

Weekly Epidemiologic Summary

COVID-19 in Ontario: Focus on March 14, 2021 to March 20, 2021

This report includes the most current information available from CCM as of **March 23, 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 [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

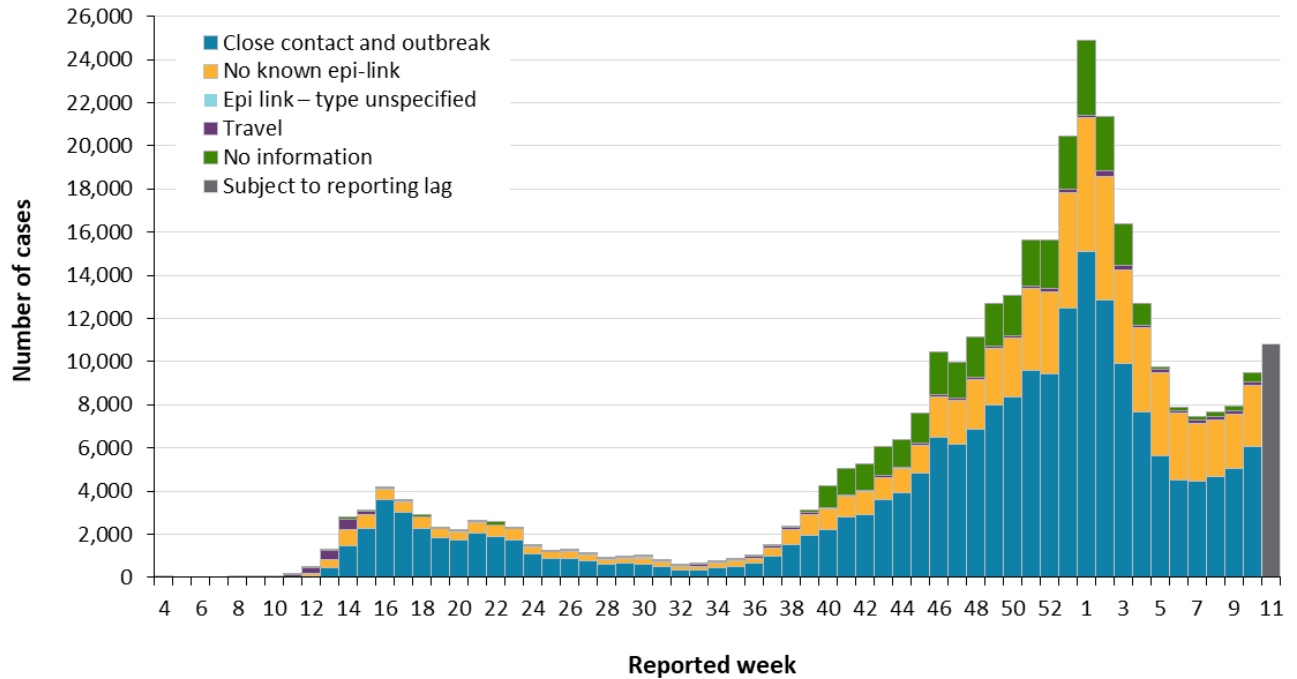
- There are a total of 329,897 confirmed cases of COVID-19 in Ontario with a public health unit reported date up to March 20, 2021.
- For the period with a public health unit reported date between March 14 to 20, 2021 (week 11):
 - A total of 10,839 cases were reported to public health compared to 9,463 cases the previous week (March 7 to 13, 2021).
 - The total number of cases reported in Ontario continues to increase with over 10,000 cases reported in week 11, a number last reported in week 4 (January 24 to 30, 2021). Over half of public health units (18/34) reported a rate of disease greater than 40 cases per 100,000 population.
 - Outbreaks in other workplace and elementary school settings accounted for the highest number of reported outbreaks, and one-third of ongoing outbreaks, in the current week (11). This may be contributing to the recent increase in the rate of cases reported amongst cases aged 20-49 and under 20, respectively.

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

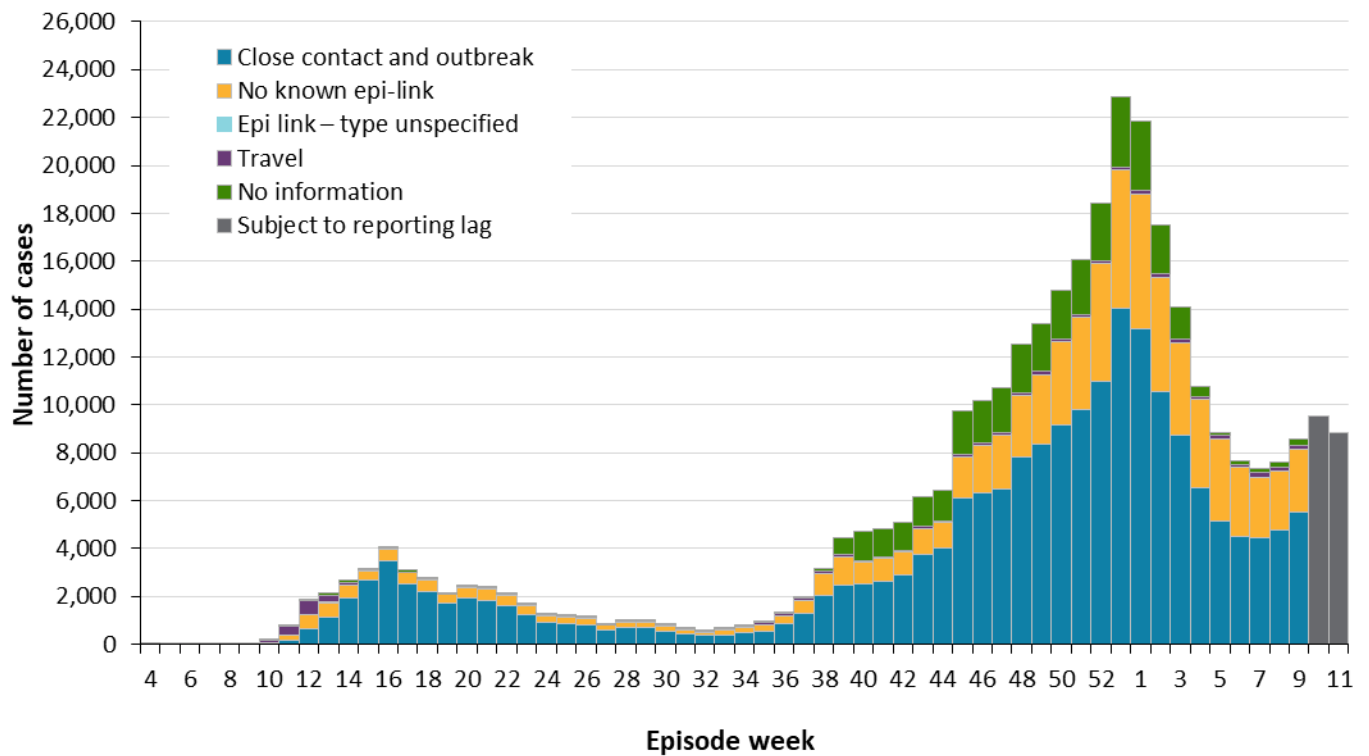
Figure 1. Confirmed cases of COVID-19 by likely source of acquisition and public health unit reported week: Ontario



Note: Include cases with reported dates ranging from week 4 (January 19 and 25, 2020) to week 11 (March 14 and 20, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

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 11 (March 14 and 20, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

