

Epidemiologic Summary

COVID-19 in Ontario: January 15, 2020 to May 25, 2020

This report includes the most current information available from the integrated Public Health Information System (iPHIS) as of **4 p.m. May 25, 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 25, 2020.**

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

Purpose

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

Highlights

- There are 26,191 confirmed cases of COVID-19 in Ontario reported to date. This represents an increase of 287 confirmed cases from the previous report.
 - 43.1% of cases are male, 56% are female.
 - 40.7% of cases are 60 years of age and older.
 - Greater Toronto Area public health units account for 65.1% of cases.
 - 12.6% of cases were hospitalized.
- 2,123 deaths have been reported (please note there may be a reporting delay for deaths). This is an increase of 21 deaths from the previous report.
- 297 outbreaks have been reported in long-term care homes. This is an increase of 2 outbreaks from the previous report.

Case Characteristics

	Number	Percentage
Number of cases ¹	26,191	N/A
Change from previous report	287	1.1% increase
Gender: Male	11,286	43.1
Gender: Female	14,679	56.0
Ages: 19 and under	866	3.3
Ages: 20-39	6,651	25.4
Ages: 40-59	8,002	30.6
Ages: 60-79	5,371	20.5
Ages: 80 and over	5,285	20.2
Number of cases in health care workers	4,485	17.1

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

Note: 226 cases did not specify male or female. 16 cases had an unknown age.

Time

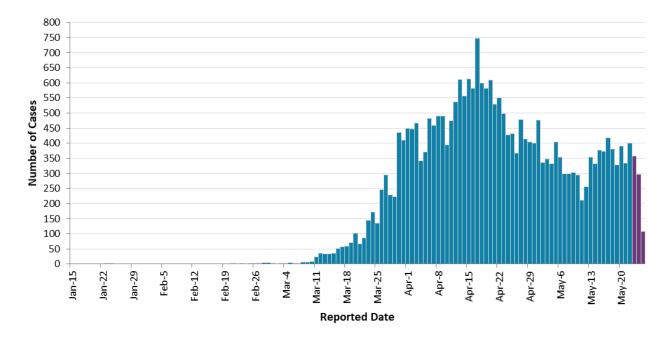


Figure 1. Confirmed cases (n=26,191) of COVID-19 by reported date: Ontario, January 15, 2020 to May 25, 2020¹

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

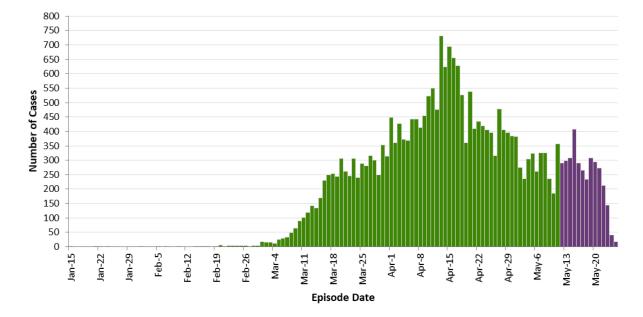
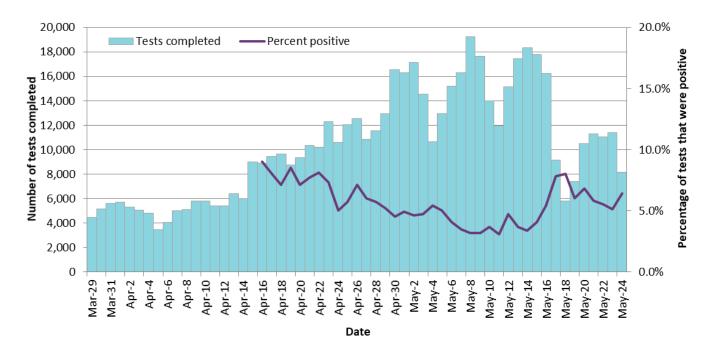


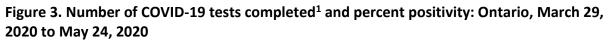
Figure 2. Confirmed cases (n=26,186¹) of COVID-19 by an approximation of symptom onset date²: Ontario, January 15, 2020 to May 25, 2020³

¹ This count excludes 5 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.

