

## Daily Epidemiologic Summary

# COVID-19 in Ontario: January 15, 2020 to February 24, 2021

This report includes the most current information available from CCM as of **February 24, 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 297,311 confirmed cases of COVID-19 in Ontario reported to date.
- Compared to the previous day, this represents:
  - An increase of 1,138 confirmed cases (percent change of +8.0%)
  - An increase of 23 deaths (percent change of +155.6%)
  - An increase of 1,094 resolved cases (percent change of -15.3%)

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 23, 2021	Change in cases February 24, 2021	Percentage change February 24, 2021 compared to February 23, 2021	Cumulative case count as of February 24, 2021
Total number of cases	1,054	1,138	+8.0%	297,311
Number of deaths	9	23	+155.6%	6,916
Number resolved	1,291	1,094	-15.3%	280,324

**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

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

	Change in cases February 23, 2021	Change in cases February 24, 2021	Cumulative case count as of February 24, 2021
Gender: Male	530	598	146,083
Gender: Female	509	555	149,659
Ages: 19 and under	188	200	39,458
Ages: 20-39	401	422	108,846
Ages: 40-59	322	332	85,983
Ages: 60-79	115	147	42,838
Ages: 80 and over	28	37	20,124

**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 24, 2021: Ontario**

	Change in cases February 23, 2021	Change in cases February 24, 2021	Cumulative case count from August 30, 2020 to February 24, 2021
Ages: 4 to 8	42	32	6,548
Ages: 9 to 13	50	46	8,856
Ages: 14 to 17	40	52	9,320

**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**

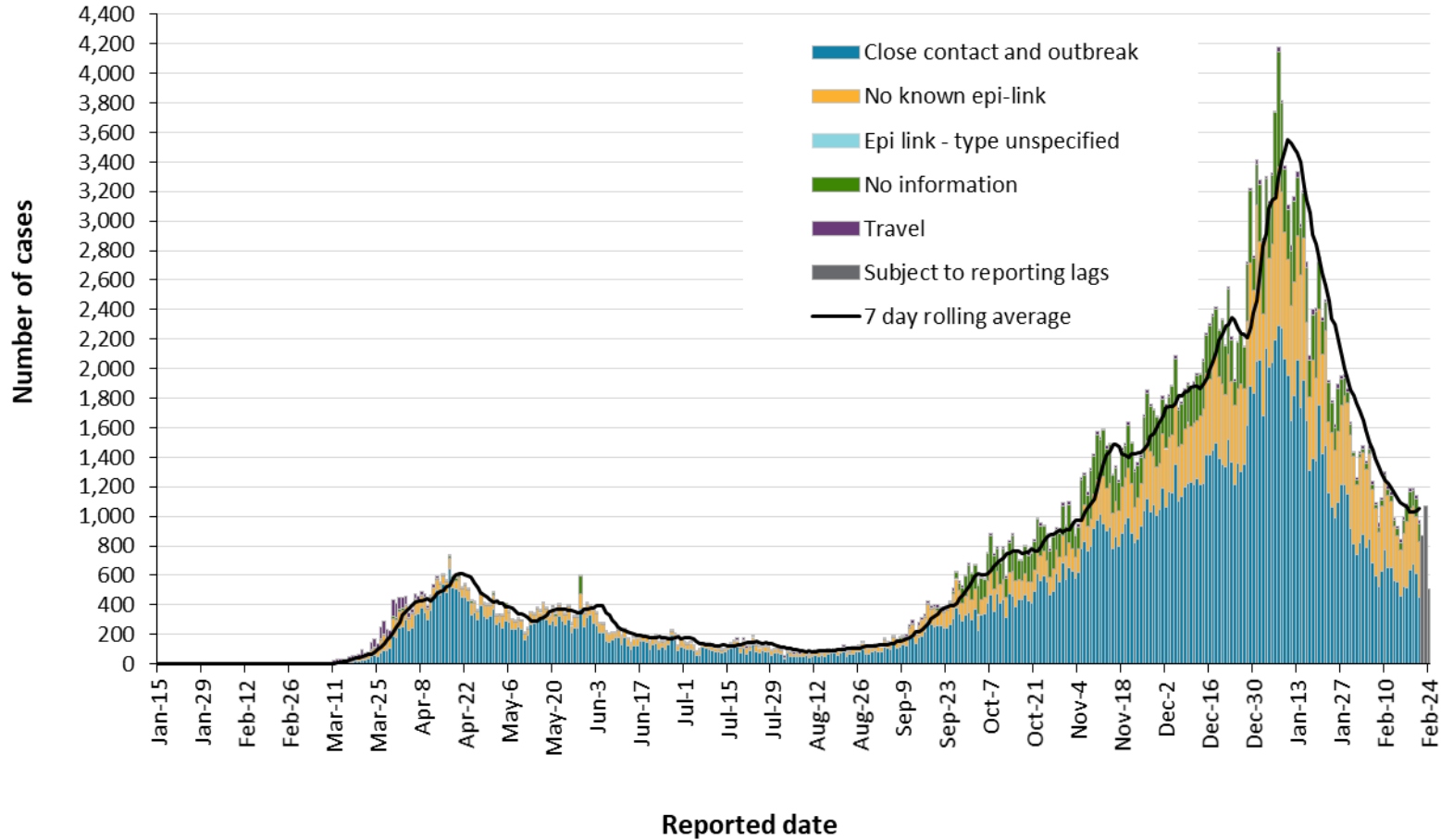
Long-term care home cases	Change in cases February 23, 2021	Change in cases February 24, 2021	Cumulative case count as of February 24, 2021
Residents	0	6	14,943
Health care workers	16	4	6,604
Deaths among residents	2	4	3,864
Deaths among health care workers	0	0	10