Case Characteristics

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

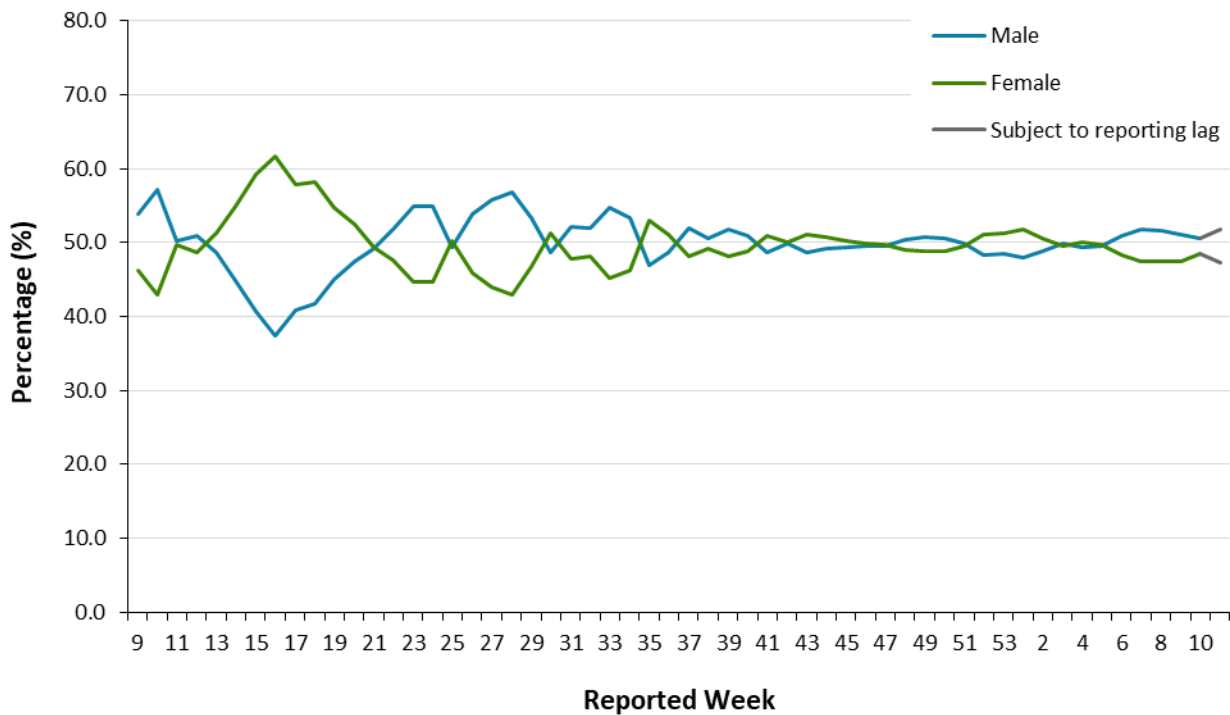
	Reported week 10 (March 7 to 13)	Reported week 11 (March 14 to 20)	Cumulative case count up to March 20	Cumulative rate per 100,000 population
Total number of cases	9,463	10,839	329,897	2,219.4
Gender: Male	4,781	5,617	162,836	2,224.8
Gender: Female	4,588	5,118	165,232	2,189.9
Ages: 19 and under	1,922	2,183	45,979	1,466.0
Ages: 20-39	3,483	3,977	120,982	2,910.9
Ages: 40-59	2,596	3,021	94,929	2,410.9
Ages: 60-79	1,214	1,377	46,976	1,589.7
Ages: 80 and over	245	273	20,958	3,085.4
Number resolved	N/A	N/A	311,318	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

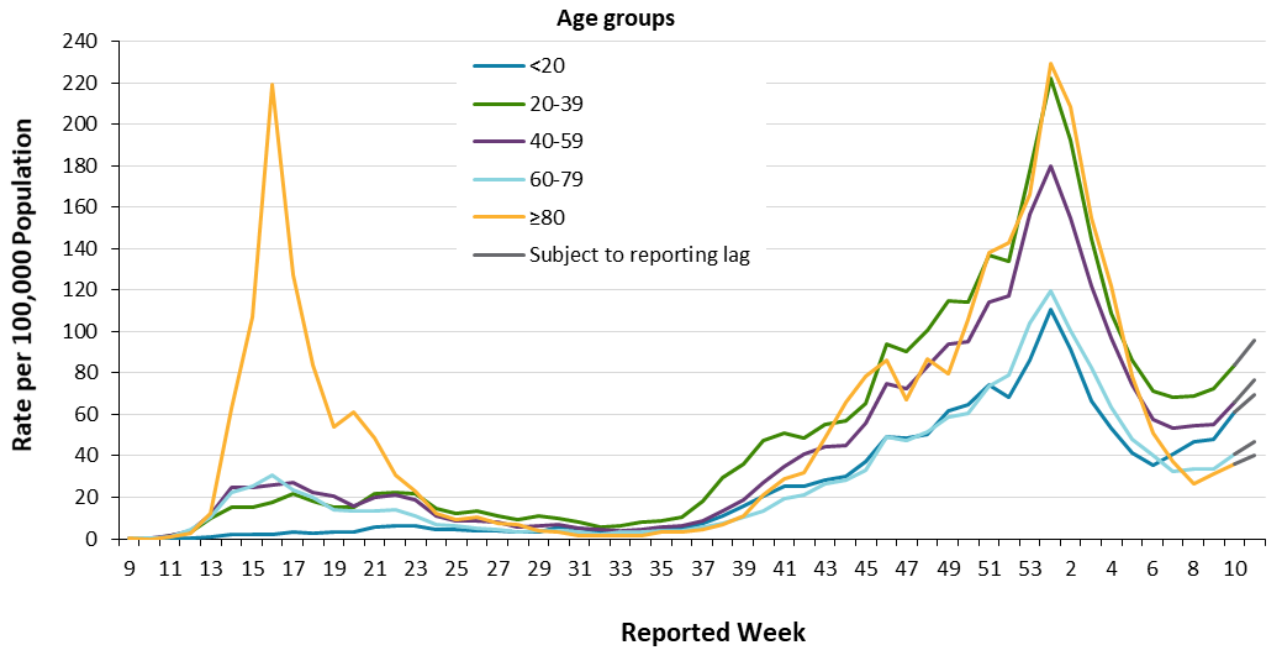
Figure 3. Percentage of confirmed cases of COVID-19 by gender and public health unit reported week: Ontario



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 11 (March 14 and 20, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

