

Weekly Epidemiologic Summary

COVID-19 in Ontario: Focus on April 4, 2021 to April 10, 2021

This report includes the most current information available from CCM as of April 13, 2021.

Please visit the interactive <u>Ontario COVID-19 Data Tool</u> to explore recent COVID-19 data by public health unit, age group, sex, and trends over time.

A <u>daily summary</u> 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

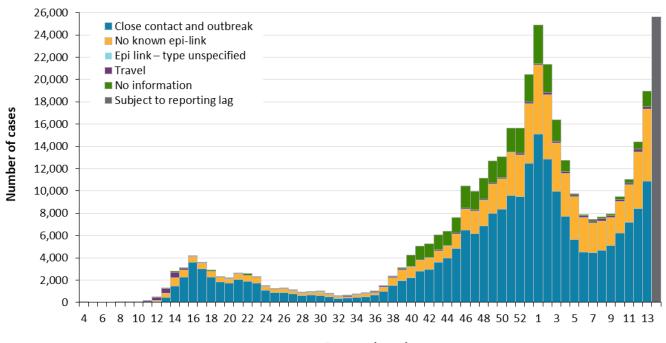
- There are a total of 389, 169 confirmed cases of COVID-19 in Ontario with a public health unit reported date up to April 10, 2021.
- For the period with a public health unit reported date between April 4 to 10, 2021 (week 14):
 - A total of 25,663 cases were reported to public health compared to 18,929 cases the previous week (March 28 to April 3, 2021).
 - This represents the largest number of cases reported in a single week (n=25,663). The previous peak occurred in week 1 (January 3 to 9, 2021; n=24,867) during the second wave of the pandemic.
 - In waves one and two of the pandemic, people aged 80 and over had the highest rate of cases per 100,000 population among all age groups during the peaks (219.4 and 229.1, respectively). During wave three, this age group has the lowest rate of disease (73.2) while cases aged 20-39 are reporting the highest rate (233.3).

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

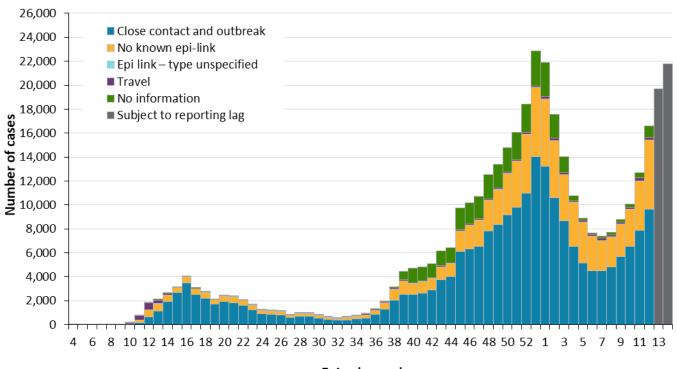
Figure 1. Confirmed cases of COVID-19 by likely source of acquisition and public health unit reported week: Ontario



Reported week

Note: Include cases with reported dates ranging from week 4 (January 19 and 25, 2020) to week 14 (April 4 and 10, 2021). See <u>Table 1A</u> in Appendix A for a list of the weeks and corresponding start and end dates.

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



Episode week

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 14 (April 4 and 10, 2021). See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.

Case Characteristics

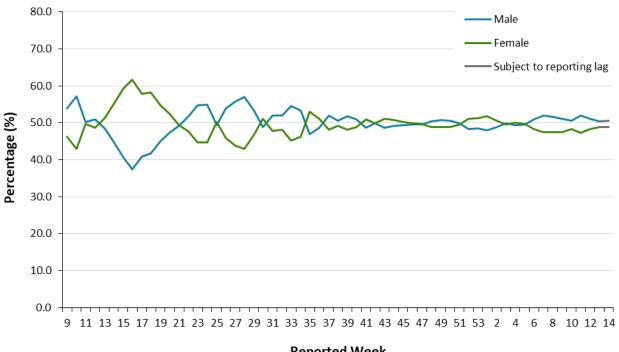
Table 1. Summary of confirmed cases of COVID-19 by public health unit reported date: Ontario

