

Weekly Epidemiologic Summary

COVID-19 in Ontario: Focus on September 20, 2020 to September 26, 2020

This report includes the most current information available from CCM and other case management systems (CCM plus) as of **September 29, 2020**.

Please visit the interactive [Ontario COVID-19 Data Tool](#) to explore recent COVID-19 data by public health unit, age group, sex, and trends over time.

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

Highlights

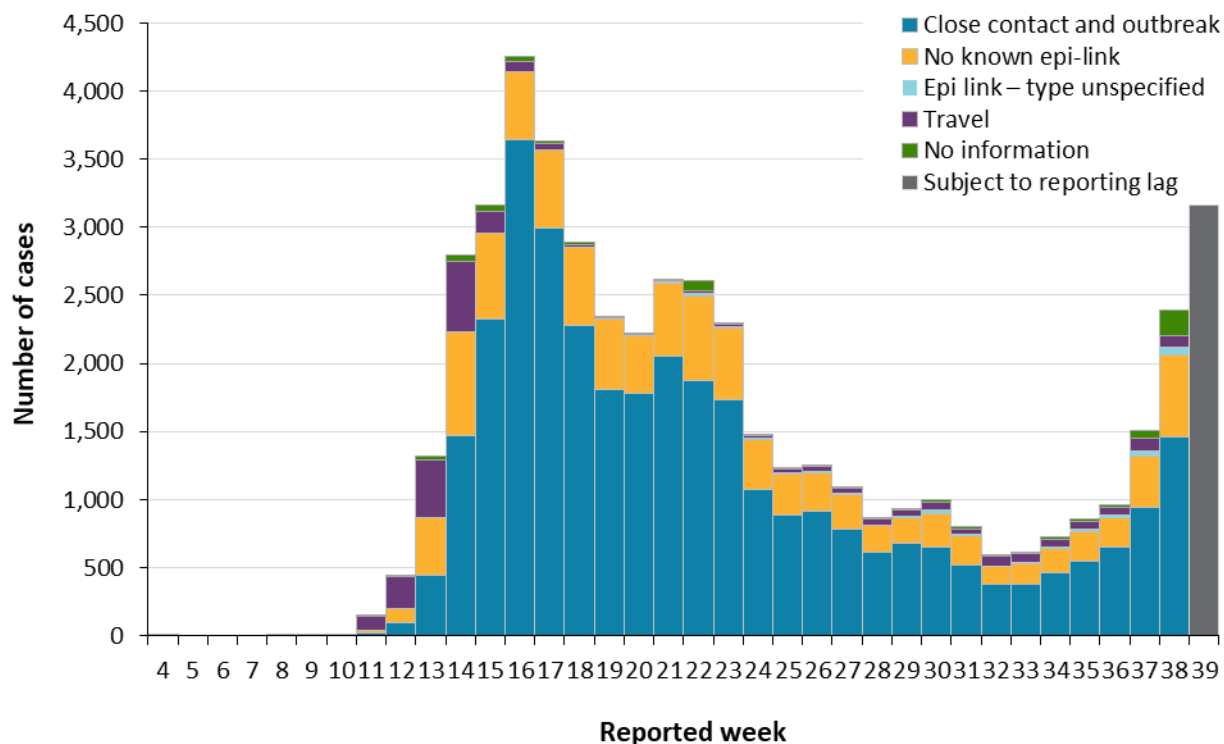
- There are a total of 50,232 confirmed cases of COVID-19 in Ontario with a public health unit reported date up to September 26, 2020.
- For the period with a public health unit reported date between September 20 and 26, 2020 (week 39):
 - A total of 3,164 cases were reported to public health compared to 2,389 cases the previous week (September 13 to 19).
 - The number of cases reported from Toronto, Peel and Ottawa Public Health Units was highest, accounting for 71.3% (2,257/3,164) of cases reported this week. However, activity in the rest of the province remains relatively low with 53.0% (18/34) of public health units reporting less than 10 cases this week.
 - The trend of increasing rates with increasing neighbourhood diversity continues and is similar to earlier periods where higher rates were observed in the most diverse neighbourhoods (Figure 6).

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

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

Cases Over Time

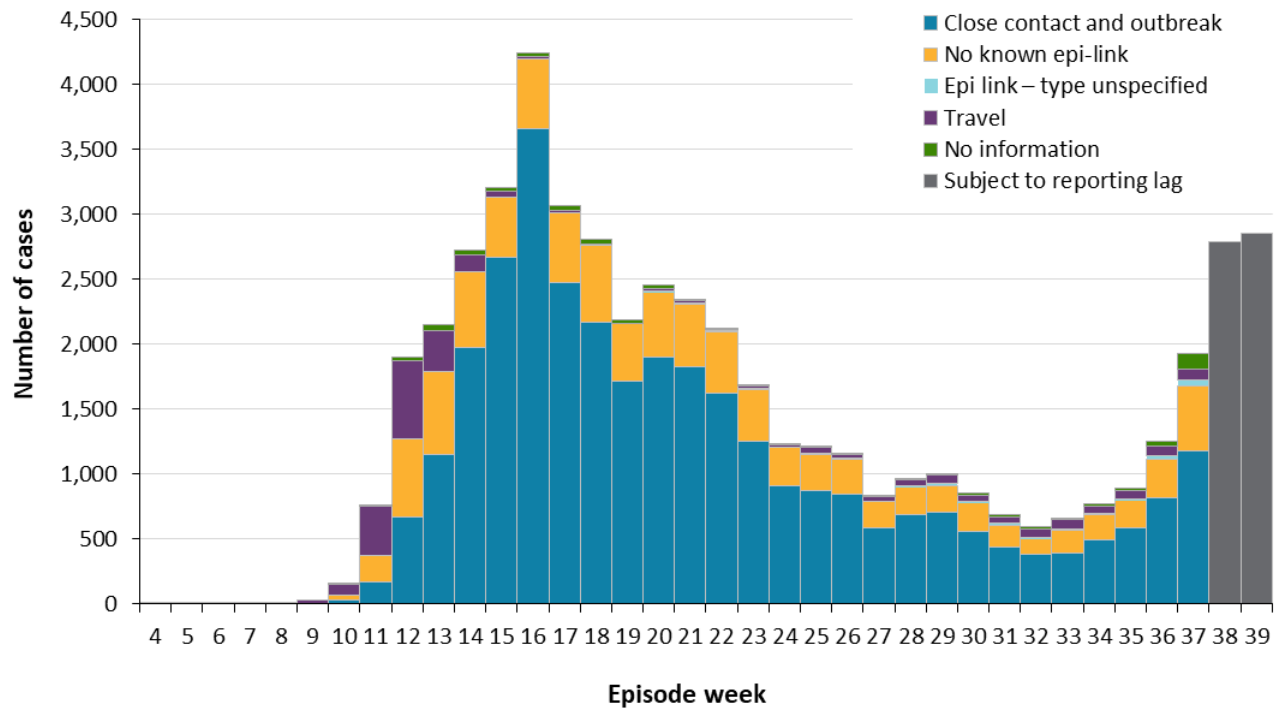
Figure 1. Confirmed cases of COVID-19 by likely source of acquisition and public health unit reported week: Ontario



Note: Include cases with reported dates ranging from week 4 (January 19 and 25, 2020) to week 39 (September 20 and 26, 2020). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM plus

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



Note: Not all cases have an episode date. Cases without an episode date are not included in the figure. The definition for how episode date is defined is available in the technical notes. Include cases with episode dates ranging from week 4 (January 19 and 25, 2020) to week 39 (September 20 and 26, 2020). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM plus.

