

WEEKLY EPIDEMIOLOGICAL SUMMARY

COVID-19 in Ontario: Focus on October 17, 2021 to October 23, 2021

This report includes the most current information available from CCM as of **October 26, 2021**.

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.

A [daily summary](#) is available and provides an epidemiologic summary of recent COVID-19 activity in Ontario. This weekly report provides an epidemiologic summary of COVID-19 activity in Ontario over time.

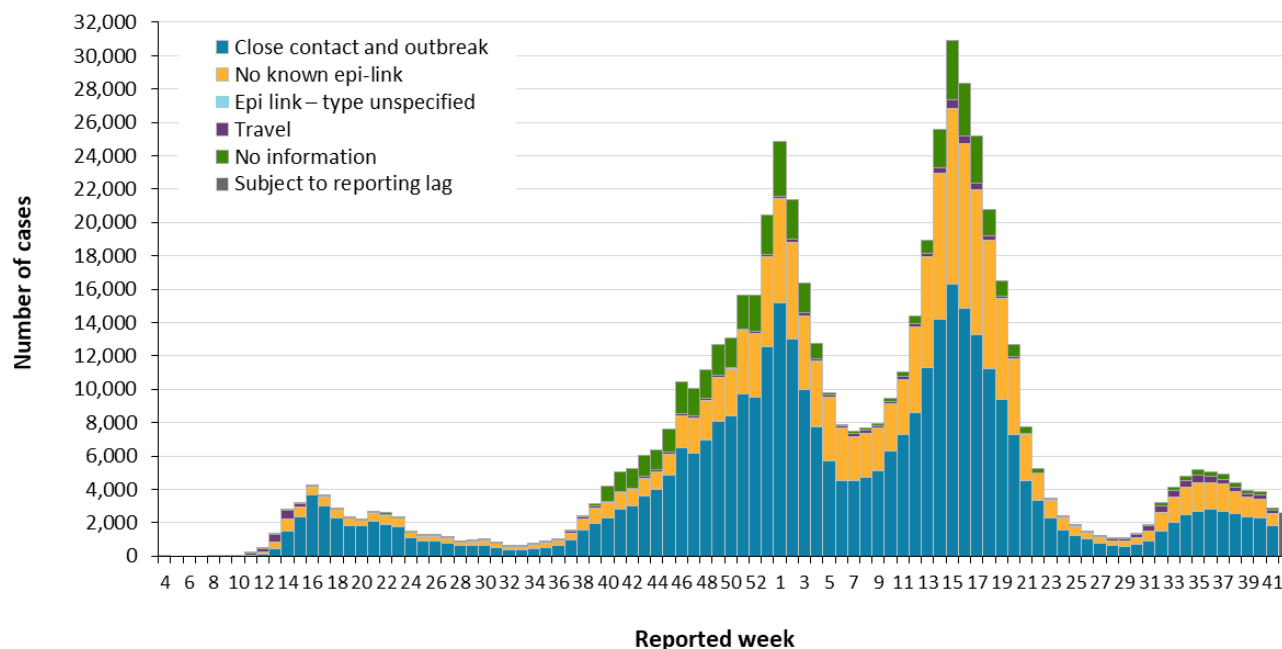
Highlights

- There are a total of 597,689 confirmed cases of COVID-19 in Ontario with a public health unit reported date up to October 23, 2021.
- For the period with a public health unit (PHU) reported date between October 17 to 23, 2021 (week 42):
 - A total of 2,635 cases were reported to public health compared to 2,904 cases the previous week (October 10 to 16, 2021).
 - The rate of cases has decreased for all age groups with the exception of cases aged 5 to 11 which reported an increase in rate from 38.5 to 40.1 cases per 100,000 population. Cases aged 5 to 11 continue to report the highest rate of cases in week 42.
 - The proportion of cases reported in North East region has increased sharply from 2.2% in week 41 to 7.1% in week 42. This is mostly driven by Public Health Sudbury & Districts reporting the highest rate of cases amongst health units in the province this week (70.6).

The term public health unit reported date in this document refers to the date local public health units were first notified of the case. Data corrections or updates can result in case records being removed and or updated from past reports. Thus comparisons of case counts by public health unit reported date may not align with daily change in cases publicly reported by the province for the same time period, which reflects the difference in cumulative counts between one day and the next.

Cases Over Time

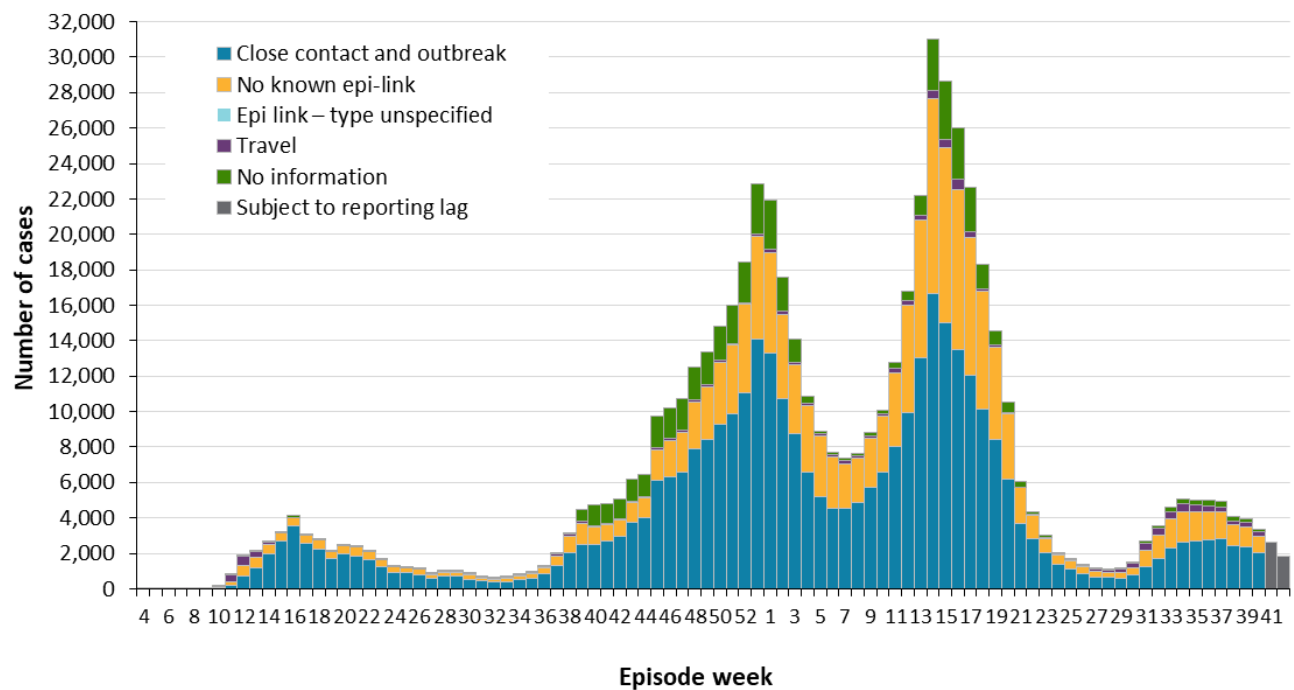
Figure 1. Confirmed cases of COVID-19 by likely source of acquisition and public health unit reported week: Ontario



Note: Include cases with reported dates ranging from week-4 (January 19 and 25, 2020) to week 42 (October 17 and 23, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

Figure 2. Confirmed cases of COVID-19 by likely source of acquisition and approximation of symptom onset week: Ontario



Note: Not all cases have an episode date. Cases without an episode date are not included in the figure. The definition for how episode date is defined is available in the technical notes. Include cases with episode dates ranging from week-4 (January 19 and 25, 2020) to week 42 (October 17 and 23, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

Case Characteristics

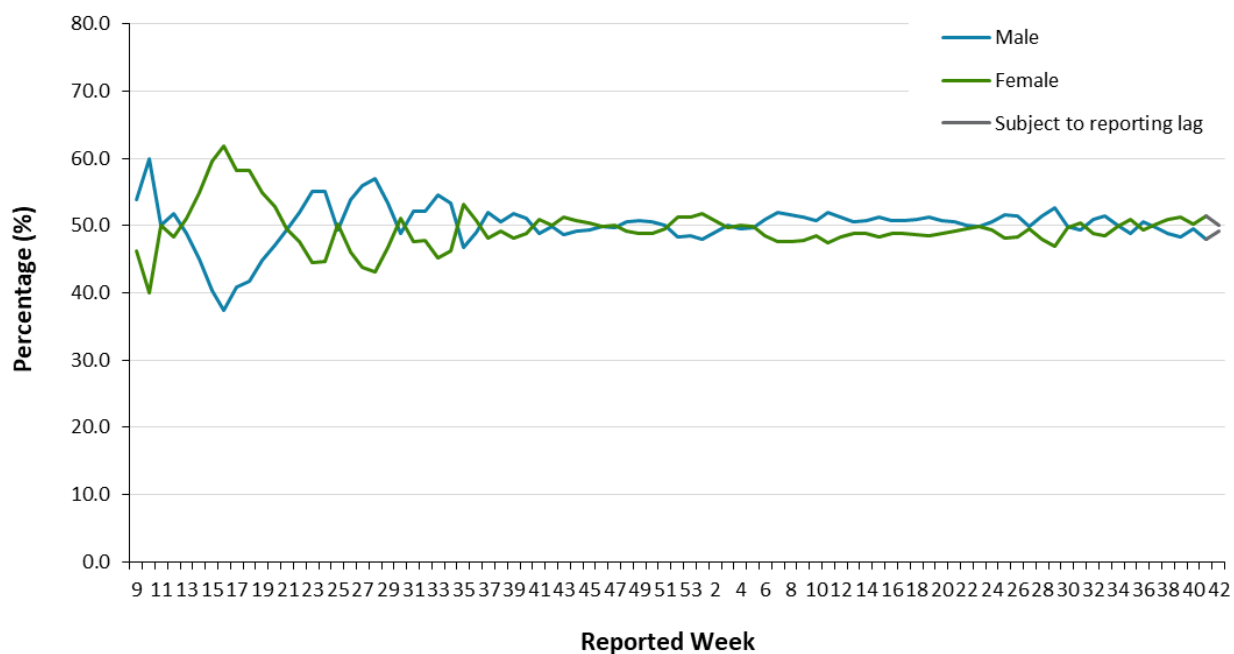
Table 1. Summary of confirmed cases of COVID-19 by public health unit reported date: Ontario