**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

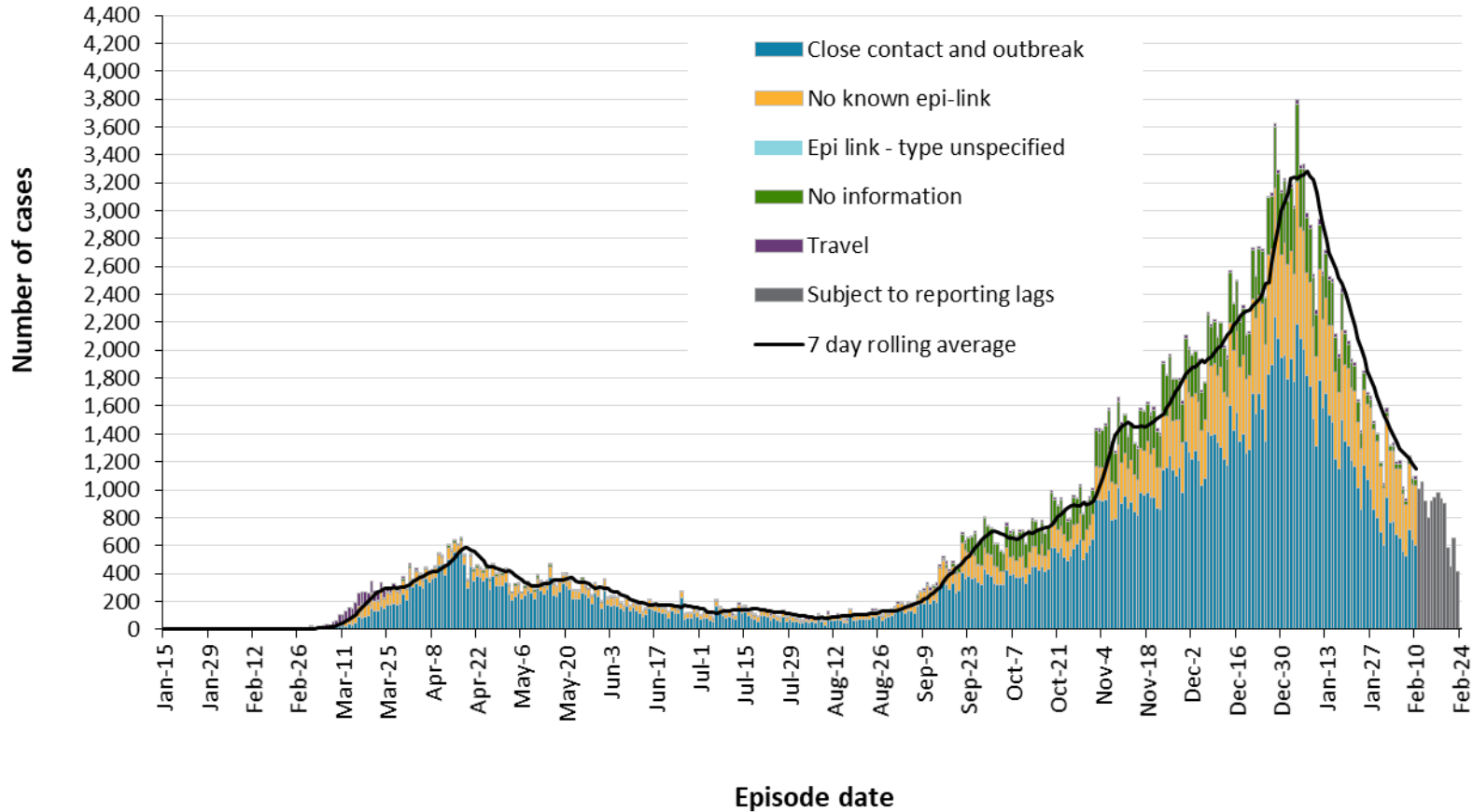
Figure 1. Confirmed cases of COVID-19 by likely acquisition and public health unit reported date: Ontario, January 15, 2020 to February 24, 2021



Data Source: CCM

COVID-19 in Ontario: January 15, 2020 to February 24, 2021

**Figure 2. Confirmed cases of COVID-19 by likely acquisition and approximation of symptom onset date: Ontario, January 15, 2020 to February 24, 2021**