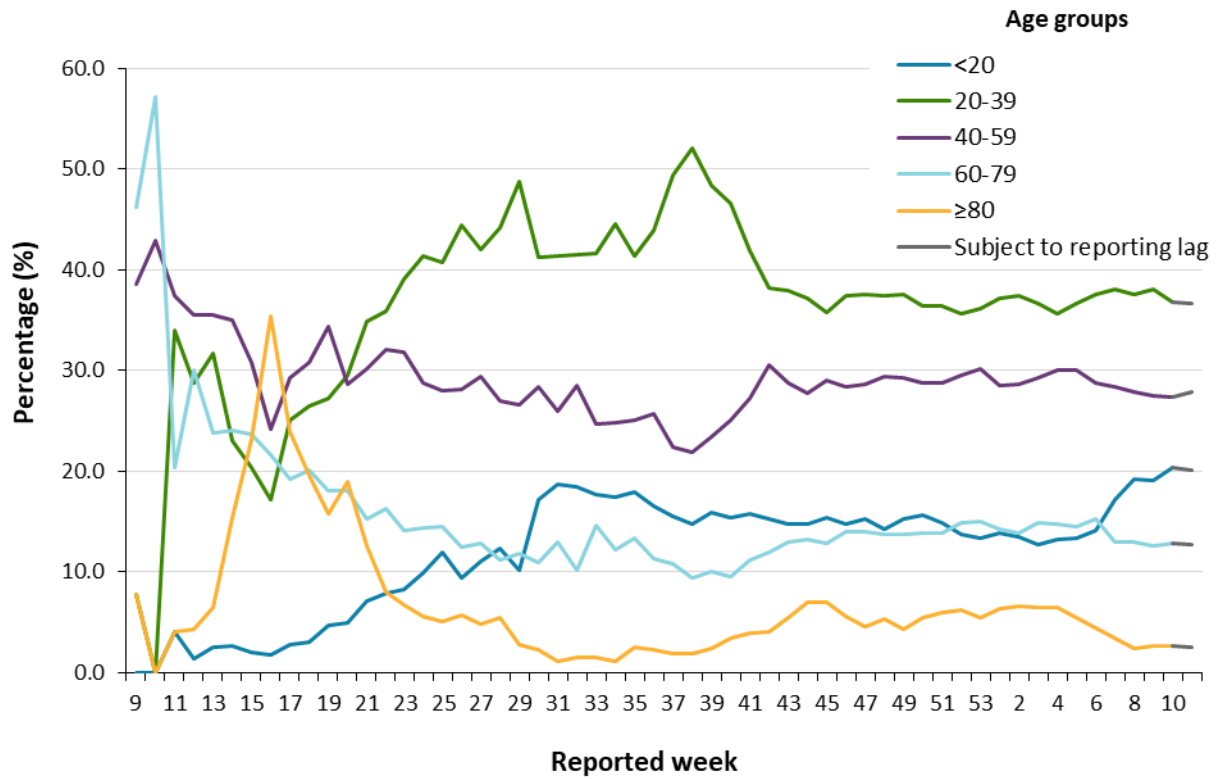
Figure 4a. Rate of confirmed cases of COVID-19 per 100,000 population by age group and public health unit reported week: Ontario



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 11 (March 14 and 20, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

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

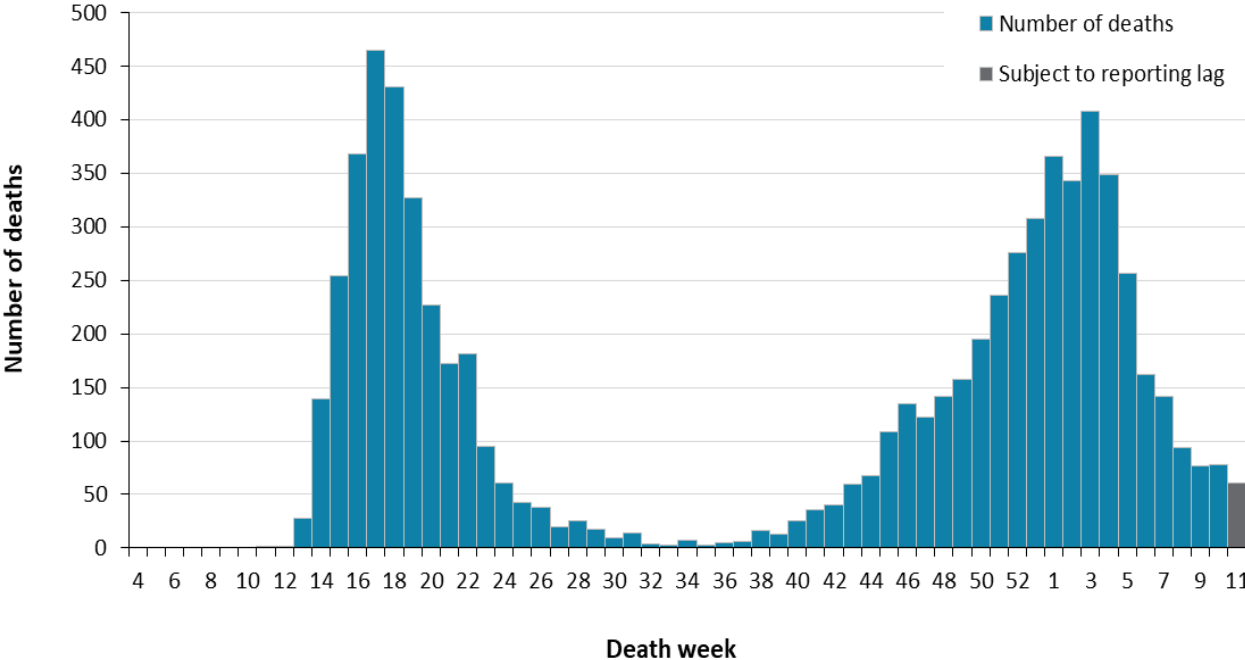


Note: Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from week 9 (February 23 and 29, 2020) to week 11 (March 14 and 20, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

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 11 (March 14 and 20, 2021). See [Table 1A](#) in Appendix A for a list of the weeks and corresponding start and end dates.

Data Source: CCM

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

Deaths	Reported week 10 (March 7 to 13)	Reported week 11 (March 14 to 20)	Cumulative case count up to March 20	Cumulative rate per 100,000 population
Number of deaths	43	16	7,262	48.9
Gender: Male	20	7	3,522	48.1
Gender: Female	23	9	3,696	49.0
Ages: 19 and under	0	0	2	0.1
Ages: 20-39	1	2	33	0.8
Ages: 40-59	6	2	304	7.7
Ages: 60-79	13	5	2,030	68.7
Ages: 80 and over	23	7	4,892	720.2

Note: Age and gender may not be reported for all cases. Reported week is the week the case was reported to the public health unit. This is different than the “week of death” presented in Figure 5 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

Exposure

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

	Reported week 10 (March 7 to 13)	Percentage	Reported week 11 (March 14 to 20)	Percentage	Cumulative case count up to March 20	Cumulative percentage
Travel	151	1.6%	162	1.5%	5,936	1.8%
Outbreak-associated or close contact of a confirmed case	6,088	64.3%	6,210	57.3%	205,232	62.2%
Epidemiological link – type unspecified	0	0.0%	0	0.0%	166	0.1%
No known epidemiological link	2,816	29.8%	3,202	29.5%	82,447	25.0%
Information missing or unknown	408	4.3%	1,265	11.7%	36,116	10.9%
Total	9,463		10,839		329,897	

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

Sub-populations of interest

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

Health care workers	Reported week 10 (March 7 to 13)	Reported week 11 (March 14 to 20)	Cumulative case count up to March 20
Number of cases	220	208	20,193
Ever hospitalized	6	3	382
Ever in ICU	0	0	82

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

Data Source: CCM

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

Long-term care home associated cases	Reported week 10 (March 7 to 13)	Reported week 11 (March 14 to 20)	Cumulative case count up to March 20
Residents	9	13	15,005
Deaths among residents	3	1	3,892
Health care workers	18	17	6,789
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. Interpret information for the most recent week with caution due to reporting lags.

