

Epidemiologic Summary

COVID-19 in Ontario: January 15, 2020 to May 18, 2020

This report includes the most current information available from the integrated Public Health Information System (iPHIS) as of **4 p.m. May 18, 2020**, from the Toronto Public Health Coronavirus Rapid Entry System (CORES) and the Ottawa Public Health COVID-19 Ottawa Database (The COD), and Middlesex-London COVID-19 Case and Contact Management tool (CCMtool) as of **2 p.m. May 18, 2020**.

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

Purpose

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

Highlights

- There are 23,384 confirmed cases of COVID-19 in Ontario reported to date. This represents an
 increase of 427 confirmed cases from the previous report.
 - 42.4% of cases are male, 56.9% are female.
 - 42.1% of cases are 60 years of age and older.
 - Greater Toronto Area public health units account for 63.1% of cases.
 - 12.9% of cases were hospitalized.
- 1,919 deaths have been reported (please note there may be a reporting delay for deaths). This is an increase of 15 deaths from the previous report.
- 280 outbreaks have been reported in long-term care homes. This is an increase of 4 outbreaks from the previous report.

Case Characteristics

Table 1. Summary of cases of COVID-19: Ontario, January 15, 2020 to May 18, 2020

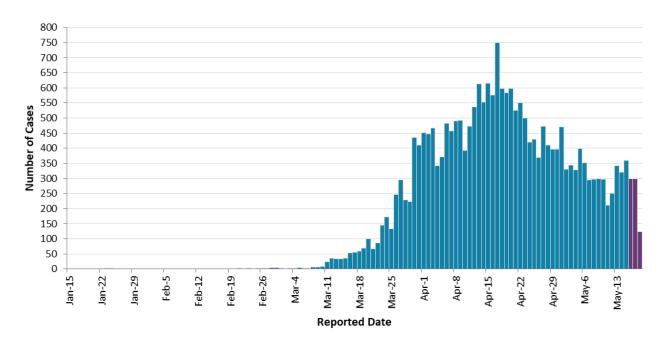
	Number	Percentage
Number of cases ¹	23,384	N/A
Change from previous report	427	1.9% increase
Gender: Male	9,919	42.4
Gender: Female	13,294	56.9
Ages: 19 and under	668	2.9
Ages: 20-39	5,707	24.4
Ages: 40-59	7,155	30.6
Ages: 60-79	4,923	21.1
Ages: 80 and over	4,916	21.0
Number of cases in health care workers	4,043	17.3

¹ Cases and rates by public health units are provided in Appendix A.

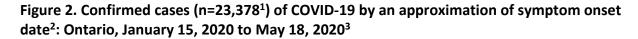
Note: 171 cases did not specify male or female. 15 cases had an unknown age.

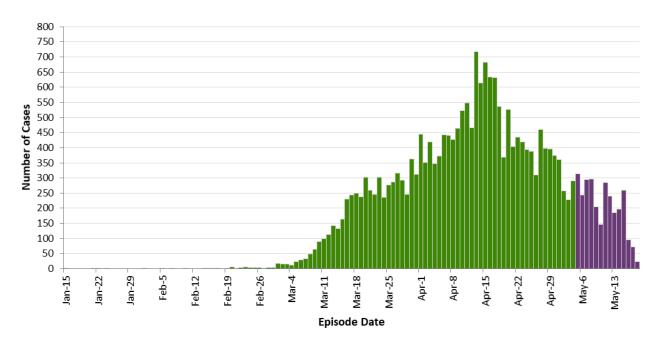
Time

Figure 1. Confirmed cases (n=23,384) of COVID-19 by reported date: Ontario, January 15, 2020 to May 18, 2020¹