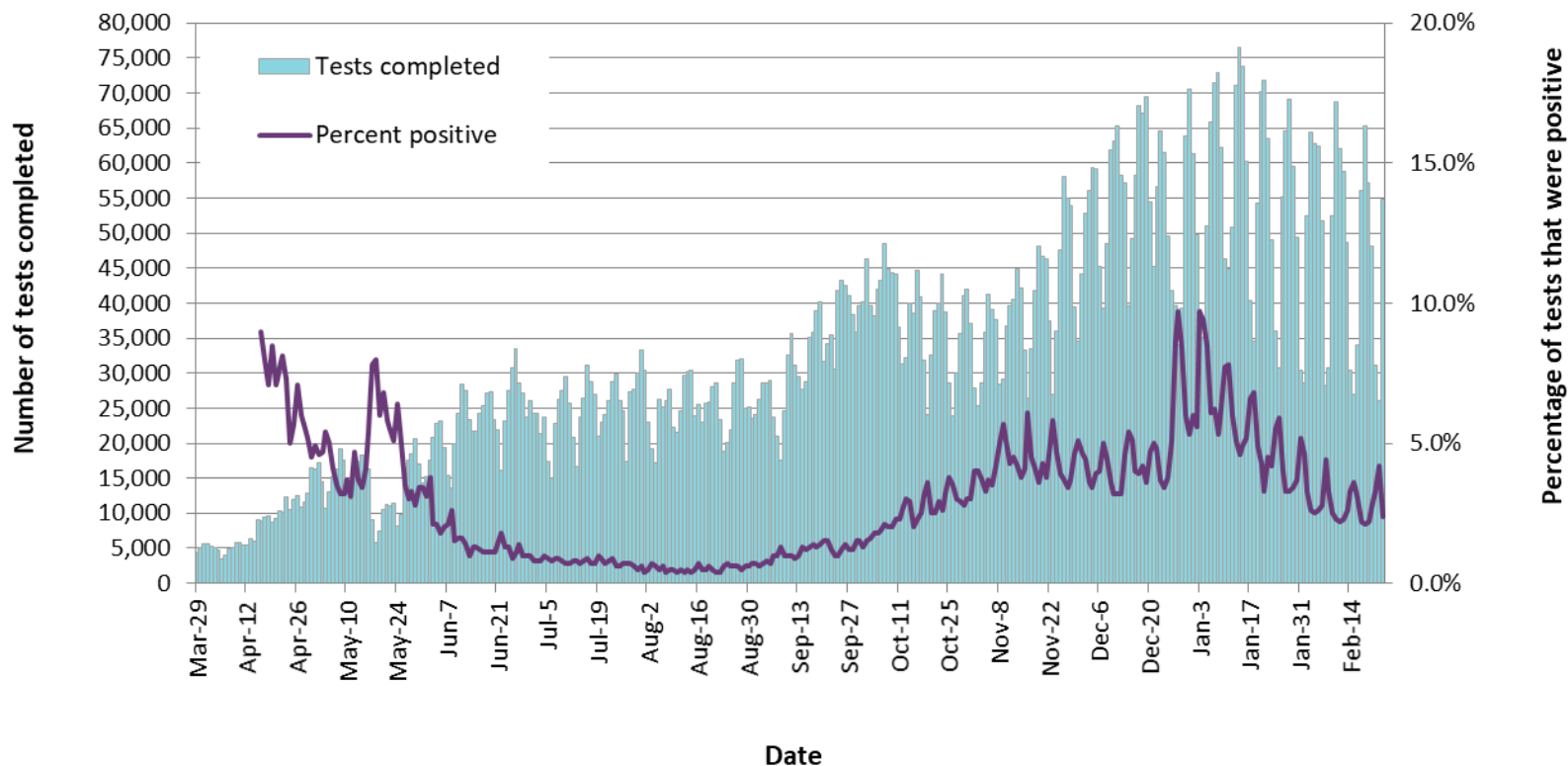


**Note:** Not all cases may have an episode date and those without one are not included in the figure. Episode date is defined and available in the technical notes.