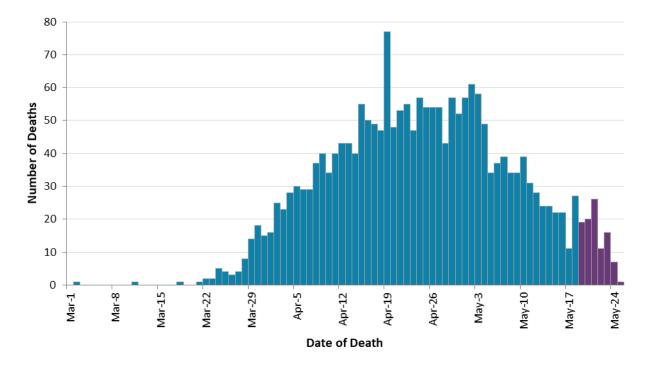
³ Interpret case counts for the most recent days (approximately 14 days, as shown in purple) with caution due to reporting lags.





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 4 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=26,191) of COVID-19 by likely source of acquisition: Ontario,January 15, 2020 to May 25, 2020

	Number	Percentage
Travel ¹	1,492	5.7
Outbreak-associated ² or close contact of a confirmed case	15,929	60.8
Sporadic community transmission ³	3,494	13.3
Information missing or unknown ⁴	5,276	20.1

¹Travel outside of Ontario during the incubation period, where close contact with a confirmed case or link to an outbreak was not reported.

² Includes cases indicating a link to a local outbreak.

³ Includes cases that could not be classified as travel, outbreak-associated or close contact.

⁴ Includes cases that only identified unknown exposure or risk factor data, as well as cases with no information.

Severity

Table 3. Confirmed cases (n=26,191) of COVID-19 by severity: Ontario, January 15, 2020 to May 25, 2020

	Number	Percentage
Cumulative deaths reported (please note there may be a reporting delay for deaths in iPHIS)	2,123	8.1
Change from previous report	21	1.0% 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	85	1.1
Deaths reported in ages: 60-79	553	10.3
Deaths reported in ages: 80 and over	1,477	27.9
Cumulative intensive care ¹	714	2.7
Cumulative hospitalized ¹	3,291	12.6
Number of resolved ² cases	19,958	76.2

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=26,191) of COVID-19 by public health unit: Ontario, January 15, 2020 to May 25, 2020

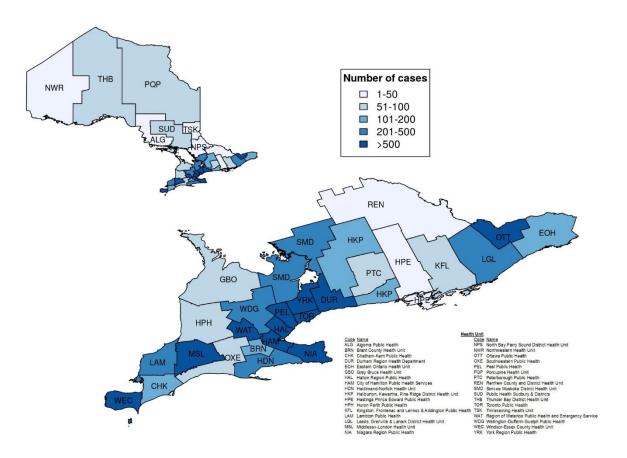
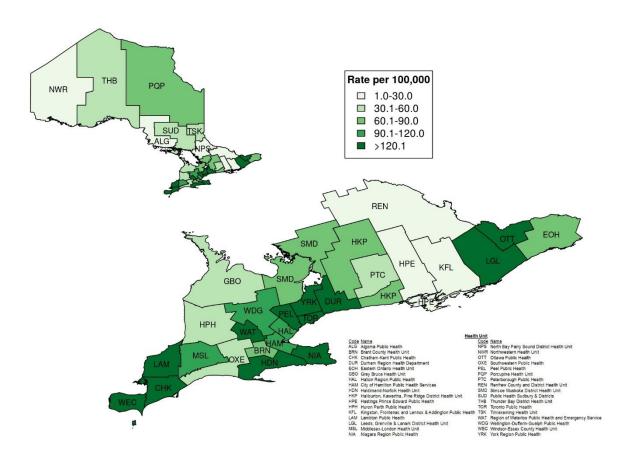