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

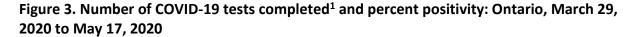


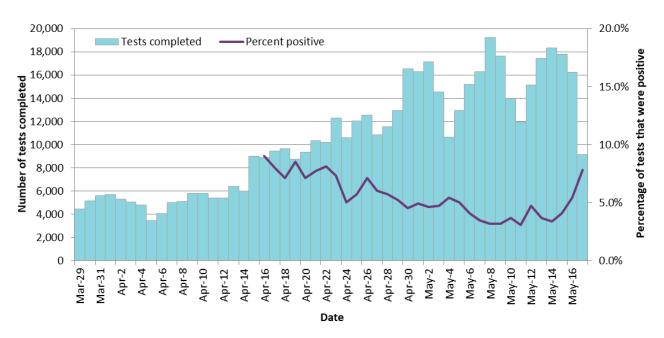


¹ This count excludes 6 cases that did not have an episode date.

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

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

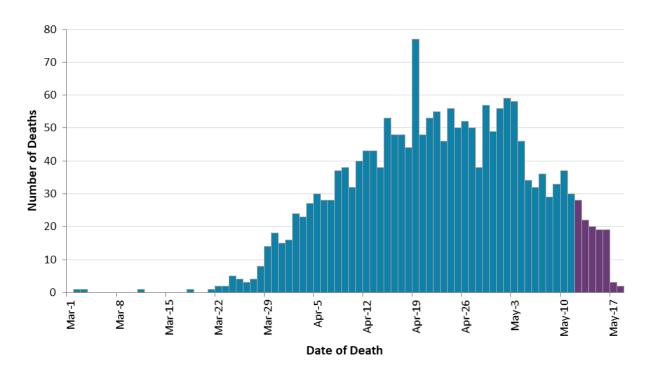




¹The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive.

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





¹This count excludes 5 cases that did not have a date of death reported.

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

Exposure

Table 2. Confirmed cases (n=23,384) of COVID-19 by exposure type: Ontario, January 15, 2020 to May 18, 2020

	Number	Percentage
Travel ¹	1,530	6.5
Close contact of a confirmed case	5,754	24.6
Community transmission	8,261	35.3
Information pending	7,839	33.5

¹Travel within the 14 days prior to becoming ill.

Severity

Table 3. Confirmed cases (n=23,384) of COVID-19 by severity: Ontario, January 15, 2020 to May 18, 2020

	Number	Percentage
Cumulative deaths reported (please note there may be a reporting delay for deaths in iPHIS)	1,919	8.2
Change from previous report	15	0.8% increase
Deaths reported in ages: 19 and under	0	0.0
Deaths reported in ages: 20-39	8	0.1
Deaths reported in ages: 40-59	81	1.1
Deaths reported in ages: 60-79	491	10.0
Deaths reported in ages: 80 and over	1,338	27.2
Cumulative intensive care ¹	667	2.9
Cumulative hospitalized ¹	3,006	12.9
Number of resolved ² cases	17,898	76.5

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

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

Geography

Figure 5. Confirmed cases (n=23,384) of COVID-19 by public health unit: Ontario, January 15, 2020 to May 18, 2020