**Data Source:** CCM

COVID-19 in Ontario: January 15, 2020 to February 24, 2021

**Figure 3. Number of COVID-19 tests completed and percent positivity: Ontario, March 29, 2020 to February 23, 2021**

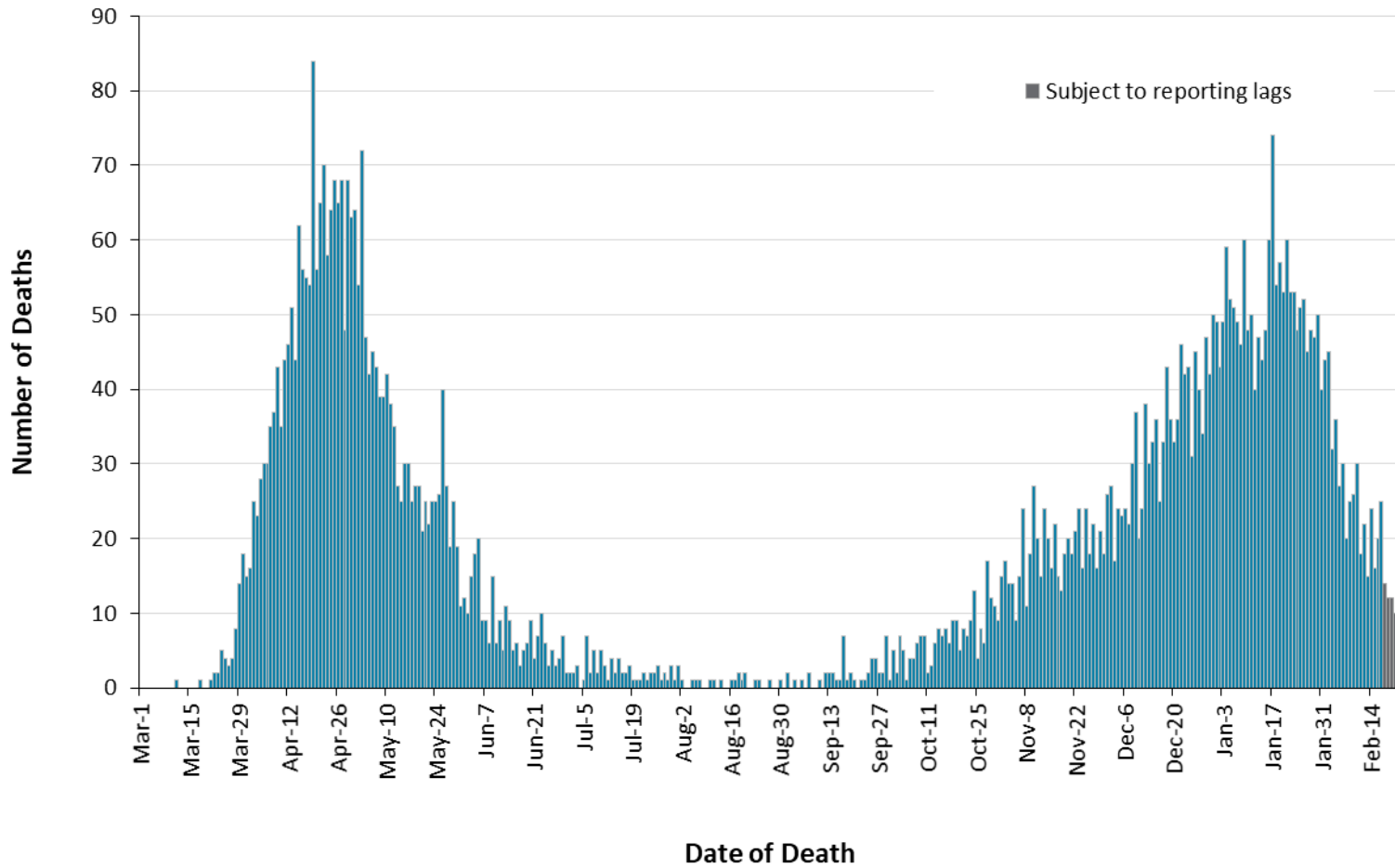


**Note:** The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive.

**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 24, 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 24, 2021	Percentage of all cases
Cumulative deaths reported (please note there may be a reporting delay for deaths)	6,916	2.3%
Deaths reported in ages: 19 and under	2	<0.1%
Deaths reported in ages: 20-39	29	<0.1%
Deaths reported in ages: 40-59	278	0.3%
Deaths reported in ages: 60-79	1,886	4.4%
Deaths reported in ages: 80 and over	4,720	23.5%
Ever in ICU	2,688	0.9%
Ever hospitalized	15,008	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 23, 2021	Change in cases February 24, 2021	Cumulative case count	Cumulative rate per 100,000 population
Northwestern Health Unit	0	9	441	503.0
Thunder Bay District Health Unit	45	44	1,466	977.6
<b>TOTAL NORTH WEST</b>	45	53	1,907	802.5
Algoma Public Health	0	0	195	170.4
North Bay Parry Sound District Health Unit	1	0	259	199.6
Porcupine Health Unit	2	1	330	395.5
Public Health Sudbury & Districts	8	7	597	300.0
Timiskaming Health Unit	0	0	91	278.4
<b>TOTAL NORTH EAST</b>	11	8	1,472	263.2
Ottawa Public Health	40	64	14,505	1,375.3
Eastern Ontario Health Unit	6	20	2,656	1,272.6
Hastings Prince Edward Public Health	3	5	395	234.4
Kingston, Frontenac and Lennox & Addington Public Health	1	4	706	331.9
Leeds, Grenville & Lanark District Health Unit	2	0	847	489.1
Renfrew County and District Health Unit	0	4	325	299.2

Public Health Unit Name	Change in cases February 23, 2021	Change in cases February 24, 2021	Cumulative case count	Cumulative rate per 100,000 population
<b>TOTAL EASTERN</b>	52	97	19,434	1,008.8
Durham Region Health Department	35	28	11,707	1,643.3
Haliburton, Kawartha, Pine Ridge District Health Unit	3	2	1,016	537.7
Peel Public Health	186	204	60,211	3,749.2
Peterborough Public Health	5	4	616	416.3
Simcoe Muskoka District Health Unit	53	44	6,414	1,069.7
York Region Public Health	94	106	28,394	2,316.4
<b>TOTAL CENTRAL EAST</b>	376	388	108,358	2,418.4
Toronto Public Health	363	339	93,165	2,985.7
<b>TOTAL TORONTO</b>	363	339	93,165	2,985.7
Chatham-Kent Public Health	0	1	1,345	1,265.1
Grey Bruce Health Unit	1	3	690	406.2
Huron Perth Public Health	1	6	1,334	954.5
Lambton Public Health	3	8	2,043	1,560.0
Middlesex-London Health Unit	10	6	6,136	1,209.0
Southwestern Public Health	1	11	2,475	1,170.2
Windsor-Essex County Health Unit	50	33	12,870	3,029.4
<b>TOTAL SOUTH WEST</b>	66	68	26,893	1,590.6
Brant County Health Unit	7	19	1,701	1,096.0

Public Health Unit Name	Change in cases February 23, 2021	Change in cases February 24, 2021	Cumulative case count	Cumulative rate per 100,000 population
City of Hamilton Public Health Services	38	37	10,281	1,736.2
Haldimand-Norfolk Health Unit	4	3	1,364	1,195.6
Halton Region Public Health	26	40	9,039	1,460.1
Niagara Region Public Health	13	12	8,522	1,803.7
Region of Waterloo Public Health and Emergency Services	44	56	10,501	1,797.0
Wellington-Dufferin-Guelph Public Health	9	18	4,674	1,498.5
<b>TOTAL CENTRAL WEST</b>	<b>141</b>	<b>185</b>	<b>46,082</b>	<b>1,617.3</b>
<b>TOTAL ONTARIO</b>	<b>1,054</b>	<b>1,138</b>	<b>297,311</b>	<b>2,000.2</b>

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

**Data Source:** CCM

## 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 23, 2021	Change in outbreaks February 24, 2021	Number of ongoing outbreaks	Cumulative number of outbreaks reported
Long-term care homes	4	1	107	1,256
Retirement homes	1	5	63	740
Hospitals	0	3	35	410

