

Daily Epidemiologic Summary

COVID-19 in Ontario: January 15, 2020 to February 10, 2021

This report includes the most current information available from CCM as of **February 10, 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 [weekly summary report](#) is available with additional information to complement the daily report.

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

Highlights

- There are a total of 282,511 confirmed cases* of COVID-19 in Ontario reported to date.
- Compared to the previous day, this represents:
 - An increase of 945 confirmed cases (percent change of -11.8%)
 - An increase of 18 deaths (percent change of -56.1%)
 - An increase of 1,344 resolved cases (percent change of -21.4%)

*As part of continued data quality checks and remediation activities following Toronto Public Health's (TPH) migration to CCM, TPH case counts are under-reported today.

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

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

Case Characteristics

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

	Change in cases February 09, 2021	Change in cases February 10, 2021*	Percentage change February 10, 2021 compared to February 09, 2021	Cumulative case count as of February 10, 2021
Total number of cases	1,072	945	-11.8%	282,511
Number of deaths	41	18	-56.1%	6,614
Number resolved	1,709	1,344	-21.4%	263,044

Note: The number of cases publicly reported by the province each day may not align with case counts reported to public health on a given day; public health unit reported date refers to the date local public health was first notified of the case. Data corrections or updates can result in case records being removed and or updated from past reports.

Data Source: CCM

*As part of continued data quality checks and remediation activities following Toronto Public Health's (TPH) migration to CCM, TPH case counts are under-reported today.

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

	Change in cases February 09, 2021	Change in cases February 10, 2021	Cumulative case count as of February 10, 2021
Gender: Male	592	467	138,346
Gender: Female	467	482	142,510
Ages: 19 and under	162	135	36,998
Ages: 20-39	388	390	103,309
Ages: 40-59	298	238	81,653
Ages: 60-79	175	130	40,857
Ages: 80 and over	50	51	19,642

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

Data Source: CCM

Table 2. Summary of recent confirmed cases of COVID-19 in school aged children by age group, August 30, 2020 to February 10, 2021: Ontario

	Change in cases February 09, 2021	Change in cases February 10, 2021	Cumulative case count from August 30, 2020 to February 10, 2021
Ages: 4 to 8	27	20	6,044
Ages: 9 to 13	36	28	8,262
Ages: 14 to 17	42	39	8,722

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

Data Source: CCM

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

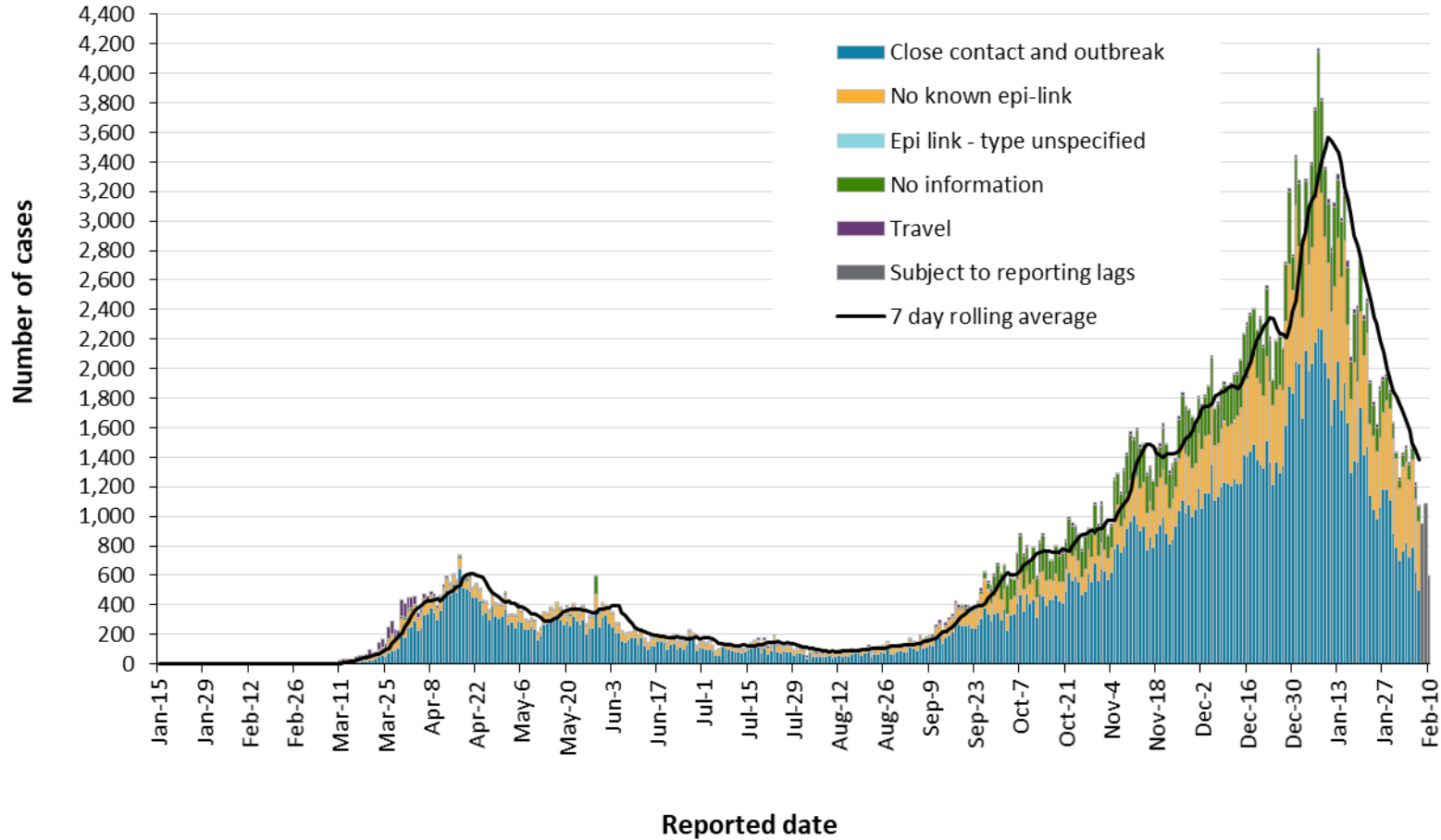
Long-term care home cases	Change in cases February 09, 2021	Change in cases February 10, 2021	Cumulative case count as of February 10, 2021
Residents	27	N/A	N/A
Health care workers	15	0	6,449
Deaths among residents	13	9	3,769
Deaths among health care workers	0	0	10

