Public Health Ontario | Santé publique Ontario

Weekly Epidemiologic Summary

COVID-19 in Ontario: Focus on September 27, 2020 to October 3, 2020

This report includes the most current information available from CCM and other case management systems (CCM plus) as of **October 6, 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

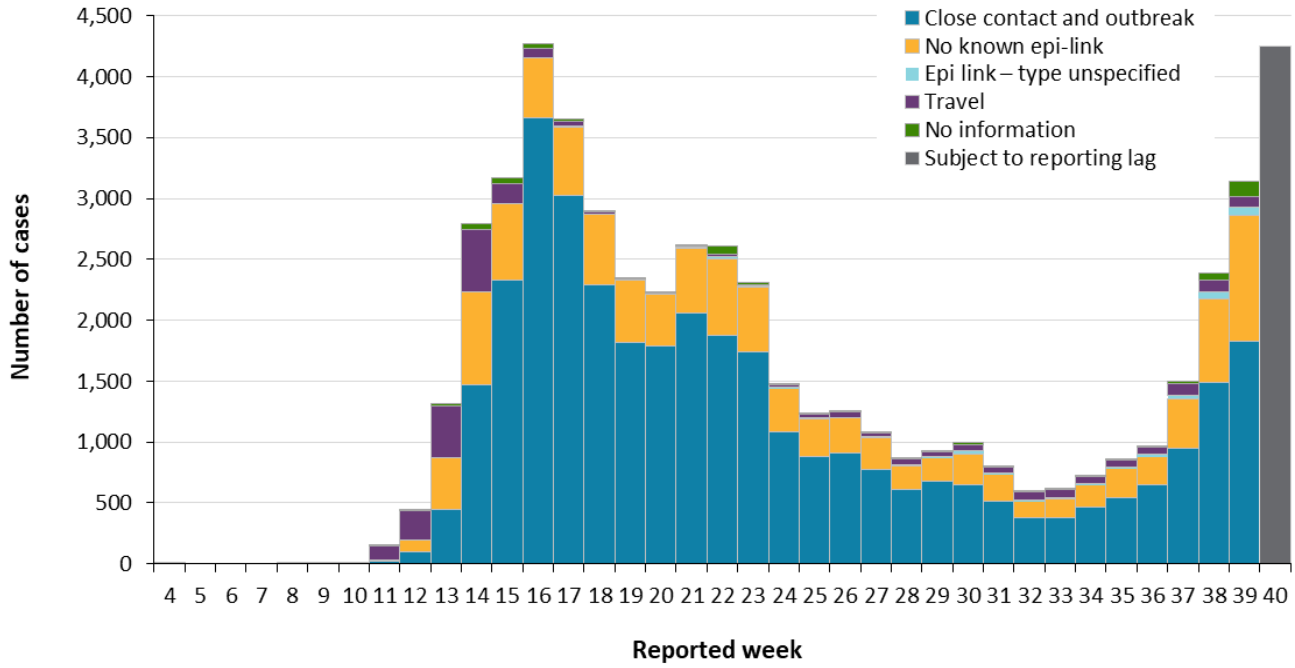
- There are a total of 54,516 confirmed cases of COVID-19 in Ontario with a public health unit reported date up to October 3, 2020.
- For the period with a public health unit reported date between September 27 and October 3, 2020 (week 40):
    - A total of 4,252 cases were reported to public health compared to 3,138 cases the previous week (September 20 to 26).
    - Although still low compared to March and April, the weekly number of deaths is increasing. This is driven by the increase in cases reported in the 80 years and older age group where cases nearly doubled from 75 cases reported in week 39 to 143 cases in week 40.
    - The highest rates of COVID-19 are occurring in neighbourhoods with the most diverse populations. These neighbourhoods are located primarily in Toronto, Peel Region and City of Ottawa (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.

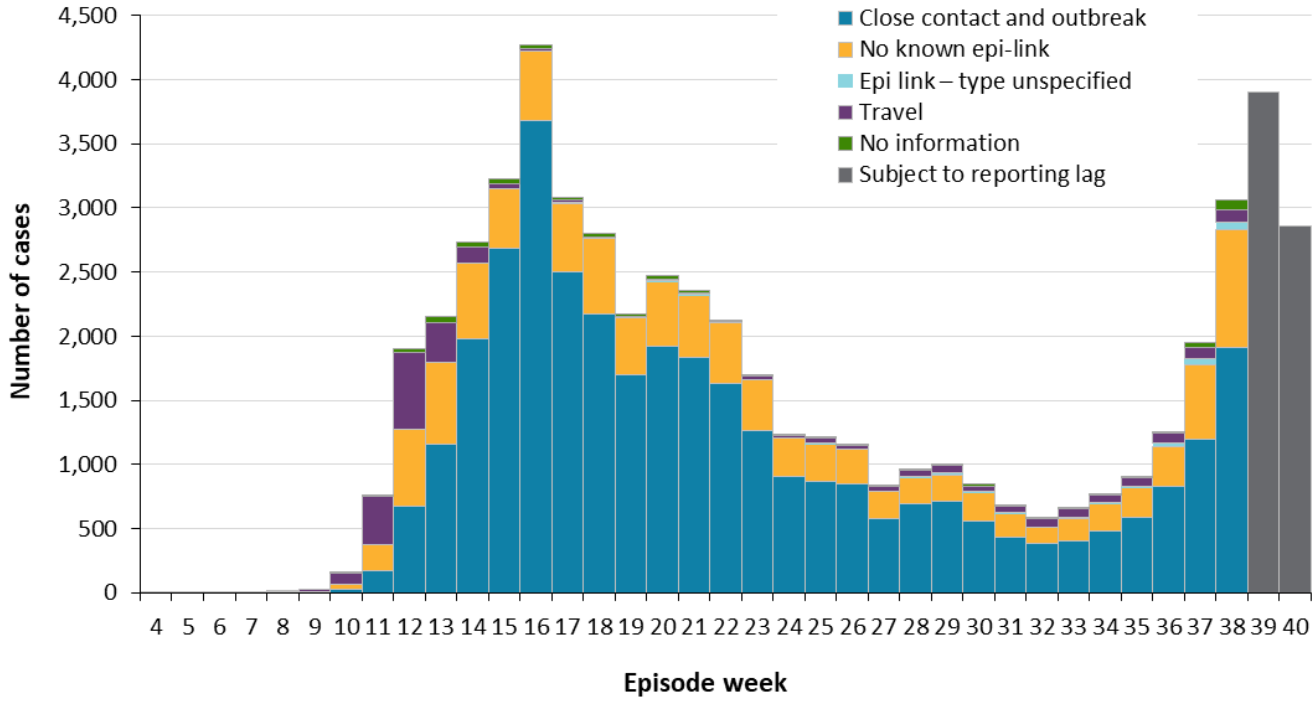
Cases Over Time

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 40 (September 27 and October 3, 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 40 (September 27 and October 3, 2020). See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.
Data Source: CCM plus.