**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

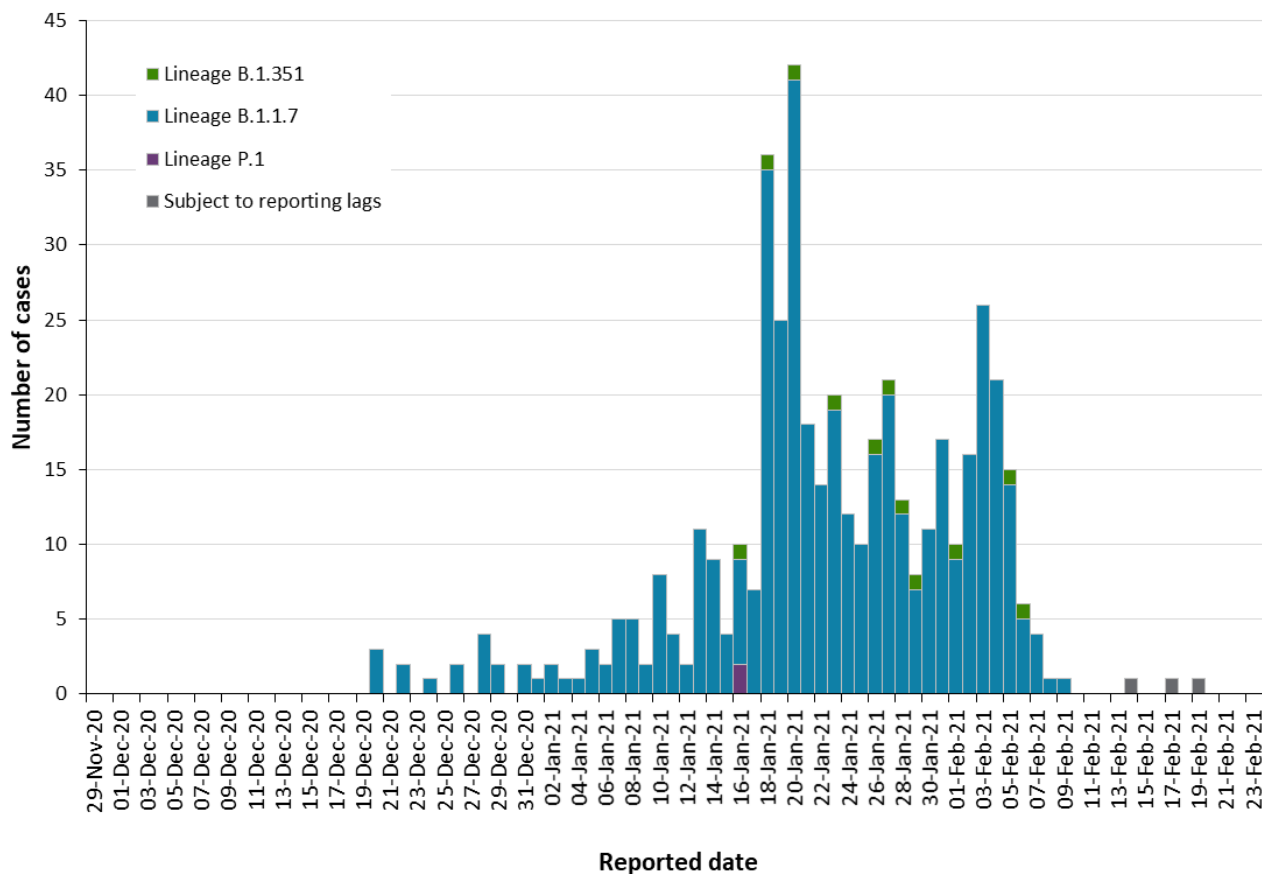
**Table 7. Summary of confirmed variant of concern (VOC) cases: Ontario**

Variant	Change in cases February 23, 2021	Change in cases February 24, 2021	Cumulative case count up to February 24, 2021
Lineage B.1.1.7	5	54	449
Lineage B.1.351	0	2	11
Lineage P.1	0	1	2

**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). Due to the nature of the WGS process, test results may be completed in batches. 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 and interim N501Y mutation screening test volumes and percent positivity please see Appendix A and B.

**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 24, 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

**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 24, 2021
Gender: Male	195	6	1	202
Gender: Female	253	5	1	259
Ages: 19 and under	51	1	0	52
Ages: 20-39	164	6	0	170
Ages: 40-59	104	1	0	105
Ages: 60-79	77	3	2	82
Ages: 80 and over	53	0	0	53

**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 24, 2021	Cumulative percentage
Travel	31	6.9%	2	18.2%	0	0.0%	33	7.1%
Outbreak-associated or close contact of a confirmed case	358	79.7%	8	72.7%	0	0.0%	366	79.2%
Epidemiological link – type unspecified	0	0.0%	0	0.0%	0	0.0%	0	0.0%
No known epidemiological link	58	12.9%	1	9.1%	1	50.0%	60	13.0%
Information missing or unknown	2	0.4%	0	0.0%	1	50.0%	3	0.6%
<b>Total</b>	<b>449</b>		<b>11</b>		<b>2</b>		<b>462</b>	

**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 24, 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.
- N501Y mutation screening test and percent positivity data were based on the MOH extract of the Ontario Laboratory Information System (OLIS) by Health Analytics & Insight Branch (HAIB), MOH accessed on **February 23, 2021** on the MOH SAS server.

## 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 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.
- Case classification information may be updated for individuals with a positive result issued from a point-of-care assays.

- The number of tests performed does not reflect the number of specimens or persons tested. More than one test may be performed per specimen or per person. As such, the percentage of tests that were positive does not necessarily translate to the number of specimens or persons testing positive.
- Reported date is the date the case was reported to the public health unit.
- 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 may include some duplicate records, if these records were not identified and resolved.
- 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>
- Screening results for the spike (S) gene N501Y mutation presented in this report do not include all provincial results because:
  - Some labs are conducting screening but are not submitting directly, or indirectly via PHO to OLIS
  - Some labs are not providing sufficient information alongside specimens transferred to PHO for testing/OLIS entry, so they are rejected from OLIS
  - Some labs may be submitting screening results to OLIS in a manner that does not conform with the VOC nomenclature, and
  - The Ministry of Health does not receive test results for specimens without an associated health card number, or that have a consent block