Case Characteristics

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

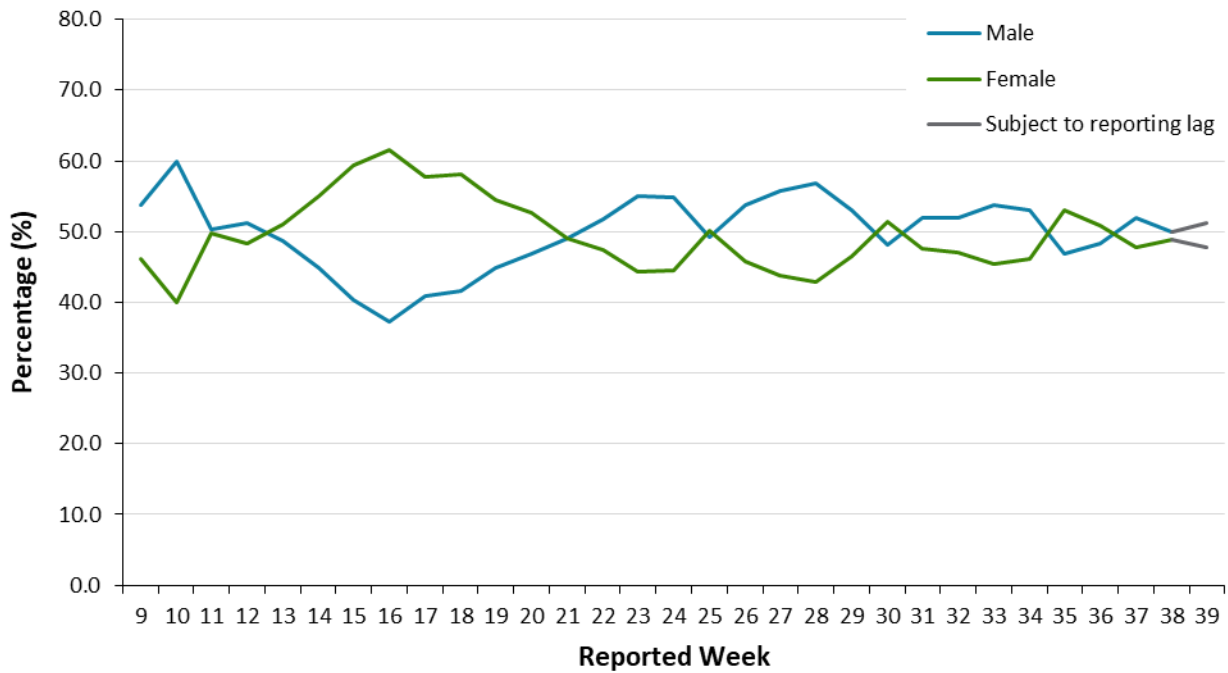
	Reported week 38 (September 13 to 19)	Reported week 39 (September 20 to 26)	Cumulative case count up to September 26	Cumulative rate per 100,000 population
Total number of cases	2,389	3,164	50,232	337.9
Gender: Male	1,193	1,622	23,826	325.5
Gender: Female	1,166	1,513	26,042	345.1
Ages: 19 and under	357	498	4,035	128.6
Ages: 20-39	1,249	1,532	17,184	413.5
Ages: 40-59	519	739	14,416	366.1
Ages: 60-79	217	317	8,326	281.8
Ages: 80 and over	45	76	6,264	922.2
Number resolved	N/A	N/A	43,887	N/A

Note: Not all cases have an age or gender reported.

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

Data Source: CCM plus

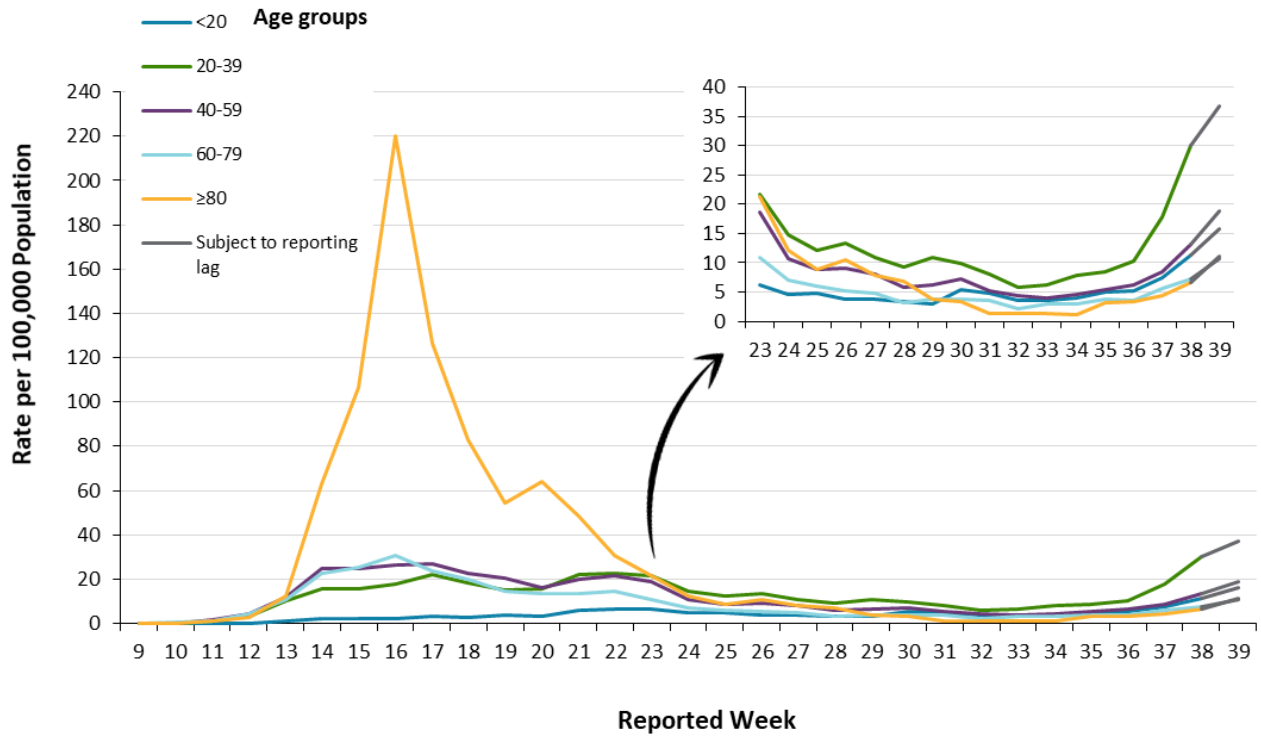
Figure 3. Percentage of confirmed cases of COVID-19 by gender and public health unit reported week: Ontario



Note: Not all cases have a gender reported. The denominator for calculating weekly percentages includes all cases. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from Week 9 (February 23 and 29, 2020) to week 39 (September 20 and 26, 2020). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM plus