	Reported week 41 (October 10 to 16)	Reported week 42 (October 17 to 23)	Cumulative case count up to October 23	Cumulative rate per 100,000 population
Total number of cases	2,904	2,635	597,689	4,056.5
Sex: Male	1,395	1,296	298,760	4,104.2
Sex: Female	1,495	1,320	296,803	3,981.5
Ages: 0-4	140	133	17,035	2,356.1
Ages: 5-11	415	432	31,463	2,917.2
Ages: 12-19	257	236	53,384	4,015.4
Ages: 20-39	896	829	224,957	5,418.2
Ages: 40-59	738	687	167,405	4,297.4
Ages: 60-79	382	266	77,276	2,664.9
Ages: 80 and over	75	52	26,062	3,973.9
Number resolved	N/A	N/A	585,563	N/A

Note: Not all cases have an age or sex reported. Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM

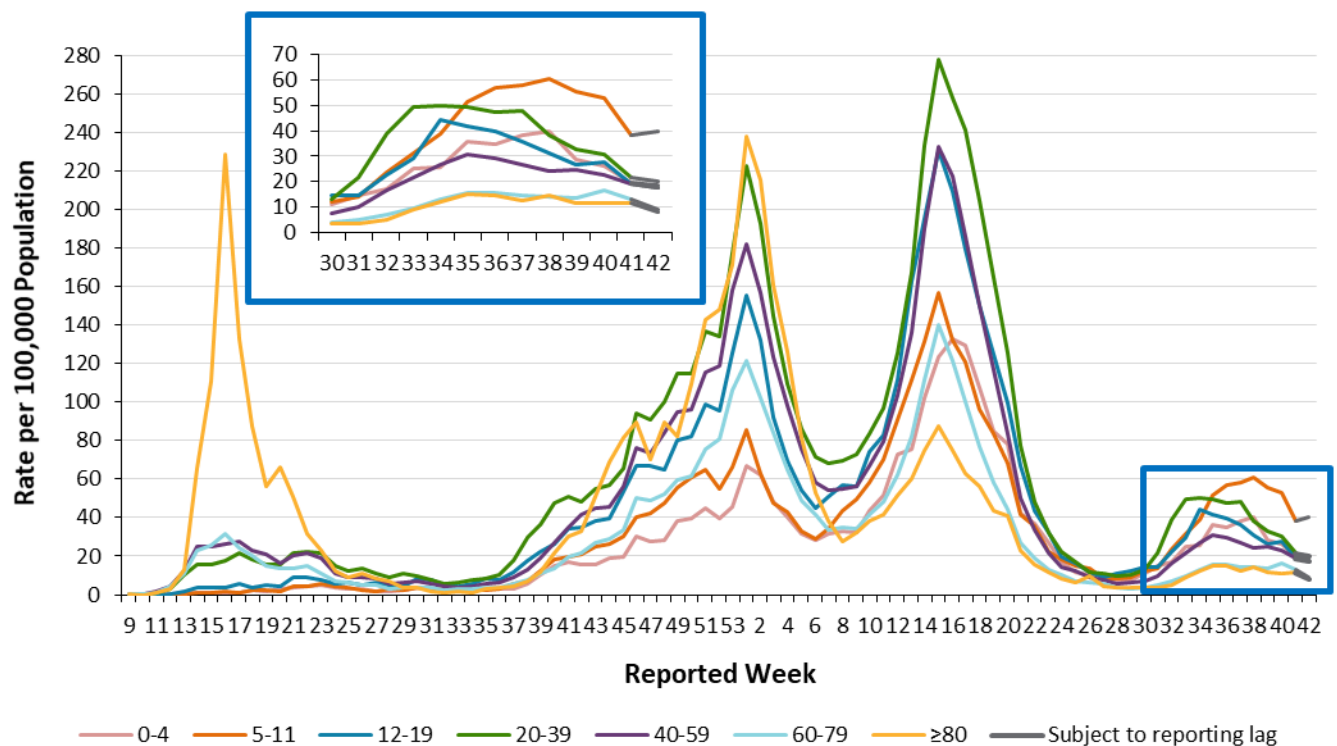
Figure 3. Percentage of confirmed cases of COVID-19 by sex and public health unit reported week: Ontario



Note: Not all cases have a sex reported. The denominator for calculating weekly percentages includes all cases. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week-9). Include cases with reported dates ranging from week-9 (February 23 and 29, 2020) to week 42 (October 17 and 23, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

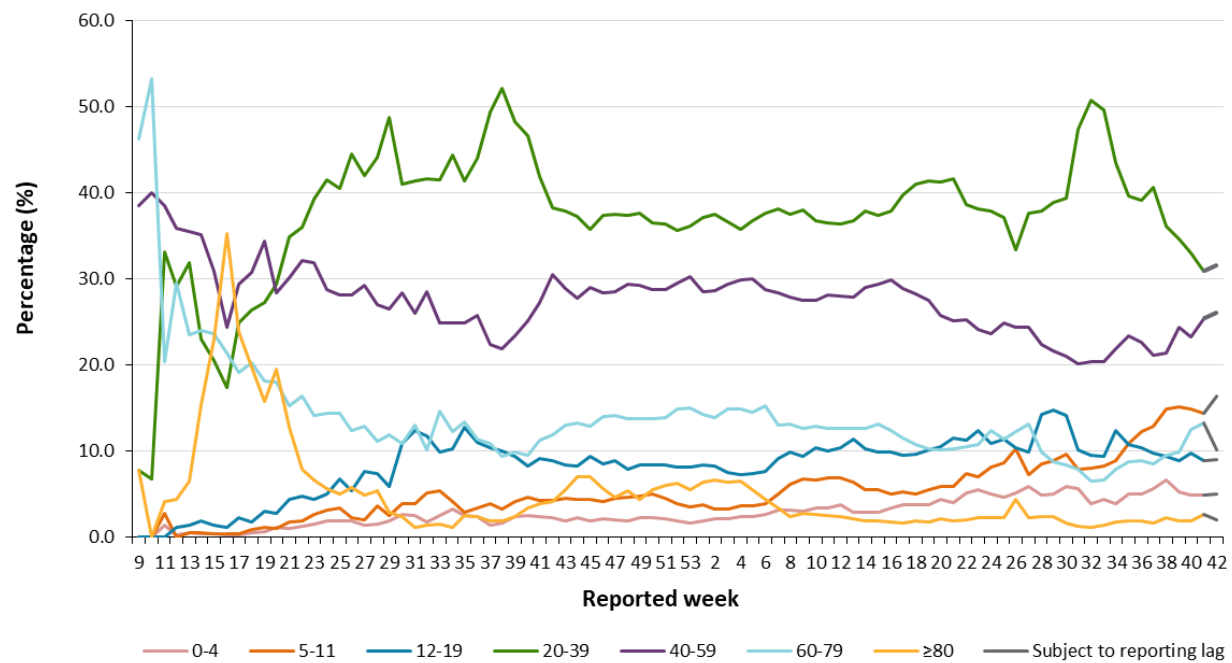
Figure 4a. Rate of confirmed cases of COVID-19 per 100,000 population by age group and public health unit reported week: Ontario



Note: Not all cases have an age reported. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from week 9 (February 23 and 29, 2020) to week 42 (October 17 and 23, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

Figure 4b. Percentage of confirmed cases of COVID-19 by age group and public health unit reported week: Ontario



Note: Only weeks with more than 10 cases by public health unit reporting date are included (starting in week-9). Include cases with reported dates ranging from week-9 (February 23 and 29, 2020) to week 42 (October 17 and 23, 2021). See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

Deaths

Figure 5. Deaths among confirmed cases of COVID-19 by week of death: Ontario

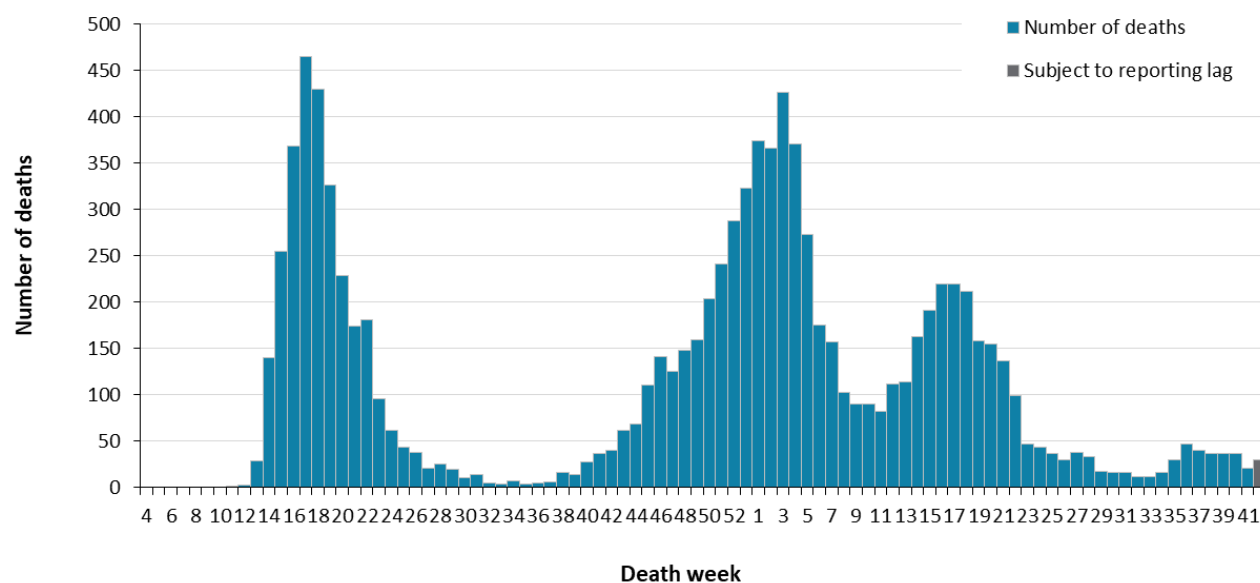


Table 2. Summary of deaths among confirmed cases of COVID-19 by public health unit reported week: Ontario