Data Source: CCM

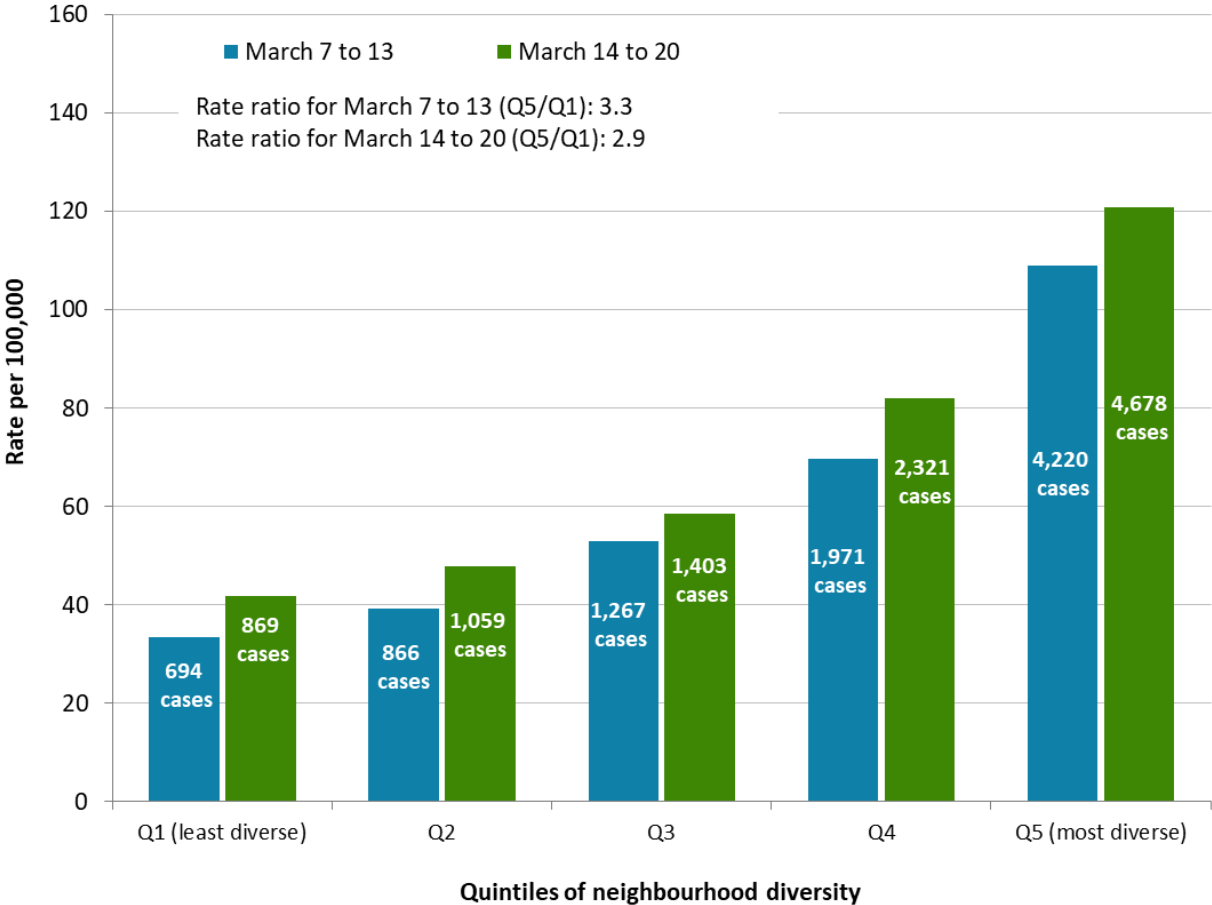
Table 6: Summary of cases of COVID-19 among school aged children by age group: Ontario

	Reported week 10 (March 7 to 13)	Reported week 11 (March 14 to 20)	Cumulative case count from August 30 up to March 20
Ages: 4-8	417	485	8,002
Ages: 9-13	526	563	10,593
Ages: 14-17	437	478	10,784

Note: Interpret information for the most recent week with caution due to reporting lags. Includes all confirmed cases of COVID-19 for specified ages, regardless of school attendance. Cumulative counts include cases of COVID-19 reported starting week 36 (August 30 to September 5, 2020).

Data Source: CCM

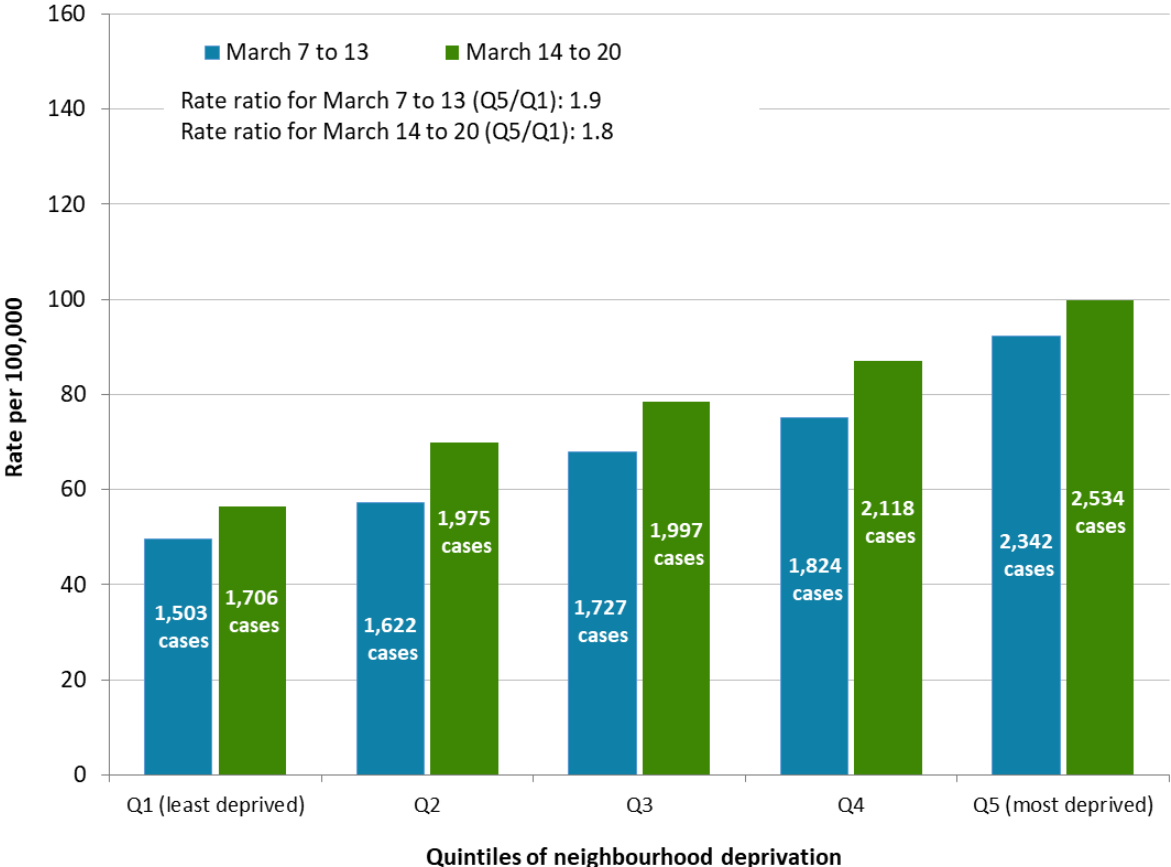
Figure 6. Rate and number of confirmed cases of COVID-19 for each quintile of neighbourhood diversity: Ontario, week 10 (March 7 to 13, 2021) and week 11 (March 14 to 20, 2021).



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, Ontario Marginalization Index

Figure 7. Rate and number of confirmed cases of COVID-19 for each quintile of neighbourhood deprivation: Ontario, week 10 (March 7 to 13, 2021) and week 11 (March 14 to 20, 2021).