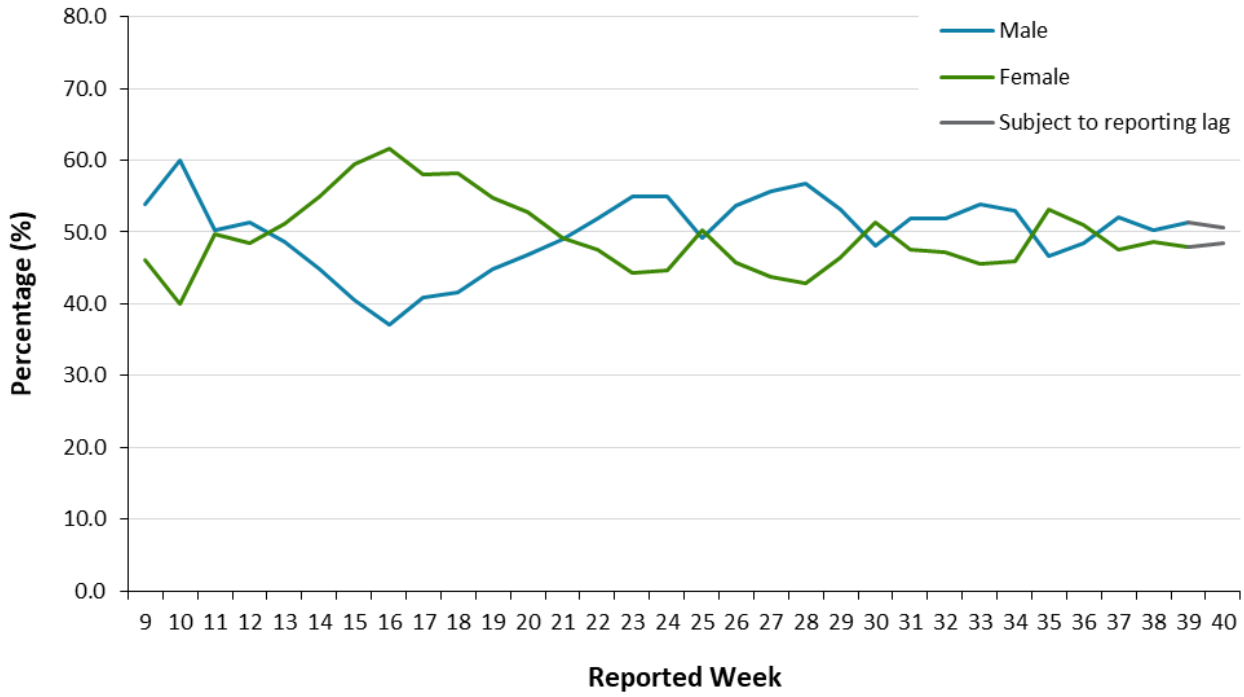
Case Characteristics

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

	Reported week 39 (September 20 to 26)	Reported week 40 (September 27 to October 3)	Cumulative case count up to October 3	Cumulative rate per 100,000 population
Total number of cases	3,138	4,252	54,516	366.8
Gender: Male	1,609	2,152	25,993	355.1
Gender: Female	1,503	2,063	28,151	373.1
Ages: 19 and under	493	650	4,679	149.2
Ages: 20-39	1,525	1,983	19,161	461.0
Ages: 40-59	730	1,067	15,486	393.3
Ages: 60-79	314	406	8,741	295.8
Ages: 80 and over	75	143	6,441	948.2
Number resolved	N/A	N/A	47,544	N/A

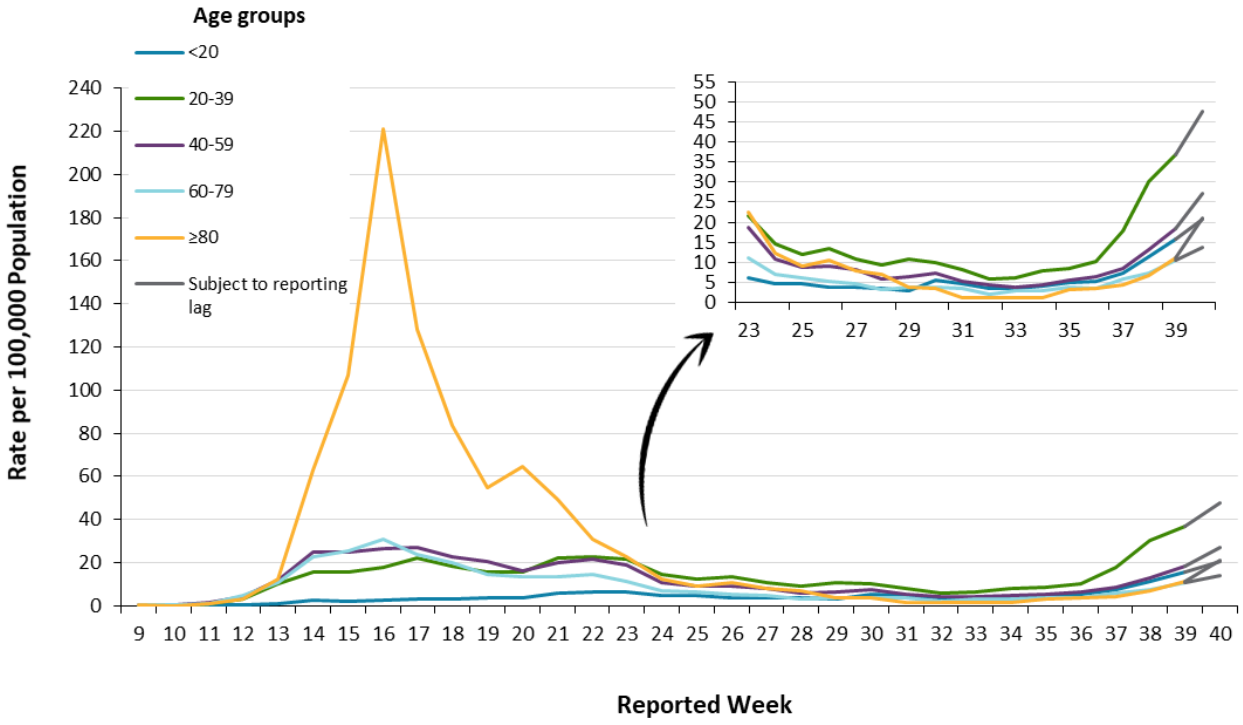
Note: Not all cases have an age or gender reported.
Interpret information for the most recent week with caution due to reporting lags.
Data Source: CCM plus

