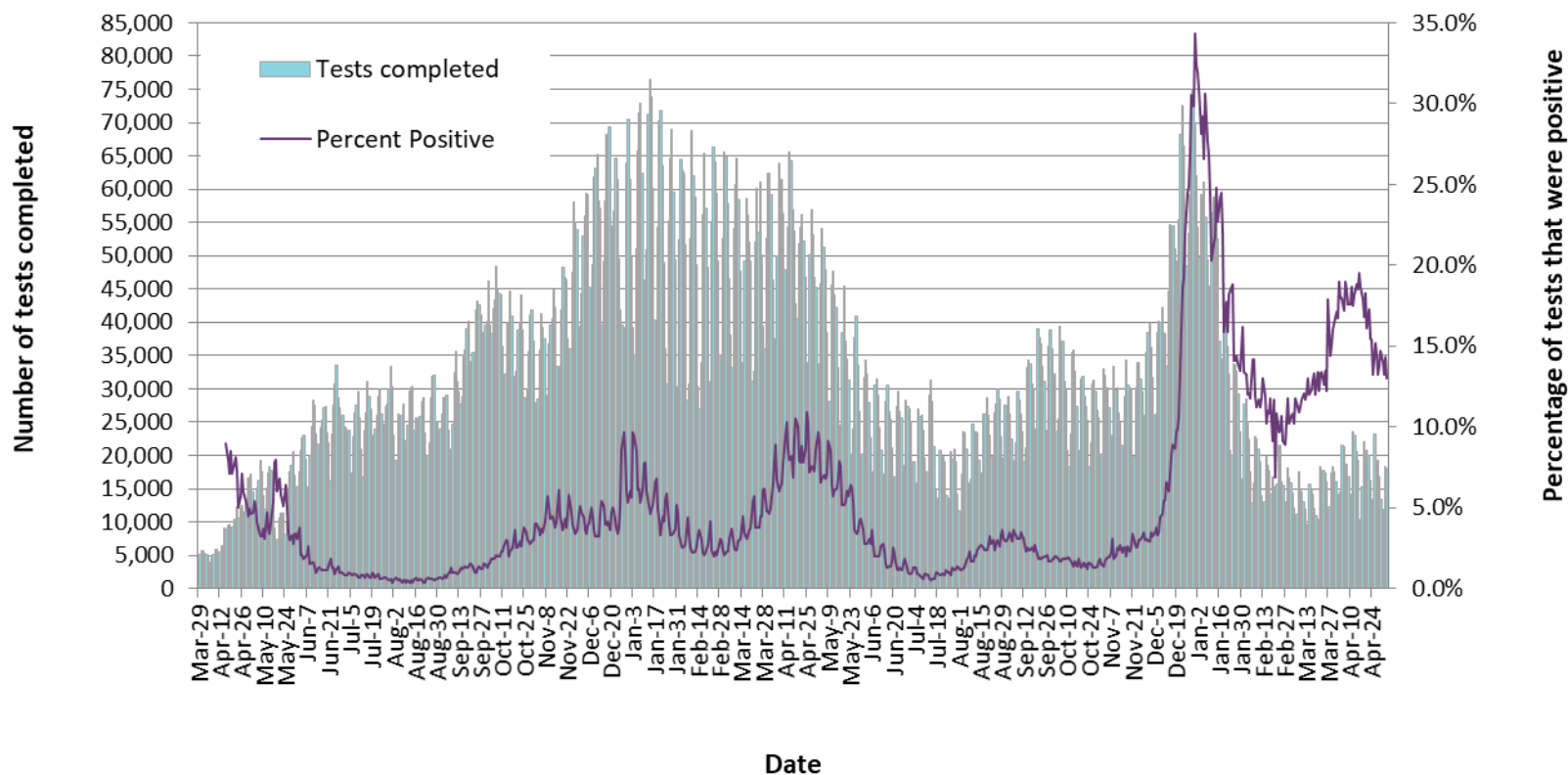
Time

Figure 1. Confirmed cases of COVID-19 by public health unit reported date: Ontario, January 15, 2020 to May 5, 2022