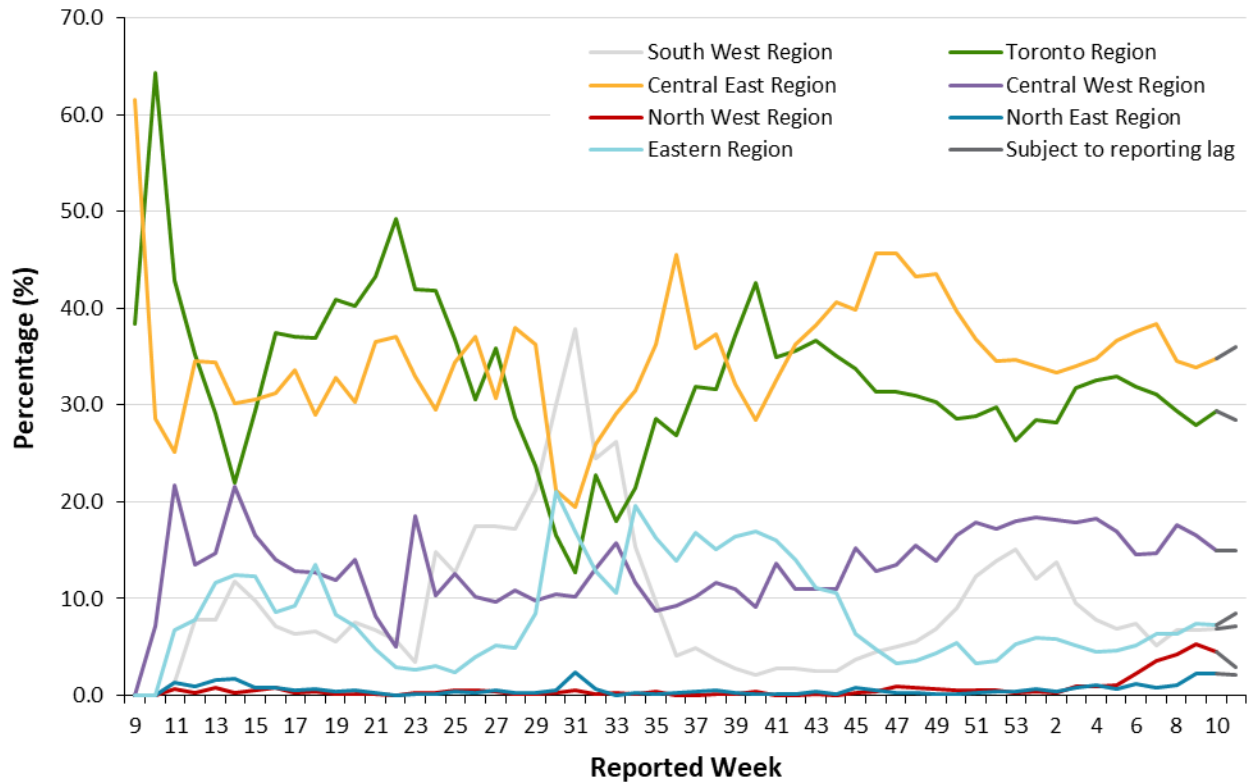


Note: Neighbourhood deprivation is measured using the material deprivation dimension of the Ontario Marginalization Index. The material deprivation dimension uses Canadian census data on income, quality of housing, educational attainment and family structure characteristics to assess the ability of individuals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

Data Source: CCM, Ontario Marginalization Index

Geography

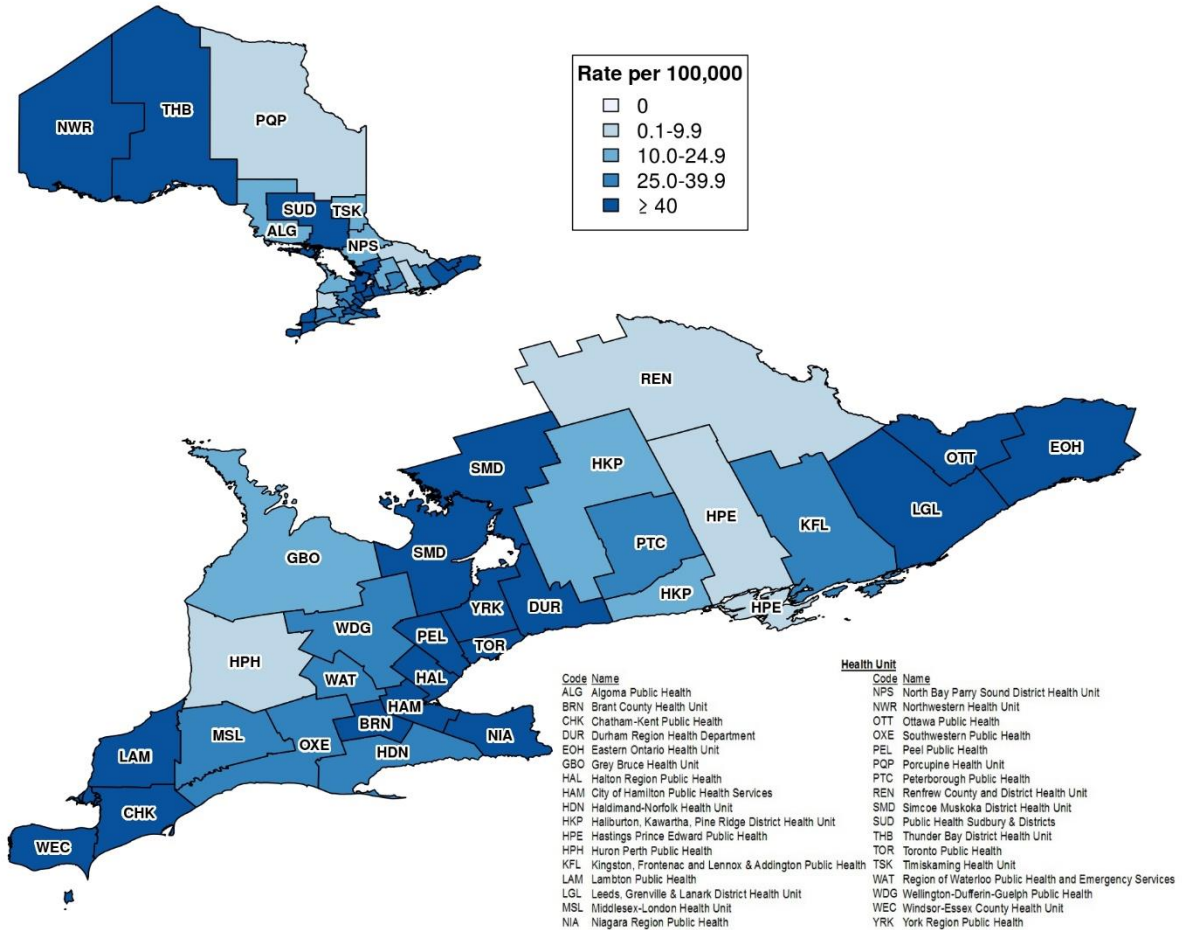
Figure 8. Percentage of COVID-19 cases by geographic region and public health unit reported week: Ontario



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 11 (March 14 and 20, 2021). Table 2A in [Appendix A](#) has a listing of public health units by region.

Data Source: CCM

Figure 9. Rate of confirmed cases of COVID-19 in public health reported week 11 (March 14 to 20, 2021) by public health unit: Ontario



Note: The provincial rate of confirmed cases of COVID-19 reported in week 11 was 72.9 cases per 100,000 population.