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



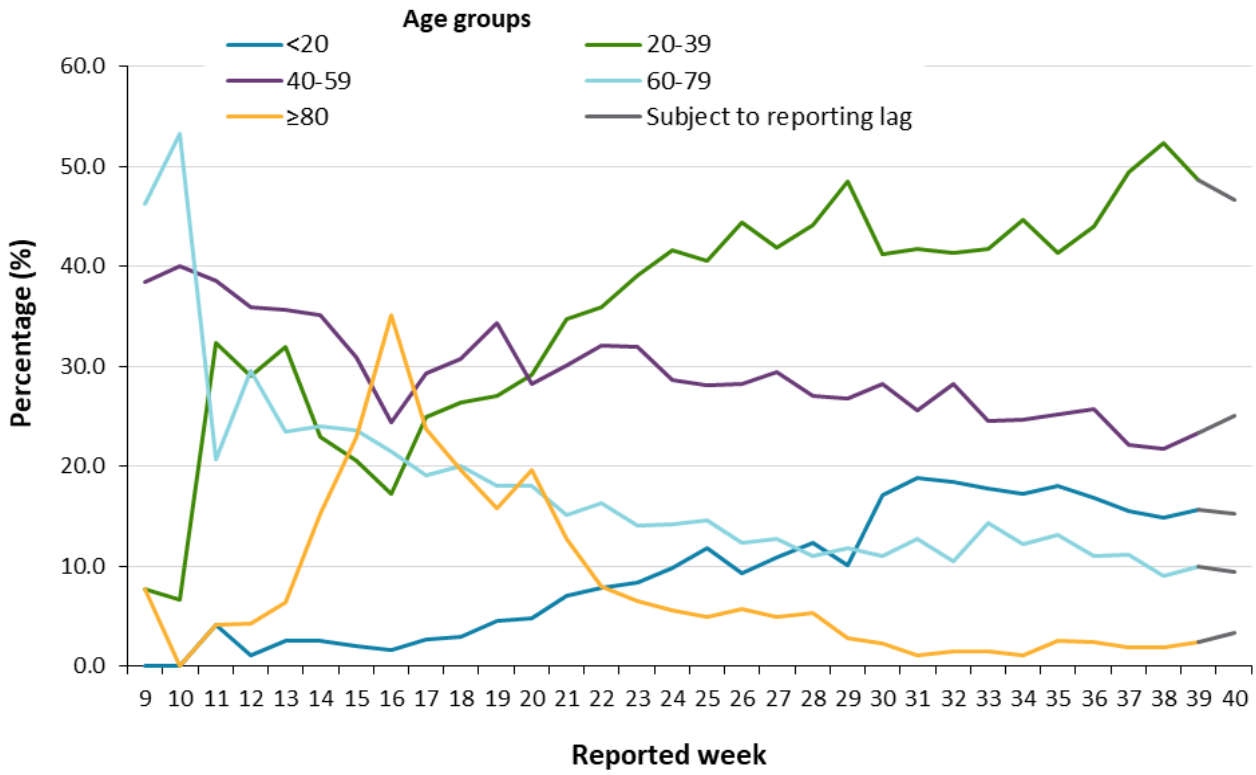
Note: Not all cases have a gender reported. The denominator for calculating weekly percentages includes all cases. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from Week 9 (February 23 and 29, 2020) to week 40 (September 27 and October 3, 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 40 (September 27 and October 3, 2020). See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.
Data Source: CCM plus

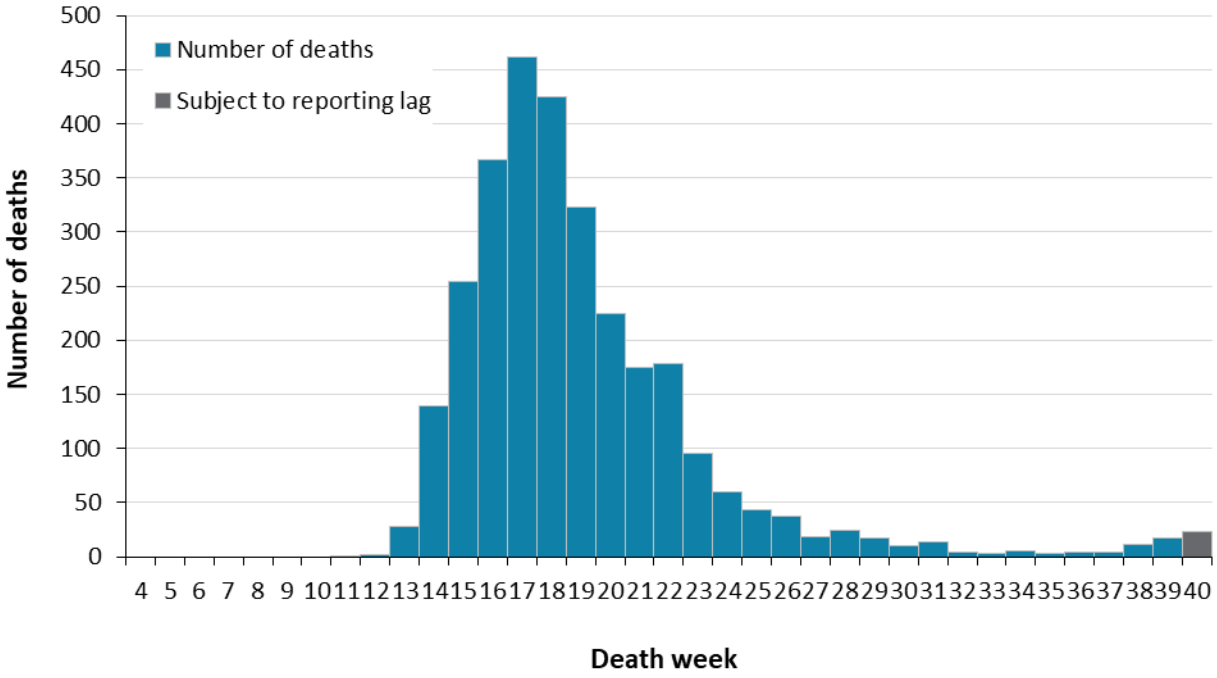
Figure 4b. Percentage of confirmed cases of COVID-19 by age group and public health unit reported week: Ontario