## 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, February 09 to February 21, 2021**

Public Health Unit Name	Feb 09 to Feb 15	Feb 10 to Feb 16	Feb 11 to Feb 17	Feb 12 to Feb 18	Feb 13 to Feb 19	Feb 14 to Feb 20	Feb 15 to Feb 21	% change from Feb 09-Feb 15 to Feb 15-Feb 21
<b>NORTH WEST</b>								
Northwestern Health Unit	89.0	108.4	109.5	117.5	104.9	109.5	98.1	+10.2%
Thunder Bay District Health Unit	88.7	92.0	90.0	96.0	98.0	113.4	124.0	+39.8%
<b>NORTH EAST</b>								
Algoma Public Health	5.2	4.4	3.5	2.6	1.7	1.7	1.7	-67.3%
North Bay Parry Sound District Health Unit	13.9	15.4	14.6	23.9	22.4	21.6	20.8	+49.6%
Porcupine Health Unit	13.2	10.8	9.6	14.4	14.4	21.6	19.2	+45.5%
Public Health Sudbury & Districts	15.6	12.6	8.5	9.5	8.0	8.0	8.5	-45.5%
Timiskaming Health Unit	0.0	0.0	0.0	0.0	0.0	0.0	0.0	N/A
<b>EASTERN</b>								
Ottawa Public Health	29.9	32.0	32.9	34.1	34.7	36.5	36.9	+23.4%
Eastern Ontario Health Unit	26.8	26.8	24.0	24.4	25.9	24.0	21.6	-19.4%
Hastings Prince Edward Public Health	7.7	6.5	5.9	5.3	6.5	5.9	5.3	-31.2%
Kingston, Frontenac and Lennox & Addington Public Health	9.4	9.9	9.9	8.0	7.1	4.7	5.6	-40.4%

Public Health Unit Name	Feb 09 to Feb 15	Feb 10 to Feb 16	Feb 11 to Feb 17	Feb 12 to Feb 18	Feb 13 to Feb 19	Feb 14 to Feb 20	Feb 15 to Feb 21	% change from Feb 09- Feb 15 to Feb 15- Feb 21
Leeds, Grenville & Lanark District Health Unit	9.2	8.1	6.4	6.4	6.9	5.2	4.6	-50.0%
Renfrew County and District Health Unit	4.6	2.8	1.8	2.8	5.5	7.4	10.1	+119.6%
<b>CENTRAL EAST</b>								
Durham Region Health Department	40.4	40.3	37.3	36.6	40.1	41.5	36.6	-9.4%
Haliburton, Kawartha, Pine Ridge District Health Unit	21.2	20.1	18.5	21.2	19.6	20.1	16.4	-22.6%
Peel Public Health	91.5	89.1	85.6	83.9	84.4	84.4	84.7	-7.4%
Peterborough Public Health	18.9	18.9	20.9	22.3	25.7	20.9	18.9	N/A
Simcoe Muskoka District Health Unit	36.2	36.9	37.0	38.0	40.5	45.9	47.4	+30.9%
York Region Public Health	66.9	70.3	70.3	68.2	66.7	68.4	65.8	-1.6%
<b>TORONTO</b>								
Toronto Public Health	75.2	71.7	70.9	70.1	71.2	72.7	76.1	+1.2%
<b>SOUTH WEST</b>								
Chatham-Kent Public Health	17.9	13.2	10.3	9.4	9.4	10.3	13.2	-26.3%
Grey Bruce Health Unit	7.7	8.2	7.7	6.5	6.5	5.9	4.7	-39.0%
Huron Perth Public Health	21.5	16.5	13.6	13.6	10.7	14.3	14.3	-33.5%
Lambton Public Health	65.7	55.7	58.0	62.6	48.1	55.7	58.8	-10.5%
Middlesex-London Health Unit	23.3	21.1	18.9	18.9	15.4	14.0	14.4	-38.2%

Public Health Unit Name	Feb 09 to Feb 15	Feb 10 to Feb 16	Feb 11 to Feb 17	Feb 12 to Feb 18	Feb 13 to Feb 19	Feb 14 to Feb 20	Feb 15 to Feb 21	% change from Feb 09-Feb 15 to Feb 15-Feb 21
Southwestern Public Health	21.7	18.4	16.1	14.2	10.9	10.9	9.9	-54.4%
Windsor-Essex County Health Unit	55.3	58.6	57.7	54.8	47.1	40.7	39.5	-28.6%
<b>CENTRAL WEST</b>								
Brant County Health Unit	29.0	36.1	35.4	30.9	42.5	38.7	38.0	+31.0%
City of Hamilton Public Health Services	41.2	38.8	38.5	43.4	49.3	52.5	51.8	+25.7%
Haldimand-Norfolk Health Unit	8.8	7.0	5.3	14.0	14.0	18.4	21.0	+138.6%
Halton Region Public Health	38.0	35.4	34.9	37.5	37.0	36.2	35.4	-6.8%
Niagara Region Public Health	33.4	33.4	28.8	26.5	25.6	23.5	22.2	-33.5%
Region of Waterloo Public Health and Emergency Services	50.5	50.8	45.5	44.5	47.1	49.6	49.5	-2.0%
Wellington-Dufferin-Guelph Public Health	38.5	35.6	32.4	29.2	24.4	27.3	29.2	-24.2%
<b>TOTAL ONTARIO</b>	<b>50.9</b>	<b>50.0</b>	<b>48.6</b>	<b>48.5</b>	<b>48.7</b>	<b>49.7</b>	<b>50.0</b>	<b>-1.8%</b>

**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 24, 2021**

Public Health Unit Name	Cumulative count for Lineage B.1.1.7	Cumulative count for Lineage B.1.351	Cumulative count for Lineage P.1
Algoma Public Health	0	0	0
Brant County Health Unit	0	0	0
Chatham-Kent Public Health	0	0	0
City of Hamilton Public Health Services	1	0	0
Durham Region Health Department	21	0	0
Eastern Ontario Health Unit	0	0	0
Grey Bruce Health Unit	0	0	0
Haldimand-Norfolk Health Unit	1	0	0
Haliburton, Kawartha, Pine Ridge District Health Unit	0	0	0
Halton Region Public Health	8	0	0
Hastings Prince Edward Public Health	0	0	0
Huron Perth Public Health	0	0	0
Kingston, Frontenac and Lennox & Addington Public Health	1	0	0
Lambton Public Health	0	0	0
Leeds, Grenville & Lanark District Health Unit	0	0	0
Middlesex-London Health Unit	4	0	0
Niagara Region Public Health	0	0	0