Data Source: CCM

Outbreaks

Table 7. Number of public health unit declared COVID-19 outbreaks by setting type: Ontario

Setting Type	Reported week 11 (March 14 to 20)	Number of ongoing outbreaks	Cumulative number of outbreaks reported to March 20
Congregate Care	36	133	2,599
Long-term care homes	16	60	1,351
Retirement homes	8	40	801
Hospitals	12	33	447
Congregate Living	23	84	892
Correctional facility	0	8	37
Shelter	9	30	182
Group Home/supportive housing	6	30	533
Short-term accommodations	1	2	21
Congregate other	7	14	119
Education	83	177	1,344
Child care	23	53	472
School – Elementary*	46	101	639
School – Elementary/secondary*	1	1	35
School – Secondary*	10	17	171
School – Post-secondary*	3	5	27
Other settings	108	217	2,452
Bar/restaurant/nightclub	6	13	185
Medical/health services	4	7	110
Personal service settings	1	2	18

Setting Type	Reported week 11 (March 14 to 20)	Number of ongoing outbreaks	Cumulative number of outbreaks reported to March 20
Recreational fitness	2	5	67
Retail	7	18	254
Other recreation/community	3	14	118
Workplace – Farm	4	14	120
Workplace - Food processing	1	6	172
Other types of workplaces	58	112	1,366
Other	13	13	14
Unknown	9	13	28
Total number of outbreaks	250	611	7,287

Note: Reported week is based on the outbreak reported date, and if unavailable, the date the public health unit created the outbreak. Ongoing outbreaks includes all outbreaks that are 'Open' in CCM without a 'Declared Over Date' recorded or where the outbreak start date (determined by the onset date of first case, or if missing the reported date, or if missing the created date) is more than 5 months from the current date, even for outbreaks where the outbreak status value selected in CCM is 'OPEN'. Interpret information for the most recent week with caution due to reporting lags. Outbreak categories are mutually exclusive. Retail includes settings such as grocery stores, pharmacies, malls, etc. Other types of workplaces include settings such as offices as well as warehousing, shipping and distribution, construction, etc. Other recreation/community includes settings such as entertainment and event venues, gatherings (e.g., weddings), religious facilities, etc. Medical/health services refer to settings such as doctor's office or clinic, wellness clinics, etc., and excludes categories listed in the congregate care setting group.

*Cumulative counts include COVID-19 school outbreaks reported starting week 36 (August 30 to September 5, 2020).

Ongoing re-classification of settings for reported outbreaks can result in outbreak counts that may differ from previously reported counts.

Data Source: CCM

Table 8. 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 10 (March 7 to 13)	Reported week 11 (March 14 to 20)	Cumulative number of cases
Congregate Care	254	209	37,184
Long-term care homes	54	53	25,047
Retirement homes	77	36	6,862
Hospitals	123	120	5,275
Congregate Living	239	261	6,814
Correctional facility	27	41	1,204
Shelter	68	120	1,918
Group Home/supportive housing	66	31	2,672
Short-term accommodations	15	12	96
Congregate other	63	57	924
Education	380	333	5,380
Child care	91	91	1,389
School – Elementary*	208	195	2,705
School – Elementary/secondary*	1	1	220
School – Secondary*	56	35	805
School – Post-secondary*	24	11	261
Other settings	670	506	18,637
Bar/restaurant/nightclub	25	25	749
Medical/health services	12	29	478
Personal service settings	5	7	69
Recreational fitness	21	48	561

Cases associated with the outbreak setting type	Reported week 10 (March 7 to 13)	Reported week 11 (March 14 to 20)	Cumulative number of cases
Retail	50	37	1,181
Other recreation/community	46	33	1,539
Workplace - Farm	16	15	2,531
Workplace - Food processing	21	8	2,183
Other types of workplaces	409	253	9,095
Other	15	18	51
Unknown	50	33	200
Total number of cases	1,543	1,309	68,015

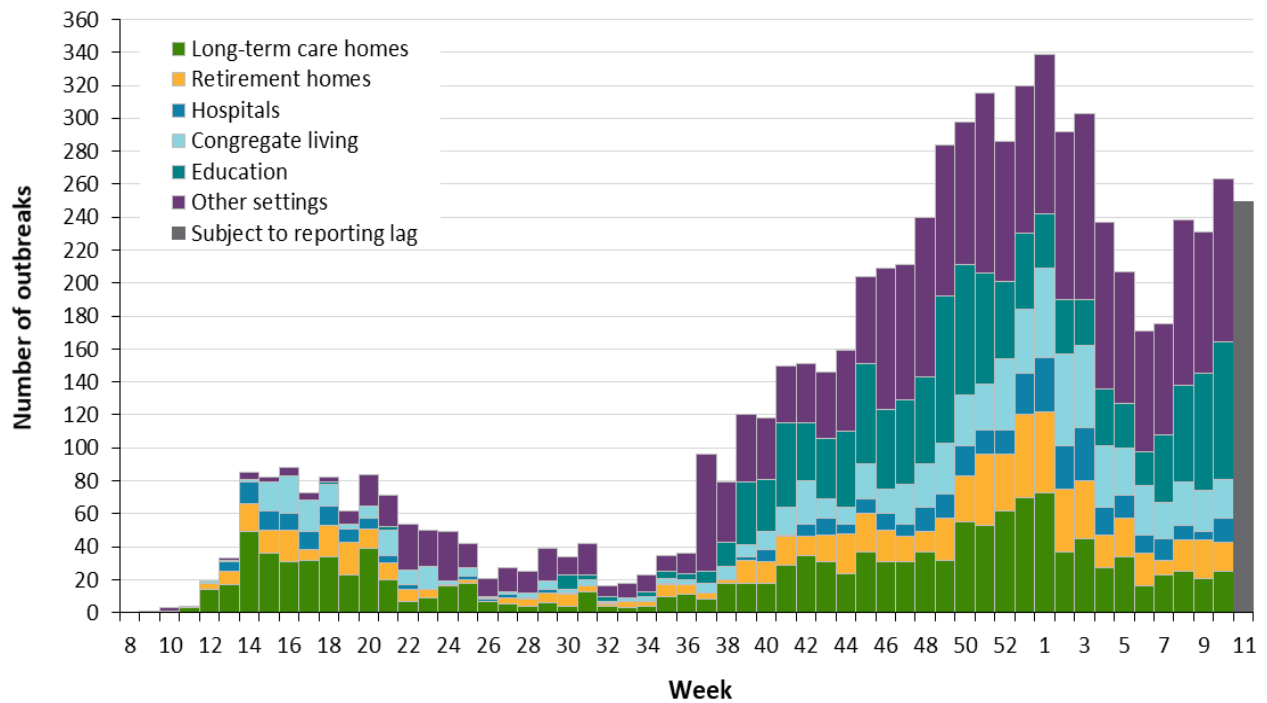
Note: Interpret case counts for the most recent week with caution due to reporting lags. Outbreak categories are mutually exclusive. Retail includes settings such as grocery stores, pharmacies, malls, etc. Other types of workplaces include settings such as offices as well as warehousing, shipping and distribution, construction, etc. Other recreation/community includes settings such as entertainment and event venues, gatherings (e.g., weddings), religious facilities, etc. Medical/health services refer to settings such as doctor's office or clinic, wellness clinics, etc., and excludes categories listed in the congregate care setting group.

*Cumulative counts include cases of COVID-19 associated with school outbreaks reported starting week 36 (August 30 to September 5, 2020).

Ongoing re-classification of settings for reported outbreaks can result in case counts that may differ from previously reported counts.

Data Source: CCM

Figure 10. 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 11 refers to March 14 and 20, 2021. Congregate living include group homes, shelters, correctional facilities, etc. Other settings include outbreaks within workplaces, childcare, schools, restaurants, recreation etc.