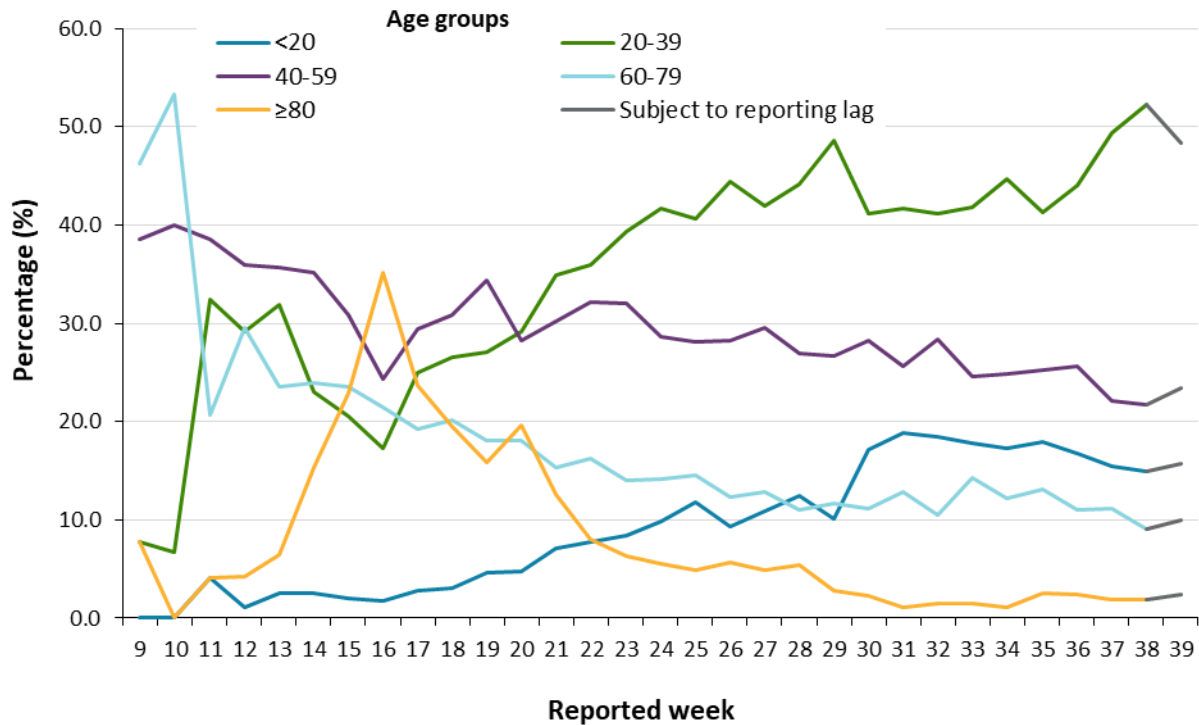
Figure 4a. Rate of confirmed cases of COVID-19 per 100,000 population by age group and public health unit reported week: Ontario



Note: Not all cases have an age reported. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from week 9 (February 23 and 29, 2020) to week 39 (September 20 and 26, 2020). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM plus

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

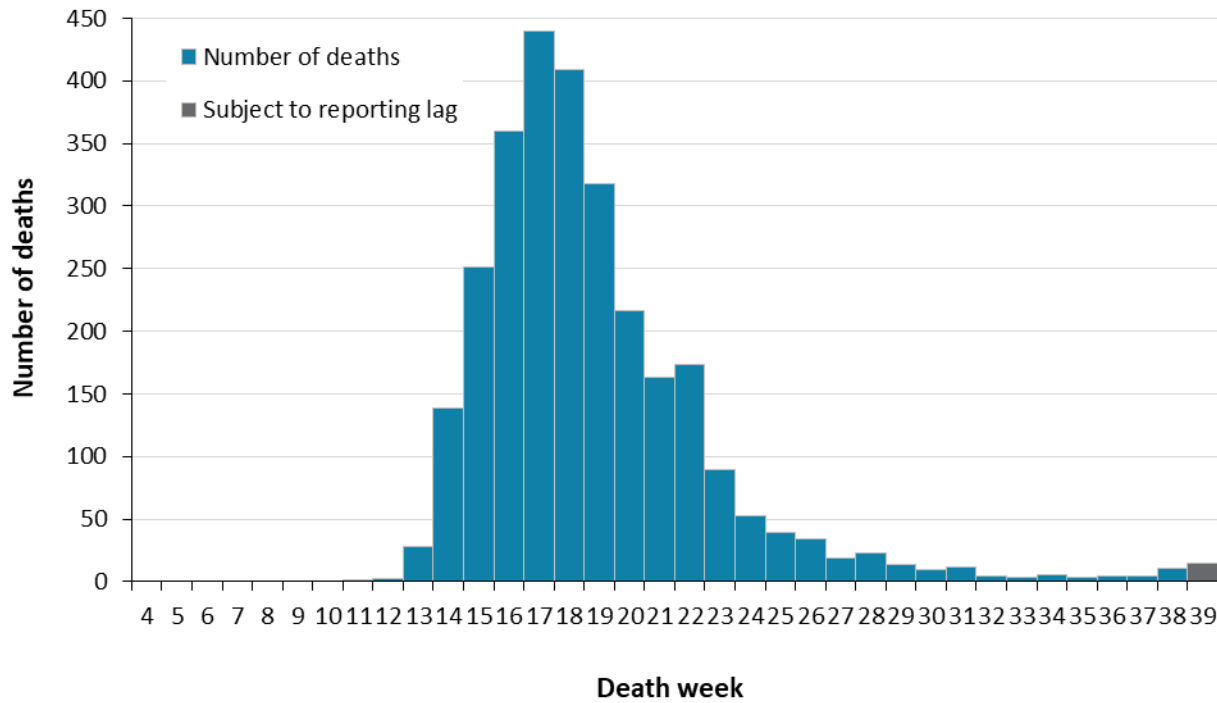


Note: Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from week 9 (February 23 and 29, 2020) to week 39 (September 20 and 26, 2020). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM plus

Deaths

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



Note: Cases without a death date are not included in the figure. Include cases with date of death ranging from week 4 (January 19 and 25, 2020) to week 39 (September 20 and 26, 2020). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM plus

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

Deaths	Reported week 38 (September 13 to 19)	Reported week 39 (September 20 to 26)	Cumulative case count up to September 26	Cumulative rate per 100,000 population
Number of deaths	9	5	2,847	19.2
Gender: Male	5	3	1,298	17.7
Gender: Female	4	2	1,511	20.0
Ages: 19 and under	0	0	1	0.0
Ages: 20-39	0	0	11	0.3
Ages: 40-59	0	0	122	3.1
Ages: 60-79	4	1	768	26.0
Ages: 80 and over	5	4	1,945	286.3

Note: Not all cases have a reported age or gender. Reported week is the week the case was reported to the public health unit. This is different than the “week of death” presented in Figures 5 and 6 which reflects the week the case was reported to have a ‘Fatal’ outcome.

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

Data Source: CCM plus

Exposure

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

	Reported week 38 (September 13 to 19)	Percentage	Reported week 39 (September 20 to 26)	Percentage	Cumulative case count up to September 26	Cumulative percentage
Travel	89	3.7%	58	1.8%	2,554	5.1%
Outbreak-associated or close contact of a confirmed case	1,462	61.2%	1,497	47.3%	34,964	69.6%
Epidemiological link – type unspecified	52	2.2%	32	1.0%	287	0.6%
No known epidemiological link	603	25.2%	816	25.8%	10,947	21.8%
Information missing or unknown	183	7.7%	761	24.1%	1,480	2.9%
Total	2,389		3,164		50,232	

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

Data Source: CCM plus.

Sub-populations of interest

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

Health care workers	Reported week 38 (September 13 to 19)	Reported week 39 (September 20 to 26)	Cumulative case count up to September 26
Number of cases	83	82	7,027
Ever hospitalized	1	0	245
Ever in ICU	0	0	60