Deaths	Reported week 41 (October 10 to 16)	Reported week 42 (October 17 to 23)	Cumulative case count up to October 23	Cumulative rate per 100,000 population
Number of deaths	14	6	9,862	66.9
Sex: Male	8	2	5,046	69.3
Sex: Female	6	4	4,761	63.9
Ages: 19 and under	0	0	6	0.2
Ages: 20-39	0	2	103	2.5
Ages: 40-59	2	2	685	17.6
Ages: 60-79	3	1	3,227	111.3
Ages: 80 and over	9	1	5,840	890.5

Note: Age and sex may not be reported for all cases. Reported week is the week the case was reported to the public health unit. This is different than the “week of death” presented in Figure 5 which reflects the week the case was reported to have a ‘Fatal’ outcome. Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM

Exposure

Table 3. Confirmed cases of COVID-19 by likely source of acquisition and public health unit reported week: Ontario

	Reported week 41 (October 10 to 16)	Percentage	Reported week 42 (October 17 to 23)	Percentage	Cumulative case count up to October 23	Cumulative percentage
Travel	166	5.7%	149	5.7%	13,342	2.2%
Outbreak-associated or close contact of a confirmed case	1,789	61.6%	1,562	59.3%	356,825	59.7%
Epidemiological link – type unspecified	0	0.0%	0	0.0%	46	<0.1%
No known epidemiological link	776	26.7%	711	27.0%	174,310	29.2%
Information missing or unknown	173	6.0%	213	8.1%	53,166	8.9%
Total	2,904		2,635		597,689	

Note: Information for how cases are grouped within each category is available in the technical notes. Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM

Sub-populations of interest

Table 4. Summary of cases of COVID-19 among health care workers: Ontario

Health care workers	Reported week 41 (October 10 to 16)	Reported week 42 (October 17 to 23)	Cumulative case count up to October 23
Number of cases	76	55	24,703
Ever hospitalized	1	2	482
Ever in ICU	0	0	99

Note: Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM

Table 5. Summary of cases of COVID-19 associated with long-term care home outbreaks: Ontario

Long-term care home associated cases	Reported week 41 (October 10 to 16)	Reported week 42 (October 17 to 23)	Cumulative case count up to October 23
Residents	13	4	15,639
Deaths among residents	1	0	4,022
Health care workers	4	0	7,375
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. Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM

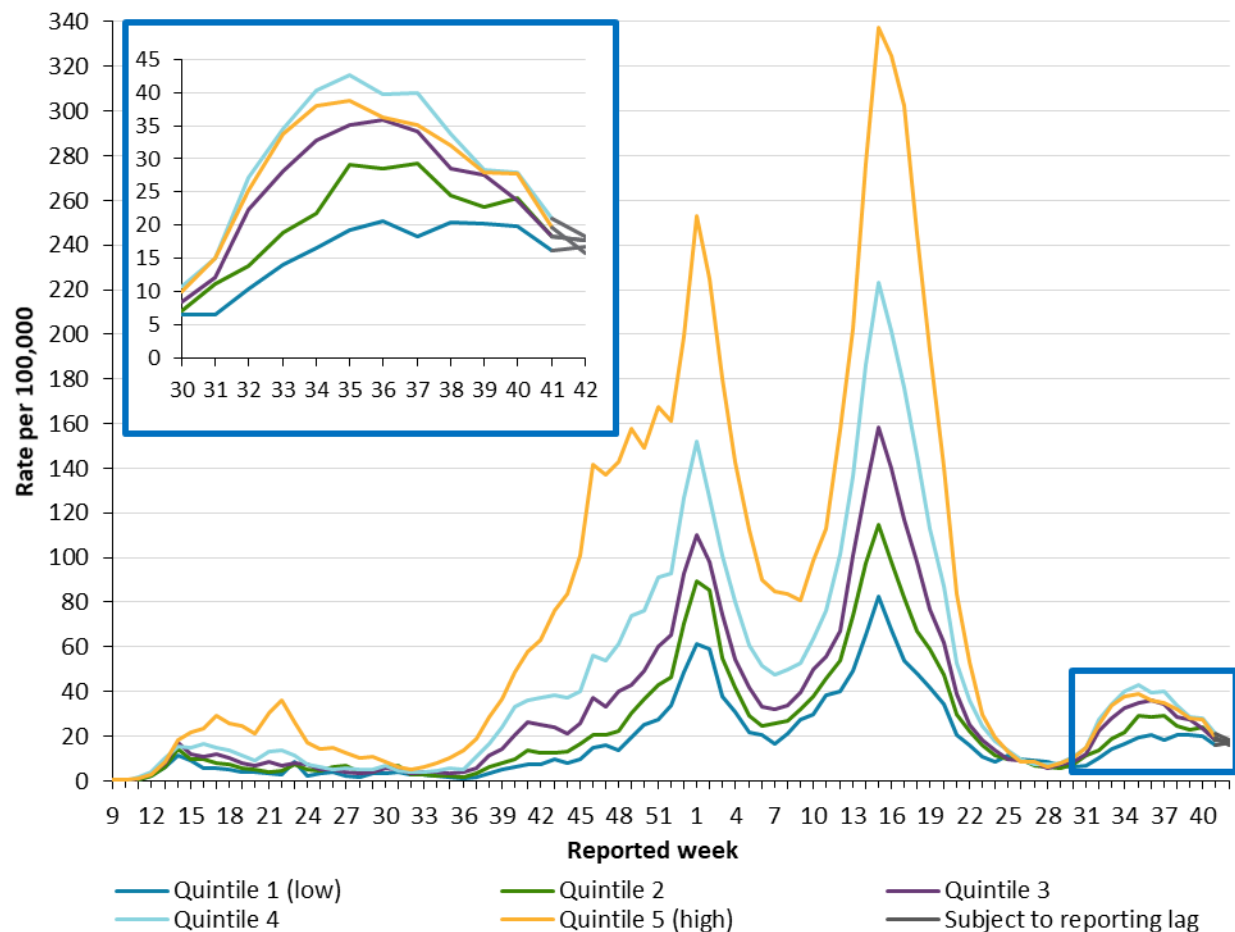
Table 6: Summary of reinfection cases of COVID-19 by age group and public health unit reported week: Ontario

Age Group	Reported Week 41 (October 10 to 16)	Reported Week 42 (October 17 to 23)	Cumulative count from November 1 up to October 23	Percent of reinfection cases
Ages: 0-4	1	1	19	5.3%
Ages: 5-11	0	0	4	1.1%
Ages: 12-19	0	0	36	10.0%
Ages: 20-39	2	2	169	47.1%
Ages: 40-59	1	1	92	25.6%
Ages: 60-79	0	1	29	8.1%
Ages: 80 and over	0	0	10	2.8%
Total reinfection cases	4	5	359	

Note: Cases identified as reinfections meeting the [provincial definition](#) as indicated by public health units selecting the reinfection checkbox. Cumulative counts include cases of COVID-19 reinfection reported starting week-45 (November 1 to 7, 2020). Not all cases have a reported age or sex. 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

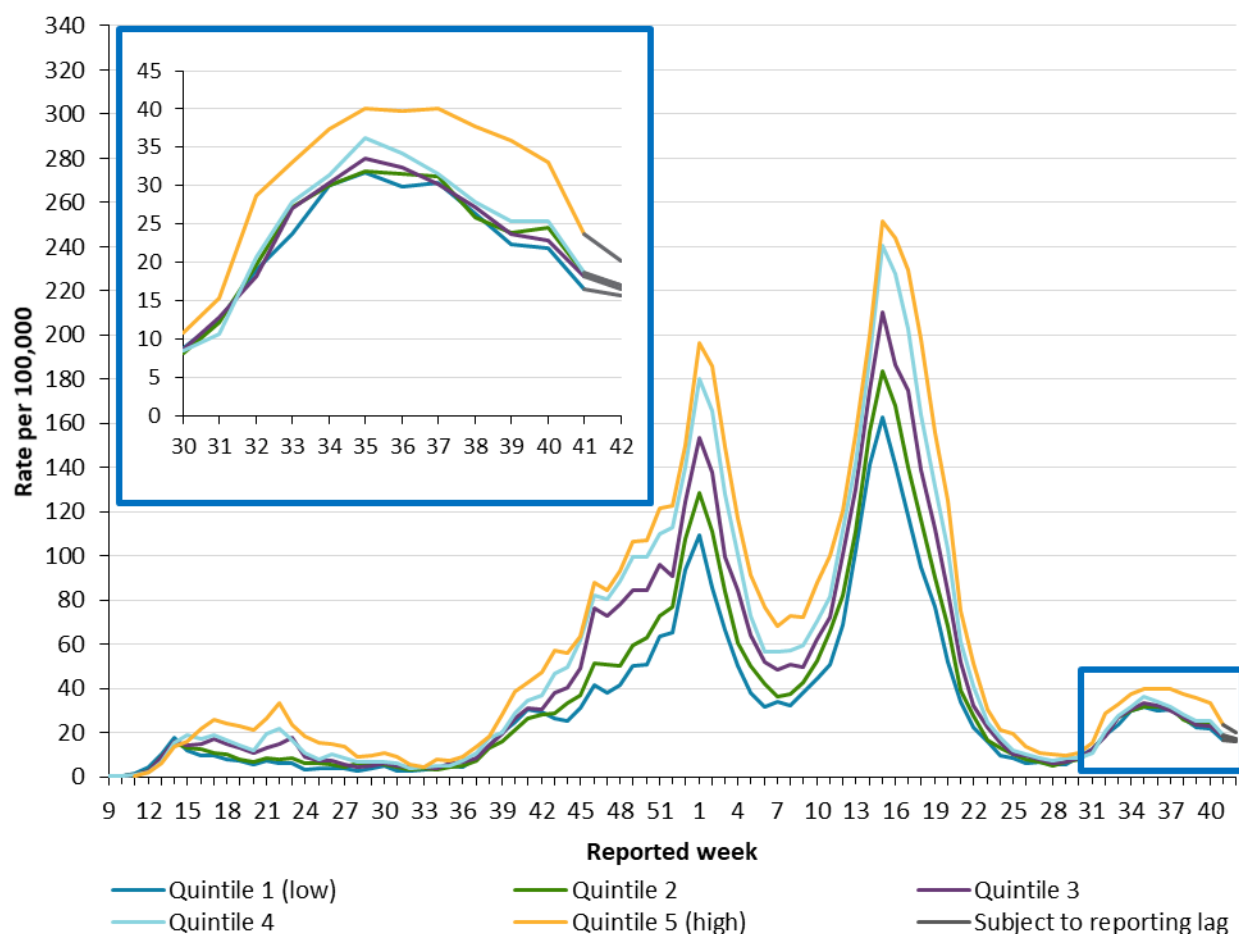
Figure 6. Rate of confirmed cases of COVID-19 per 100,000 population by quintile of neighbourhood diversity and public health unit reported week: Ontario