| | Reported week 13 (March 28 to April 3) | Reported week 14 (April 4 to 10) | Cumulative case count up to April 10 | Cumulative rate per 100,000 population |
|-----------------------|--|-------------------------------------|--------------------------------------|---|
| Total number of cases | 18,929 | 25,663 | 389,169 | 2,618.1 |
| Gender: Male | 9,538 | 12,986 | 192,863 | 2,635.0 |
| Gender: Female | 9,238 | 12,518 | 194,075 | 2,572.2 |
| Ages: 19 and under | 3,909 | 4,780 | 57,716 | 1,840.2 |
| Ages: 20-39 | 6,947 | 9,696 | 142,954 | 3,439.5 |
| Ages: 40-59 | 5,292 | 7,431 | 111,791 | 2,839.1 |
| Ages: 60-79 | 2,380 | 3,250 | 54,428 | 1,841.9 |
| Ages: 80 and over | 395 | 497 | 22,192 | 3,267.1 |
| Number resolved | N/A | N/A | 354,285 | 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.

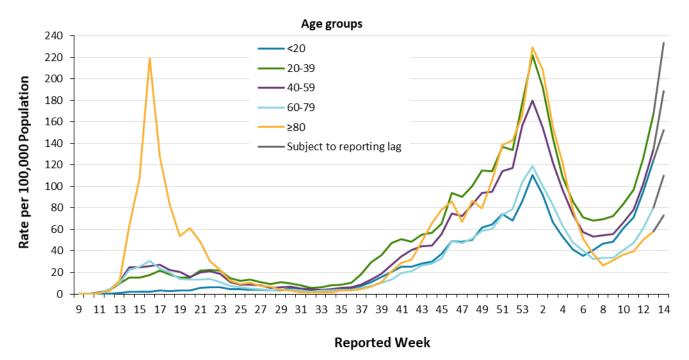
Figure 3. Percentage of confirmed cases of COVID-19 by gender and public health unit reported week: Ontario



Reported Week

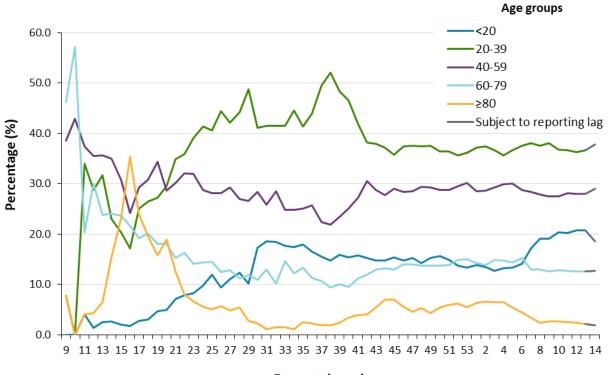
Note: Not all cases have a gender reported. The denominator for calculating weekly percentages includes all cases. Only weeks with more than 10 cases by public health unit reporting date are included (starting in week 9). Include cases with reported dates ranging from week 9 (February 23 and 29, 2020) to week 14 (April 4 and 10, 2021). See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.

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 14 (April 4 and 10, 2021). See <u>Table 1A</u> in Appendix A for a list of the weeks and corresponding start and end dates.

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

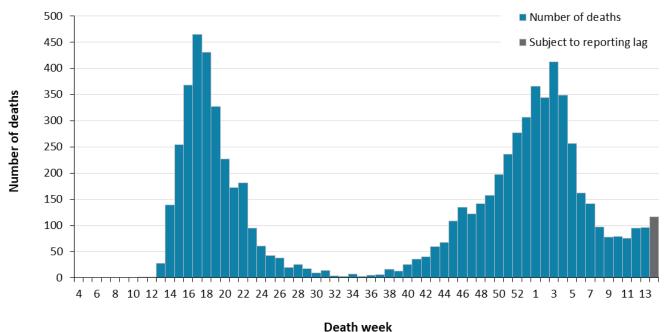


Reported week

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 14 (April 4 and 10, 2021). See <u>Table 1A</u> in Appendix A for a list of the weeks and corresponding start and end dates.