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 40 (September 27 and October 3, 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 40 (September 27 and October 3, 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 39 (September 20 to 26)	Reported week 40 (September 27 to October 3)	Cumulative case count up to October 3	Cumulative rate per 100,000 population
Number of deaths	15	14	2,986*	20.1
Gender: Male	6	5	1,366	18.7
Gender: Female	9	8	1,587	21.0
Ages: 19 and under	0	0	1	0.0
Ages: 20-39	0	0	11	0.3
Ages: 40-59	0	0	124	3.1
Ages: 60-79	3	5	797	27.0
Ages: 80 and over	12	9	2,053	302.2

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.
*There were 114 deaths reported for cases that occurred in the spring or summer and are now being recorded as part of a data review and data cleaning initiative.
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 39 (September 20 to 26)	Percentage	Reported week 40 (September 27 to October 3)	Percentage	Cumulative case count up to October 3	Cumulative percentage
Travel	86	2.7%	35	0.8%	2,624	4.8%
Outbreak-associated or close contact of a confirmed case	1,826	58.2%	1,672	39.3%	37,132	68.1%
Epidemiological link – type unspecified	61	1.9%	49	1.2%	366	0.7%
No known epidemiological link	1,039	33.1%	1,857	43.7%	13,166	24.2%
Information missing or unknown	126	4.0%	639	15.0%	1,228	2.3%
Total	**3,138**		**4,252**		**54,516**	

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 39 (September 20 to 26)	Reported week 40 (September 27 to October 3)	Cumulative case count up to October 3
Number of cases	129	164	7,018*
Ever hospitalized	1	1	239
Ever in ICU	0	0	59

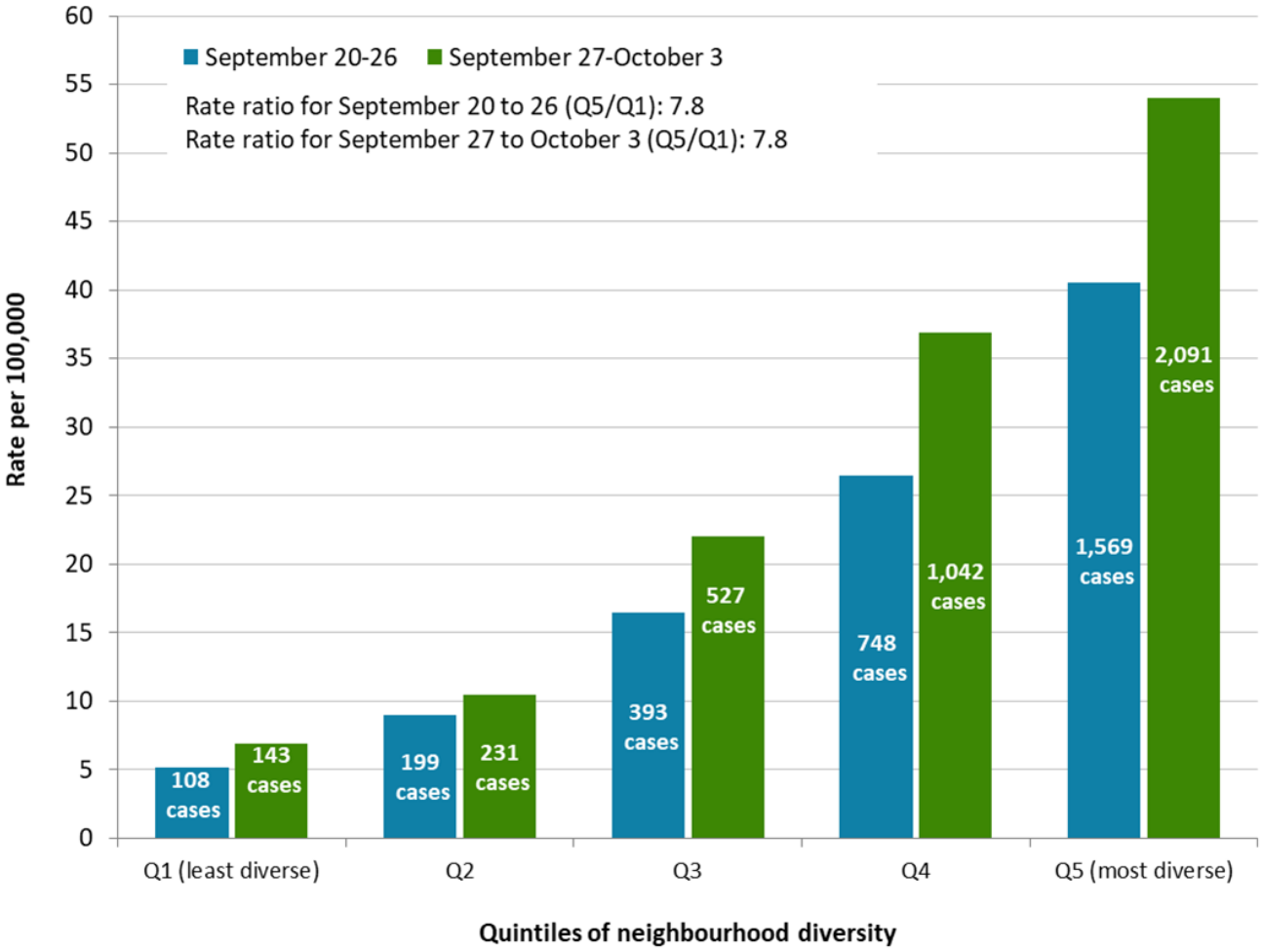
Note: Interpret information for the most recent week with caution due to reporting lags.
*Recent data remediation resulted in a decrease in the cumulative number of cases identified as Health Care Workers compared to the previous report.
Data Source: CCM plus