Note: Neighbourhood diversity is measured using the ethnic concentration dimension of the Ontario Marginalization Index. The ethnic concentration dimension is based on the proportion of non-white and non-Indigenous residents and/or the proportion of immigrants that arrived in Canada within the past five years. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from weeks 9 (February 23 to 29, 2020) to week 42 (October 17 to 23, 2021). As of June 8, all rate denominators were changed to the 2021 OHIP RPDB population, and as a result, rates shown here may differ from previous reports. See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM, Ontario Marginalization Index

Figure 7. Rate of confirmed cases of COVID-19 per 100,000 population by quintile of neighbourhood material deprivation and public health unit reported week: Ontario



Note: Neighbourhood material deprivation is measured using the material deprivation dimension of the Ontario Marginalization Index. The material deprivation dimension uses Canadian census data on income, quality of housing, educational attainment and family structure characteristics to assess the ability of individuals and communities to access and attain basic material needs. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from weeks 9 (February 23 to 29, 2020) to week 42 (October 17 to 23, 2021). As of June 8, all rate denominators were changed to the 2021 OHIP RPDB population, and as a result, rates shown here may differ from previous reports. See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM, Ontario Marginalization Index

Table 7: Summary of cases of COVID-19 by quintile of neighbourhood diversity and public health unit reported week: Ontario

	Cases Reported Week 41(October 10 to 16)	Cases Reported Week 42 (October 17 to 23)	Cumulative case count up to October 23	Cumulative rate per 100,000 population up to October 23
Quintile 1 (least diverse)	359	375	33,682	1,516.4
Quintile 2	433	422	49,648	2,096.5
Quintile 3	475	459	72,573	2,799.8
Quintile 4	658	571	122,408	3,913.8
Quintile 5 (most diverse)	850	686	276,919	6,406.8

Note: Neighbourhood diversity is measured using the ethnic concentration dimension of the Ontario Marginalization Index. The ethnic concentration dimension is based on the proportion of non-white and non-Indigenous residents and/or the proportion of immigrants that arrived in Canada within the past five years. Cumulative counts and rates include cases of COVID-19 reported starting week 9 (February 23 to 29, 2020).

Data Source: CCM, Ontario Marginalization Index

Table 8: Summary of cases of COVID-19 by quintile of neighbourhood material deprivation and public health unit reported week: Ontario

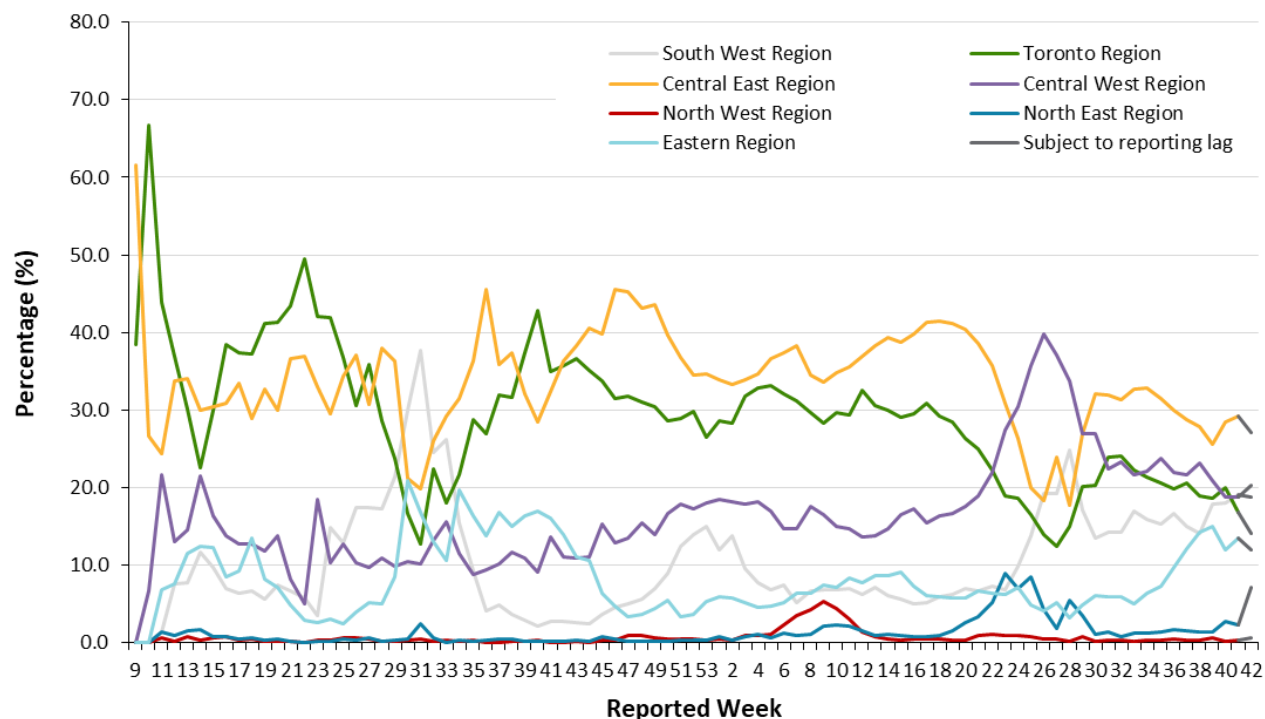
	Cases Reported Week 41(October 10 to 16)	Cases Reported Week 42 (October 17 to 23)	Cumulative case count up to October 23	Cumulative rate per 100,000 population up to October 23
Quintile 1 (least material deprivation)	571	542	94,892	2,753.5
Quintile 2	572	528	98,854	3,184.0
Quintile 3	505	457	106,843	3,853.1
Quintile 4	490	445	116,693	4,441.1
Quintile 5 (most material deprivation)	637	541	137,948	5,147.3

Note: Neighbourhood material deprivation is measured using the material deprivation dimension of the Ontario Marginalization Index. The material deprivation dimension uses Canadian census data on income, quality of housing, educational attainment and family structure characteristics to assess the ability of individuals and communities to access and attain basic material needs. Cumulative counts and rates include cases of COVID-19 reported starting week 9 (February 23 to 29, 2020).

Data Source: CCM, Ontario Marginalization Index

Geography

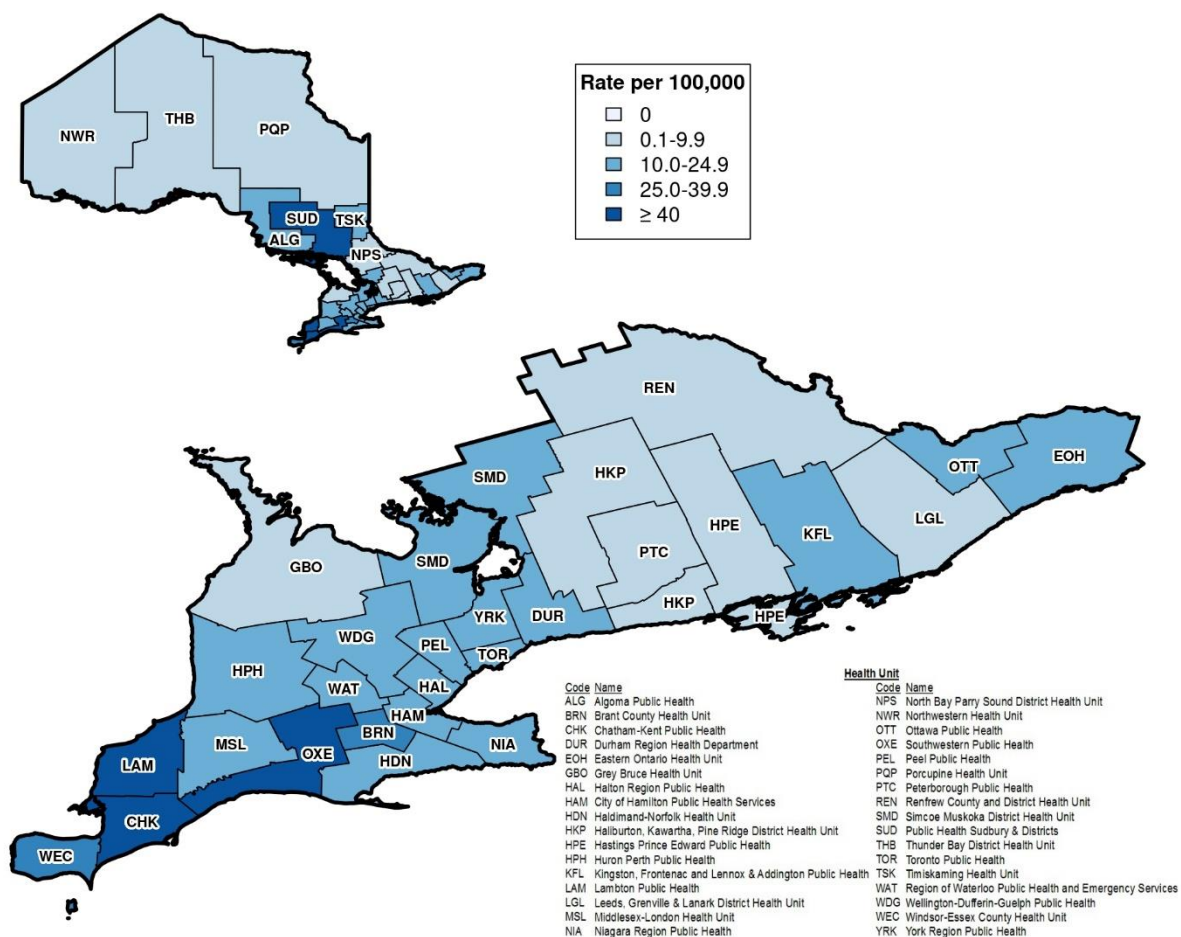
Figure 8. Percentage of COVID-19 cases by geographic region and public health unit reported week: Ontario



Note: Only weeks with more than 10 cases by public health unit reporting date are included (starting in week-9). Include cases with reported dates ranging from week-9 (February 23 and 29, 2020) to week 42 (October 17 and 23, 2021). [Table 2A](#) in Appendix A has a listing of public health units by region.