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 14 (April 4 and 10, 2021). See Table 1A in Appendix A for a list of the weeks and corresponding start and end dates.

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

| Deaths | Reported week 13 (March 28 to April 3) | 8 to April (April 4 to 10) | | Cumulative rate per 100,000 population |
|--------------------|--|----------------------------|-------|---|
| Number of deaths | 56 | 42 | 7,607 | 51.2 |
| Gender: Male | 31 | 22 | 3,701 | 50.6 |
| Gender: Female | 24 | 20 | 3,860 | 51.2 |
| Ages: 19 and under | 0 | 0 | 2 | 0.1 |
| Ages: 20-39 | 2 | 1 | 38 | 0.9 |
| Ages: 40-59 | 3 | 4 | 331 | 8.4 |
| Ages: 60-79 | 22 | 18 | 2,187 | 74.0 |
| Ages: 80 and over | 29 | 19 | 5,048 | 743.2 |

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.

Exposure

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

| | Reported week 13 (March 28 to April 3) | Percentage | Reported week 14 (April 4 to 10) | Percentage | Cumulative case count up to April 10 | Cumulative percentage |
|--|---|------------|---|------------|---|-----------------------|
| Travel | 222 | 1.2% | 225 | 0.9% | 6,622 | 1.7% |
| Outbreak-associated or close contact of a confirmed case | 10,884 | 57.5% | 11,047 | 43.0% | 236,994 | 60.9% |
| Epidemiological link – type unspecified | 0 | 0.0% | 0 | 0.0% | 164 | <0.01% |
| No known epidemiological link | 6,464 | 34.1% | 5,459 | 21.3% | 99,708 | 25.6% |
| Information missing or unknown | 1,359 | 7.2% | 8,932 | 34.8% | 45,681 | 11.7% |
| Total | 18,929 | | 25,663 | | 389,169 | |

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.

Sub-populations of interest

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

| Health care workers | Reported week 13 (March 28 to April 3) | Reported week 14 (April 4 to 10) | Cumulative case count up to April 10 |
|---------------------|--|-------------------------------------|---|
| Number of cases | 292 | 268 | 21,079 |
| Ever hospitalized | 6 | 1 | 397 |
| Ever in ICU | 2 | 0 | 86 |

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 13 (March 28 to April 3) | Reported week 14 (April 4 to 10) | Cumulative case count up to April 10 |
|--------------------------------------|--|-------------------------------------|---|
| Residents | 16 | 9 | 15,069 |
| Deaths among residents | 1 | 0 | 3,908 |
| Health care workers | 24 | 12 | 6,874 |
| Deaths among health care workers | 0 | 0 | 10 |

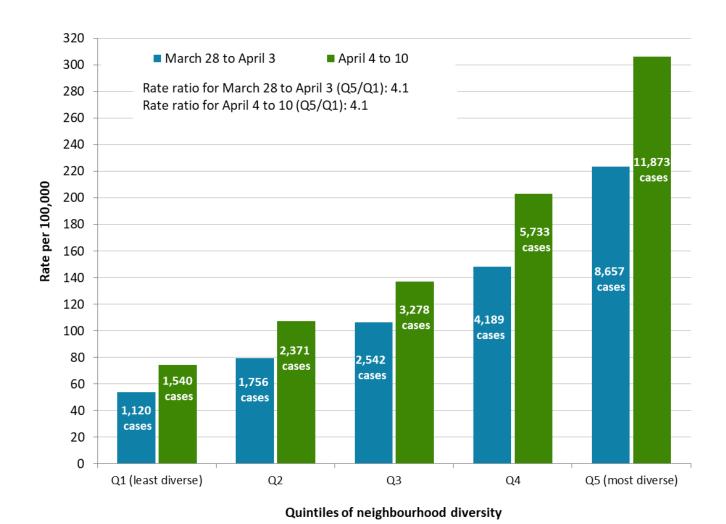
Note: Information on how long-term care home residents and health care workers are identified is available in the technical notes. Interpret information for the most recent week with caution due to reporting lags.