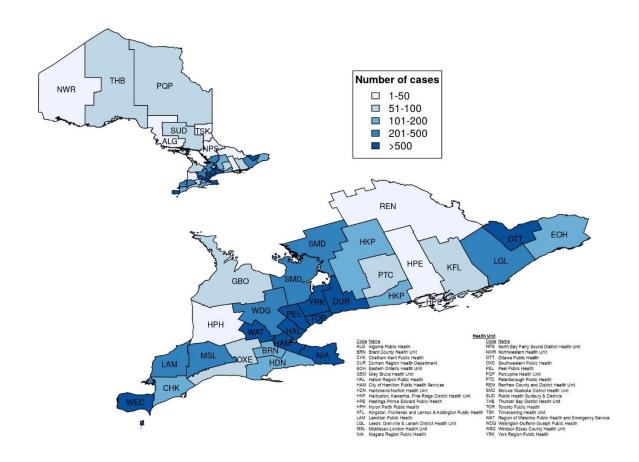
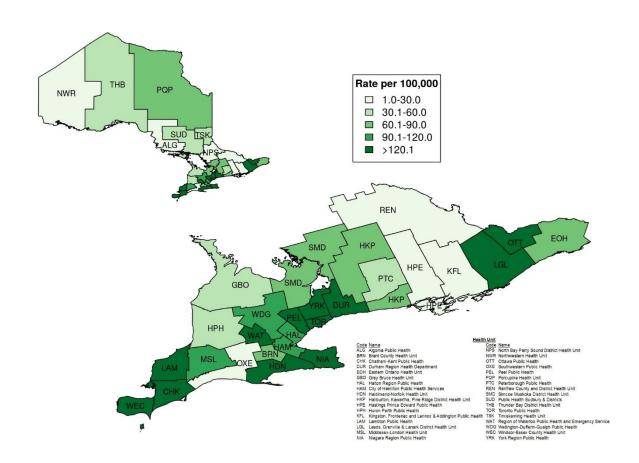


Figure 6. Rate of confirmed cases of COVID-19 by public health unit: Ontario, January 15, 2020 to May 18, 2020



Outbreaks in Institutions and Public Hospitals

Table 4a. Confirmed COVID-19 outbreaks reported in long-term care homes, retirement homes and hospitals by status: Ontario, January 15, 2020 to May 18, 2020

Institution type	Number of ongoing outbreaks ¹	Cumulative number of outbreaks reported
Long term care homes	220	280
Retirement homes	81	115
Hospitals	54	77

¹Includes all outbreaks that are 'Open' in iPHIS without a 'Declared Over Date' recorded.

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

Table 4b. Confirmed cases of COVID-19 in long-term care homes⁶: Ontario, January 15, 2020 to May 18, 2020

Indicator	Number	Percentage
Cases among long-term care home residents ^{1,2,3}	4,235	18.1 % of all cases
Cases among health care workers ^{2,3,4,} associated with long-term care outbreaks	1,456	6.2 % of all cases
Deaths ⁵ reported for residents in long-term care homes ^{1,2,3}	1,115	58.1% of all deaths
Deaths ⁵ reported for health care workers ^{2,3,4,} in long- term care homes	3	0.2 % of all deaths

¹ Includes cases that reported '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 factor 'Resident of nursing home or other chronic care facility'.

⁵Deaths are determined by using the outcome field. Any case marked 'Fatal' is included in the deaths data. Deaths are included whether or not COVID-19 was determined to be a contributing or underlying cause of death as indicated in iPHIS or local case management systems.

² Excludes cases that reported 'Yes' to both risk factors: 'Resident of nursing home or other chronic care facility' and 'health care worker'.

³There is a lag between when cases are reported and when risk factors are updated.

⁴ Health care worker includes cases that reported 'Yes' to any of the occupations health care worker, doctor, nurse; and for health care workers associated with a long-term care outbreak those reported to be part of an outbreak assigned as a long-term care home (via the outbreak number or case comments field)

⁶ Counts of cases and deaths for long term care home residents and staff are now being calculated using individual level data as opposed to aggregate data. As a result, they are being reported separately from the aggregate counts in table 4c.

Table 4c. Aggregate case counts (confirmed and epidemiologically linked) reported for COVID-19 outbreaks in retirement homes and hospitals: 1 Ontario, January 15, 2020 to May 18, 2020

Indicator	Retirement Homes	Hospitals
Total number of cases ^{,2,3,4} reported as part of the confirmed COVID-19 outbreaks	1,062	684
Cases reported among residents/patients	731	326
Cases reported among staff	331	350
Total number of deaths ^{2,3,4} reported as part of the confirmed COVID-19 outbreaks	160	52
Deaths reported among residents/patients	160	52
Deaths reported among staff	0	0

¹ Counts of cases and deaths for long term care home residents and staff are now being calculated using individual level data as opposed to aggregate data. These are available in table 4b.