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

Data Source: CCM plus

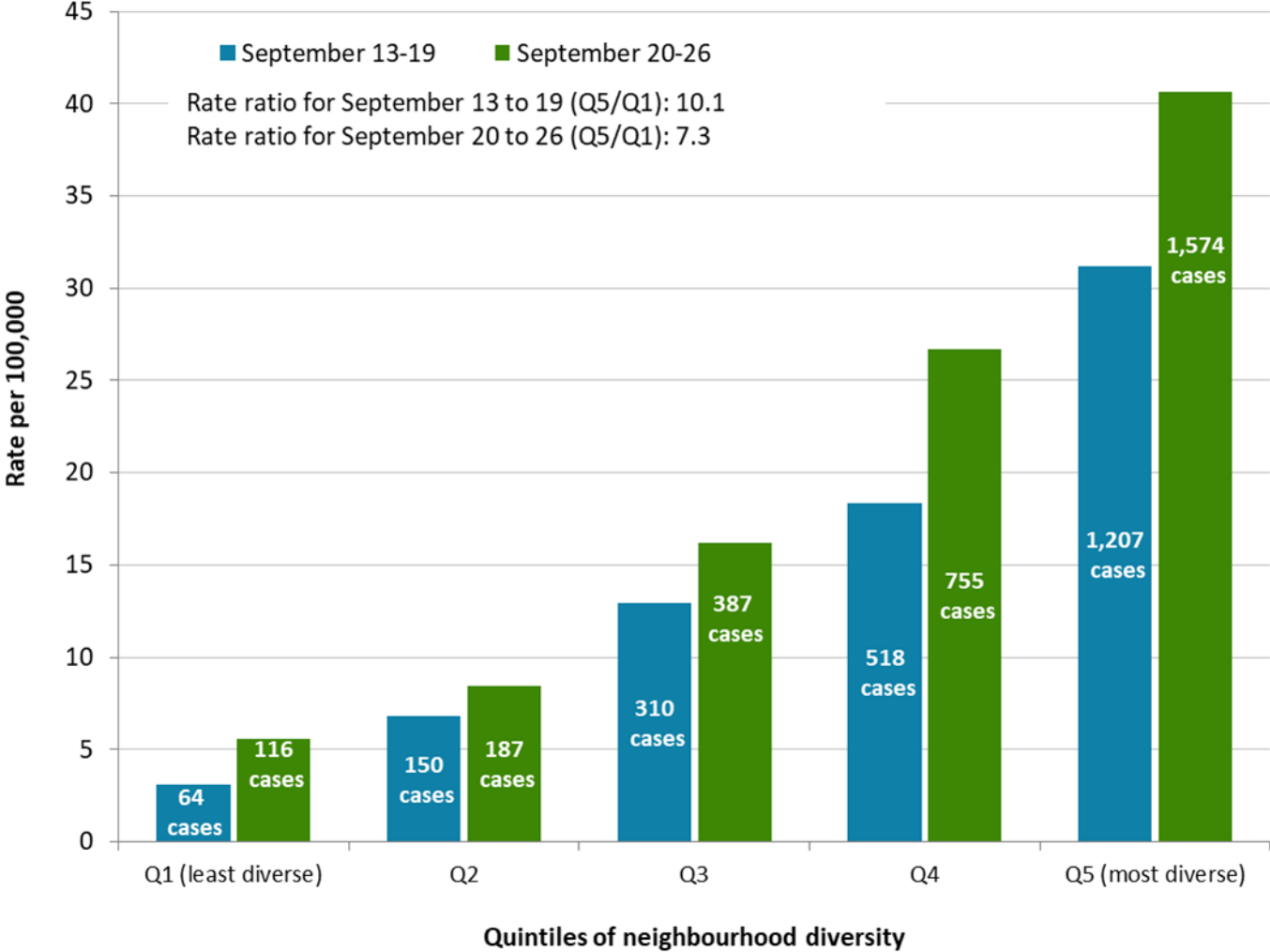
Table 5. Summary of cases of COVID-19 associated with long-term care home outbreaks: Ontario

Long-term care home associated cases	Reported week 38 (September 13 to 19)	Reported week 39 (September 20 to 26)	Cumulative case count up to September 26
Residents	46	33	6,057
Deaths among residents	6	0	1,835
Health care workers	18	15	2,710
Deaths among health care workers	0	0	8

Note: Information on how long-term care home residents and health care workers are identified is available in the technical notes. Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM plus

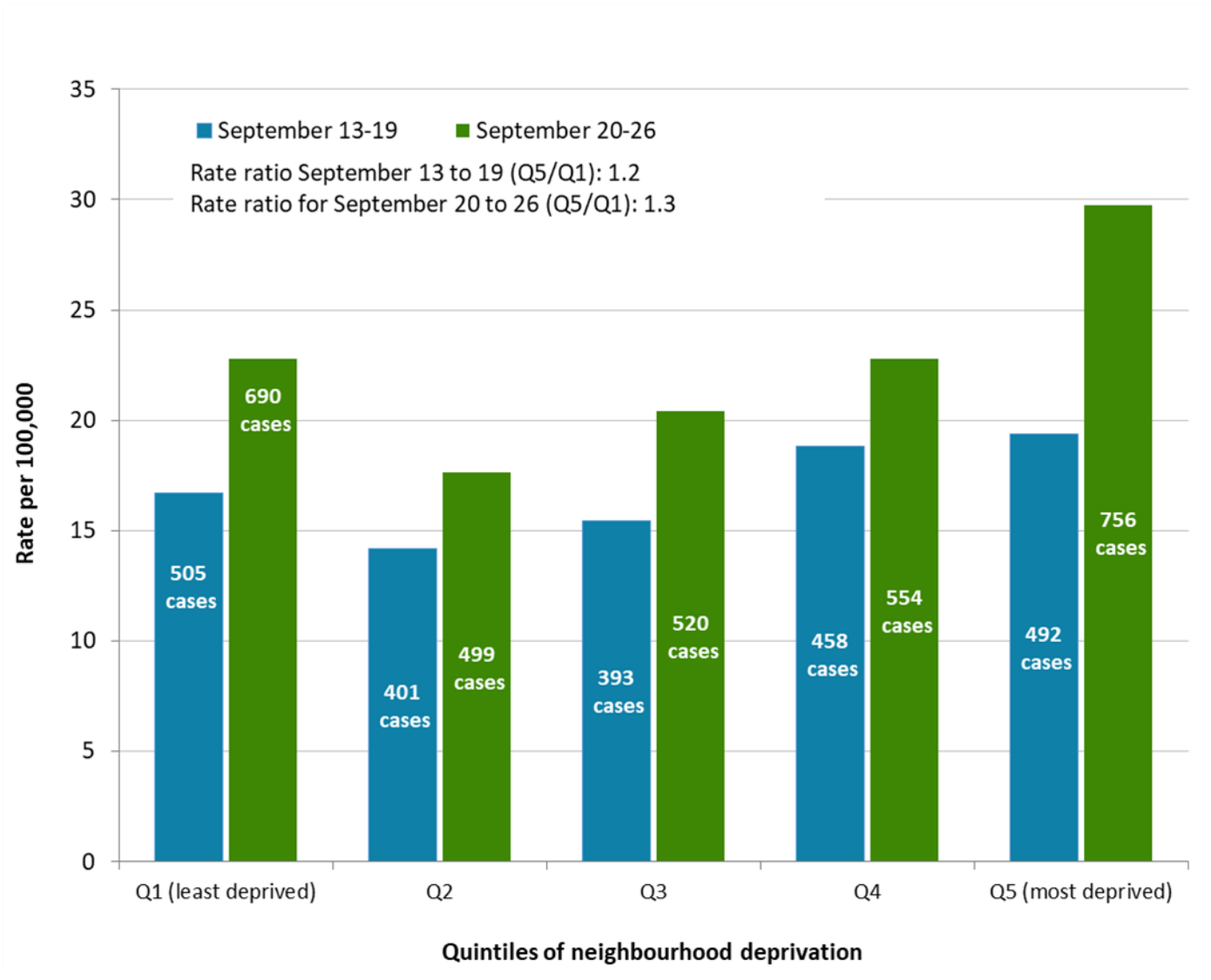
Figure 6. Rate and number of confirmed cases of COVID-19 for each quintile of neighbourhood diversity: Ontario, week 38 (September 13 to 19, 2020) and week 39 (September 20 to 26, 2020).



Note: Neighbourhood diversity is measured using the ethnic concentration dimension of the Ontario Marginalization Index. The ethnic concentration dimension is based on the proportion of non-white and non-Indigenous residents and/or the proportion of immigrants that arrived in Canada within the past five years.