Data Source: CCM

Variant COVID-19 Cases

Table 9. Summary of confirmed COVID-19 cases with a mutation or VOC detected by age group and gender: Ontario

	Lineage B.1.1.7	Lineage B.1.351	Lineage P.1	Mutation or non-VOC lineage detected*	Cumulative case count as of March 20, 2021
Gender: Male	680	25	26	7,343	8,074
Gender: Female	705	25	21	6,729	7,480
Ages: 19 and under	193	3	6	2,696	2,898
Ages: 20-39	530	19	20	5,350	5,919
Ages: 40-59	397	17	16	4,140	4,570
Ages: 60-79	200	9	5	1,731	1,945
Ages: 80 and over	69	2	0	290	361

Note: Not all cases have an 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 for cases with a B.1.1.7, B.1.351, and P.1 lineage detected are determined using the Investigation Subtype field only. Changes to the VOC testing algorithm may impact counts and trends. Further details can be found in the data caveats section.

* Includes all confirmed COVID-19 cases with a lineage or mutation reported in the Investigation Subtype field, excluding variants of concern B.1.1.7, B.1.351, and P.1 lineages. If a VOC is identified through genomic analysis, the cumulative case counts for mutations will fluctuate as the case is moved to one of the listed lineages.

Data Source: CCM

Table 10. Summary of confirmed COVID-19 cases with a mutation or VOC detected by likely source of acquisition: Ontario

	Lineage B.1.1.7	%	Lineage B.1.351	%	Lineage P.1	%	Mutation or non-VOC lineage detected*	%	Cumulative case count up to March 20, 2021	Cumulative percentage
Travel	67	4.8%	8	16.0%	1	2.1%	312	2.2%	388	2.5%
Outbreak-associated or close contact of a confirmed case	1,008	72.6%	38	76.0%	33	70.2%	9,379	66.0%	10,458	66.6%
Epidemiological link – type unspecified	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
No known epidemiological link	307	22.1%	4	8.0%	13	27.7%	3,711	26.1%	4,035	25.7%
Information missing or unknown	7	0.5%	0	0.0%	0	0.0%	806	5.7%	813	5.2%
Total	1,389		50		47		14,208		15,694	

Note: Information for how cases are grouped within each category is available in the technical notes. Data for cases with a B.1.1.7, B.1.351, and P.1 lineage detected are determined using the Investigation Subtype field only.* Includes all confirmed COVID-19 cases with a lineage or mutation reported in the Investigation Subtype field, excluding variants of concern B.1.1.7, B.1.351, and P.1 lineages. If a VOC is identified through genomic analysis, the cumulative case counts for mutations will fluctuate as the case is moved to one of the listed lineages.

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 **March 23, 2021 at 1 p.m.**
- CCM is a dynamic disease reporting system, which allow 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.
- Statistics Canada Postal Code Conversion File (PCCF), reference date of May 2020.
- 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. 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.
- 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.
- 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.
- 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. 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 a confirmed 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.
- 'Cases associated with school outbreaks' includes cases that are linked to an outbreak, by school classification type (Elementary, Elementary/Secondary, Secondary, Post-Secondary), that met the definition of a [school outbreak](#).
- 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 CCM as 'Open' and without a 'Declared Over Date' recorded. Closed outbreaks are 'Closed' or have a 'Declared Over Date' recorded in CCM or where the outbreak start date (determined by the onset date of first case, or if missing the reported date, or if missing the created date) is more than 5 months from the current date, even for outbreaks where the outbreak status value selected in CCM is 'OPEN'.
- 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).
- 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 testing and genomic analyses for SARS-CoV-2 positive specimens using the criteria outlined here: <https://www.publichealthontario.ca/en/laboratory-services/test-information-index/covid-19-voc>
- Changes to the VOC testing algorithm may occur over time and trends should be interpreted with caution. Since February 3, 2021 all PCR positive SARS-CoV-2 specimens with CT values ≤ 35 are tested for a N501Y mutation. Starting March 22, 2021, these specimens are tested for the E484K mutation as well. Specimens that are positive for the N501Y mutation only are not being

forwarded for further genomic analysis. Specimens that are E484K positive (with or without N501Y) are forwarded for genomic analysis.

- The laboratory detection of a variant of concern is a multi-step process. Samples that test positive for SARS-CoV-2 and have a cycle threshold (Ct) value ≤ 35 can be tested for mutations common to variants of concern. If positive for the mutation of interest these samples may then undergo genomic analyses to identify the VOC. VOC lineages may still be confirmed using genomic analysis despite specific S gene mutation(s) being documented as ‘unable to complete’ due to poor sequence quality at the genome position.
- If a VOC is identified through genomic analysis cases initially classified as a mutation may be updated and moved to the appropriate lineage (B.1.1.7, B.1.351 and P.1)

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 Single Link Indicator Postal Code Conversion File (PCCF) 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 institutional and congregate 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 institutional and congregate setting 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	14	31
11	March 8, 2020	March 14, 2020	147	178
12	March 15, 2020	March 21, 2020	437	615
13	March 22, 2020	March 28, 2020	1,309	1,924
14	March 29, 2020	April 4, 2020	2,780	4,704
15	April 5, 2020	April 11, 2020	3,134	7,838
16	April 12, 2020	April 18, 2020	4,207	12,045
17	April 19, 2020	April 25, 2020	3,630	15,675
18	April 26, 2020	May 2, 2020	2,889	18,564
19	May 3, 2020	May 9, 2020	2,343	20,907
20	May 10, 2020	May 16, 2020	2,192	23,099
21	May 17, 2020	May 23, 2020	2,614	25,713
22	May 24, 2020	May 30, 2020	2,601	28,314

Reported Week	Start date	End date	Number of cases	Cumulative count
23	May 31, 2020	June 6, 2020	2,303	30,617
24	June 7, 2020	June 13, 2020	1,472	32,089
25	June 14, 2020	June 20, 2020	1,230	33,319
26	June 21, 2020	June 27, 2020	1,251	34,570
27	June 28, 2020	July 4, 2020	1,083	35,653
28	July 5, 2020	July 11, 2020	869	36,522
29	July 12, 2020	July 18, 2020	930	37,452
30	July 19, 2020	July 25, 2020	989	38,441
31	July 26, 2020	August 1, 2020	804	39,245
32	August 2, 2020	August 8, 2020	593	39,838
33	August 9, 2020	August 15, 2020	611	40,449
34	August 16, 2020	August 22, 2020	730	41,179
35	August 23, 2020	August 29, 2020	853	42,032
36	August 30, 2020	September 5, 2020	979	43,011
37	September 6, 2020	September 12, 2020	1,503	44,514
38	September 13, 2020	September 19, 2020	2,372	46,886
39	September 20, 2020	September 26, 2020	3,123	50,009
40	September 27, 2020	October 3, 2020	4,225	54,234
41	October 4, 2020	October 10, 2020	5,037	59,271
42	October 11, 2020	October 17, 2020	5,280	64,551
43	October 18, 2020	October 24, 2020	6,041	70,592
44	October 25, 2020	October 31, 2020	6,384	76,976
45	November 1, 2020	November 7, 2020	7,611	84,587

Reported Week	Start date	End date	Number of cases	Cumulative count
46	November 8, 2020	November 14, 2020	10,437	95,024
47	November 15, 2020	November 21, 2020	9,982	105,006
48	November 22, 2020	November 28, 2020	11,126	116,132
49	November 29, 2020	December 5, 2020	12,685	128,817
50	December 6, 2020	December 12, 2020	13,047	141,864
51	December 13, 2020	December 19, 2020	15,647	157,511
52	December 20, 2020	December 26, 2020	15,631	173,142
53	December 27, 2020	January 2, 2021	20,447	193,589
1	January 3, 2021	January 9, 2021	24,879	218,468
2	January 10, 2021	January 16, 2021	21,360	239,828
3	January 17, 2021	January 23, 2021	16,384	256,212
4	January 24, 2021	January 30, 2021	12,721	268,933
5	January 31, 2021	February 6, 2021	9,767	278,700
6	February 7, 2021	February 13, 2021	7,873	286,573
7	February 14, 2021	February 20, 2021	7,447	294,020
8	February 21, 2021	February 27, 2021	7,658	301,678
9	February 28, 2021	March 6, 2021	7,917	309,595
10	March 7, 2021	March 13, 2021	9,463	319,058
11	March 14, 2021	March 20, 2021	10,839	329,897