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

² Includes all outbreak-related cases and deaths reported in aggregate outbreak summary counts, regardless of whether the case was laboratory confirmed (deaths among non-laboratory confirmed cases reported here are not included in Table 3).

³ May include cases and deaths other than residents/patients or staff, such as volunteers. As a result, the total number of cases and deaths may be greater than the number of cases and deaths reported in residents or staff.

⁴ Counts may fluctuate from previous reports due to updates made by health units as additional information about the outbreak is reported.

Technical Notes

Data Sources

- The data for this report were based on:
 - Information extracted from the Ontario Ministry of Health (MOH) integrated Public Health Information System (iPHIS) database, as of May 18, 2020 at 4 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 May 18, 2020 at 2 p.m.
- iPHIS, CORES, The COD and COVID-19 CCMtool are dynamic disease reporting systems, which
 allows ongoing updates to data previously entered. As a result, data extracted from iPHIS and
 the Local Systems represent a snapshot at the time of extraction and may differ from previous
 or subsequent reports.
- Ontario population projection data for 2020 were sourced from Ontario Ministry of Health, IntelliHEALTH Ontario. Data were extracted on November 26, 2019.
- COVID-19 test data were based on information from The Provincial COVID-19 Diagnostics Network, reported by member microbiology laboratories.

Data Caveats:

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

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

Appendix A

Table 1. Confirmed cases (n=23,384) of COVID-19 by public health unit: Ontario, January 15, 2020 to May 18, 2020

Public Health Unit Name	Cases	Rate per 100,000 population
Northwestern Health Unit	19	21.7
Thunder Bay District Health Unit	79	52.7
TOTAL NORTH WEST	98	41.2
Algoma Public Health	20	17.5
North Bay Parry Sound District Health Unit	21	16.2
Porcupine Health Unit	65	77.9
Public Health Sudbury & Districts	63	31.7
Timiskaming Health Unit	18	55.1
TOTAL NORTH EAST	187	33.4
Ottawa Public Health	1,820	172.6
Eastern Ontario Health Unit	142	68.0
Hastings Prince Edward Public Health	42	24.9
Kingston, Frontenac and Lennox & Addington Public Health	61	28.7
Leeds, Grenville & Lanark District Health Unit	340	196.3
Renfrew County and District Health Unit	19	17.5
TOTAL EASTERN	2,424	125.8
Durham Region Health Department	1,272	178.6
Haliburton, Kawartha, Pine Ridge District Health Unit	163	86.3
Peel Public Health	3,477	216.5

Public Health Unit Name	Cases	Rate per 100,000 population
Peterborough Public Health	74	50.0
Simcoe Muskoka District Health Unit	431	71.9
York Region Public Health	2,018	164.6
TOTAL CENTRAL EAST	7,435	165.9
Toronto Public Health	7,989	256.0
TOTAL TORONTO	7,989	256.0
Chatham-Kent Public Health	137	128.9
Grey Bruce Health Unit	89	52.4
Huron Perth Public Health	49	35.1
Lambton Public Health	225	171.8
Middlesex-London Health Unit	474	93.4
Southwestern Public Health	63	29.8
Windsor-Essex County Health Unit	784	184.5
TOTAL SOUTH WEST	1,821	107.7
Brant County Health Unit	109	70.2
City of Hamilton Public Health Services	586	99.0
Haldimand-Norfolk Health Unit	198	173.6
Halton Region Public Health	585	94.5
Niagara Region Public Health	608	128.7
Region of Waterloo Public Health and Emergency Services	997	170.6
Wellington-Dufferin-Guelph Public Health	347	111.3
TOTAL CENTRAL WEST	3,430	120.4
TOTAL ONTARIO	23,384	157.3

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For Further Information

For more information, email cd@oahpp.ca.

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