Note: Changes in testing eligibility went into effect on December 31, 2021, limiting access to testing and resulting in a change in the population being tested.
Data Source: CCM

Figure 2. Number of COVID-19 tests completed and percent positivity: Ontario, March 29, 2020 to May 4, 2022

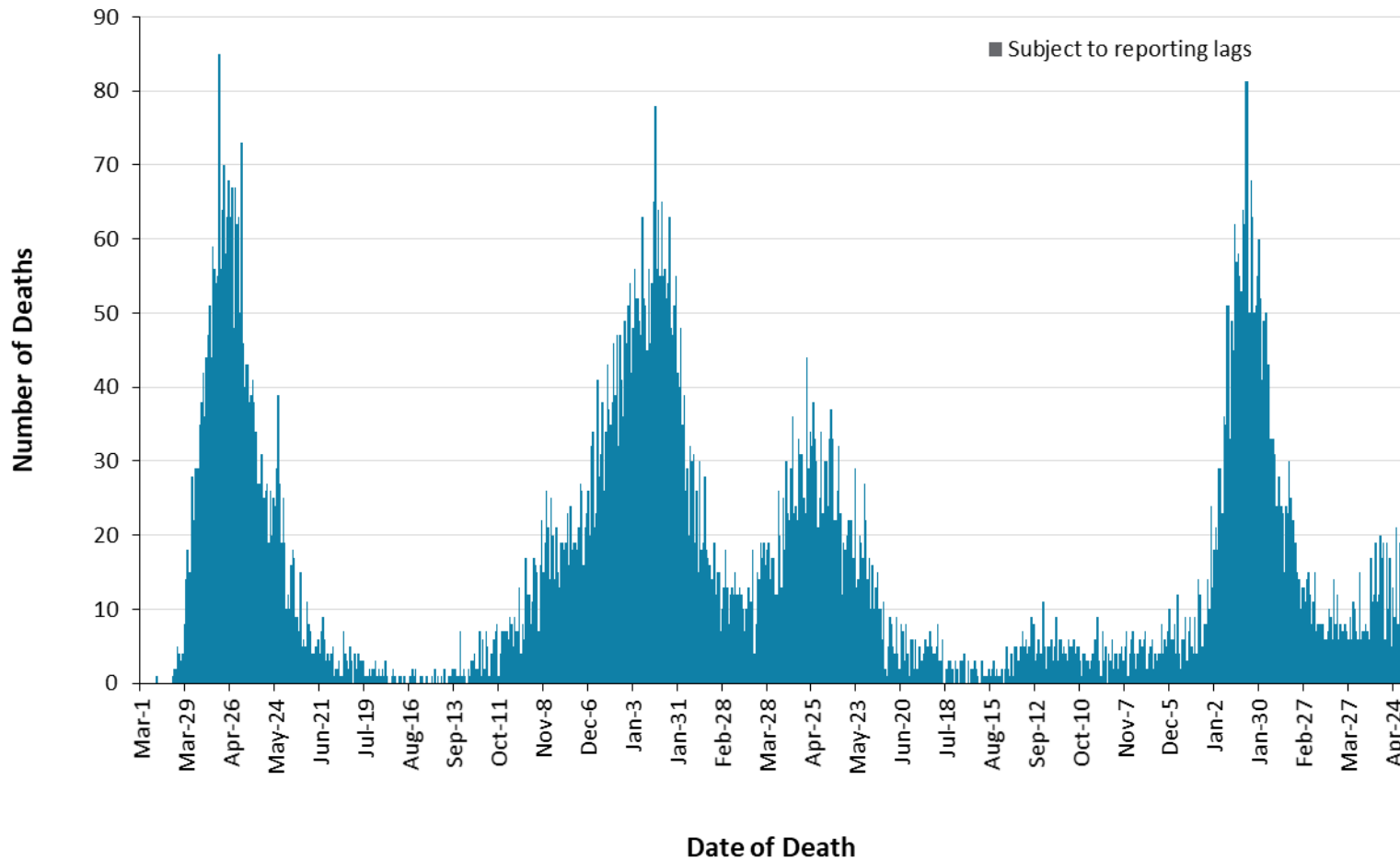


Note: The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive. Changes in testing eligibility went into effect on December 31, 2021, limiting access to testing and resulting in a change in the population being tested.