Figure 6. Rate of confirmed cases of COVID-19 by public health unit: Ontario, January 15, 2020 to May 25, 2020



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 25, 2020

Institution type	Number of ongoing outbreaks ¹	Cumulative number of outbreaks reported
Long term care homes	201	297
Retirement homes	80	123
Hospitals	52	82

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 25, 2020

Indicator	Number	Percentage
Cases among long-term care home residents ^{1,2,3}	4,892	18.7% of all cases
Cases among health care workers ^{2,3,4,} associated with long-term care outbreaks	1,703	6.5% of all cases
Deaths ⁵ reported for residents in long-term care homes ^{1,2,3}	1,335	62.9% of all deaths
Deaths ⁵ reported for health care workers ^{2,3,4,} in long- term care homes	4	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'.

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)

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.

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 25, 2020

Indicator	Retirement Homes	Hospitals
Total number of cases ^{,2,3,4} reported as part of the confirmed COVID-19 outbreaks	957	706
Cases reported among residents/patients	630	349
Cases reported among staff	327	349
Total number of deaths ^{2,3,4} reported as part of the confirmed COVID-19 outbreaks	134	64
Deaths reported among residents/patients	134	64
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.

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.

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

Technical Notes

Data Sources

- The data for this report were based on:
 - Information extracted from the Ontario Ministry of Health (MOH) integrated Public Health Information System (iPHIS) database, as of May 25, 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 25, 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

- Likely source of acquisition is determined by examining the exposure and risk factor fields from iPHIS and local systems to determine whether a case travelled, was associated with an outbreak, was a contact of a case, had no known epidemiological link (sporadic community transmission) or was reported to have an unknown source/no information was reported. Cases with multiple exposures or 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 > sporadic community transmission > information missing or unknown
 - For cases with an episode date *before* April 1, 2020: Travel > outbreak-associated > close contact of a confirmed case > sporadic community transmission > information missing or unknown
- 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=26,191) of COVID-19 by public health unit: Ontario, January 15, 2020 to May 25, 2020

Public Health Unit Name	Cases	Rate per 100,000 population
Northwestern Health Unit	22	25.1
Thunder Bay District Health Unit	81	54.0
TOTAL NORTH WEST	103	43.3
Algoma Public Health	20	17.5
North Bay Parry Sound District Health Unit	25	19.3
Porcupine Health Unit	65	77.9
Public Health Sudbury & Districts	62	31.2
Timiskaming Health Unit	18	55.1
TOTAL NORTH EAST	190	34.0
Ottawa Public Health	1,903	180.4
Eastern Ontario Health Unit	145	69.5
Hastings Prince Edward Public Health	44	26.1
Kingston, Frontenac and Lennox & Addington Public Health	61	28.7
Leeds, Grenville & Lanark District Health Unit	345	199.2
Renfrew County and District Health Unit	23	21.2
TOTAL EASTERN	2,521	130.9
Durham Region Health Department	1,387	194.7
Haliburton, Kawartha, Pine Ridge District Health Unit	170	90.0
Peel Public Health	3,977	247.6

Public Health Unit Name	Cases	Rate per 100,000 population
Peterborough Public Health	81	54.7
Simcoe Muskoka District Health Unit	450	75.1
York Region Public Health	2,252	183.7
TOTAL CENTRAL EAST	8,317	185.6
Toronto Public Health	9,427	302.1
TOTAL TORONTO	9,427	302.1
Chatham-Kent Public Health	143	134.5
Grey Bruce Health Unit	87	51.2
Huron Perth Public Health	52	37.2
Lambton Public Health	249	190.1
Middlesex-London Health Unit	503	99.1
Southwestern Public Health	71	33.6
Windsor-Essex County Health Unit	906	213.3
TOTAL SOUTH WEST	2,011	118.9
Brant County Health Unit	113	72.8
City of Hamilton Public Health Services	642	108.4
Haldimand-Norfolk Health Unit	204	178.8
Halton Region Public Health	620	100.1
Niagara Region Public Health	631	133.5
Region of Waterloo Public Health and Emergency Services	1,045	178.8
Wellington-Dufferin-Guelph Public Health	367	117.7
TOTAL CENTRAL WEST	3,622	127.1
TOTAL ONTARIO	26,191	176.2

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For Further Information

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

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