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

| | Reported week 13 (March 28 to April 3) | Reported week 14 (April 4 to 10) | Cumulative case count from August 30 up to April 10 |
|-------------|--|-------------------------------------|---|
| Ages: 4-8 | 772 | 936 | 10,366 |
| Ages: 9-13 | 965 | 1,181 | 13,528 |
| Ages: 14-17 | 847 | 1,163 | 13,407 |

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).

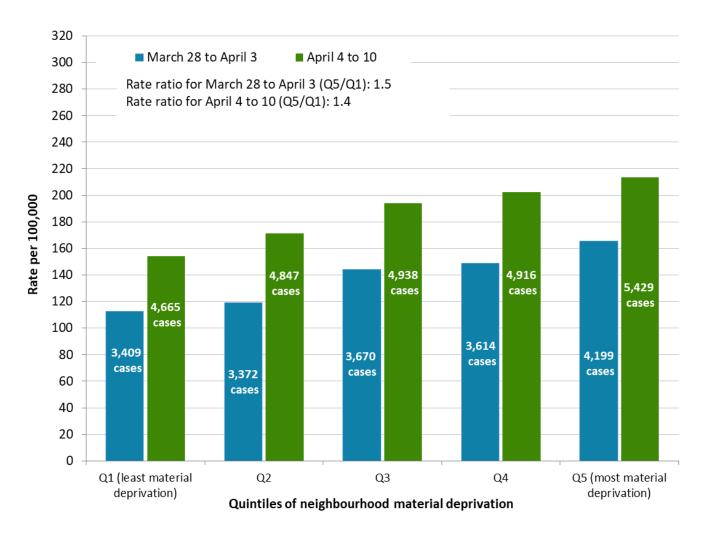
Figure 6. Rate and number of confirmed cases of COVID-19 for each quintile of neighbourhood diversity: Ontario, week 13 (March 28 to April 3, 2021) and week 14 (April 4 to 10, 2021).



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 material deprivation: Ontario, week 13 (March 28 to April 3, 2021) and week 14 (April 4 to 10, 2021).

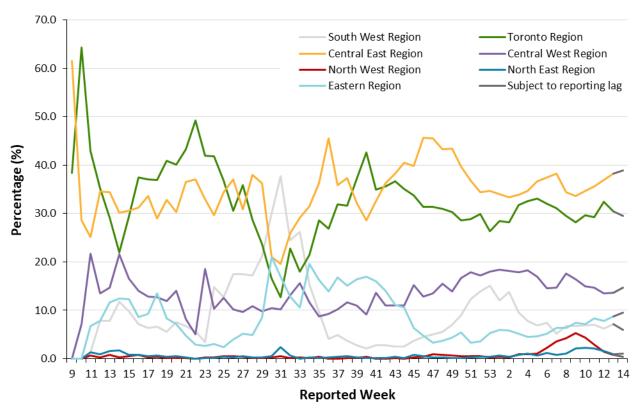


Note: Neighbourhood material deprivation is measured using the material deprivation dimension of the Ontario Marginalization Index. The material deprivation dimension uses Canadian census data on income, quality of housing, educational attainment and family structure characteristics to assess the ability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