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

Data Source: CCM

Time

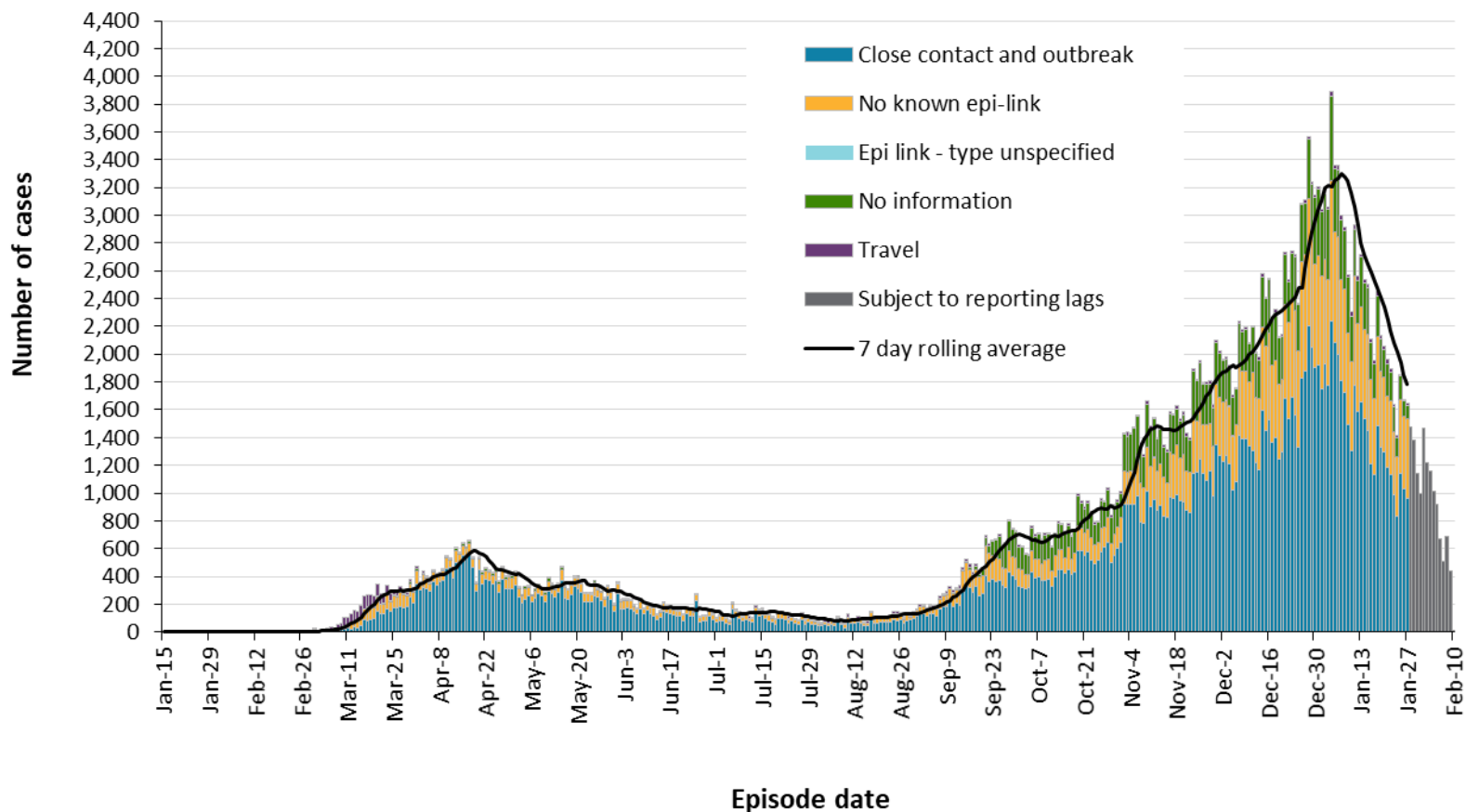
Figure 1. Confirmed cases of COVID-19 by likely acquisition and public health unit reported date: Ontario, January 15, 2020 to February 10, 2021