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

Long-term care home associated cases	Reported week 39 (September 20 to 26)	Reported week 40 (September 27 to October 3)	Cumulative case count up to October 3
Residents	34	77	6,218
Deaths among residents	3	5	1,951
Health care workers	20	27	2,657
Deaths among health care workers	0	0	8

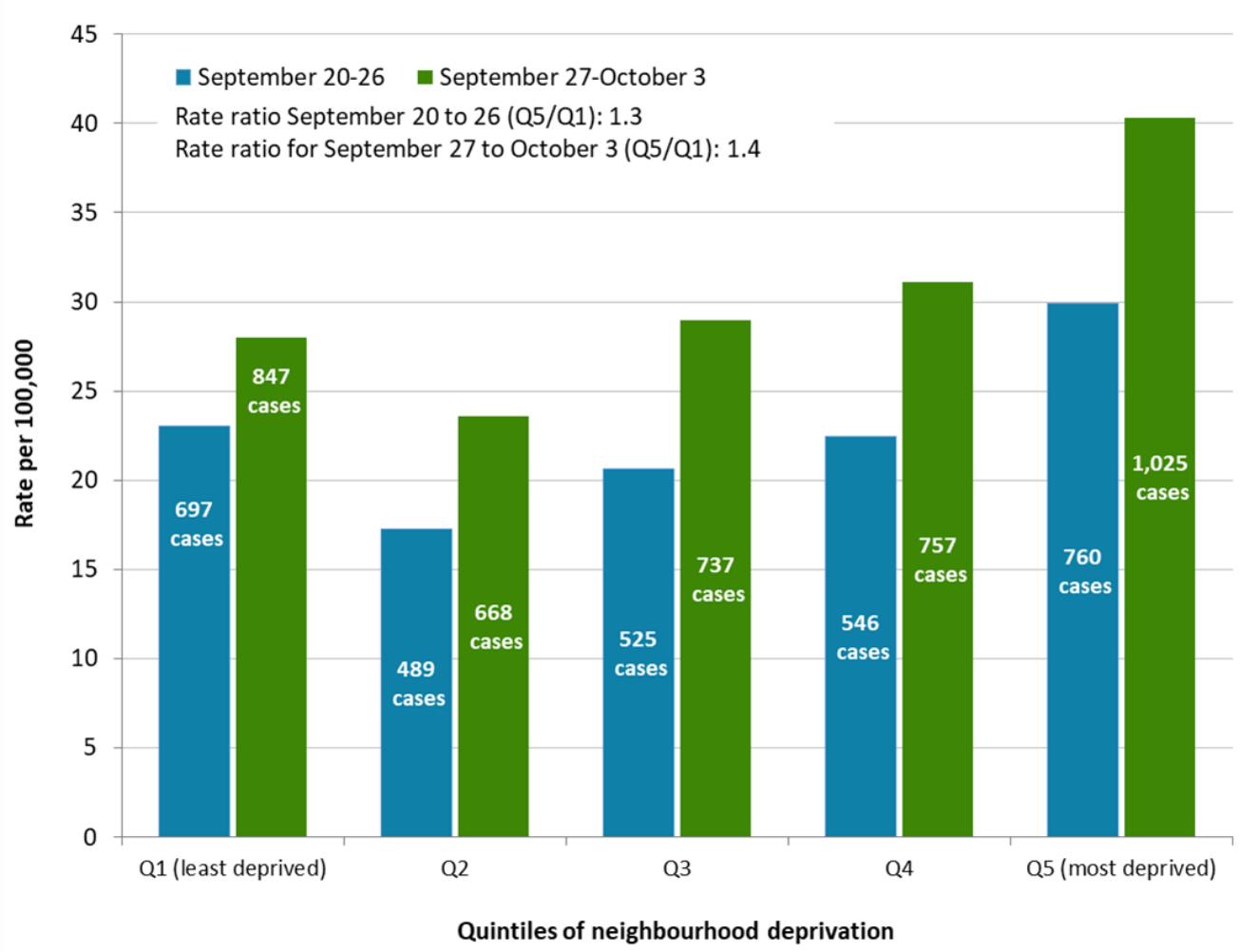
Note: Information on how long-term care home residents and health care workers are identified is available in the technical notes. Interpret information for the most recent week with caution due to reporting lags.
Data Source: CCM plus

Figure 6. Rate and number of confirmed cases of COVID-19 for each quintile of neighbourhood diversity: Ontario, week 39 (September 20 to 26, 2020) and week 40 (September 27 to October 3, 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