Data Source: CCM

Figure 9. Rate of confirmed cases of COVID-19 in public health reported week 42 (October 17 to 23, 2021) by public health unit: Ontario



Note: The provincial rate of confirmed cases of COVID-19 reported in week 42 was 17.9 cases per 100,000 population.

Data Source: CCM

Outbreaks

Table 9. Number of public health unit declared COVID-19 outbreaks by setting type: Ontario

Setting Type	Reported week 42 (October 17 to 23)	Number of ongoing outbreaks	Cumulative number of outbreaks reported to October 23
Congregate Care	4	10	3,027
Long-term care homes	2	6	1,532
Retirement homes	0	2	899
Hospitals	2	2	596
Congregate Living	2	10	1,406
Correctional facility	0	3	68
Shelter	0	3	290
Group Home/supportive housing	1	3	821
Short-term accommodations	0	0	47
Congregate other	1	1	180
Education and Childcare	43	83	2,995
Child care	7	13	1,154
Camp – Day*	0	0	21
Camp – Overnight*	0	0	1
Camp – Unspecified*	0	0	1
School – Elementary**	34	62	1,380
School – Elementary/secondary**	1	2	71
School – Secondary**	1	6	312
School – Post-secondary**	0	0	55
Other settings	27	59	4,722
Bar/restaurant/nightclub	3	7	418

Setting Type	Reported week 42 (October 17 to 23)	Number of ongoing outbreaks	Cumulative number of outbreaks reported to October 23
Medical/health services	2	1	166
Personal service settings	0	0	38
Recreational fitness	1	2	117
Retail	0	0	501
Other recreation/community	3	12	301
Workplace – Farm	0	1	250
Workplace - Food processing	0	1	284
Other types of workplaces	10	19	2,577
Other	1	1	17
Unknown	7	15	53
Total number of outbreaks	76	162	12,150

Note: Reported week is based on the outbreak reported date, and if unavailable, the date the public health unit created the outbreak. Ongoing outbreaks includes all outbreaks that are 'Open' in CCM without a 'Declared Over Date' recorded 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'. Interpret information for the most recent week with caution due to reporting lags. Outbreak categories are mutually exclusive. Retail includes settings such as grocery stores, pharmacies, malls, etc. Other types of workplaces include settings such as offices as well as warehousing, shipping and distribution, manufacturing facilities, mines and construction sites, etc. Other recreation/community includes settings such as entertainment and event venues, gatherings (e.g., weddings), religious facilities, etc. Medical/health services refer to settings such as doctor's office or clinic, wellness clinics, etc., and excludes categories listed in the congregate care setting group.

*Cumulative counts include COVID-19 camp outbreaks reported starting week-27 of 2021 (July 4 to 10, 2021).

**Cumulative counts include COVID-19 school outbreaks reported starting week-36 (August 30 to September 5, 2020).

Ongoing re-classification of settings for reported outbreaks can result in outbreak counts that may differ from previously reported counts. Outbreaks in settings outside of Ontario are excluded from all outbreak counts.

Data Source: CCM

Table 10. Confirmed cases of COVID-19 associated with COVID-19 outbreaks by setting type and public health unit reported week: Ontario

Cases associated with the outbreak setting type	Reported week 41 (October 10 to 16)	Reported week 42 (October 17 to 23)	Cumulative number of cases
Congregate Care	85	10	40,708
Long-term care homes	19	3	26,858
Retirement homes	63	2	7,392
Hospitals	3	5	6,458
Congregate Living	20	61	10,355
Correctional facility	12	51	1,891
Shelter	4	1	2,831
Group Home/supportive housing	3	1	3,723
Short-term accommodations	0	0	250
Congregate other	1	8	1,660
Education and Childcare	222	182	12,630
Child care	19	15	4,700
Camp – Day*	0	0	109
Camp – Overnight*	0	0	14
Camp – Unspecified*	0	0	2
School – Elementary**	170	157	5,710
School – Elementary/secondary**	18	5	391
School – Secondary**	15	5	1,253
School – Post-secondary**	0	0	451
Other settings	166	125	37,183
Bar/restaurant/nightclub	35	27	2,050
Medical/health services	0	4	747
Personal service settings	0	0	134
Recreational fitness	3	13	834

Cases associated with the outbreak setting type	Reported week 41 (October 10 to 16)	Reported week 42 (October 17 to 23)	Cumulative number of cases
Retail	2	0	2,670
Other recreation/community	18	13	3,630
Workplace - Farm	4	2	3,241
Workplace - Food processing	0	2	3,788
Other types of workplaces	51	27	19,701
Other	4	0	89
Unknown	49	37	299
Total number of cases	493	378	100,876

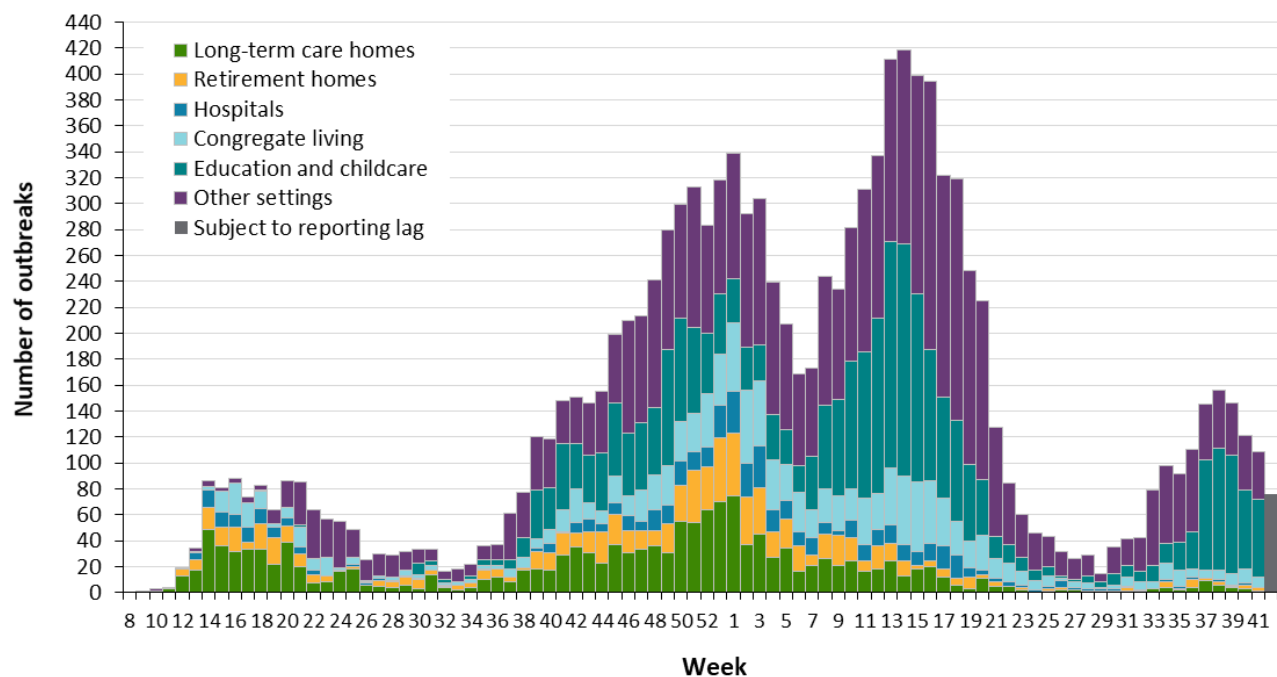
Note: Interpret case counts for the most recent week with caution due to reporting lags. Outbreak categories are mutually exclusive. Retail includes settings such as grocery stores, pharmacies, malls, etc. Other types of workplaces include settings such as offices as well as warehousing, shipping and distribution, manufacturing facilities, mines, and construction sites, etc. Other recreation/community includes settings such as entertainment and event venues, gatherings (e.g., weddings), religious facilities, etc. Medical/health services refer to settings such as doctor's office or clinic, wellness clinics, etc., and excludes categories listed in the congregate care setting group. *Cumulative counts include cases of COVID-19 camp outbreaks reported starting week-27 of 2021 (July 4 to 10, 2021).

**Cumulative counts include cases of COVID-19 associated with school outbreaks reported starting week-36 (August 30 to September 5, 2020).

Ongoing re-classification of settings for reported outbreaks can result in case counts that may differ from previously reported counts. Cases associated with outbreaks outside of Ontario are excluded from case counts in this table.

Data Source: CCM

Figure 10. Public health unit declared COVID-19 outbreaks by outbreak setting type and public health unit reported week: Ontario



Note: If public health unit outbreak reported date is unavailable, the date the public health unit created the outbreak is used. Week 8 refers to February 16 and 22, 2020 and week 42 refers to October 17 and 23, 2021. Congregate living include group homes, shelters, correctional facilities, etc. Other settings include outbreaks within workplaces, childcare, schools, restaurants, recreation etc.