Data Source: CCM, Ontario Marginalization Index

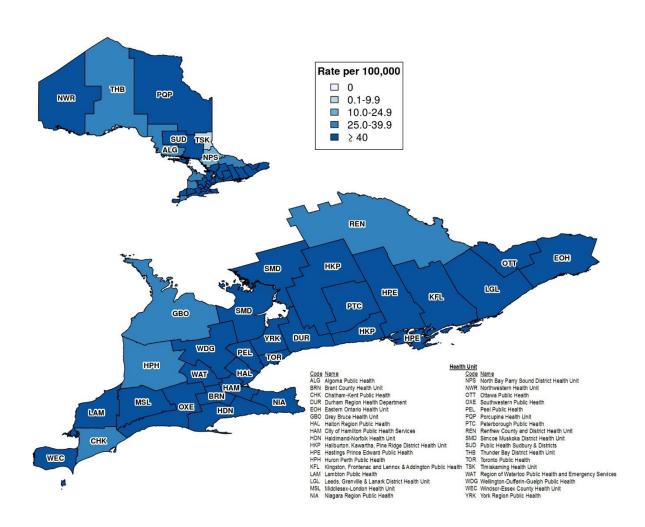
Geography

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 14 (April 4 and 10, 2021). Table 2A in <u>Appendix A</u> has a listing of public health units by region.

Figure 9. Rate of confirmed cases of COVID-19 in public health reported week 14 (April 4 to 10, 2021) by public health unit: Ontario



Note: The provincial rate of confirmed cases of COVID-19 reported in week 14 was 172.6 cases per 100,000 population.

Outbreaks

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

| Setting Type | Reported week 14 (April 4 to 10) | Number of ongoing outbreaks | Cumulative number of outbreaks reported to April 10 |
|--------------------------------|-------------------------------------|-----------------------------|---|
| Congregate Care | 27 | 111 | 2,720 |
| Long-term care homes | 7 | 46 | 1,399 |
| Retirement homes | 7 | 29 | 834 |
| Hospitals | 13 | 36 | 487 |
| Congregate Living | 37 | 123 | 1,011 |
| Correctional facility | 2 | 11 | 45 |
| Shelter | 7 | 32 | 208 |
| Group Home/supportive housing | 22 | 60 | 598 |
| Short-term accommodations | 1 | 3 | 24 |
| Congregate other | 5 | 17 | 136 |
| Education | 150 | 377 | 1,830 |
| Child care | 44 | 104 | 587 |
| School – Elementary* | 79 | 214 | 935 |
| School – Elementary/secondary* | 6 | 11 | 53 |
| School – Secondary* | 18 | 39 | 221 |
| School – Post-secondary* | 3 | 9 | 34 |
| Other settings | 121 | 274 | 2,836 |
| Bar/restaurant/nightclub | 17 | 23 | 221 |
| Medical/health services | 4 | 7 | 122 |
| Personal service settings | 1 | 4 | 26 |

| Setting Type | Reported week 14 (April 4 to 10) | Number of ongoing outbreaks | Cumulative number of outbreaks reported to April 10 |
|-----------------------------|-------------------------------------|-----------------------------|---|
| Recreational fitness | 2 | 4 | 79 |
| Retail | 17 | 33 | 299 |
| Other recreation/community | 9 | 30 | 165 |
| Workplace – Farm | 12 | 22 | 152 |
| Workplace - Food processing | 3 | 15 | 192 |
| Other types of workplaces | 48 | 126 | 1,555 |
| Other | 2 | 3 | 4 |
| Unknown | 6 | 7 | 21 |
| Total number of outbreaks | 335 | 885 | 8,397 |

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.