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

Severity

Figure 3. Confirmed deaths among COVID-19 cases by date of death: Ontario, March 1, 2020 to May 5, 2022



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

Data Source: CCM

Table 3. Confirmed cases of COVID-19 by severity: Ontario

	Cumulative case count as of May 5, 2022	Percentage of all cases
Cumulative deaths reported (please note there may be a reporting delay for deaths)	12,938	1.0%
Deaths reported in ages: 19 and under	15	0.1%
Deaths reported in ages: 20-39	139	0.1%
Deaths reported in ages: 40-59	918	0.3%
Deaths reported in ages: 60-79	4,352	2.8%
Deaths reported in ages: 80 and over	7,513	12.3%
Ever in ICU	8,268	0.7%
Ever hospitalized	47,219	3.7%

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. Percentage of deaths reported for each age group is calculated using all cases in the age group as the denominator.

Data Source: CCM

Geography

Table 4. Summary of recent confirmed cases of COVID-19 by public health unit and region: Ontario

Public Health Unit Name	Change in cases May 4, 2022	Change in cases May 5, 2022	Cumulative case count	Cumulative rate per 100,000 population
Northwestern Health Unit	53	32	8,117	9,998.2
Thunder Bay District Health Unit	97	72	11,572	7,337.7
TOTAL NORTH WEST	150	104	19,689	8,241.8
Algoma Public Health	46	26	8,113	6,884.8
North Bay Parry Sound District Health Unit	25	33	5,710	4,415.8
Porcupine Health Unit	13	14	7,019	8,257.6
Public Health Sudbury & Districts	65	49	14,634	7,129.6
Timiskaming Health Unit	20	8	1,874	5,530.5
TOTAL NORTH EAST	169	130	37,350	6,537.8
Ottawa Public Health	128	106	72,160	6,917.6
Eastern Ontario Health Unit	22	23	15,587	7,220.9
Hastings Prince Edward Public Health	26	28	9,898	5,727.0
Kingston, Frontenac and Lennox & Addington Public Health	109	56	16,344	7,811.5
Leeds, Grenville & Lanark District Health Unit	38	23	8,906	4,949.3
Renfrew County and District Health Unit	27	25	4,540	4,185.3
TOTAL EASTERN	350	261	127,435	6,604.7

Public Health Unit Name	Change in cases May 4, 2022	Change in cases May 5, 2022	Cumulative case count	Cumulative rate per 100,000 population
Durham Region Health Department	116	134	60,830	8,550.4
Haliburton, Kawartha, Pine Ridge District Health Unit	42	28	9,037	4,738.2
Peel Public Health	185	192	182,475	11,669.8
Peterborough Public Health	53	18	7,173	4,842.8
Simcoe Muskoka District Health Unit	110	116	44,386	7,342.5
York Region Public Health	192	168	108,807	9,065.3
TOTAL CENTRAL EAST	698	656	412,708	9,340.0
Toronto Public Health	531	554	312,770	10,466.1
TOTAL TORONTO	531	554	312,770	10,466.1
Chatham-Kent Public Health	34	17	8,397	7,875.6
Grey Bruce Health Unit	35	26	8,525	4,839.6
Huron Perth Public Health	48	32	7,151	4,889.8
Lambton Public Health	31	33	11,579	8,707.8
Middlesex-London Health Unit	67	52	37,182	7,281.9
Southwestern Public Health	27	40	13,464	6,150.5
Windsor-Essex County Health Unit	88	66	42,930	9,961.8
TOTAL SOUTH WEST	330	266	129,228	7,502.6
Brant County Health Unit	28	25	11,496	7,486.4
City of Hamilton Public Health Services	132	110	56,522	9,716.3
Haldimand-Norfolk Health Unit	19	19	8,445	7,037.0