Data Source: CCM

COVID-19 in Ontario: January 15, 2020 to February 10, 2021

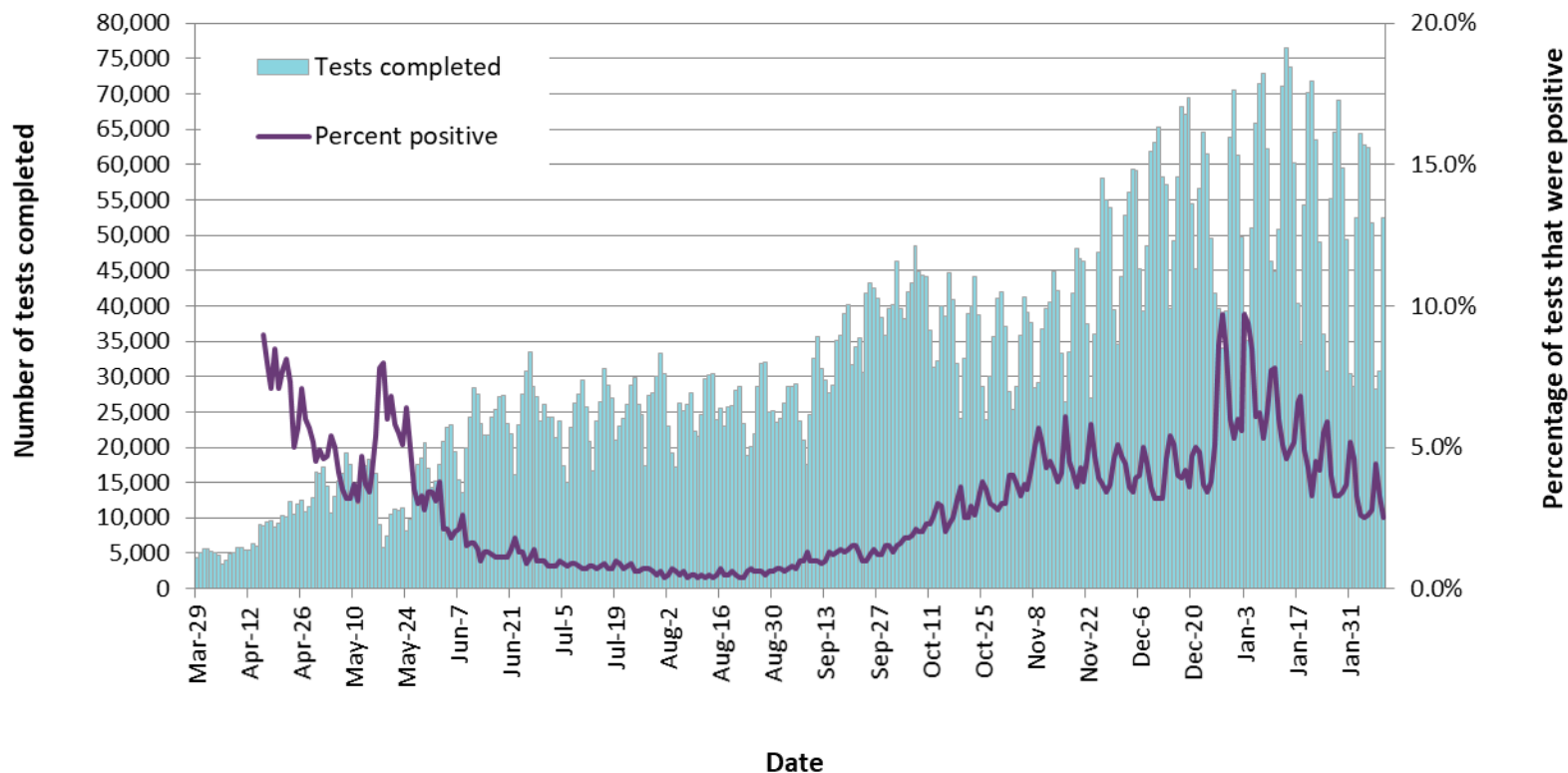
Figure 2. Confirmed cases of COVID-19 by likely acquisition and approximation of symptom onset date: Ontario, January 15, 2020 to February 10, 2021



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

Data Source: CCM

Figure 3. Number of COVID-19 tests completed and percent positivity: Ontario, March 29, 2020 to February 09, 2021