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

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

Table 8. Confirmed cases of COVID-19 associated with COVID-19 outbreaks by setting type and public health unit reported week: Ontario

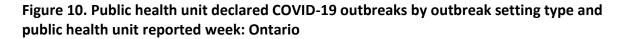
| Cases associated with the outbreak setting type | Reported week 13 (March 28 to April 3) | Reported week 14 (April 4 to 10) | Cumulative number of cases |
|---|--|-------------------------------------|----------------------------------|
| Congregate Care | 235 | 202 | 37,950 |
| Long-term care homes | 81 | 47 | 25,328 |
| Retirement homes | 56 | 31 | 6,985 |
| Hospitals | 98 | 124 | 5,637 |
| Congregate Living | 266 | 308 | 7,741 |
| Correctional facility | 24 | 23 | 1,283 |
| Shelter | 89 | 68 | 2,238 |
| Group Home/supportive housing | 54 | 101 | 2,932 |
| Short-term accommodations | 16 | 12 | 130 |
| Congregate other | 83 | 104 | 1,158 |
| Education | 730 | 595 | 7,500 |
| Child care | 197 | 185 | 2,017 |
| School – Elementary* | 428 | 310 | 3,868 |
| School – Elementary/secondary* | 23 | 20 | 273 |
| School – Secondary* | 52 | 55 | 966 |
| School – Post-secondary* | 30 | 25 | 376 |
| Other settings | 991 | 701 | 21,664 |
| Bar/restaurant/nightclub | 64 | 45 | 919 |
| Medical/health services | 16 | 8 | 525 |
| Personal service settings | 14 | 0 | 97 |
| Recreational fitness | 19 | 18 | 634 |

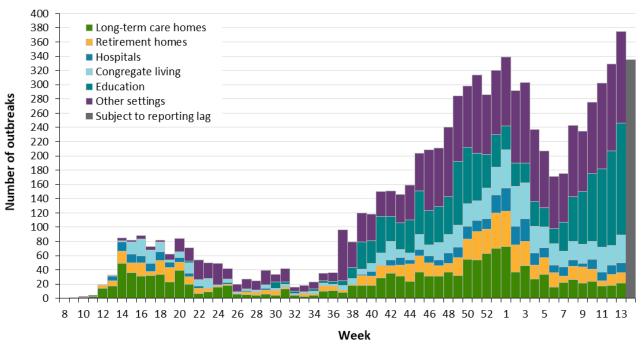
| Cases associated with the outbreak setting type | Reported week 13 (March 28 to April 3) | Reported week 14 (April 4 to 10) | Cumulative number of cases |
|---|--|-------------------------------------|----------------------------------|
| Retail | 81 | 64 | 1,411 |
| Other recreation/community | 132 | 75 | 2,034 |
| Workplace - Farm | 38 | 45 | 2,648 |
| Workplace - Food processing | 70 | 70 | 2,425 |
| Other types of workplaces | 538 | 338 | 10,811 |
| Other | 10 | 11 | 22 |
| Unknown | 9 | 27 | 138 |
| Total number of cases | 2,222 | 1,806 | 74,855 |

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.

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

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





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 14 refers to April 4 and 10, 2021. Congregate living include group homes, shelters, correctional facilities, etc. Other settings include outbreaks within workplaces, childcare, schools, restaurants, recreation etc.

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 | Mutations** | Cumulative case count as of April 10, 2021 |
|--------------------|---------------------|--------------------|-------------|-------------|--|
| Gender: Male | 11,942 | 41 | 94 | 13,172 | 25,249 |
| Gender: Female | 11,406 | 42 | 81 | 12,334 | 23,863 |
| Ages: 19 and under | 4,244 | 8 | 26 | 5,031 | 9,309 |
| Ages: 20-39 | 8,584 | 31 | 66 | 9,645 | 18,326 |
| Ages: 40-59 | 7,058 | 25 | 63 | 7,387 | 14,533 |
| Ages: 60-79 | 3,074 | 14 | 19 | 3,100 | 6,207 |
| Ages: 80 and over | 493 | 6 | 2 | 542 | 1,043 |

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 where lineage B.1.1.7 was identified by genomic analysis and those presumed to be B.1.1.7 based on a positive N501Y and negative E484K mutation.