Public Health Unit Name	Change in cases May 4, 2022	Change in cases May 5, 2022	Cumulative case count	Cumulative rate per 100,000 population
Halton Region Public Health	77	87	47,894	7,844.1
Niagara Region Public Health	91	95	40,049	8,313.6
Region of Waterloo Public Health and Emergency Services	72	63	45,495	7,517.0
Wellington-Dufferin-Guelph Public Health	53	48	21,727	6,963.9
TOTAL CENTRAL WEST	472	447	231,628	8,085.3
TOTAL ONTARIO	2,700	2,418	1,270,808	8,625.0

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

Data Source: CCM

Outbreaks

Table 5. 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 May 4, 2022	Change in outbreaks May 5, 2022	Number of ongoing outbreaks	Cumulative number of outbreaks reported
Long-term care homes	8	6	214	2,578
Retirement homes	5	9	166	1,846
Hospitals	9	7	106	1,420

Note: Ongoing outbreaks are those that are reported in CCM as 'Open' and without a 'Declared Over Date' recorded. The start of the outbreak is determined by the onset date of first case, or if missing the outbreak reported date, or else if that is also missing, then the outbreak created date.

Data Source: CCM

Technical Notes

Data Sources

- The data for this report were based on information successfully extracted from the Public Health Case and Contact Management Solution (CCM) for all PHUs by PHO as of:
 - **May 5, 2022 at 1 p.m.** for cases reported from December 1, 2021 onwards;
 - **May 5, 2022 at 9 a.m.** for cases reported from January 1, 2021 to November 30, 2021
 - **April 29, 2022 at 9 a.m.** for cases reported up to December 31, 2020.
- CCM is a dynamic disease reporting system, which allows ongoing updates to data previously entered. As a result, data extracted from CCM represent a snapshot at the time of extraction and may differ from previous or subsequent reports.
- Ontario population estimate data were sourced from Statistics Canada. Population estimates 2001-2020: Table 1 annual population estimates by age and sex for July 1, 2001 to 2020, health regions, Ontario [unpublished data table]. Ottawa, ON: Government of Canada; 2021 [received April 22, 2021].
- COVID-19 test data were based on information from The Provincial COVID-19 Diagnostics Network, reported by member microbiology laboratories.

Data Caveats

- Due to changes in the availability of testing, driven by increasing COVID-19 cases related to the Omicron variant, case counts in this report are an underestimate of the true number of individuals with COVID-19 in Ontario. As such, data should be interpreted with caution.
- The data only represent cases reported to public health units and recorded in CCM. 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.
- Data cleaning for older cases is incorporated on Mondays and Thursdays and may impact the case count published on Tuesdays and Fridays.
- Lags in CCM 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 Case Definition – Coronavirus Disease \(COVID-19\) document](#) are included in the report counts from CCM.
- Cases of confirmed reinfection, as defined in the provincial case definitions, are counted as unique investigations.
- Case classification information may be updated for individuals with a positive result issued from a point-of-care assays.
- 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.
- For surveillance purposes, a COVID-19 death is defined as a death resulting from a clinically compatible illness unless there is a clear alternative cause of death that cannot be related to COVID-19 (e.g., trauma, medically assisted death). There should be no period of complete recovery from COVID-19 between illness and reported death.
- Deaths are determined by using the Outcome and Type of Death fields in CCM. COVID-19 deaths are counted where the Outcome value is 'Fatal' and the Type of Death value is not 'DOPHS was unrelated to cause of death' or 'Under PHU Review'.
 - COVID-19 deaths are placed in time using the 'Date of Death' field in CCM. If the date of death is missing, the outcome date field is used as a proxy.
- Resolved cases are determined only for COVID-19 cases that are not considered COVID-19 deaths. The following cases are classified as resolved:
 - Cases that are reported as 'recovered' in CCM based on local public health unit assessment
 - Cases that are not hospitalized and are 14 days past their symptom onset date or specimen collection date (where symptom onset date is not known)
 - 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
 - Cases that died with a Type of Death = "DOPHS was unrelated to cause of death". These are considered resolved for the purpose of COVID-19 surveillance and reporting
- Hospitalization includes all cases hospitalized (or that had their hospital stay extended) because of COVID-19. It includes cases that have been discharged from hospital as well as cases that are currently hospitalized. Includes Intensive Care Unit (ICU) cases but not emergency room visits. Hospitalizations were identified by a reported hospital admission date or reported 'Yes' for hospitalization/ICU
- 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 permanent health unit. This is equivalent to the diagnosing health unit (DHU) in iPHIS. 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-PHO (to signify a case that is not a resident of Ontario) have been excluded from the analyses.
- Male/Female information presented in this report are sourced from the Sex field in CCM and are intended to represent sex assigned at birth. On October 14, 2021 changes were made in CCM to enable reporting on the Sex field where these data are supplemented by archived Male/Female information previously entered in the Gender field.