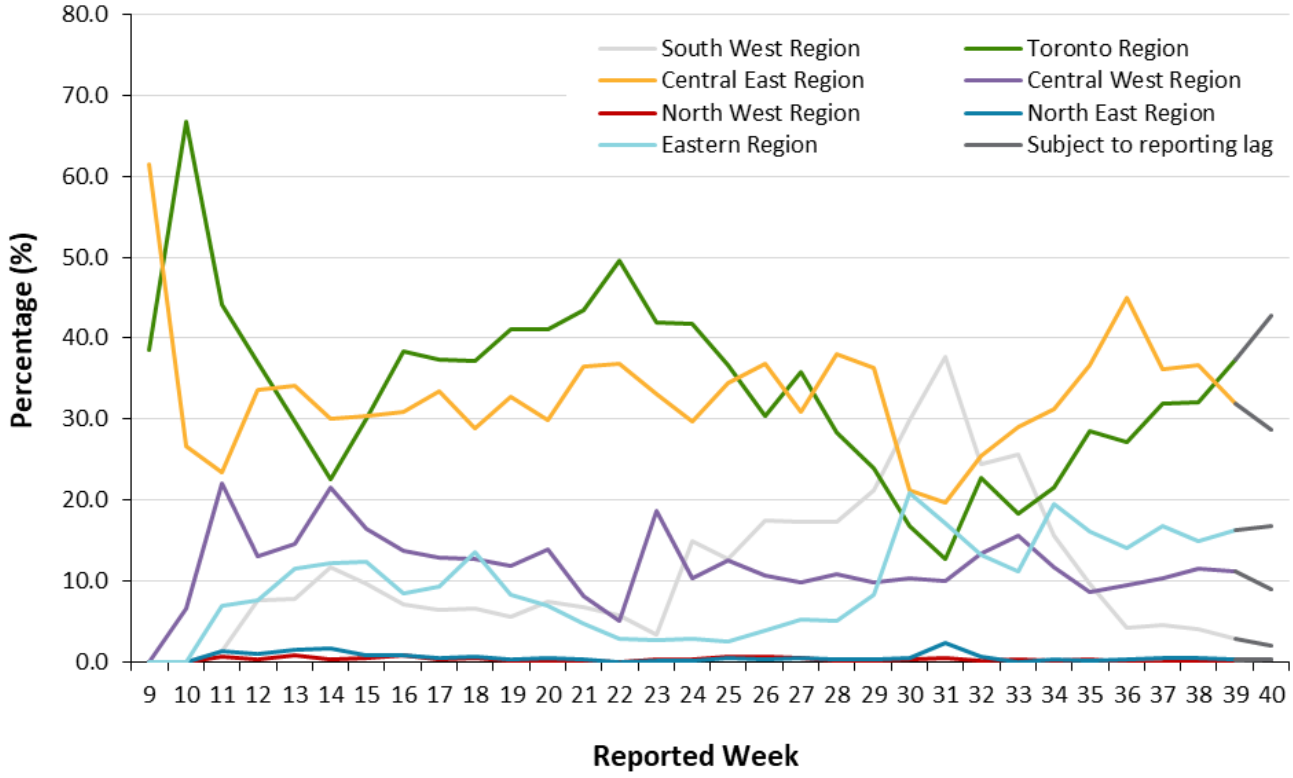
Figure 7. Rate and number of confirmed cases of COVID-19 for each quintile of neighbourhood deprivation: Ontario, week 39 (September 20 to 26, 2020) and week 40 (September 27 to October 3, 2020).



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

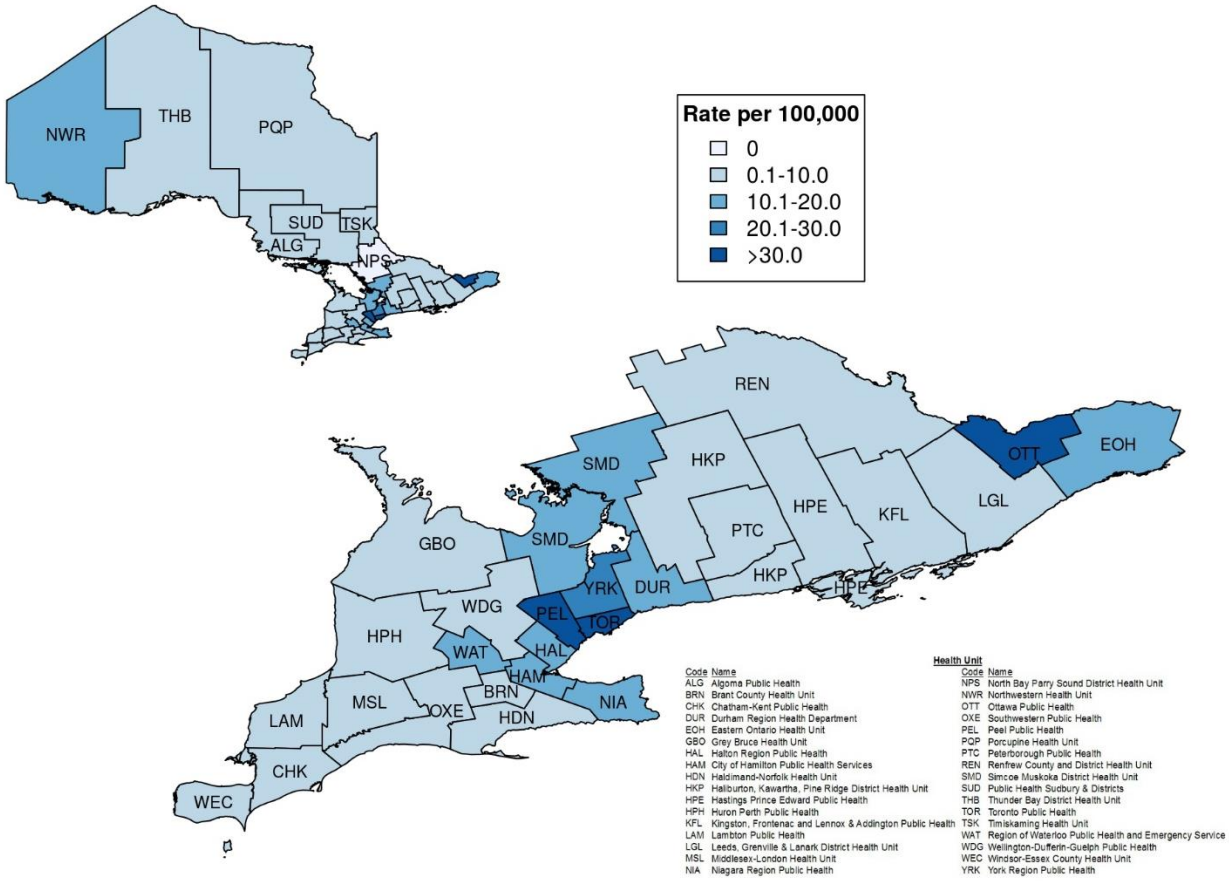
Geography

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 40 (September 27 and October 3, 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 40 (September 27 to October 3, 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 40 (September 27 to October 3)	Number of ongoing outbreaks	Cumulative number of outbreaks reported to October 3
Institution: Long-term care homes	8	48	474
Institution: Retirement homes	10	40	220
Institution: Hospitals	4	8	104
Institutions Subtotal	**22**	**96**	**798**
Congregate: Correctional facility	0	1	6
Congregate: Shelter	2	8	56
Congregate: Group home	7	16	108
Congregate Setting Subtotal	**9**	**25**	**170**
Non-congregate setting: Workplace	15	113	370
Non-congregate setting: Daycare	11	28	60
Non-congregate setting: Elementary/Secondary School	9	27	32
Non-congregate setting: Post-Secondary School	0	0	0
Non-congregate setting: Other	14	69	138
Non-Congregate Settings Subtotal	**49**	**237**	**600**
Total number of outbreaks	**80**	**358**	**1,568**

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.