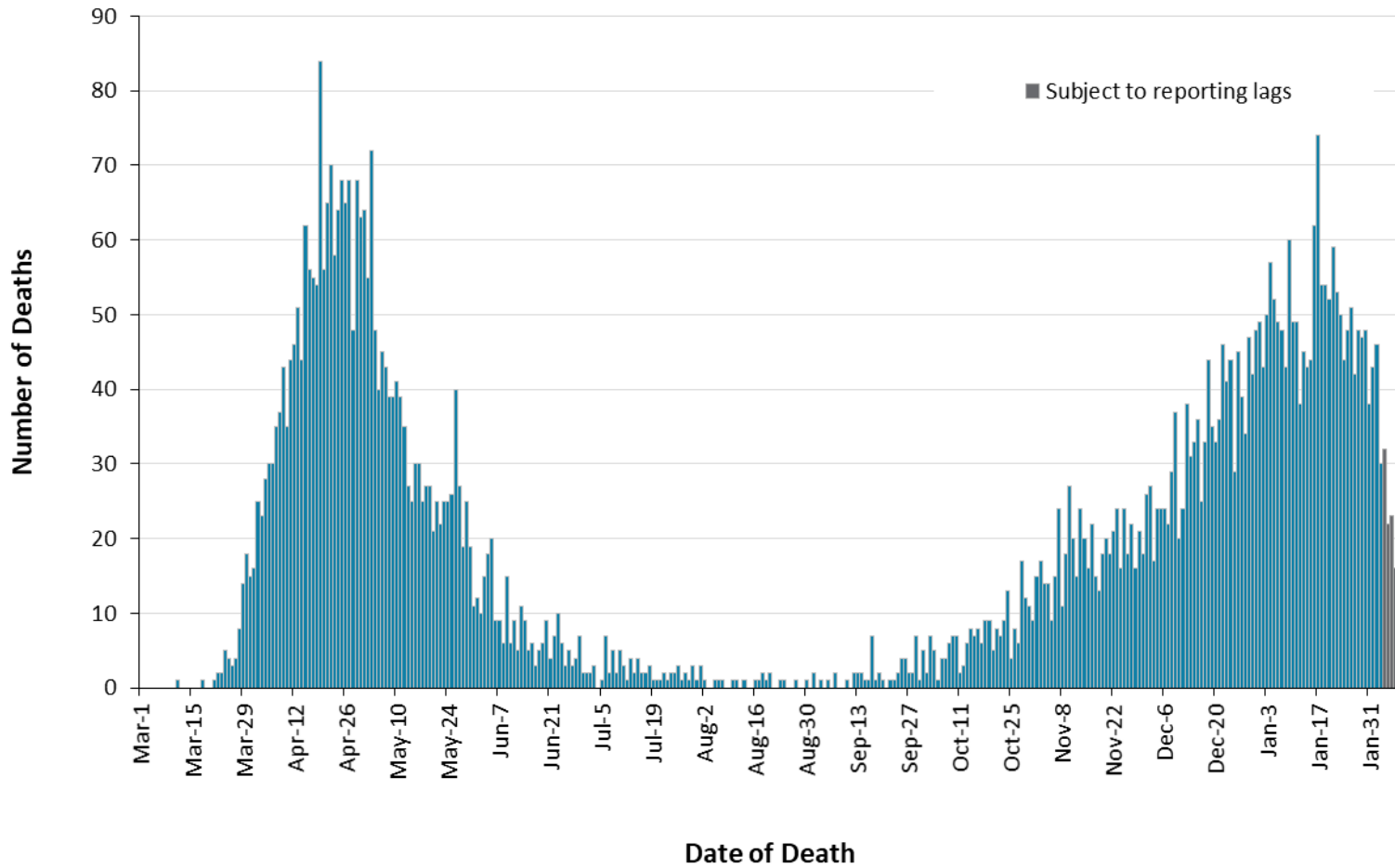


Note: The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive.

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

Severity

Figure 4. Confirmed deaths among COVID-19 cases by date of death: Ontario, March 1, 2020 to February 10, 2021



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

Data Source: CCM

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

	Cumulative case count as of February 10, 2021	Percentage of all cases
Cumulative deaths reported (please note there may be a reporting delay for deaths)	6,614	2.3%
Deaths reported in ages: 19 and under	2	<0.1%
Deaths reported in ages: 20-39	26	<0.1%
Deaths reported in ages: 40-59	258	0.3%
Deaths reported in ages: 60-79	1,797	4.4%
Deaths reported in ages: 80 and over	4,530	23.1%
Ever in ICU	2,585	0.9%
Ever hospitalized	14,190	5.0%

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

Data Source: CCM

Geography

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

Public Health Unit Name	Change in cases February 09, 2021	Change in cases February 10, 2021	Cumulative case count	Cumulative rate per 100,000 population
Northwestern Health Unit	0	4	282	321.6
Thunder Bay District Health Unit	7	12	1,081	720.9
TOTAL NORTH WEST	7	16	1,363	573.6
Algoma Public Health	2	3	189	165.2
North Bay Parry Sound District Health Unit	7	0	216	166.5
Porcupine Health Unit	5	3	302	361.9
Public Health Sudbury & Districts	2	11	565	283.9
Timiskaming Health Unit	0	0	91	278.4
TOTAL NORTH EAST	16	17	1,363	243.7
Ottawa Public Health	40	63	13,812	1,309.6
Eastern Ontario Health Unit	2	15	2,548	1,220.8
Hastings Prince Edward Public Health	4	3	371	220.2
Kingston, Frontenac and Lennox & Addington Public Health	2	0	672	315.9
Leeds, Grenville & Lanark District Health Unit	1	5	827	477.6
Renfrew County and District Health Unit	0	3	308	283.5

Public Health Unit Name	Change in cases February 09, 2021	Change in cases February 10, 2021	Cumulative case count	Cumulative rate per 100,000 population
TOTAL EASTERN	49	89	18,538	962.3
Durham Region Health Department	21	33	11,160	1,566.5
Haliburton, Kawartha, Pine Ridge District Health Unit	4	8	949	502.3
Peel Public Health	196	258	57,433	3,576.3
Peterborough Public Health	2	1	562	379.8
Simcoe Muskoka District Health Unit	29	34	5,899	983.8
York Region Public Health	125	116	26,783	2,184.9
TOTAL CENTRAL EAST	377	450	102,786	2,294.0
Toronto Public Health*	393	112	88,624	2,840.2
TOTAL TORONTO	393	112	88,624	2,840.2
Chatham-Kent Public Health	16	7	1,327	1,248.2
Grey Bruce Health Unit	0	5	663	390.3
Huron Perth Public Health	5	8	1,287	920.9
Lambton Public Health	8	9	1,894	1,446.2
Middlesex-London Health Unit	22	20	5,960	1,174.3
Southwestern Public Health	4	11	2,408	1,138.5
Windsor-Essex County Health Unit	24	25	12,418	2,923.1
TOTAL SOUTH WEST	79	85	25,957	1,535.2
Brant County Health Unit	11	0	1,566	1,009.0

Public Health Unit Name	Change in cases February 09, 2021	Change in cases February 10, 2021	Cumulative case count	Cumulative rate per 100,000 population
City of Hamilton Public Health Services	28	46	9,712	1,640.1
Haldimand-Norfolk Health Unit	4	4	1,330	1,165.8
Halton Region Public Health	28	31	8,604	1,389.8
Niagara Region Public Health	19	25	8,272	1,750.7
Region of Waterloo Public Health and Emergency Services	47	41	9,915	1,696.7
Wellington-Dufferin-Guelph Public Health	14	29	4,481	1,436.6
TOTAL CENTRAL WEST	151	176	43,880	1,540.0
TOTAL ONTARIO	1,072	945	282,511	1,900.6

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

Data Source: CCM

*As part of continued data quality checks and remediation activities following Toronto Public Health's (TPH) migration to CCM, TPH case counts are under-reported today.