Data Source: CCM

Variant COVID-19 Cases

Table 11. Summary of confirmed COVID-19 cases with a mutation or VOC detected by age group and sex: Ontario

	Lineage B.1.1.7 (Alpha)*	Lineage B.1.351 (Beta)**	Lineage P.1 (Gamma)***	Lineage B.1.617.2 (Delta)†	Mutations‡	Mutation not detected§	Cumulative case count as of October 23, 2021
Sex: Male	74,290	737	2,721	10,455	12,000	17,258	117,461
Sex: Female	71,837	762	2,491	10,132	10,999	17,308	113,529
Ages: 19 and under	27,813	250	905	4,720	4,674	8,139	46,501
Ages: 20-39	55,601	485	1,947	8,807	9,004	13,269	89,113
Ages: 40-59	42,844	491	1,572	4,754	6,304	8,711	64,676
Ages: 60-79	17,437	236	670	1,913	2,710	3,755	26,721
Ages: 80 and over	2,799	41	137	423	453	758	4,611

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 for cases with a B.1.1.7 (Alpha), B.1.351 (Beta), P.1 (Gamma) and B.1.617.2 (Delta) lineage detected or a mutation are determined using the Investigation Subtype field only. Changes to the VOC testing algorithm may impact counts and trends. Further details can be found in the data caveats section.

*Includes all confirmed COVID-19 cases where lineage B.1.1.7 (Alpha) was identified by genomic analysis and those presumed to be B.1.1.7 based on a positive N501Y and negative E484K mutation in the Investigation Subtype field.

**Includes B.1.351 (Beta) cases identified by genomic analysis and those presumed to be B.1.351 based on 'Mutation K417N+ and N501Y+ and E484K+' in the Investigation Subtype field.

***Includes P.1 (Gamma) cases identified by genomic analysis and those presumed to be P.1 based on 'Mutation K417T+ and N501Y+ and E484K+' in the Investigation Subtype field.

†Includes B.1.617.2 (Delta) and AY.3 cases identified by genomic analysis. Mutations common to B.1.617.2 are not included in the current VOC mutation test.

‡Mutations includes all confirmed COVID-19 cases with the following mutations detected, reported from the Investigation Subtype field: N501Y and E484K, N501Y (E484K unknown), E484K (N501Y negative), E484K (N501Y unknown).

§Includes cases identified as 'Mutation not detected' or 'Mutation N501Y- and E484K-' in the Investigation Subtype field only.

Data Source: CCM

Table 12. Summary of confirmed COVID-19 cases with a mutation or VOC detected by likely source of acquisition: Ontario

	Lineage B.1.1.7 (Alpha)*	%	Lineage B.1.351 (Beta)**	%	Lineage P.1 (Gamma)***	%	Lineage B.1.617.2 (Delta)†	%	Mutations ‡	%	Cumulative case count up to October 23, 2021	Cumulative percentage
Travel	853	0.6%	38	2.5%	70	1.3%	1,676	8.1%	327	1.4%	2,964	1.5%
Outbreak-associated or close contact of a confirmed case	81,688	55.8%	960	63.9%	3,319	63.4%	11,488	55.7%	15,005	64.8%	112,460	57.1%
Epidemiological link – type unspecified	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
No known epidemiological link	52,270	35.7%	405	26.9%	1,611	30.8%	6,545	31.7%	6,717	29.0%	67,548	34.3%
Information missing or unknown	11,692	8.0%	100	6.7%	231	4.4%	908	4.4%	1,097	4.7%	14,028	7.1%
Total	146,503		1,503		5,231		20,617		23,146		197,000	

Note: Information for how cases are grouped within each category is available in the technical notes. Data for cases with a B.1.1.7 (Alpha), B.1.351 (Beta), and P.1 (Gamma) lineage detected are determined using the Investigation Subtype field only.

*Includes all confirmed COVID-19 cases where lineage B.1.1.7 (Alpha) was identified by genomic analysis and those presumed to be B.1.1.7 based on a positive N501Y and negative E484K mutation in the Investigation Subtype field.

**Includes B.1.351 (Beta) cases identified by genomic analysis and those presumed to be B.1.351 based on 'Mutation K417N+ and N501Y+ and E484K+' in the Investigation Subtype field.

***Includes P.1 (Gamma) cases identified by genomic analysis and those presumed to be P.1 based on 'Mutation K417T+ and N501Y+ and E484K+' in the Investigation Subtype field.

†Includes B.1.617.2 (Delta) and AY.3 cases identified by genomic analysis. Mutations common to B.1.617.2 are not included in the current VOC mutation test.

‡Mutations includes all confirmed COVID-19 cases with the following mutations detected, reported from the Investigation Subtype field: N501Y and E484K, N501Y (E484K unknown), E484K (N501Y negative), E484K (N501Y unknown)

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 **October 26, 2021 at 1 p.m.** for cases reported from February 1, 2021 onwards and as of **October 25, 2021 at 9 a.m.** for cases reported up January 31, 2021.
- VOC testing data for this report were based on information successfully extracted from CCM within the laboratory object for select Logical Observation Identifiers Names and Codes (LOINC) for cases reported between February 07, 2021 and August 17, 2021, for all PHUs by PHO as of **September 29, 2021 at 1 p.m.** VOC testing data for cases reported between February 07, 2021 and August 17, 2021 are supplemented with information from the Investigation lineage and Investigation mutation field. For cases reported as of August 18, 2021, VOC test value is assigned based on information solely from the Investigation lineage and Investigation mutation fields for all PHUs.
- 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].
- Statistics Canada Postal Code Conversion File Plus (PCCF+), version 7B.
- The health equity (neighbourhood-level diversity and material deprivation) analyses use data from the 2016 Ontario Marginalization Index (ON-Marg), and population counts from the Ontario Health Insurance Plan (OHIP) Registered Person Database (RPDB) as of May 1, 2021 (provided by the Institute for Clinical Evaluative Sciences [ICES]):
 - Matheson FI; van Ingen T. 2016 Ontario marginalization index. Toronto, ON: Providence St. Joseph's and St. Michael's Healthcare; 2018. Joint publication with Public Health Ontario.
 - Chung H, Fung K, Ishiguro L, Paterson M, et al. Characteristics of COVID-19 diagnostic test recipients, Applied Health Research Questions (AHRQ) # 2021 0950 080 000. Toronto: Institute for Clinical Evaluative Sciences; 2020.

Data Caveats and Methods: Case Data

- The data represent case information reported to public health units and recorded in CCM. As a result, all counts are 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.
- Observed trends over time should be interpreted with caution for the most recent period due to reporting and/or data entry lags.
- 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. This includes persons with:

- laboratory confirmation by a validated NAAT assay
 - a validated point-of-care (POC) assay deemed acceptable to provide a final result
 - a validated laboratory-based serological assay SARS-CoV-2
- Cases of confirmed reinfection, as defined in the provincial case definitions, are counted as unique investigations. Reinfection cases include cases for persons (CCM clients) with two or more confirmed case investigations where the case investigations after the first one have the reinfection checkbox marked as 'Yes'.
 - Case classification information may be updated for individuals with a positive result issued from a point-of-care assays.
 - 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.
 - Reported date is the date the case was reported to the public health unit. This is different than the daily change in cases released by the Province for the same time period, which reflects the difference in cumulative counts reported to the Province between one day and the next.
 - Reported weeks were created to align with the Public Health Agency of Canada (PHAC) influenza surveillance weeks.
 - Case episode date represents an estimate of disease onset. This date is calculated based on the earliest date of symptom onset, specimen collection/test date, or the date reported to the public health unit.
 - Cases with unknown or missing ages were excluded from age-specific analyses.
 - Health care worker includes cases that reported 'Yes' to any of the following occupations: health care worker, doctor, nurse, dentist, dental hygienist, midwife, other medical technicians, personal support worker, respiratory therapist, first responder.
 - 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 considered 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 hospitalization end date entered) and have a case status of 'closed' indicating that public health follow up is complete and are 14 days past their symptom onset date or specimen collection date
 - Data on hospital admissions, ICU admissions and deaths are likely under-reported as these events may occur after the completion of public health follow up of cases. Cases that were admitted to hospital or died after follow-up was completed may not be captured in CCM.

- Deaths are determined by using the outcome field in CCM. 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.
- Hospitalization includes all cases for which a hospital admission date was reported or hospitalization/ICU was reported as 'Yes' 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.
- 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 this data field is supplemented by archived Male/Female information previously entered in the Gender field.
- 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 a confirmed outbreak, was a contact of a case, had an Epidemiological link with type unspecified, 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
- '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.
- '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.

- 'Cases associated with school outbreaks' includes cases that are linked to an outbreak, by school classification type (Elementary, Elementary/Secondary, Secondary, Post-Secondary), that met the definition of a [school outbreak](#).
- School classification types are defined by the Ministry of Education.
 - Elementary/Secondary schools include public or private schools educating children in a combination of elementary and secondary grades (e.g., Kindergarten to Grade 8, Grades 9 to 12, and Kindergarten to Grade 12).
- 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 (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
- 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'.
- Outbreaks are declared by the local medical officer of health or their designate in accordance to the Health Protection and Promotion Act and criteria outlined in [Ministry guidance documents](#).
- School outbreaks include outbreaks declared on or after week-36 (August 30 to September 5, 2020).
- Public Health Ontario conducts testing and genomic analyses for SARS-CoV-2 positive specimens using the criteria outlined here: <https://www.publichealthontario.ca/en/laboratory-services/test-information-index/covid-19-voc>
- Lineage nomenclature is dynamic. PANGO lineage naming and assignment may change as more samples are sequenced and analyzed.
- Variant status may be updated based on scientific evidence. Variants designated as a VOC in Canada is available on the [Public Health Agency of Canada's SARS-CoV-2 Variants webpage](#).
- Changes to the VOC testing algorithm may occur over time and trends should be interpreted with caution. Since February 3, 2021 all PCR positive SARS-CoV-2 specimens with CT values ≤ 35 are tested for a N501Y mutation. As of March 22, 2021, positive specimens with a Ct ≤ 35 are tested for both the N501Y and E484K mutation, with all E484K positive specimens with a Ct ≤ 30 forwarded for further genomic analysis. If found to be positive for the N501Y mutation only, no further genomic analysis are performed as these are presumed to be B.1.1.7 (alpha). As of May 26, 2021, cases where an E484K mutation is detected will no longer be reflexed for sequencing as VOC testing labs switched to a representative sampling method where only a proportion of all positives with a Ct ≤ 30 are forwarded for further genomic analysis. The laboratory detection of a variant of concern is a multi-step process. Samples that test positive for SARS-CoV-2 and have a cycle threshold (Ct) value ≤ 35 can be tested for mutations common to variants of concern. If

positive for the mutation of interest these samples may then undergo genomic analyses to identify the VOC. VOC lineages may still be confirmed using genomic analysis despite specific S gene mutation(s) being documented as ‘unable to complete’ due to poor sequence quality at the genome position.