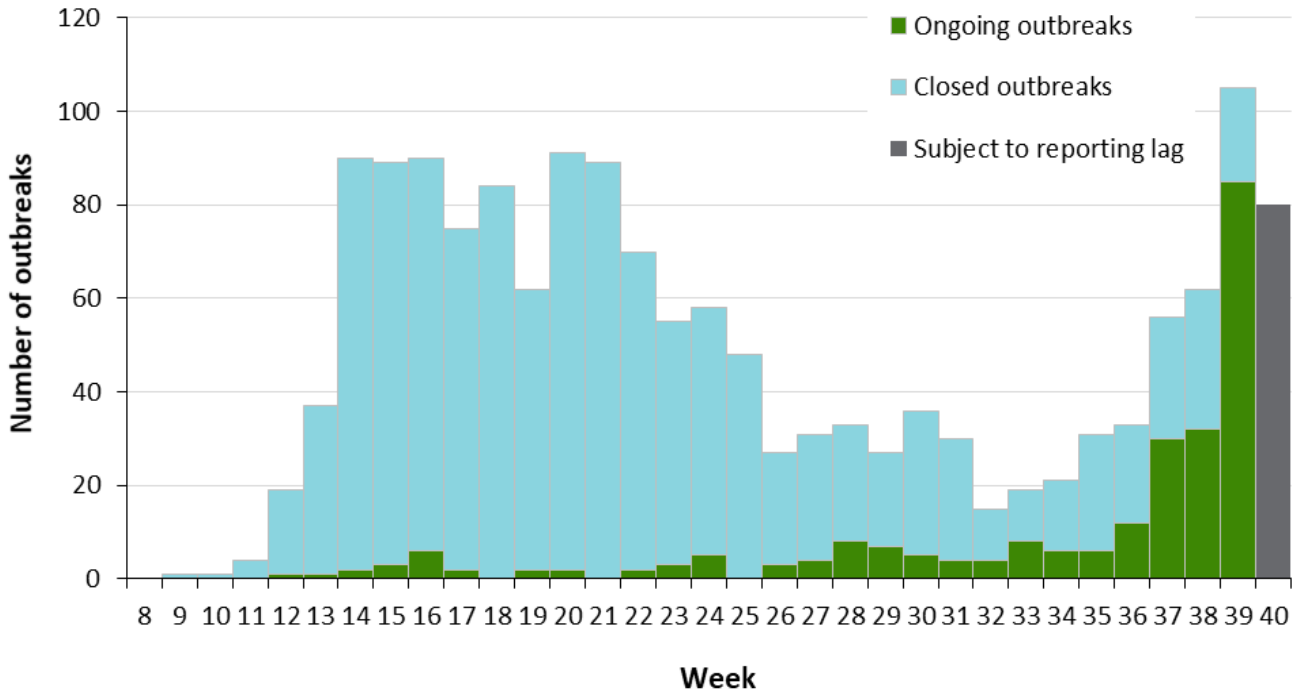
Data Source: CCM plus

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 39 (September 20 to 26)	Reported week 40 (September 27 to October 3)	Cumulative number of cases
Institution: Long-term care homes	69	119	9,503
Institution: Retirement homes	22	36	1,671
Institution: Hospitals	26	56	1,056
Institutions Subtotal	**117**	**211**	**12,230**
Congregate: Correctional facility	0	0	119
Congregate: Shelter	7	3	602
Congregate: Group home	7	14	497
Congregate Setting Subtotal	**14**	**17**	**1,218**
Non-congregate setting: Workplace	40	23	2,746
Non-congregate setting: Daycare	11	16	97
Non-congregate setting: Other	81	40	627
Non-Congregate Settings Subtotal	132	79	3,470
Total number of cases	**263**	**307**	**16,918**

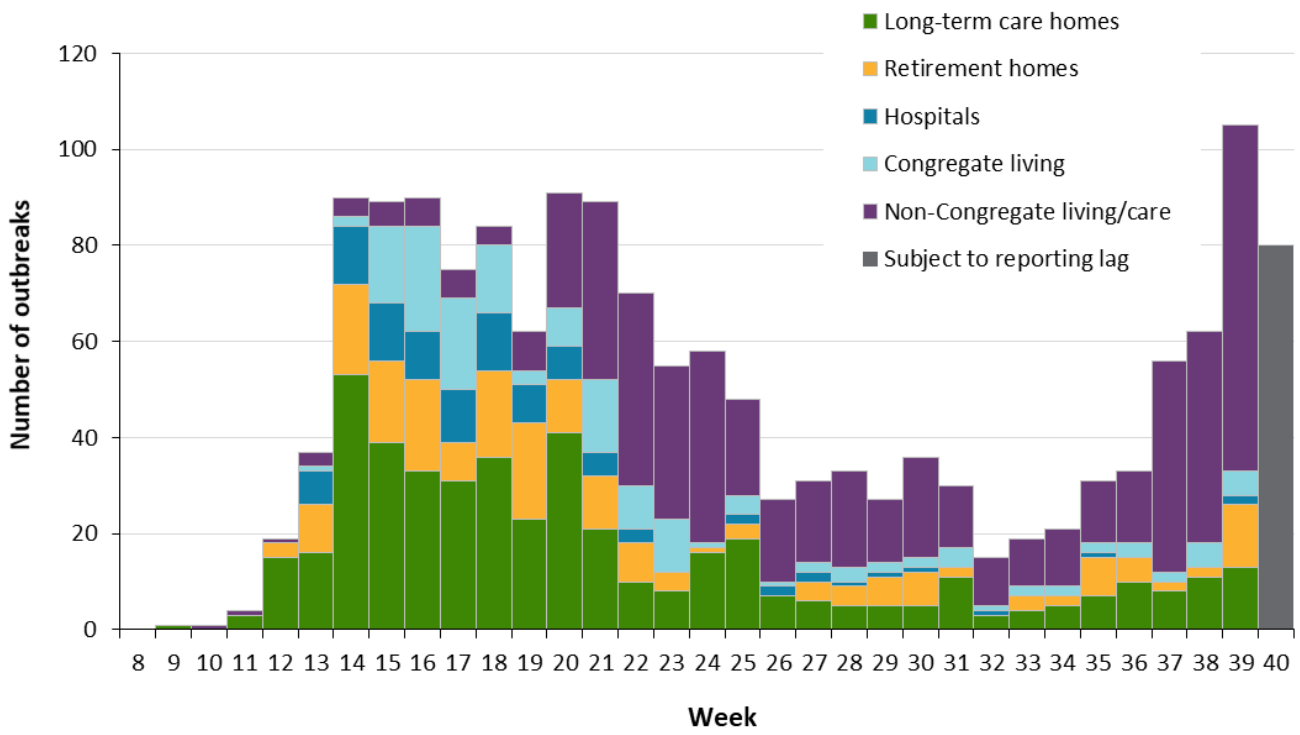
Note: Interpret case counts for the most recent week with caution due to reporting lags. Non-congregate setting: Workplace includes farms, food processing facilities, other. Non-congregate setting: Other includes restaurants, community centres, etc.
Data Source: CCM plus