Outbreaks

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

Institution type	Change in outbreaks February 09, 2021	Change in outbreaks February 10, 2021	Number of ongoing outbreaks	Cumulative number of outbreaks reported
Long-term care homes	-1	-3	201	1,220
Retirement homes	1	4	109	707
Hospitals	1	1	55	384

Note: Ongoing outbreaks include all outbreaks that are 'Open' in CCM without a 'Declared Over Date' recorded, or where the outbreak started more than five months ago, even for outbreaks where the Outbreak Status value selected in CCM is 'OPEN'. The start of the outbreak is determined by the onset date of first case, or if missing the outbreak reported date, or else if that is also missing, then the outbreak created date.

Data Source: CCM

Variant COVID-19 Cases

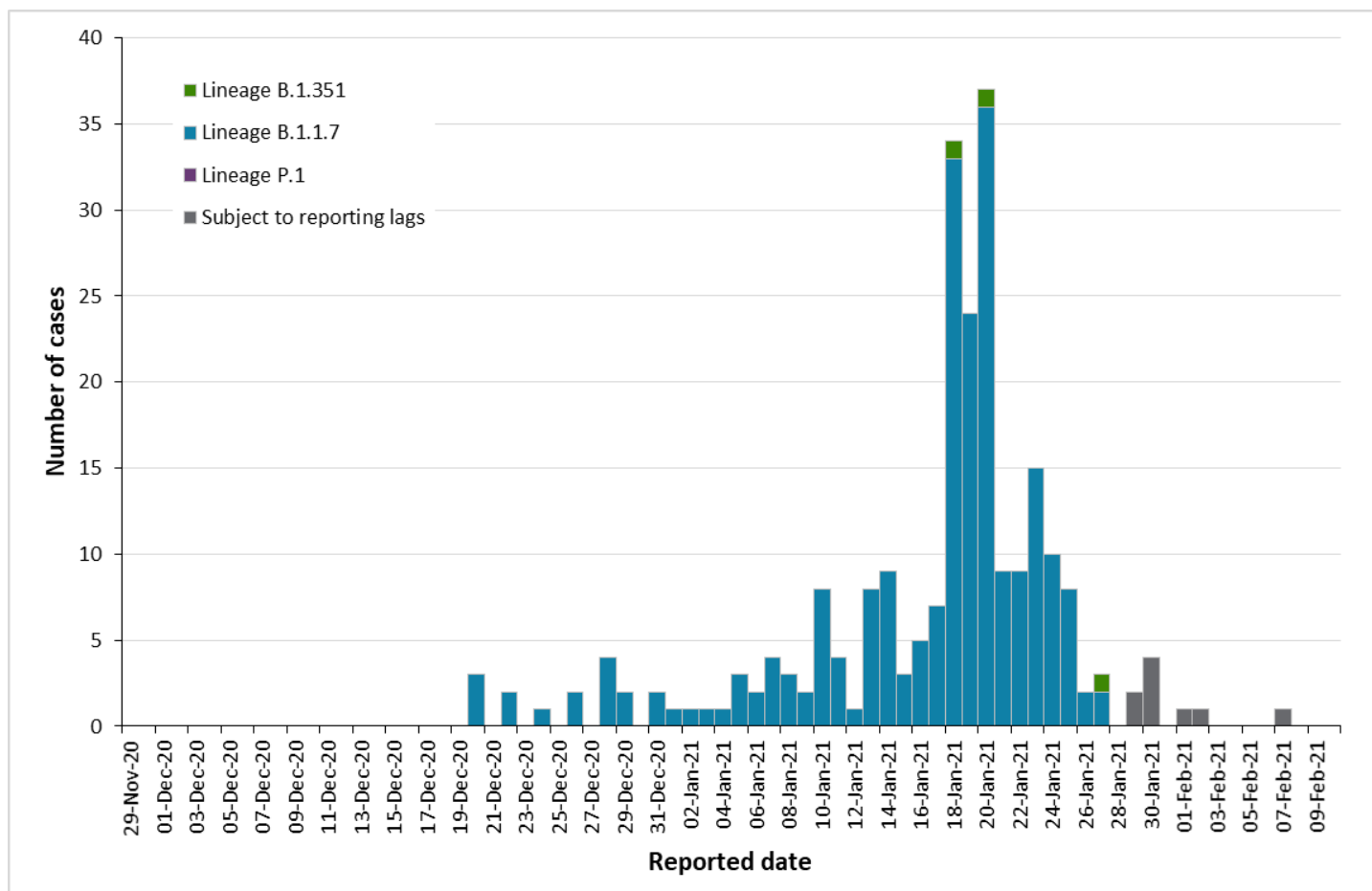
Table 7. Summary of confirmed variant of concern (VOC) cases: Ontario

Variant	Change in cases February 09, 2021	Change in cases February 10, 2021	Cumulative case count up to February 10, 2021
Lineage B.1.1.7	1	8	236
Lineage B.1.351	0	0	3
Lineage P.1	0	0	0

Note: Caution should be taken when interpreting VOC data due to the nature of the confirmation process, including delays between specimen collection and whole genome sequencing (WGS). Data corrections or updates can result in case records being removed and/or updated and may result in totals differing from past publicly reported case counts. For a breakdown of confirmed VOC cases by PHU please see Appendix A.