Public Health Unit Name	Cumulative count for Lineage B.1.1.7	Cumulative count for Lineage B.1.351	Cumulative count for Lineage P.1
North Bay Parry Sound District Health Unit	0	2	0
Northwestern Health Unit	0	0	0
Ottawa Public Health	8	1	0
Peel Public Health	71	8	0
Peterborough Public Health	1	0	0
Porcupine Health Unit	0	0	0
Public Health Sudbury & Districts	3	0	0
Region of Waterloo Public Health and Emergency Services	7	0	0
Renfrew County and District Health Unit	0	0	0
Simcoe Muskoka District Health Unit	179	0	0
Southwestern Public Health	0	0	0
Thunder Bay District Health Unit	0	0	0
Timiskaming Health Unit	0	0	0
Toronto Public Health	73	0	2
Wellington-Dufferin-Guelph Public Health	1	0	0
Windsor-Essex County Health Unit	0	0	0
York Region Public Health	70	0	0
<b>TOTAL ONTARIO</b>	<b>449</b>	<b>11</b>	<b>2</b>

**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

## Appendix B

The laboratory detection of a variant of concern is a two-step process. Samples that test positive for SARS-CoV-2 and have a cycle threshold (Ct) value  $\leq 35$  can be tested for the N501Y mutation. If positive for the N501Y mutation these samples then undergo whole genome sequencing (WGS) to confirm the presence of a designated VOC. The table below refers to step one of this process.

**Note:** The number of specimens screened for the spike (S) gene N501Y mutation is defined as the number of unique specimens with a test request code indicating a VOC screening test (TR12952-8). The number of specimens with spike (S) gene N501Y mutation detected is defined as the number of unique specimens where the Observation Value for the VOC screening test result was 'Detected'. The N501Y mutation screening results presented here do not include all screening results in the province. Further details can be found in the [technical notes](#). Testing numbers may be subject to change due to reporting lags. These data are interim and will change as data collection and reporting methods are refined in the coming weeks.

**Table B1. Interim cumulative number of specimens screened for N501Y mutation and percent positivity: Ontario as of February 23, 2021**

	Cumulative number of specimens screened for the spike (S) gene N501Y mutation	Cumulative number of specimens with spike (S) gene N501Y mutation detected	Cumulative percent positivity
Specimens screened	17,651	1,989	11.3%

**Data Sources:** OLIS. Note that these are interim data sources to be replaced by CCM once data becomes available.

**Table B2. Interim daily number of specimens screened for N501Y mutation and percent positivity: Ontario as of February 23, 2021**

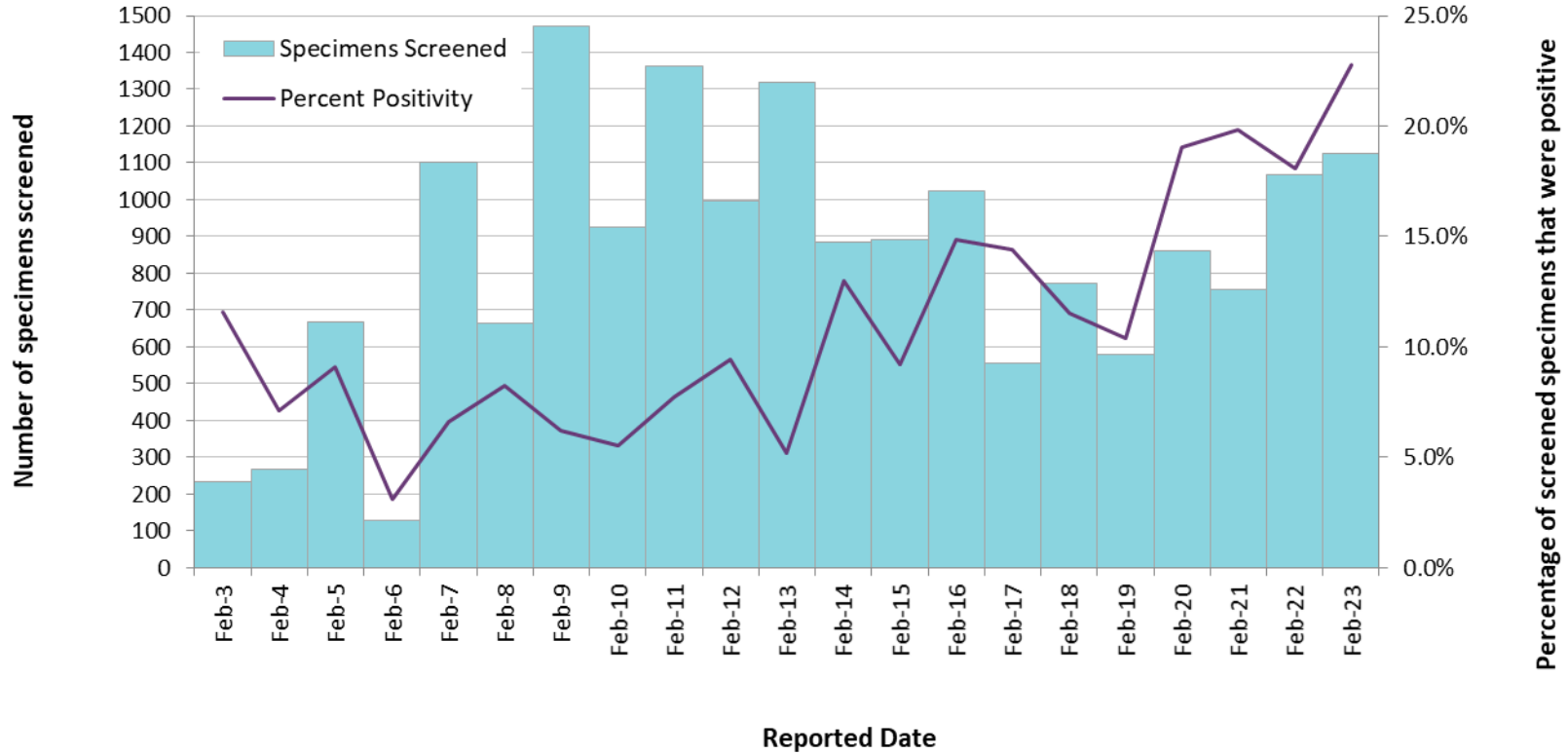
Reported Date <sup>1</sup>	# of specimens screened for the spike (S) gene N501Y mutation	# of specimens with spike (S) gene N501Y mutation detected	Daily percent positivity	Weekly percent positivity over a rolling 7-day period
February 17, 2021	556	80	14.4%	9.9%
February 18, 2021	772	89	11.5%	10.6%
February 19, 2021	579	60	10.4%	10.7%