- COVID-19 cases from CCM for which the Classification and/or Disposition was reported as ENTERED IN ERROR, DOES NOT MEET DEFINITION, IGNORE, DUPLICATE or any variation on these values have been excluded. The provincial case count for COVID-19 may include some duplicate records, if these records were not identified and resolved.
- Ongoing outbreaks are those that are reported in CCM as 'Open' and without a 'Declared Over Date' recorded. Closed outbreaks are 'Closed' or have a 'Declared Over Date' recorded in CCM or where the outbreak start date (determined by the onset date of first case, or if missing the reported date, or if missing the created date) is more than 5 months from the current date, even for outbreaks where the outbreak status value selected in CCM is 'OPEN'.
- '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, April 20, 2022 to May 2, 2022

Public Health Unit Name	Apr 20 to Apr 26	Apr 21 to Apr 27	Apr 22 to Apr 28	Apr 23 to Apr 29	Apr 24 to Apr 30	Apr 25 to May 1	Apr 26 to May 2	% change from Apr 20 – Apr 26 to Apr 26 – May 2
NORTH WEST								
Northwestern Health Unit	340.0	325.2	319.0	356.0	344.9	343.7	310.4	-8.7%
Thunder Bay District Health Unit	265.7	236.5	228.3	209.3	218.1	221.3	233.3	-12.2%
NORTH EAST								
Algoma Public Health	213.8	214.7	201.1	190.9	192.6	182.5	186.7	-12.7%
North Bay Parry Sound District Health Unit	235.1	220.4	204.9	163.9	153.1	148.5	147.7	-37.2%
Porcupine Health Unit	178.8	177.6	167.1	168.2	167.1	156.5	131.8	-26.3%
Public Health Sudbury & Districts	213.9	224.6	218.3	196.3	181.7	183.2	179.3	-16.2%
Timiskaming Health Unit	395.5	377.7	425.0	404.3	401.4	389.6	339.4	-14.2%
EASTERN								
Ottawa Public Health	139.7	118.5	118.8	103.3	96.2	95.3	95.6	-31.6%
Eastern Ontario Health Unit	133.4	109.8	89.9	88.5	90.3	93.6	95.0	-28.8%
Hastings Prince Edward Public Health	276.6	263.3	246.5	194.4	184.0	170.1	159.7	-42.3%