Data Source: CCM

Figure 5. Confirmed COVID-19 variants of concern (VOC) cases by public health unit reported date: Ontario, November 29, 2020 to February 10, 2021



Note: Reported date is based on the date the case was reported, not the date that the VOC was identified. Additional testing was conducted on January 20, 2021 which led to an increase in the number of cases with variants of concern identified. Further details on screening for variants of concern can be found in the [technical notes](#). Caution should be taken when interpreting these data due to potential sampling biases and delay between sample collection and sequencing in recent days.

Data Source: CCM

COVID-19 in Ontario: January 15, 2020 to February 10, 2021

Table 8. Summary of confirmed variant of concern (VOC) cases by age group and gender: Ontario

	Lineage B.1.1.7	Lineage B.1.351	Lineage P.1	Cumulative case count as of February 10, 2021
Gender: Male	100	2	0	102
Gender: Female	136	1	0	137
Ages: 19 and under	19	0	0	19
Ages: 20-39	71	2	0	73
Ages: 40-59	54	1	0	55
Ages: 60-79	44	0	0	44
Ages: 80 and over	48	0	0	48

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

Data Source: CCM

Table 9. Summary of confirmed variant of concern (VOC) cases likely source of acquisition: Ontario

	Lineage B.1.1.7	Percentage	Lineage B.1.351	Percentage	Lineage P.1	Percentage	Cumulative case count up to February 10, 2021	Cumulative percentage
Travel	19	8.1%	1	33.3%	0	0.0%	20	8.4%
Outbreak-associated or close contact of a confirmed case	190	80.5%	1	33.3%	0	0.0%	191	79.9%
Epidemiological link – type unspecified	0	0.0%	0	0.0%	0	0.0%	0	0.0%
No known epidemiological link	25	10.6%	1	33.3%	0	0.0%	26	10.9%
Information missing or unknown	2	0.8%	0	0.0%	0	0.0%	2	0.8%
Total	236		3		0		239	

Note: Information for how cases are grouped within each category is available in the technical notes.

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 **February 10, 2021 at 1 p.m.**
- CCM is a dynamic disease reporting system, which allows ongoing updates to data previously entered. As a result, data extracted from CCM represent a snapshot at the time of extraction and may differ from previous or subsequent reports.
- Ontario population projection data for 2020 were sourced from Ministry, 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 units and recorded in CCM. As a result, all counts will be subject to varying degrees of underreporting due to a variety of factors, such as disease awareness and medical care seeking behaviours, which may depend on severity of illness, clinical practice, changes in laboratory testing, and reporting behaviours.
- Lags in CCM data entry due to weekend staffing may result in lower case counts than would otherwise be recorded.
- Only cases meeting the confirmed case classification as listed in the MOH [COVID-19 case definition](#) are included in the report counts from CCM. This includes persons with a positive detection of serum/plasma immunoglobulin G (IgG) antibodies to SARS-CoV-2, which was added to the confirmed case definition on August 6, 2020.
- Cases of confirmed reinfection, i.e. where genome sequencing indicates the two episodes are caused by different viral lineages, added to the confirmed case definition on November 20, 2020, are counted as unique investigations.
- The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive.
- Reported date is the date the case was reported to the public health unit.
- Case episode date is based on an estimate of the best date of disease onset. This date is calculated based on either the date of symptom onset, specimen collection/test date, or the date reported to the public health unit.

- Resolved cases are determined only for COVID-19 cases that have not died. Cases that have died are considered fatal and not resolved. The following cases are classified as resolved:
 - Cases that are reported as ‘recovered’ in CCM
 - Cases that are not hospitalized and are 14 days past their episode date
 - Cases that are currently hospitalized (no hospital end date entered) and have a status of ‘closed’ in CCM (indicating public health unit follow-up is complete) and are 14 days past their symptom onset date or specimen collection date
- Hospitalization includes all cases for which a hospital admission date was reported at the time of data extraction. It includes cases that have been discharged from hospital as well as cases that are currently hospitalized. Emergency room visits are not included in the number of reported hospitalizations.
- ICU admission includes all cases for which an ICU admission date was reported at the time of data extraction. It is a subset of the count of hospitalized cases. It includes cases that have been treated or that are currently being treated in an ICU.
- Orientation of case counts by geography is based on the diagnosing health unit (DHU). DHU refers to the case's public health unit of residence at the time of illness onset and not necessarily the location of exposure. Cases for which the DHU was reported as MOH-PHO (to signify a case that is not a resident of Ontario) have been excluded from the analyses.
- Likely source of acquisition is determined by examining the epidemiologic link and epidemiologic link status fields in CCM. 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 no known epidemiological link (sporadic community transmission) or was reported to have an unknown source/no information was reported. Some cases may have no information reported if the case is untraceable, was lost to follow-up or referred to FNIHB. Cases with multiple risk factors were assigned to a single likely acquisition source group which was determined hierarchically in the following order:
 - For cases with an episode date *on or after* April 1, 2020: Outbreak-associated > close contact of a confirmed case > travel > no known epidemiological link > information missing or unknown
 - For cases with an episode date *before* April 1, 2020: Travel > outbreak-associated > close contact of a confirmed case > no known epidemiological link > information missing or unknown
- Deaths are determined by using the outcome field in CCM. 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.
- 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 includes cases that are counted once across all systems from which the case data are obtained. Duplicate records may exist if these records were not identified and resolved prior to data upload to the Ministry.