Data Source: CCM plus, Ontario Marginalization Index

Figure 7. Rate and number of confirmed cases of COVID-19 for each quintile of neighbourhood deprivation: Ontario, week 38 (September 13 to 19, 2020) and week 39 (September 20 to 26, 2020).

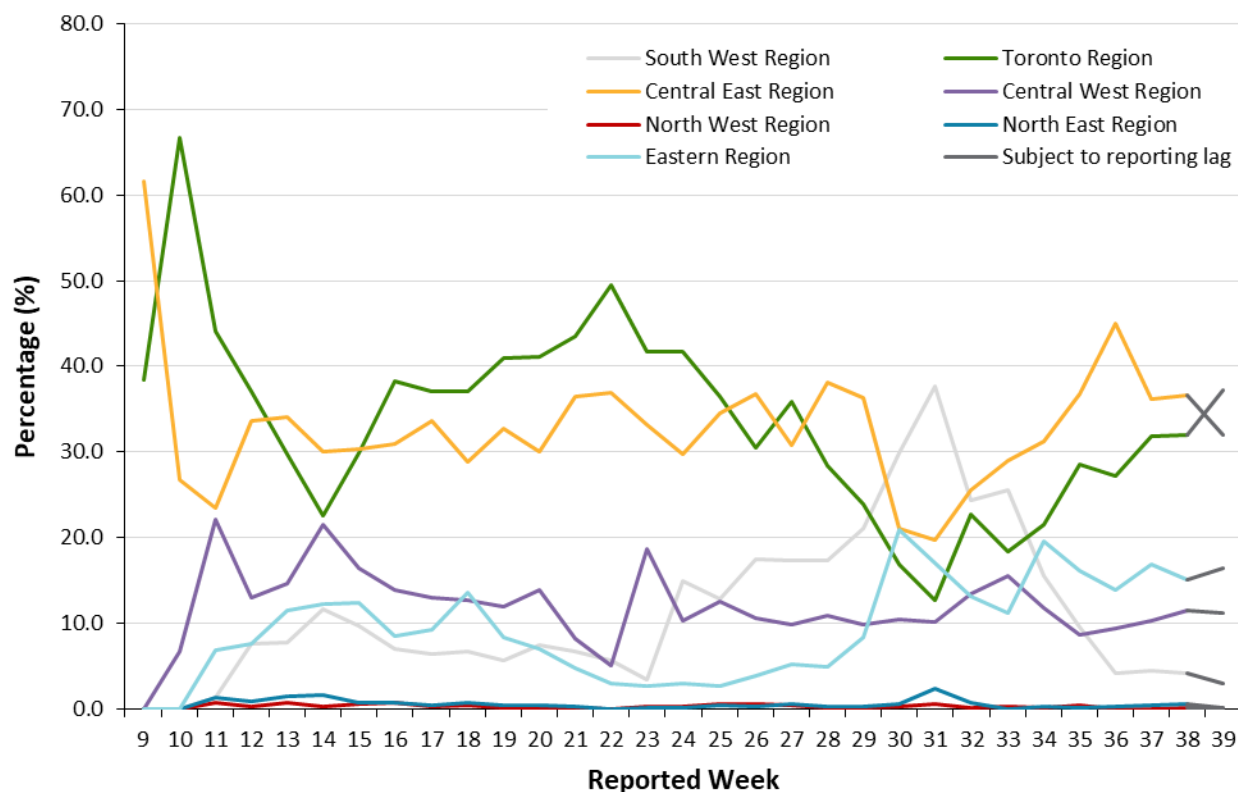


Note: Neighbourhood deprivation is measured using the material deprivation dimension of the Ontario Marginalization Index. The material deprivation dimension uses Canadian census data on income, quality of housing, educational attainment and family structure characteristics to assess the ability of individuals and communities to access and attain basic material needs.

Data Source: CCM plus, Ontario Marginalization Index

Geography

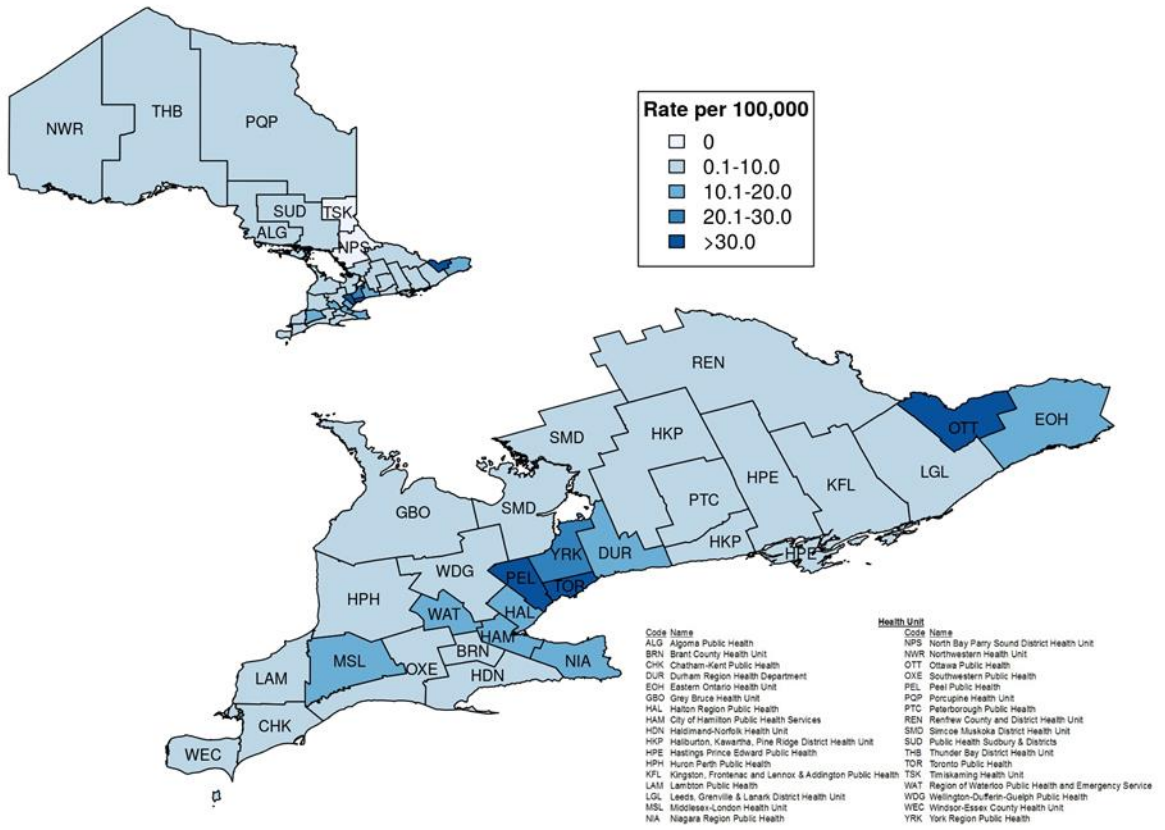
Figure 8. Percentage of COVID-19 cases by geographic region and public health unit reported week: Ontario



Note: Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from week 9 (February 23 and 29, 2020) to week 39 (September 20 and 26, 2020). Table 2A in [Appendix A](#) has a listing of public health units by region.