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

Public Health Unit Name	Cases reported week 10	Rate per 100,000 population Reported week 10	Cases reported week 11	Rate per 100,000 population Reported week 11
Northwestern Health Unit	66	75.3	56	63.9
Thunder Bay District Health Unit	358	238.7	264	176.0
TOTAL NORTH WEST	424	178.4	320	134.7
Algoma Public Health	4	3.5	17	14.9
North Bay Parry Sound District Health Unit	4	3.1	15	11.6
Porcupine Health Unit	2	2.4	2	2.4
Public Health Sudbury & Districts	197	99.0	187	94.0
Timiskaming Health Unit	2	6.1	6	18.4
TOTAL NORTH EAST	209	37.4	227	40.6
Ottawa Public Health	469	44.5	557	52.8
Eastern Ontario Health Unit	90	43.1	130	62.3
Hastings Prince Edward Public Health	14	8.3	4	2.4
Kingston, Frontenac and Lennox & Addington Public Health	23	10.8	82	38.5
Leeds, Grenville & Lanark District Health Unit	69	39.8	138	79.7
Renfrew County and District Health Unit	20	18.4	10	9.2
TOTAL EASTERN	685	35.6	921	47.8

Public Health Unit Name	Cases reported week 10	Rate per 100,000 population Reported week 10	Cases reported week 11	Rate per 100,000 population Reported week 11
Durham Region Health Department	318	44.6	488	68.5
Haliburton, Kawartha, Pine Ridge District Health Unit	29	15.3	26	13.8
Peel Public Health	1,693	105.4	2,036	126.8
Peterborough Public Health	52	35.1	51	34.5
Simcoe Muskoka District Health Unit	299	49.9	263	43.9
York Region Public Health	910	74.2	1,038	84.7
TOTAL CENTRAL EAST	3,301	73.7	3,902	87.1
Toronto Public Health	2,777	89.0	3,085	98.9
TOTAL TORONTO	2,777	89.0	3,085	98.9
Chatham-Kent Public Health	65	61.1	90	84.7
Grey Bruce Health Unit	8	4.7	28	16.5
Huron Perth Public Health	24	17.2	12	8.6
Lambton Public Health	158	120.6	209	159.6
Middlesex-London Health Unit	141	27.8	161	31.7
Southwestern Public Health	47	22.2	74	35.0
Windsor-Essex County Health Unit	204	48.0	194	45.7
TOTAL SOUTH WEST	647	38.3	768	45.4
Brant County Health Unit	100	64.4	87	56.1
City of Hamilton Public Health Services	455	76.8	612	103.3

Public Health Unit Name	Cases reported week 10	Rate per 100,000 population Reported week 10	Cases reported week 11	Rate per 100,000 population Reported week 11
Haldimand-Norfolk Health Unit	43	37.7	35	30.7
Halton Region Public Health	287	46.4	289	46.7
Niagara Region Public Health	185	39.2	255	54.0
Region of Waterloo Public Health and Emergency Services	277	47.4	228	39.0
Wellington-Dufferin-Guelph Public Health	73	23.4	110	35.3
TOTAL CENTRAL WEST	1,420	49.8	1,616	56.7
TOTAL ONTARIO	9,463	63.7	10,839	72.9

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

Table 3A. Confirmed COVID-19 variants of concern by public health unit and region: Ontario

Public Health Unit Name	Cumulative case count up to March 20 for Lineage B.1.1.7	Cumulative case count up to March 20 for Lineage B.1.351	Cumulative case count up to March 20 for Lineage P.1	Cumulative count up to March 20 for mutation or non-VOC lineage detected*
Northwestern Health Unit	1	0	0	5
Thunder Bay District Health Unit	0	0	0	2
TOTAL NORTH WEST	1	0	0	7
Algoma Public Health	0	0	0	0
North Bay Parry Sound District Health Unit	2	21	0	16
Porcupine Health Unit	0	2	0	1
Public Health Sudbury & Districts	5	0	0	291
Timiskaming Health Unit	0	1	0	5
TOTAL NORTH EAST	7	24	0	313
Ottawa Public Health	21	2	0	343
Eastern Ontario Health Unit	0	1	0	108
Hastings Prince Edward Public Health	0	0	0	13
Kingston, Frontenac and Lennox & Addington Public Health	1	0	0	50
Leeds, Grenville & Lanark District Health Unit	0	0	0	23
Renfrew County and District Health Unit	0	0	0	0
TOTAL EASTERN	22	3	0	537

Public Health Unit Name	Cumulative case count up to March 20 for Lineage B.1.1.7	Cumulative case count up to March 20 for Lineage B.1.351	Cumulative case count up to March 20 for Lineage P.1	Cumulative count up to March 20 for mutation or non-VOC lineage detected*
Durham Region Health Department	67	0	2	735
Haliburton, Kawartha, Pine Ridge District Health Unit	2	0	0	41
Peel Public Health	302	10	7	2,517
Peterborough Public Health	1	0	0	163
Simcoe Muskoka District Health Unit	296	1	9	697
York Region Public Health	296	2	8	1,658
TOTAL CENTRAL EAST	964	13	26	5,811
Toronto Public Health	305	7	21	5,752
TOTAL TORONTO	305	7	21	5,752
Chatham-Kent Public Health	1	0	0	14
Grey Bruce Health Unit	0	0	0	11
Huron Perth Public Health	0	0	0	4
Lambton Public Health	0	0	0	71
Middlesex-London Health Unit	4	0	0	54
Southwestern Public Health	5	0	0	45
Windsor-Essex County Health Unit	3	0	0	51
TOTAL SOUTH WEST	13	0	0	250
Brant County Health Unit	0	0	0	45

Public Health Unit Name	Cumulative case count up to March 20 for Lineage B.1.1.7	Cumulative case count up to March 20 for Lineage B.1.351	Cumulative case count up to March 20 for Lineage P.1	Cumulative count up to March 20 for mutation or non-VOC lineage detected*
City of Hamilton Public Health Services	10	0	0	472
Haldimand-Norfolk Health Unit	4	3	0	24
Halton Region Public Health	27	0	0	344
Niagara Region Public Health	8	0	0	235
Region of Waterloo Public Health and Emergency Services	22	0	0	284
Wellington-Dufferin-Guelph Public Health	6	0	0	134
TOTAL CENTRAL WEST	77	3	0	1,538
TOTAL ONTARIO	1,389	50	47	14,208

Note: Interpret the VOC and mutation trends with caution due to the varying time required to complete VOC testing and/or genomic analysis following the initial positive test for SARS-CoV-2. Data for calculating the cumulative case count uses data from the Investigation Subtype field only. Data for cases with a B.1.1.7, B.1.351, and P.1 lineage detected are determined using the Investigation Subtype field only.

*Includes all confirmed COVID-19 cases with a lineage or mutation reported in the Investigation Subtype field, excluding variants of concern B.1.1.7, B.1.351, and P.1 lineages. If a VOC is identified through genomic analysis, the cumulative case counts for mutations will fluctuate as the case is moved to one of the listed lineages.

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For Further Information

For more information, email cd@oahpp.ca.

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