Reported Date <sup>1</sup>	# of specimens screened for the spike (S) gene N501Y mutation	# of specimens with spike (S) gene N501Y mutation detected	Daily percent positivity	Weekly percent positivity over a rolling 7-day period
February 20, 2021	861	164	19.0%	13.3%
February 21, 2021	757	150	19.8%	14.3%
February 22, 2021	1068	193	18.1%	15.8%
February 23, 2021	1124	256	22.8%	17.4%

<sup>1</sup> Reporting date refers to the Observation Release Date

**Data Sources:** OLIS. Note that these are interim data sources to be replaced by CCM once data becomes available.

**Figure 6. Number of specimens screened for the spike (S) gene N501Y mutation and percent positivity: Ontario, February 3, 2021 to February 23, 2021**



**Note:** Reporting date refers to the Observation Release Date

**Data Sources:** OLIS. Note that these are interim data sources to be replaced by CCM once data becomes available.

**Table B3. Interim number of specimens screened for N501Y mutation and percent positivity: Ontario, February 16, 2021 to February 23, 2021**

Public Health Unit Name	# of specimens screened for the spike (S) gene N501Y mutation	# of specimens with spike (S) gene N501Y mutation detected	Weekly percent positivity over a rolling 7-day period	Cumulative percent positivity Feb 03 to Feb 23
Algoma Public Health	1	0	0.0%	5.9%
Brant County Health Unit	41	0	0.0%	0.7%
Chatham-Kent Public Health	20	0	0.0%	0.0%
City of Hamilton Public Health Services	242	10	4.1%	3.2%
Durham Region Health Department	306	60	19.6%	13.6%
Eastern Ontario Health Unit	29	0	0.0%	0.0%
Grey Bruce Health Unit	5	0	0.0%	0.0%
Haldimand-Norfolk Health Unit	20	0	0.0%	0.0%
Haliburton, Kawartha, Pine Ridge District Health Unit	19	3	15.8%	4.3%
Halton Region Public Health	184	11	6.0%	6.5%
Hastings Prince Edward Public Health	10	2	20.0%	6.3%
Huron Perth Public Health	10	0	0.0%	0.0%
Kingston, Frontenac and Lennox & Addington Public Health	8	0	0.0%	0.0%
Lambton Public Health	38	0	0.0%	0.0%
Leeds, Grenville & Lanark District Health Unit	11	0	0.0%	0.0%

Public Health Unit Name	# of specimens screened for the spike (S) gene N501Y mutation	# of specimens with spike (S) gene N501Y mutation detected	Weekly percent positivity over a rolling 7-day period	Cumulative percent positivity Feb 03 to Feb 23
Middlesex-London Health Unit	71	5	7.0%	1.8%
Niagara Region Public Health	30	4	13.3%	4.6%
North Bay Parry Sound District Health Unit	12	9	75.0%	59.5%
Northwestern Health Unit	17	0	0.0%	0.0%
Ottawa Public Health	41	6	14.6%	12.6%
Peel Public Health	1,037	182	17.6%	11.5%
Peterborough Public Health	28	1	3.6%	4.8%
Porcupine Health Unit	15	1	6.7%	8.0%
Public Health Sudbury & Districts	19	2	10.5%	3.1%
Region of Waterloo Public Health and Emergency Services	184	35	19.0%	10.4%
Renfrew County and District Health Unit	2	0	0.0%	0.0%
Simcoe Muskoka District Health Unit	194	75	38.7%	30.9%
Southwestern Public Health	22	0	0.0%	5.2%
Thunder Bay District Health Unit	93	4	4.3%	2.3%
Timiskaming Health Unit	0	0	0.0%	100.0%
Toronto Public Health	2,029	394	19.4%	11.8%



Public Health Unit Name	# of specimens screened for the spike (S) gene N501Y mutation	# of specimens with spike (S) gene N501Y mutation detected	Weekly percent positivity over a rolling 7-day period	Cumulative percent positivity Feb 03 to Feb 23
Wellington-Dufferin-Guelph Public Health	75	9	12.0%	6.0%
Windsor-Essex County Health Unit	140	4	2.9%	1.7%
York Region Public Health	715	162	22.7%	17.3%
<b>TOTAL<sup>1</sup></b>	<b>5,601</b>	<b>885</b>	<b>15.8%</b>	<b>10.5%</b>

<sup>1</sup>The N501Y screening results presented here do not include all screening results in the province. Further details can be found in the [technical notes](#).

**Data Sources:** OLIS. Note that these are interim data sources to be replaced by CCM once data becomes available.

## 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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## Citation

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Epidemiologic summary: COVID-19 in Ontario – January 15, 2020 to February 24, 2021. Toronto, ON: Queen's Printer for Ontario; 2021.

## For Further Information

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## Public Health Ontario

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