Data Source: CCM plus

Figure 9. Rate of confirmed cases of COVID-19 in public health reported week 39 (September 20 to 26, 2020) by public health unit: Ontario



Data Source: CCM plus

Outbreaks

Table 6. Number of public health unit declared COVID-19 outbreaks by setting type: Ontario

Setting Type	Reported week 39 (September 20 to 26)	Number of ongoing outbreaks	Cumulative number of outbreaks reported to September 26
Institution: Long-term care homes	1	30	450
Institution: Retirement homes	3	23	201
Institution: Hospitals	2	4	100
Institutions Subtotal	6	57	751
Congregate: Correctional facility	0	1	6
Congregate: Shelter	1	5	53
Congregate: Group home	2	9	98
Congregate Setting Subtotal	3	15	157
Non-congregate setting: Workplace	5	87	338
Non-congregate setting: Daycare	5	25	46
Non-congregate setting: Elementary/Secondary School	5	9	9
Non-congregate setting: Post-Secondary School	0	0	0
Non-congregate setting: Other	7	37	100
Non-Congregate Settings Subtotal	22	158	493
Total number of outbreaks	31	230	1,401

Note: If public health unit outbreak reported date is unavailable, the date the public health unit created the outbreak is used. Ongoing outbreaks includes all outbreaks that are 'Open' in iPHIS without a 'Declared Over Date' recorded. Non-congregate settings: Workplace includes farms, food processing facilities, other. Non-congregate setting: Other includes restaurants, community centres, etc.

*Cumulative counts include COVID-19 school outbreaks reported starting week 36 (August 30 to September 5, 2020). Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM plus

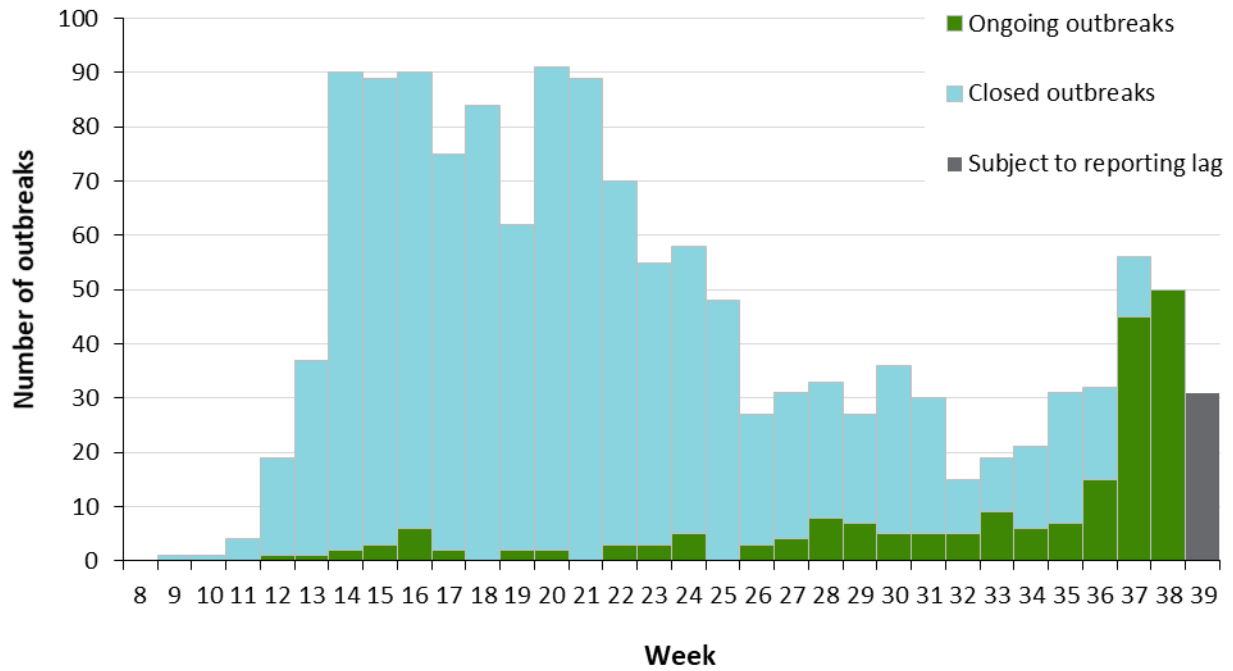
Table 7. Confirmed cases of COVID-19 associated with COVID-19 outbreaks by setting type and public health unit reported week: Ontario

Cases associated with the outbreak setting type	Reported week 38 (September 13 to 19)	Reported week 39 (September 20 to 26)	Cumulative number of cases
Institution: Long-term care homes	77	64	9,251
Institution: Retirement homes	5	17	1,616
Institution: Hospitals	3	25	1,000
Institutions Subtotal	85	106	11,867
Congregate: Correctional facility	0	0	110
Congregate: Shelter	1	5	598
Congregate: Group home	7	6	485
Congregate Setting Subtotal	8	11	1,193
Non-congregate setting: Workplace	34	28	2,597
Non-congregate setting: Daycare	7	11	78
Non-congregate setting: Other	93	64	562
Non-Congregate Settings Subtotal	134	103	3,237
Total number of cases	227	220	16,297

Note: Interpret case counts for the most recent week with caution due to reporting lags. Non-congregate setting: Workplace includes farms, food processing facilities, other. Non-congregate setting: Other includes restaurants, community centres, etc.

Data Source: CCM plus

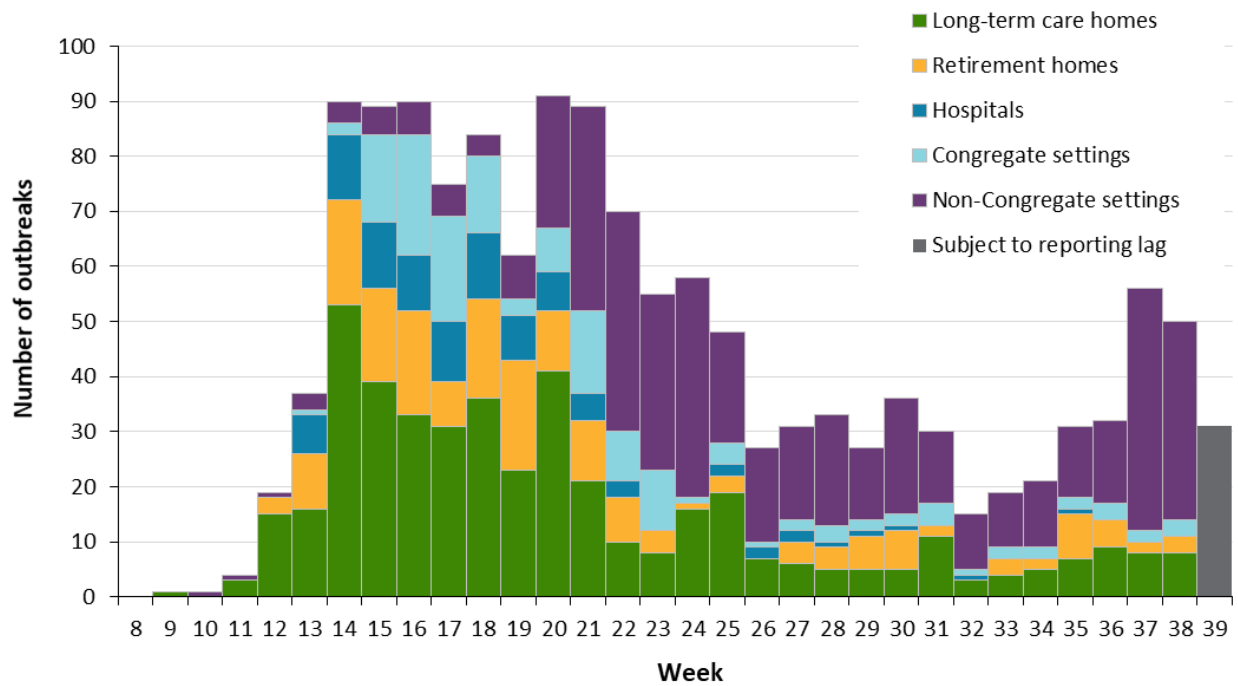
Figure 10. Public health unit declared COVID-19 outbreaks by status (ongoing or closed) and public health unit outbreak reported week: Ontario



Note: If public health unit outbreak reported date is unavailable, the date the public health unit created the outbreak is used. Ongoing outbreaks includes all outbreaks that are 'Open' in iPHIS without a 'Declared Over Date' recorded. Closed outbreaks are 'Closed' or have a 'Declared Over Date' recorded in iPHIS. Week 8 refers to February 16 and 22, 2020 and week 39 refers to September 20 and 26, 2020.