- Ongoing outbreaks include all outbreaks that are 'Open' in CCM without a 'Declared Over Date' recorded, or where the outbreak started more than five months ago, even for outbreaks where the Outbreak Status value selected in CCM is 'OPEN'. The start of the outbreak is determined by the onset date of first case, or if missing the outbreak reported date, or else if that is also missing, then the outbreak created date.
- 'Long-term care home residents' includes cases that reported 'Yes' to the risk factor 'Resident of a long-term care home'; or 'Yes' to the risk factor 'Resident of nursing home or other chronic care facility' and reported to be part of an outbreak assigned as a long-term care home (via the Outbreak number or case comments field); or were reported to be part of an outbreak assigned as a long-term care home (via the outbreak number or case comments field) with an age over 70 years and did not report 'No' to the risk factors 'Resident of long-term care home' or 'Resident of nursing home or other chronic care facility'. 'Long-term care home residents' excludes cases that reported 'Yes' to any of the health care worker occupational risk factors.
- The 'health care workers' variable includes cases that reported 'Yes' to any of the occupation of health care worker, doctor, nurse, dentist, dental hygienist, midwife, other medical technicians, personal support worker, respiratory therapist, first responder.
- 'Health care workers associated with long-term care outbreaks' includes 'health care workers' reported to be part of an outbreak assigned as a long-term care home (via the outbreak number or case comments field). Excludes cases that reported 'Yes' to risk factors 'Resident of long-term care home' or 'Resident of nursing home or other chronic care facility' and 'Yes' to the calculated 'health care workers' variable.
- Percent change is calculated by taking the difference between the current period (i.e., daily count or sum of the daily count over a 7-day period) and previous period (i.e., daily count or sum of the daily count over a 7-day period), divided by the previous period.
- PANGO lineage B.1.1.7: This lineage was first detected in England in September, 2020. Early evidence suggests that the N501Y mutation may increase SARS-CoV-2 transmissibility. The PANGO lineage B.1.1.7 is assigned to genome sequences with at least 5 of the 17 defining B.1.1.7 SNPs.
- PANGO lineage B.1.351 (also known as 501Y.V2): This lineage was first detected October, 2020 in South Africa and has several mutations of concern, including spike (S) gene: N501Y, K417N, and E484K. Early evidence suggests that these mutations may increase SARS-CoV-2 transmissibility and decrease vaccine efficacy. The PANGO lineage B.1.351 will be assigned to genome sequences at least 5 of the 9 defining B.1.351 SNPs.
- PANGO lineage P.1 (also known as 501Y.V3)
 - This lineage was first detected January, 2021 in Brazil and has several mutations of concern, including spike (S) gene N501Y, K417T, and E484K. Early evidence suggests that these mutations may increase SARS-CoV-2 transmissibility and decrease vaccine

efficacy. The PANGO lineage P.1 is assigned to genome sequences with more than 10 of the 17 defining P.1 SNPs.

- Public Health Ontario conducts variants of concern (VOC) surveillance on a subset of SARS-CoV-2 positive specimens. Additional SARS-CoV-2 specimens are referred to PHO Laboratory for screening provided they meet the criteria outlined here:
<https://www.publichealthontario.ca/en/laboratory-services/test-information-index/covid-19-voc>

Appendix A

Table A1. Weekly rates of confirmed COVID-19 cases per 100,000 population over recent rolling 7-day periods, by reported date and public health unit: Ontario, January 26 to February 07, 2021

Public Health Unit Name	Jan 26 to Feb 01	Jan 27 to Feb 02	Jan 28 to Feb 03	Jan 29 to Feb 04	Jan 30 to Feb 05	Jan 31 to Feb 06	Feb 01 to Feb 07	% change from Jan 26-Feb 01 to Feb 01-Feb 07
NORTH WEST								
Northwestern Health Unit	11.4	13.7	13.7	9.1	18.2	18.2	18.2	+59.6%
Thunder Bay District Health Unit	85.4	83.4	68.7	56.0	63.4	60.7	52.0	-39.1%
NORTH EAST								
Algoma Public Health	17.5	20.1	17.5	12.2	13.1	14.0	15.7	-10.3%
North Bay Parry Sound District Health Unit	3.1	4.6	5.4	4.6	4.6	5.4	14.6	+371.0%
Porcupine Health Unit	61.1	55.1	41.9	31.2	31.2	22.8	22.8	-62.7%
Public Health Sudbury & Districts	23.1	21.1	16.1	12.1	14.1	14.1	13.6	-41.1%
Timiskaming Health Unit	3.1	6.1	6.1	9.2	6.1	6.1	6.1	+96.8%
EASTERN								
Ottawa Public Health	36.7	35.3	33.1	31.6	31.8	33.5	34.1	-7.1%
Eastern Ontario Health Unit	56.5	50.8	48.9	45.0	38.8	36.4	32.1	-43.2%
Hastings Prince Edward Public Health	1.8	2.4	1.8	2.4	2.4	3.0	3.0	+66.7%
Kingston, Frontenac and Lennox & Addington Public Health	4.7	4.7	3.3	3.3	3.8	4.2	5.6	+19.1%