Public Health Unit Name	Apr 20 to Apr 26	Apr 21 to Apr 27	Apr 22 to Apr 28	Apr 23 to Apr 29	Apr 24 to Apr 30	Apr 25 to May 1	Apr 26 to May 2	% change from Apr 20 – Apr 26 to Apr 26 – May 2
Kingston, Frontenac and Lennox & Addington Public Health	332.2	306.4	314.0	290.1	275.8	265.7	274.8	-17.3%
Leeds, Grenville & Lanark District Health Unit	209.5	192.3	198.4	185.1	167.3	161.7	156.2	-25.4%
Renfrew County and District Health Unit	151.2	133.7	134.6	119.8	118.9	111.5	124.5	-17.7%
CENTRAL EAST								
Durham Region Health Department	153.8	139.2	131.6	119.1	111.0	105.7	107.0	-30.4%
Haliburton, Kawartha, Pine Ridge District Health Unit	177.2	150.5	148.9	112.7	101.7	102.2	101.7	-42.6%
Peel Public Health	93.0	84.2	79.4	76.4	75.0	74.2	73.6	-20.9%
Peterborough Public Health	120.8	110.7	101.9	91.1	88.4	89.8	91.8	-24.0%
Simcoe Muskoka District Health Unit	198.3	178.3	168.2	139.3	133.2	133.3	132.8	-33.0%
York Region Public Health	130.7	121.9	115.1	109.6	108.6	102.8	101.6	-22.3%
TORONTO								
Toronto Public Health	140.0	128.4	122.9	118.0	113.1	107.8	108.5	-22.5%
SOUTH WEST								
Chatham-Kent Public Health	282.3	261.7	257.0	234.5	211.0	207.3	191.3	-32.2%
Grey Bruce Health Unit	162.4	152.1	143.1	105.6	97.6	89.1	89.7	-44.8%

Public Health Unit Name	Apr 20 to Apr 26	Apr 21 to Apr 27	Apr 22 to Apr 28	Apr 23 to Apr 29	Apr 24 to Apr 30	Apr 25 to May 1	Apr 26 to May 2	% change from Apr 20 – Apr 26 to Apr 26 – May 2
Huron Perth Public Health	157.3	130.6	114.9	97.1	93.7	98.5	93.0	-40.9%
Lambton Public Health	206.8	185.0	169.2	154.2	131.6	132.4	131.6	-36.4%
Middlesex-London Health Unit	129.3	128.3	121.8	110.7	99.5	102.2	96.4	-25.4%
Southwestern Public Health	143.4	144.4	137.0	132.5	125.6	121.1	120.6	-15.9%
Windsor-Essex County Health Unit	170.8	156.4	139.5	113.9	108.1	109.5	104.7	-38.7%
CENTRAL WEST								
Brant County Health Unit	131.5	117.9	106.1	106.8	97.0	96.4	92.5	-29.7%
City of Hamilton Public Health Services	199.9	184.6	174.8	167.1	155.4	163.0	160.4	-19.8%
Haldimand-Norfolk Health Unit	160.0	136.7	139.2	123.3	116.7	113.3	104.2	-34.9%
Halton Region Public Health	124.5	113.2	107.3	88.6	84.8	81.2	79.3	-36.3%
Niagara Region Public Health	164.0	158.0	148.2	137.2	128.5	120.6	120.4	-26.6%
Region of Waterloo Public Health and Emergency Services	110.7	100.0	95.3	88.6	84.3	82.6	83.3	-24.8%
Wellington-Dufferin-Guelph Public Health	143.6	123.4	121.2	105.1	97.1	85.9	84.6	-41.1%
TOTAL ONTARIO	152.6	139.8	133.5	122.0	116.1	113.1	112.1	-26.5%

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

Data Source: CCM

Table A2. Number of confirmed COVID-19 cases with a fatal outcome by date of death in the last 30 days: Ontario

Date of Death	Number of deaths
April 6, 2022	7
April 7, 2022	8
April 8, 2022	7
April 9, 2022	6
April 10, 2022	17
April 11, 2022	11
April 12, 2022	12
April 13, 2022	19
April 14, 2022	11
April 15, 2022	12
April 16, 2022	20
April 17, 2022	17
April 18, 2022	19
April 19, 2022	6
April 20, 2022	19
April 21, 2022	10
April 22, 2022	17
April 23, 2022	5
April 24, 2022	13
April 25, 2022	9
April 26, 2022	21
April 27, 2022	8

Date of Death	Number of deaths
April 28, 2022	19
April 29, 2022	12*
April 30, 2022	11*
May 1, 2022	14*
May 2, 2022	17*
May 3, 2022	6*
May 4, 2022	9*
May 5, 2022	1*

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

*Subject to reporting lags

Data Source: CCM

Citation

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