Data Source: CCM plus

Figure 11. Public health unit declared COVID-19 outbreaks by outbreak setting type and public health unit reported week: Ontario



Note: If public health unit outbreak reported date is unavailable, the date the public health unit created the outbreak is used. Week 8 refers to February 16 and 22, 2020 and week 39 refers to September 20 and 26, 2020. Congregate settings include group homes, shelters, correctional facilities, etc. Non-congregate settings include outbreaks within workplaces, daycares, schools, restaurants, etc.

Data Source: CCM plus

Technical Notes

Data Sources

- The data for this report were based on:
 - Information extracted from the Ontario Ministry of Health (Ministry) integrated Public Health Information System (iPHIS) database for Toronto Public Health as of **September 29, 2020 at 3 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 **September 29, 2020 at 2 p.m.**
 - Information successfully uploaded to the Ministry from the Public Health Case and Contact Management Solution (CCM) as of **September 29, 2020 at 1 p.m.**
- CCM plus (which includes CCM, iPHIS, CORES, The COD and COVID-19 CCMtool) are dynamic disease reporting systems, which allow ongoing updates to data previously entered. As a result, data extracted from CCM 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 Ministry, IntelliHEALTH Ontario. Data were extracted on November 26, 2019.
- Postal Code Conversion File Plus (PCCF+) version 7B from Statistics Canada 2016 Canadian census dissemination area profiles.
- The health equity (neighbourhood-level diversity and deprivation) analyses use data from the 2016 Ontario Marginalization Index and population counts from the 2016 Canada Census:
 - Matheson FI; van Ingen T. 2016 Ontario marginalization index. Toronto, ON: Providence St. Joseph's and St. Michael's Healthcare; 2018. Joint publication with Public Health Ontario.
 - Statistics Canada. Census of Population, 2016: Profile for Canada, Provinces, Territories, Census Divisions, Census Subdivisions and Dissemination Areas. Retrieved from: https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/download-telecharger/comp/GetFile.cfm?Lang=E&FILETYPE=CSV&GEONO=044_ONTARIO.

Data Caveats and Methods: Case Data

- The data only represent cases reported to public health units and recorded in CCM plus. As a result, all counts are subject to varying degrees of underreporting due to a variety of factors, such as disease awareness and medical care seeking behaviours, which may depend on severity of illness, clinical practice, changes in laboratory testing, and reporting behaviours.

- Observed trends over time should be interpreted with caution for the most recent period due to reporting and/or data entry lags.
- All cases meeting the confirmed case classification as listed in the MOH [COVID-19 case definition](#) are included except where noted (e.g., analyses that describe the relationship between COVID-19 and marginalization). 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**.
- CCM/iPHIS cases for which the Disposition Status was reported as ENTERED IN ERROR, DOES NOT MEET DEFINITION, DOES NOT MEET, IGNORE, DUPLICATE-DO NOT USE, 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.
- Reported date is the date the case was reported to the public health unit. This is different than the daily change in cases released by the Province for the same time period, which reflects the difference in cumulative counts reported to the Province between one day and the next.
- Reported weeks were created to align with the Public Health Agency of Canada (PHAC) influenza surveillance weeks.
- Case episode date 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.
- Cases with unknown or missing ages were excluded from age-specific analyses.
- Health care worker includes cases that reported 'Yes' to any of the following occupations: health care worker, doctor, nurse, dentist, dental hygienist, midwife, other medical technicians, personal support worker, respiratory therapist, first responder.
- Resolved cases are determined only for COVID-19 cases that have not died. Cases that have died are considered fatal and not resolved. The following cases are considered resolved:
 - Cases that are reported as 'recovered' in CCM based on local public health unit assessment
 - Cases that are not hospitalized and are 14 days past their symptom onset date or specimen collection date (where symptom onset date is not known)
 - Cases that are currently hospitalized (no hospitalization end date entered) and have a case status of 'closed' indicating that public health follow up is complete and are 14 days past their symptom onset date or specimen collection date
- Data on hospital admissions, ICU admissions and deaths are likely under-reported as these events may occur after the completion of public health follow up of cases. Cases that were admitted to hospital or died after follow-up was completed may not be captured in CCM.

- Deaths are determined by using the outcome field in CCM plus. Any case marked 'Fatal' is included in the deaths data. The CCM field Type of Death is not used to further categorize the data.
 - The date of death is determined using the outcome date field for cases marked as 'Fatal' in the outcome field.
- Hospitalization includes all cases for which a hospital admission date was reported 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.
- Likely source of acquisition is determined by examining the epidemiologic link and epidemiologic link status fields in CCM and local systems. If no epidemiologic link is identified in those fields the risk factor fields are examined to determine whether a case travelled, was associated with an outbreak, was a contact of a case, had an epidemiological link with type unspecified, had no known epidemiological link (sporadic community transmission) or was reported to have an unknown source/no information was reported. Some cases may have no information reported if the case is untraceable, was lost to follow-up or referred to FNIHB. Cases with multiple risk factors were assigned to a single likely acquisition source group which was determined hierarchically in the following order:
 - For cases with an episode date *on or after* April 1, 2020: Outbreak-associated > close contact of a confirmed case > travel > no known epidemiological link > information missing or unknown
 - For cases with an episode date *before* April 1, 2020: Travel > outbreak-associated > close contact of a confirmed case > no known epidemiological link > information missing or unknown
- 'Long-term care home residents' includes cases that reported 'Yes' to the risk factor 'Resident of a long-term care home'; or 'Yes' to the risk factor 'Resident of nursing home or other chronic care facility' and reported to be part of an outbreak assigned as a long-term care home (via the Outbreak number or case comments field); or were reported to be part of an outbreak assigned as a long-term care home (via the outbreak number or case comments field) with an age over 70 years and did not report 'No' to the risk factors 'Resident of long-term care home' or 'Resident of nursing home or other chronic care facility'. 'Long-term care home residents' excludes cases that reported 'Yes' to any of the health care worker occupational risk factors.
- 'Health care workers associated with long-term care outbreaks' includes 'health care workers' reported to be part of an outbreak assigned as a long-term care home (via the outbreak number or case comments field). Excludes cases that reported 'Yes' to risk factors 'Resident of long-term care home' or 'Resident of nursing home or other chronic care facility' and 'Yes' to the calculated 'health care workers' variable.

- School classification types are defined by the Ministry of Education.
 - Elementary/Secondary schools include public or private schools educating children in a combination of elementary and secondary grades (e.g., Kindergarten to Grade 8, Grades 9 to 12, and Kindergarten to Grade 12).
- Orientation of case counts by geography is based on the 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
- Ongoing outbreaks are those that are reported in iPHIS as 'Open' and without a 'Declared Over Date' recorded.
- Outbreaks are declared by the local medical officer of health or their designate in accordance to the Health Protection and Promotion Act and criteria outlined in [Ministry guidance documents](#).
- School outbreaks include outbreaks declared on or after week 36 (August 30 to September 5, 2020).