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 40 refers to September 27 and October 3, 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 40 refers to September 27 and October 3, 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 **October 6, 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 **October 6, 2020 at 2 p.m.**
    - Information successfully uploaded to the Ministry from the Public Health Case and Contact Management Solution (CCM) as of **October 6, 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	3,166	7,906
16	April 12, 2020	April 18, 2020	4,269	12,175
17	April 19, 2020	April 25, 2020	3,649	15,824
18	April 26, 2020	May 2, 2020	2,899	18,723
19	May 3, 2020	May 9, 2020	2,352	21,075
20	May 10, 2020	May 16, 2020	2,229	23,304
21	May 17, 2020	May 23, 2020	2,623	25,927

Reported Week	Start date	End date	Number of cases	Cumulative count
22	May 24, 2020	May 30, 2020	2,612	28,539
23	May 31, 2020	June 6, 2020	2,306	30,845
24	June 7, 2020	June 13, 2020	1,471	32,316
25	June 14, 2020	June 20, 2020	1,235	33,551
26	June 21, 2020	June 27, 2020	1,254	34,805
27	June 28, 2020	July 4, 2020	1,083	35,888
28	July 5, 2020	July 11, 2020	864	36,752
29	July 12, 2020	July 18, 2020	927	37,679
30	July 19, 2020	July 25, 2020	999	38,678
31	July 26, 2020	August 1, 2020	804	39,482
32	August 2, 2020	August 8, 2020	598	40,080
33	August 9, 2020	August 15, 2020	617	40,697
34	August 16, 2020	August 22, 2020	722	41,419
35	August 23, 2020	August 29, 2020	857	42,276
36	August 30, 2020	September 5, 2020	965	43,241
37	September 6, 2020	September 12, 2020	1,501	44,742
38	September 13, 2020	September 19, 2020	2,384	47,126
39	September 20, 2020	September 26, 2020	3,138	50,264
40	September 27, 2020	October 3, 2020	4,252	54,516

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

Public Health Unit Name	Reported week 39	Rate per 100,000 population Reported week 39	Reported week 40	Rate per 100,000 population Reported week 40
Northwestern Health Unit	3	3.4	15	17.1
Thunder Bay District Health Unit	1	0.7	1	0.7
TOTAL NORTH WEST	4	1.7	16	6.7
Algoma Public Health	1	0.9	2	1.7
North Bay Parry Sound District Health Unit	0	0.0	0	0.0
Porcupine Health Unit	2	2.4	2	2.4
Public Health Sudbury & Districts	3	1.5	4	2.0
Timiskaming Health Unit	1	3.1	2	6.1
TOTAL NORTH EAST	7	1.3	10	1.8
Ottawa Public Health	456	43.2	642	60.9
Eastern Ontario Health Unit	32	15.3	25	12.0
Hastings Prince Edward Public Health	1	0.6	7	4.2
Kingston, Frontenac and Lennox & Addington Public Health	10	4.7	19	8.9
Leeds, Grenville & Lanark District Health Unit	9	5.2	17	9.8
Renfrew County and District Health Unit	5	4.6	4	3.7
TOTAL EASTERN	513	26.6	714	37.1

Public Health Unit Name	Reported week 39	Rate per 100,000 population Reported week 39	Reported week 40	Rate per 100,000 population Reported week 40
Durham Region Health Department	76	10.7	116	16.3
Haliburton, Kawartha, Pine Ridge District Health Unit	6	3.2	3	1.6
Peel Public Health	618	38.5	706	44.0
Peterborough Public Health	8	5.4	9	6.1
Simcoe Muskoka District Health Unit	51	8.5	70	11.7
York Region Public Health	241	19.7	319	26.0
TOTAL CENTRAL EAST	1,000	22.3	1,223	27.3
Toronto Public Health	1,170	37.5	1,817	58.2
TOTAL TORONTO	1,170	37.5	1,817	58.2
Chatham-Kent Public Health	2	1.9	3	2.8
Grey Bruce Health Unit	5	2.9	9	5.3
Huron Perth Public Health	1	0.7	4	2.9
Lambton Public Health	2	1.5	1	0.8
Middlesex-London Health Unit	56	11.0	37	7.3
Southwestern Public Health	2	0.9	7	3.3
Windsor-Essex County Health Unit	24	5.6	26	6.1
TOTAL SOUTH WEST	92	5.4	87	5.1
Brant County Health Unit	12	7.7	12	7.7

Public Health Unit Name	Reported week 39	Rate per 100,000 population Reported week 39	Reported week 40	Rate per 100,000 population Reported week 40
City of Hamilton Public Health Services	71	12.0	62	10.5
Haldimand-Norfolk Health Unit	3	2.6	2	1.8
Halton Region Public Health	82	13.2	114	18.4
Niagara Region Public Health	56	11.9	78	16.5
Region of Waterloo Public Health and Emergency Services	101	17.3	88	15.1
Wellington-Dufferin-Guelph Public Health	27	8.7	29	9.3
TOTAL CENTRAL WEST	352	12.4	385	13.5
TOTAL ONTARIO	**3,138**	**21.1**	**4,252**	**28.6**

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

Disclaimer

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For Further Information

For more information, email cd@oahpp.ca.

Public Health Ontario

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