^{**} Mutations includes all confirmed COVID-19 cases with the following mutations detected, reported from the Investigation Subtype field: N501Y and E484K, N501Y (E484K unknown), E484K (N501Y negative), E484K (N501Y unknown)

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 | % | Mutations** | % | Cumulative case count up to April 10, 2021 | Cumulative percentage |
|--|---------------------|-------|--------------------|-------|----------------|-------|-------------|-------|--|-----------------------|
| Travel | 221 | 0.9% | 11 | 13.1% | 2 | 1.1% | 328 | 1.3% | 562 | 1.1% |
| Outbreak-associated or close contact of a confirmed case | 13,592 | 57.9% | 61 | 72.6% | 127 | 72.2% | 15,598 | 60.7% | 29,378 | 59.4% |
| Epidemiological link – type unspecified | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| No known epidemiological link | 6,980 | 29.8% | 11 | 13.1% | 45 | 25.6% | 7,678 | 29.9% | 14,714 | 29.8% |
| Information missing or unknown | 2,664 | 11.4% | 1 | 1.2% | 2 | 1.1% | 2,103 | 8.2% | 4,770 | 9.7% |
| Total | 23,457 | | 84 | | 176 | | 25,707 | | 49,424 | |

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 where lineage B.1.1.7 was identified by genomic analysis and those presumed to be B.1.1.7 based on a positive N501Y and negative E484K mutation.

^{**} Mutations includes all confirmed COVID-19 cases with the following mutations detected, reported from the Investigation Subtype field: N501Y and E484K, N501Y (E484K unknown), E484K (N501Y negative), E484K (N501Y unknown)

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 April 13, 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 material 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 –
 <u>Coronavirus Disease (COVID-19) document</u> 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-Co-V-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 material 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 | 1,308 | 1,923 |
| 14 | March 29, 2020 | April 4, 2020 | 2,778 | 4,701 |
| 15 | April 5, 2020 | April 11, 2020 | 3,135 | 7,836 |
| 16 | April 12, 2020 | April 18, 2020 | 4,206 | 12,042 |
| 17 | April 19, 2020 | April 25, 2020 | 3,630 | 15,672 |
| 18 | April 26, 2020 | May 2, 2020 | 2,889 | 18,561 |
| 19 | May 3, 2020 | May 9, 2020 | 2,343 | 20,904 |
| 20 | May 10, 2020 | May 16, 2020 | 2,193 | 23,097 |
| 21 | May 17, 2020 | May 23, 2020 | 2,615 | 25,712 |
| 22 | May 24, 2020 | May 30, 2020 | 2,600 | 28,312 |

| Reported Week | Start date | End date | Number of cases | Cumulative count |
|------------------|--------------------|--------------------|-----------------|------------------|
| 23 | May 31, 2020 | June 6, 2020 | 2,304 | 30,616 |
| 24 | June 7, 2020 | June 13, 2020 | 1,473 | 32,089 |
| 25 | June 14, 2020 | June 20, 2020 | 1,229 | 33,318 |
| 26 | June 21, 2020 | June 27, 2020 | 1,251 | 34,569 |
| 27 | June 28, 2020 | July 4, 2020 | 1,084 | 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 | 990 | 38,442 |
| 31 | July 26, 2020 | August 1, 2020 | 805 | 39,247 |
| 32 | August 2, 2020 | August 8, 2020 | 593 | 39,840 |
| 33 | August 9, 2020 | August 15, 2020 | 610 | 40,450 |
| 34 | August 16, 2020 | August 22, 2020 | 730 | 41,180 |
| 35 | August 23, 2020 | August 29, 2020 | 853 | 42,033 |
| 36 | August 30, 2020 | September 5, 2020 | 979 | 43,012 |
| 37 | September 6, 2020 | September 12, 2020 | 1,502 | 44,514 |
| 38 | September 13, 2020 | September 19, 2020 | 2,373 | 46,887 |
| 39 | September 20, 2020 | September 26, 2020 | 3,123 | 50,010 |
| 40 | September 27, 2020 | October 3, 2020 | 4,224 | 54,234 |
| 41 | October 4, 2020 | October 10, 2020 | 5,042 | 59,276 |
| 42 | October 11, 2020 | October 17, 2020 | 5,278 | 64,554 |
| 43 | October 18, 2020 | October 24, 2020 | 6,041 | 70,595 |
| 44 | October 25, 2020 | October 31, 2020 | 6,387 | 76,982 |
| 45 | November 1, 2020 | November 7, 2020 | 7,608 | 84,590 |