Public Health Unit Name	Jan 26 to Feb 01	Jan 27 to Feb 02	Jan 28 to Feb 03	Jan 29 to Feb 04	Jan 30 to Feb 05	Jan 31 to Feb 06	Feb 01 to Feb 07	% change from Jan 26-Feb 01 to Feb 01-Feb 07
Leeds, Grenville & Lanark District Health Unit	18.5	16.2	13.3	12.1	8.7	8.7	5.8	-68.6%
Renfrew County and District Health Unit	4.6	5.5	6.4	4.6	2.8	4.6	3.7	-19.6%
CENTRAL EAST								
Durham Region Health Department	64.9	62.6	60.1	54.9	50.8	50.1	45.5	-29.9%
Haliburton, Kawartha, Pine Ridge District Health Unit	26.5	27.0	37.6	36.0	32.8	33.9	33.9	+27.9%
Peel Public Health	138.4	136.7	133.9	126.3	123.7	121.0	116.4	-15.9%
Peterborough Public Health	20.9	18.2	15.5	12.8	12.8	10.1	8.8	-57.9%
Simcoe Muskoka District Health Unit	51.0	51.4	53.5	49.0	46.7	47.9	47.0	-7.8%
York Region Public Health	92.3	86.0	81.2	77.2	73.3	72.8	74.1	-19.7%
TORONTO								
Toronto Public Health	128.8	125.4	120.2	115.1	109.5	101.3	96.0	-25.5%
SOUTH WEST								
Chatham-Kent Public Health	100.6	94.1	95.9	91.2	74.3	78.1	77.1	-23.4%
Grey Bruce Health Unit	17.7	17.1	14.1	13.0	12.4	10.0	11.2	-36.7%
Huron Perth Public Health	35.1	30.1	28.6	32.2	32.2	31.5	29.3	-16.5%
Lambton Public Health	41.2	40.5	32.8	27.5	30.5	28.3	26.0	-36.9%
Middlesex-London Health Unit	45.5	45.7	41.4	38.6	38.4	37.6	37.0	-18.7%

Public Health Unit Name	Jan 26 to Feb 01	Jan 27 to Feb 02	Jan 28 to Feb 03	Jan 29 to Feb 04	Jan 30 to Feb 05	Jan 31 to Feb 06	Feb 01 to Feb 07	% change from Jan 26-Feb 01 to Feb 01-Feb 07
Southwestern Public Health	38.8	39.7	33.1	39.7	40.7	40.2	39.7	+2.3%
Windsor-Essex County Health Unit	75.8	71.8	65.0	62.4	58.8	50.1	49.7	-34.4%
CENTRAL WEST								
Brant County Health Unit	29.0	23.8	32.2	29.6	32.2	42.5	43.8	+51.0%
City of Hamilton Public Health Services	75.5	73.1	68.2	66.2	66.9	67.7	63.0	-16.6%
Haldimand-Norfolk Health Unit	35.1	38.6	35.9	36.8	31.6	30.7	29.8	-15.1%
Halton Region Public Health	56.1	53.0	60.6	62.5	62.5	60.9	59.0	+5.2%
Niagara Region Public Health	113.7	101.8	87.0	82.3	76.0	63.7	59.5	-47.7%
Region of Waterloo Public Health and Emergency Services	69.0	62.1	65.0	58.0	60.4	57.7	56.6	-18.0%
Wellington-Dufferin-Guelph Public Health	82.1	75.0	66.7	54.8	48.1	47.4	43.0	-47.6%
TOTAL ONTARIO	80.6	77.6	74.5	70.5	68.0	65.2	62.8	-22.1%

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

Data Source: CCM

Table A2. Summary of confirmed variant of concern (VOC) cases by public health unit: Ontario as of February 10, 2021

Public Health Unit Name	Cumulative count for Lineage B.1.1.7	Cumulative count for Lineage B.1.351
Algoma Public Health	0	0
Brant County Health Unit	0	0
Chatham-Kent Public Health	0	0
City of Hamilton Public Health Services	0	0
Durham Region Health Department	11	0
Eastern Ontario Health Unit	0	0
Grey Bruce Health Unit	0	0
Haldimand-Norfolk Health Unit	1	0
Haliburton, Kawartha, Pine Ridge District Health Unit	0	0
Halton Region Public Health	1	0
Hastings Prince Edward Public Health	0	0
Huron Perth Public Health	0	0
Kingston, Frontenac and Lennox & Addington Public Health	1	0
Lambton Public Health	0	0
Leeds, Grenville & Lanark District Health Unit	0	0
Middlesex-London Health Unit	4	0
Niagara Region Public Health	0	0

Public Health Unit Name	Cumulative count for Lineage B.1.1.7	Cumulative count for Lineage B.1.351
North Bay Parry Sound District Health Unit	0	0
Northwestern Health Unit	0	0
Ottawa Public Health	6	1
Peel Public Health	21	2
Peterborough Public Health	0	0
Porcupine Health Unit	0	0
Public Health Sudbury & Districts	3	0
Region of Waterloo Public Health and Emergency Services	1	0
Renfrew County and District Health Unit	0	0
Simcoe Muskoka District Health Unit	130	0
Southwestern Public Health	0	0
Thunder Bay District Health Unit	0	0
Timiskaming Health Unit	0	0
Toronto Public Health	29	0
Wellington-Dufferin-Guelph Public Health	0	0
Windsor-Essex County Health Unit	0	0
York Region Public Health	28	0
TOTAL ONTARIO	236	3

Note: Caution should be taken when interpreting VOC data due to the nature of the screening and confirmation process, including delays between specimen collection and whole genome sequencing

(WGS). A confirmed VOC case is defined as a COVID-19 case in whom a designated VOC was detected by WGS of their SARS-CoV-2 positive specimen. Data corrections or updates can result in case records being removed and/or updated and may result in totals differing from past publicly reported case counts.

Data Source: CCM

Disclaimer

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

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For Further Information

For more information, email cd@oahpp.ca.

Public Health Ontario

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