- If a VOC is identified through genomic analysis cases initially classified as a mutation may be updated and moved to the appropriate lineage [B.1.1.7 (Alpha), B.1.351 (Beta), P.1 (Gamma) and B.1.617.2 (Delta)].

Data Caveats and Methods: ON-Marg

- ON-Marg is a data tool that combines a wide range of demographic indicators into multiple distinct dimensions of marginalization. It is an area-based index which assigns a measure of marginalization based on neighbourhood versus individual characteristics. As such, the broader demographic trends of an area may not reflect all residents of a neighbourhood owing to the inherent heterogeneity of demographic characteristics which can vary substantially especially across large rural geographies. For more information, please visit [PHO's ON-Marg website](#).
- Neighbourhood diversity is defined using the ethnic concentration dimension of ON-Marg, which measures populations who may experience marginalization related to racism and discrimination. It is based on the proportion of non-white and non-Indigenous residents (visible minority) and/or the proportion of immigrants that arrived in Canada within the past five years. ‘Visible minority’ is a term used by Statistics Canada that, although is considered to be outdated, is used here to be consistent with the Canadian census.
- Neighbourhood material deprivation is defined using the material deprivation dimension of ON-Marg, which is closely connected to poverty. It refers to the inability of individuals and communities to access and attain basic material needs. The indicators included in this dimension measure income, quality of housing, educational attainment and family structure characteristics.
- “Neighbourhoods” are considered to be Statistic Canada dissemination areas (DA). Cases were probabilistically matched to a DA based on their postal code using Statistics Canada’s PCCF+ version 7B file, and subsequently assigned to a quintile of marginalization that contained 20% of Ontario neighbourhoods. The quintiles for the ethnic concentration and the material deprivation dimensions are ordered from quintiles 1 to 5, with quintile 1 having the lowest level of marginalization (i.e., least diverse or least deprived) and quintile 5 having the highest level of marginalization (i.e., most diverse or most deprived).
- The following were not included in analyses that summarize the impact of COVID-19 among Ontarians who may experience marginalization:
 - People who have tested positive for COVID-19 that reside in institutional and congregate settings are not included in the census data from which the marginalization indicators (ethnic concentration and material deprivation) are derived. Although these cases represent a large number of cases overall and deaths, their exclusion ensures appropriate comparisons since institutional and congregate setting residents are excluded from ON-Marg.
 - People who have tested positive for COVID-19 that reside in census dissemination areas where data has been suppressed, and cases that have missing or invalid postal codes could not be assigned to a quintile of marginalization.

- Due to data suppression for some census indicators on Indian Reserves in Ontario, residents of Indian Reserves could not be included in ON-Marg and therefore people who have tested positive for COVID-19 and are living on Indian Reserves could not be assigned to a quintile of marginalization. While Indigenous individuals living off reserves are included in this analysis, Indigeneity data is not currently collected or captured in dimensions of ON-Marg.
- Population counts used in rate denominators were provided by ICES. Individuals alive and eligible for the Ontario Health Insurance Plan (OHIP) as of January 1st, 2021 using the OHIP RPDB were included.
 - Individuals residing in long-term care (LTC) homes were excluded. Recent health care transaction records (e.g., OHIP physician billings, Ontario Drug Benefit [ODB] Plan claims) and Resident Assessment Instrument (RAI) assessments from the Continuing Care Reporting System (CCRS) were used to identify individuals residing in a LTC home near the period prior to the index date.
 - Postal codes were assigned to individuals according to the most recent residential address available in the OHIP RPDB.
- This work is supported by the Applied Health Research Questions (AHRQ) Portfolio at ICES, which is funded by the Ontario Ministry of Health, and Ontario Health Data Platform (OHDP), a Province of Ontario initiative to support Ontario's ongoing response to COVID-19 and its related impacts. Parts of this material are based on data and information compiled and provided by the Ontario Ministry of Health. The analyses, conclusions, opinions and statements expressed herein are solely those of the authors and do not reflect those of ICES, the OHDP or the funding or data sources; no endorsement is intended or should be inferred. For more information on AHRQ and how to submit a request, please visit www.ices.on.ca/DAS/AHRQ.

Appendix A

Table 1A. Confirmed cases of COVID-19 by public health unit reported week: Ontario

Reported Week	Start date	End date	Number of cases	Cumulative count
2	January 5, 2020	January 11, 2020	0	0
3	January 12, 2020	January 18, 2020	0	0
4	January 19, 2020	January 25, 2020	3	3
5	January 26, 2020	February 1, 2020	0	3
6	February 2, 2020	February 8, 2020	0	3
7	February 9, 2020	February 15, 2020	0	3
8	February 16, 2020	February 22, 2020	1	4
9	February 23, 2020	February 29, 2020	13	17
10	March 1, 2020	March 7, 2020	15	32
11	March 8, 2020	March 14, 2020	148	180
12	March 15, 2020	March 21, 2020	447	627
13	March 22, 2020	March 28, 2020	1,325	1,952
14	March 29, 2020	April 4, 2020	2,797	4,749
15	April 5, 2020	April 11, 2020	3,167	7,916
16	April 12, 2020	April 18, 2020	4,262	12,178
17	April 19, 2020	April 25, 2020	3,651	15,829
18	April 26, 2020	May 2, 2020	2,902	18,731
19	May 3, 2020	May 9, 2020	2,353	21,084
20	May 10, 2020	May 16, 2020	2,223	23,307
21	May 17, 2020	May 23, 2020	2,617	25,924
22	May 24, 2020	May 30, 2020	2,611	28,535
23	May 31, 2020	June 6, 2020	2,302	30,837

Reported Week	Start date	End date	Number of cases	Cumulative count
24	June 7, 2020	June 13, 2020	1,472	32,309
25	June 14, 2020	June 20, 2020	1,226	33,535
26	June 21, 2020	June 27, 2020	1,250	34,785
27	June 28, 2020	July 4, 2020	1,085	35,870
28	July 5, 2020	July 11, 2020	866	36,736
29	July 12, 2020	July 18, 2020	931	37,667
30	July 19, 2020	July 25, 2020	993	38,660
31	July 26, 2020	August 1, 2020	808	39,468
32	August 2, 2020	August 8, 2020	592	40,060
33	August 9, 2020	August 15, 2020	610	40,670
34	August 16, 2020	August 22, 2020	728	41,398
35	August 23, 2020	August 29, 2020	850	42,248
36	August 30, 2020	September 5, 2020	976	43,224
37	September 6, 2020	September 12, 2020	1,505	44,729
38	September 13, 2020	September 19, 2020	2,372	47,101
39	September 20, 2020	September 26, 2020	3,123	50,224
40	September 27, 2020	October 3, 2020	4,222	54,446
41	October 4, 2020	October 10, 2020	5,036	59,482
42	October 11, 2020	October 17, 2020	5,276	64,758
43	October 18, 2020	October 24, 2020	6,039	70,797
44	October 25, 2020	October 31, 2020	6,388	77,185
45	November 1, 2020	November 7, 2020	7,602	84,787
46	November 8, 2020	November 14, 2020	10,440	95,227
47	November 15, 2020	November 21, 2020	10,038	105,265
48	November 22, 2020	November 28, 2020	11,135	116,400

Reported Week	Start date	End date	Number of cases	Cumulative count
49	November 29, 2020	December 5, 2020	12,681	129,081
50	December 6, 2020	December 12, 2020	13,060	142,141
51	December 13, 2020	December 19, 2020	15,656	157,797
52	December 20, 2020	December 26, 2020	15,631	173,428
53	December 27, 2020	January 2, 2021	20,446	193,874
1	January 3, 2021	January 9, 2021	24,876	218,750
2	January 10, 2021	January 16, 2021	21,382	240,132
3	January 17, 2021	January 23, 2021	16,399	256,531
4	January 24, 2021	January 30, 2021	12,768	269,299
5	January 31, 2021	February 6, 2021	9,783	279,082
6	February 7, 2021	February 13, 2021	7,900	286,982
7	February 14, 2021	February 20, 2021	7,457	294,439
8	February 21, 2021	February 27, 2021	7,685	302,124
9	February 28, 2021	March 6, 2021	7,934	310,058
10	March 7, 2021	March 13, 2021	9,480	319,538
11	March 14, 2021	March 20, 2021	11,022	330,560
12	March 21, 2021	March 27, 2021	14,389	344,949
13	March 28, 2021	April 3, 2021	18,947	363,896
14	April 4, 2021	April 10, 2021	25,576	389,472
15	April 11, 2021	April 17, 2021	30,894	420,366
16	April 18, 2021	April 24, 2021	28,342	448,708
17	April 25, 2021	May 1, 2021	25,208	473,916
18	May 2, 2021	May 8, 2021	20,754	494,670
19	May 9, 2021	May 15, 2021	16,525	511,195
20	May 16, 2021	May 22, 2021	12,652	523,847