Data Caveats and Methods: ON-Marg

- ON-Marg is a data tool that combines a wide range of demographic indicators into multiple distinct dimensions of marginalization. It is an area-based index which assigns a measure of marginalization based on neighbourhood versus individual characteristics. As such, the broader demographic trends of an area may not reflect all residents of a neighbourhood owing to the inherent heterogeneity of demographic characteristics which can vary substantially especially across large rural geographies. For more information, please visit [PHO's ON-Marg website](#).
- Neighbourhood diversity is defined using the ethnic concentration dimension of ON-Marg, which measures populations who may experience marginalization related to racism and discrimination. It is based on the proportion of non-white and non-Indigenous residents (visible minority) and/or the proportion of immigrants that arrived in Canada within the past five years. 'Visible minority' is a term used by Statistics Canada that, although is considered to be outdated, is used here to be consistent with the Canadian census.
- Neighbourhood deprivation is defined using the material deprivation dimension of ON-Marg, which is closely connected to poverty. It refers to the inability of individuals and communities to access and attain basic material needs. The indicators included in this dimension measure income, quality of housing, educational attainment and family structure characteristics.
- "Neighbourhoods" are considered to be Statistic Canada dissemination areas (DA). The Postal Code Conversion File Plus (PCCF+) version 7B was used to match individuals to a DA based on their postal code, which were subsequently assigned to a quintile of marginalization that contained 20% of Ontario neighbourhoods. The quintiles for the ethnic concentration and the material deprivation dimensions are ordered from quintiles 1 to 5, with quintile 1 having the

lowest level of marginalization (i.e., least diverse or least deprived) and quintile 5 having the highest level of marginalization (i.e., most diverse or most deprived).

- The following were not included in analyses that summarize the impact of COVID-19 among Ontarians who may experience marginalization:
 - People who have tested positive for COVID-19 that reside in long-term care settings are not included in the census data from which the marginalization indicators (ethnic concentration and material deprivation) are derived. Although these cases represent a large number of cases overall and deaths, their exclusion ensures appropriate comparisons since long-term care residents are excluded from ON-Marg.
 - People who have tested positive for COVID-19 that reside in census dissemination areas where data has been suppressed, and cases that have missing or invalid postal codes could not be assigned to a quintile of marginalization.
 - Due to data suppression for some census indicators on Indian Reserves in Ontario, residents of Indian Reserves could not be included in ON-Marg and therefore people who have tested positive for COVID-19 and are living on Indian Reserves could not be assigned to a quintile of marginalization. While Indigenous individuals living off reserves are included in this analysis, Indigeneity data is not currently collected or captured in dimensions of ON-Marg.

Appendix A

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

Reported Week	Start date	End date	Number of cases	Cumulative count
2	January 5, 2020	January 11, 2020	0	0
3	January 12, 2020	January 18, 2020	0	0
4	January 19, 2020	January 25, 2020	3	3
5	January 26, 2020	February 1, 2020	0	3
6	February 2, 2020	February 8, 2020	0	3
7	February 9, 2020	February 15, 2020	0	3
8	February 16, 2020	February 22, 2020	1	4
9	February 23, 2020	February 29, 2020	13	17
10	March 1, 2020	March 7, 2020	15	32
11	March 8, 2020	March 14, 2020	145	177
12	March 15, 2020	March 21, 2020	446	623
13	March 22, 2020	March 28, 2020	1,320	1,943
14	March 29, 2020	April 4, 2020	2,797	4,740
15	April 5, 2020	April 11, 2020	3,161	7,901
16	April 12, 2020	April 18, 2020	4,257	12,158
17	April 19, 2020	April 25, 2020	3,632	15,790
18	April 26, 2020	May 2, 2020	2,889	18,679
19	May 3, 2020	May 9, 2020	2,348	21,027
20	May 10, 2020	May 16, 2020	2,226	23,253
21	May 17, 2020	May 23, 2020	2,621	25,874

Reported Week	Start date	End date	Number of cases	Cumulative count
22	May 24, 2020	May 30, 2020	2,612	28,486
23	May 31, 2020	June 6, 2020	2,297	30,783
24	June 7, 2020	June 13, 2020	1,469	32,252
25	June 14, 2020	June 20, 2020	1,233	33,485
26	June 21, 2020	June 27, 2020	1,254	34,739
27	June 28, 2020	July 4, 2020	1,083	35,822
28	July 5, 2020	July 11, 2020	864	36,686
29	July 12, 2020	July 18, 2020	928	37,614
30	July 19, 2020	July 25, 2020	999	38,613
31	July 26, 2020	August 1, 2020	804	39,417
32	August 2, 2020	August 8, 2020	599	40,016
33	August 9, 2020	August 15, 2020	617	40,633
34	August 16, 2020	August 22, 2020	723	41,356
35	August 23, 2020	August 29, 2020	855	42,211
36	August 30, 2020	September 5, 2020	965	43,176
37	September 6, 2020	September 12, 2020	1,503	44,679
38	September 13, 2020	September 19, 2020	2,389	47,068
39	September 20, 2020	September 26, 2020	3,164	50,232

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

Public Health Unit Name	Reported week 38	Rate per 100,000 population Reported week 38	Reported week 39	Rate per 100,000 population Reported week 39
Northwestern Health Unit	2	2.3	3	3.4
Thunder Bay District Health Unit	2	1.3	1	0.7
TOTAL NORTH WEST	4	1.7	4	1.7
Algoma Public Health	2	1.7	1	0.9
North Bay Parry Sound District Health Unit	1	0.8	0	0.0
Porcupine Health Unit	4	4.8	2	2.4
Public Health Sudbury & Districts	5	2.5	3	1.5
Timiskaming Health Unit	0	0.0	0	0.0
TOTAL NORTH EAST	12	2.1	6	1.1
Ottawa Public Health	331	31.4	463	43.9
Eastern Ontario Health Unit	18	8.6	32	15.3
Hastings Prince Edward Public Health	0	0.0	1	0.6
Kingston, Frontenac and Lennox & Addington Public Health	2	0.9	10	4.7
Leeds, Grenville & Lanark District Health Unit	4	2.3	9	5.2
Renfrew County and District Health Unit	7	6.4	5	4.6
TOTAL EASTERN	362	18.8	520	27.0

Public Health Unit Name	Reported week 38	Rate per 100,000 population Reported week 38	Reported week 39	Rate per 100,000 population Reported week 39
Durham Region Health Department	70	9.8	77	10.8
Haliburton, Kawartha, Pine Ridge District Health Unit	5	2.6	6	3.2
Peel Public Health	508	31.6	619	38.5
Peterborough Public Health	5	3.4	8	5.4
Simcoe Muskoka District Health Unit	56	9.3	52	8.7
York Region Public Health	230	18.8	249	20.3
TOTAL CENTRAL EAST	874	19.5	1,011	22.6
Toronto Public Health	763	24.5	1,175	37.7
TOTAL TORONTO	763	24.5	1,175	37.7
Chatham-Kent Public Health	0	0.0	2	1.9
Grey Bruce Health Unit	4	2.4	5	2.9
Huron Perth Public Health	1	0.7	1	0.7
Lambton Public Health	1	0.8	2	1.5
Middlesex-London Health Unit	51	10.0	56	11.0
Southwestern Public Health	7	3.3	2	0.9
Windsor-Essex County Health Unit	34	8.0	25	5.9
TOTAL SOUTH WEST	98	5.8	93	5.5
Brant County Health Unit	8	5.2	12	7.7

Public Health Unit Name	Reported week 38	Rate per 100,000 population Reported week 38	Reported week 39	Rate per 100,000 population Reported week 39
City of Hamilton Public Health Services	36	6.1	72	12.2
Haldimand-Norfolk Health Unit	4	3.5	3	2.6
Halton Region Public Health	95	15.3	83	13.4
Niagara Region Public Health	28	5.9	57	12.1
Region of Waterloo Public Health and Emergency Services	78	13.3	101	17.3
Wellington-Dufferin-Guelph Public Health	27	8.7	27	8.7
TOTAL CENTRAL WEST	276	9.7	355	12.5
TOTAL ONTARIO	2,389	16.1	3,164	21.3

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

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For Further Information

For more information, email cd@oahpp.ca.

Public Health Ontario

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