Reported Week	Start date	End date	Number of cases	Cumulative count
21	May 23, 2021	May 29, 2021	7,759	531,606
22	May 30, 2021	June 5, 2021	5,216	536,822
23	June 6, 2021	June 12, 2021	3,482	540,304
24	June 13, 2021	June 19, 2021	2,418	542,722
25	June 20, 2021	June 26, 2021	1,881	544,603
26	June 27, 2021	July 3, 2021	1,473	546,076
27	July 4, 2021	July 10, 2021	1,226	547,302
28	July 11, 2021	July 17, 2021	1,044	548,346
29	July 18, 2021	July 24, 2021	1,109	549,455
30	July 25, 2021	July 31, 2021	1,350	550,805
31	August 1, 2021	August 7, 2021	1,906	552,711
32	August 8, 2021	August 14, 2021	3,172	555,883
33	August 15, 2021	August 21, 2021	4,144	560,027
34	August 22, 2021	August 28, 2021	4,774	564,801
35	August 29, 2021	September 4, 2021	5,184	569,985
36	September 5, 2021	September 11, 2021	5,055	575,040
37	September 12, 2021	September 18, 2021	4,916	579,956
38	September 19, 2021	September 25, 2021	4,398	584,354
39	September 26, 2021	October 2, 2021	3,953	588,307
40	October 3, 2021	October 9, 2021	3,843	592,150
41	October 10, 2021	October 16, 2021	2,904	595,054
42	October 17, 2021	October 23, 2021	2,635	597,689

Table 2A. Confirmed cases of COVID-19 by public health unit and region: Ontario

Public Health Unit Name	Cases reported week 41	Rate per 100,000 population Reported week 41	Cases reported week 42	Rate per 100,000 population Reported week 42
Northwestern Health Unit	4	4.9	3	3.7
Thunder Bay District Health Unit	3	1.9	12	7.6
TOTAL NORTH WEST	7	2.9	15	6.3
Algoma Public Health	5	4.2	20	17.0
North Bay Parry Sound District Health Unit	7	5.4	9	7.0
Porcupine Health Unit	5	5.9	6	7.1
Public Health Sudbury & Districts	45	21.9	145	70.6
Timiskaming Health Unit	3	8.9	7	20.7
TOTAL NORTH EAST	65	11.4	187	32.7
Ottawa Public Health	186	17.8	216	20.7
Eastern Ontario Health Unit	115	53.3	47	21.8
Hastings Prince Edward Public Health	23	13.3	16	9.3
Kingston, Frontenac and Lennox & Addington Public Health	47	22.5	26	12.4
Leeds, Grenville & Lanark District Health Unit	7	3.9	9	5.0
Renfrew County and District Health Unit	14	12.9	2	1.8
TOTAL EASTERN	392	20.3	316	16.4
Durham Region Health Department	82	11.5	89	12.5

Public Health Unit Name	Cases reported week 41	Rate per 100,000 population Reported week 41	Cases reported week 42	Rate per 100,000 population Reported week 42
Haliburton, Kawartha, Pine Ridge District Health Unit	12	6.3	13	6.8
Peel Public Health	394	25.2	312	20.0
Peterborough Public Health	19	12.8	9	6.1
Simcoe Muskoka District Health Unit	108	17.9	120	19.9
York Region Public Health	235	19.6	171	14.2
TOTAL CENTRAL EAST	850	19.2	714	16.2
Toronto Public Health	489	16.4	372	12.4
TOTAL TORONTO	489	16.4	372	12.4
Chatham-Kent Public Health	65	61.0	53	49.7
Grey Bruce Health Unit	17	9.7	11	6.2
Huron Perth Public Health	36	24.6	18	12.3
Lambton Public Health	74	55.7	75	56.4
Middlesex-London Health Unit	75	14.7	113	22.1
Southwestern Public Health	96	43.9	92	42.0
Windsor-Essex County Health Unit	192	44.6	133	30.9
TOTAL SOUTH WEST	555	32.2	495	28.7
Brant County Health Unit	39	25.4	41	26.7
City of Hamilton Public Health Services	162	27.8	123	21.1
Haldimand-Norfolk Health Unit	24	20.0	27	22.5
Halton Region Public Health	70	11.5	90	14.7
Niagara Region Public Health	98	20.3	117	24.3

Public Health Unit Name	Cases reported week 41	Rate per 100,000 population Reported week 41	Cases reported week 42	Rate per 100,000 population Reported week 42
Region of Waterloo Public Health and Emergency Services	86	14.2	85	14.0
Wellington-Dufferin-Guelph Public Health	67	21.5	53	17.0
TOTAL CENTRAL WEST	546	19.1	536	18.7
TOTAL ONTARIO	2,904	19.7	2,635	17.9

Note: Interpret information for the most recent week with caution due to reporting lags.

Table 3A. Confirmed COVID-19 variants of concern by public health unit and region: Ontario

Public Health Unit Name	Cumulative case count up to October 23 for Lineage B.1.1.7 (Alpha)*	Cumulative case count up to October 23 for Lineage B.1.351 (Beta)**	Cumulative case count up to October 23 for Lineage P.1 (Gamma)***	Cumulative case count up to October 23 for Lineage B.1.617.2 (Delta)†	Cumulative count up to October 23 for Mutations‡
Northwestern Health Unit	67	0	1	23	17
Thunder Bay District Health Unit	104	1	2	28	74
TOTAL NORTH WEST	171	1	3	51	91
Algoma Public Health	68	0	15	28	26
North Bay Parry Sound District Health Unit	234	28	3	77	13
Porcupine Health Unit	1,108	2	0	74	8
Public Health Sudbury & Districts	689	13	10	72	268
Timiskaming Health Unit	84	1	0	6	0
TOTAL NORTH EAST	2,183	44	28	257	315
Ottawa Public Health	6,851	515	55	645	473
Eastern Ontario Health Unit	665	46	21	149	268
Hastings Prince Edward Public Health	112	0	18	121	391
Kingston, Frontenac and Lennox &	458	2	35	95	132

Public Health Unit Name	Cumulative case count up to October 23 for Lineage B.1.1.7 (Alpha)*	Cumulative case count up to October 23 for Lineage B.1.351 (Beta)**	Cumulative case count up to October 23 for Lineage P.1 (Gamma)***	Cumulative case count up to October 23 for Lineage B.1.617.2 (Delta)†	Cumulative count up to October 23 for Mutations‡
Addington Public Health					
Leeds, Grenville & Lanark District Health Unit	294	19	0	71	44
Renfrew County and District Health Unit	232	8	7	19	12
TOTAL EASTERN	8,612	590	136	1,100	1,320
Durham Region Health Department	9,523	66	270	772	1,213
Haliburton, Kawartha, Pine Ridge District Health Unit	445	0	23	163	307
Peel Public Health	31,194	163	1,774	2,892	2,859
Peterborough Public Health	630	4	8	133	161
Simcoe Muskoka District Health Unit	4,009	36	174	639	681
York Region Public Health	15,875	79	482	1,672	2,741
TOTAL CENTRAL EAST	61,676	348	2,731	6,271	7,962
Toronto Public Health	46,071	375	1,524	4,205	7,478
TOTAL TORONTO	46,071	375	1,524	4,205	7,478
Chatham-Kent Public Health	131	5	16	240	107

Public Health Unit Name	Cumulative case count up to October 23 for Lineage B.1.1.7 (Alpha)*	Cumulative case count up to October 23 for Lineage B.1.351 (Beta)**	Cumulative case count up to October 23 for Lineage P.1 (Gamma)***	Cumulative case count up to October 23 for Lineage B.1.617.2 (Delta)†	Cumulative count up to October 23 for Mutations‡
Grey Bruce Health Unit	310	0	6	606	55
Huron Perth Public Health	279	0	12	155	29
Lambton Public Health	439	0	18	147	131
Middlesex-London Health Unit	3,384	2	124	780	189
Southwestern Public Health	690	3	21	217	164
Windsor-Essex County Health Unit	1,857	8	19	1,187	141
TOTAL SOUTH WEST	7,090	18	216	3,332	816
Brant County Health Unit	670	2	97	308	508
City of Hamilton Public Health Services	5,066	66	105	1,689	2,093
Haldimand-Norfolk Health Unit	369	3	23	114	408
Halton Region Public Health	5,090	30	169	729	620
Niagara Region Public Health	4,286	4	20	217	1,104
Region of Waterloo Public Health and Emergency Services	3,134	21	98	1,881	254

Public Health Unit Name	Cumulative case count up to October 23 for Lineage B.1.1.7 (Alpha)*	Cumulative case count up to October 23 for Lineage B.1.351 (Beta)**	Cumulative case count up to October 23 for Lineage P.1 (Gamma)***	Cumulative case count up to October 23 for Lineage B.1.617.2 (Delta)†	Cumulative count up to October 23 for Mutations‡
Wellington-Dufferin-Guelph Public Health	2,085	1	81	463	177
TOTAL CENTRAL WEST	20,700	127	593	5,401	5,164
TOTAL ONTARIO	146,503	1,503	5,231	20,617	23,146

Note: Interpret the VOC and mutation trends with caution due to the varying time required to complete VOC testing and/or genomic analysis following the initial positive test for SARS-CoV-2. Data for calculating the cumulative case count uses data from the Investigation Subtype field only. Data for cases with a B.1.1.7 (Alpha), B.1.351 (Beta), P.1 (Gamma) and B.1.617.2 (Delta) lineage detected or a mutation are determined using the Investigation Subtype field only.

*Includes all confirmed COVID-19 cases where lineage B.1.1.7 (Alpha) was identified by genomic analysis and those presumed to be B.1.1.7 based on a positive N501Y and negative E484K mutation in the Investigation Subtype field.

**Includes B.1.351 (Beta) cases identified by genomic analysis and those presumed to be B.1.351 based on 'Mutation K417N+ and N501Y+ and E484K+' in the Investigation Subtype field

***Includes P.1 (Gamma) cases identified by genomic analysis and those presumed to be P.1 based on 'Mutation K417T+ and N501Y+ and E484K+' in the Investigation Subtype field

†Includes B.1.617.2 (Delta) and AY.3 cases identified by genomic analysis. Mutations common to B.1.617.2 are not included in the current VOC mutation test.

‡ Mutations includes all confirmed COVID-19 cases with the following mutations detected, reported from the Investigation Subtype field: N501Y and E484K, N501Y (E484K unknown), E484K (N501Y negative), E484K (N501Y unknown)

Citation

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Weekly epidemiologic summary: COVID-19 in Ontario – focus on October 17, 2021 to October 23, 2021. Toronto, ON: Queen's Printer for Ontario; 2021.

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For Further Information

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