| Reported Week | Start date | End date | Number of cases | Cumulative count |
|------------------|-------------------|-------------------|-----------------|------------------|
| 46 | November 8, 2020 | November 14, 2020 | 10,437 | 95,027 |
| 47 | November 15, 2020 | November 21, 2020 | 9,988 | 105,015 |
| 48 | November 22, 2020 | November 28, 2020 | 11,127 | 116,142 |
| 49 | November 29, 2020 | December 5, 2020 | 12,685 | 128,827 |
| 50 | December 6, 2020 | December 12, 2020 | 13,047 | 141,874 |
| 51 | December 13, 2020 | December 19, 2020 | 15,653 | 157,527 |
| 52 | December 20, 2020 | December 26, 2020 | 15,627 | 173,154 |
| 53 | December 27, 2020 | January 2, 2021 | 20,449 | 193,603 |
| 1 | January 3, 2021 | January 9, 2021 | 24,867 | 218,470 |
| 2 | January 10, 2021 | January 16, 2021 | 21,361 | 239,831 |
| 3 | January 17, 2021 | January 23, 2021 | 16,394 | 256,225 |
| 4 | January 24, 2021 | January 30, 2021 | 12,728 | 268,953 |
| 5 | January 31, 2021 | February 6, 2021 | 9,773 | 278,726 |
| 6 | February 7, 2021 | February 13, 2021 | 7,889 | 286,615 |
| 7 | February 14, 2021 | February 20, 2021 | 7,455 | 294,070 |
| 8 | February 21, 2021 | February 27, 2021 | 7,674 | 301,744 |
| 9 | February 28, 2021 | March 6, 2021 | 7,930 | 309,674 |
| 10 | March 7, 2021 | March 13, 2021 | 9,479 | 319,153 |
| 11 | March 14, 2021 | March 20, 2021 | 11,020 | 330,173 |
| 12 | March 21, 2021 | March 27, 2021 | 14,404 | 344,577 |
| 13 | March 28, 2021 | April 3, 2021 | 18,929 | 363,506 |
| 14 | April 4, 2021 | April 10, 2021 | 25,663 | 389,169 |

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

| Public Health Unit Name | Cases reported week 13 | Rate per 100,000 population Reported week 13 | Cases reported week 14 | Rate per 100,000 population Reported week 14 |
|--|------------------------------|---|------------------------------|---|
| Northwestern Health Unit | 37 | 42.2 | 48 | 54.7 |
| Thunder Bay District Health Unit | 116 | 77.4 | 54 | 36.0 |
| TOTAL NORTH WEST | 153 | 64.4 | 102 | 42.9 |
| Algoma Public Health | 13 | 11.4 | 30 | 26.2 |
| North Bay Parry Sound District Health Unit | 12 | 9.2 | 16 | 12.3 |
| Porcupine Health Unit | 20 | 24.0 | 37 | 44.3 |
| Public Health Sudbury & Districts | 132 | 66.3 | 174 | 87.4 |
| Timiskaming Health Unit | 3 | 9.2 | 1 | 3.1 |
| TOTAL NORTH EAST | 180 | 32.2 | 258 | 46.1 |
| Ottawa Public Health | 1,215 | 115.2 | 1,772 | 168.0 |
| Eastern Ontario Health Unit | 220 | 105.4 | 264 | 126.5 |
| Hastings Prince Edward Public Health | 99 | 58.8 | 135 | 80.1 |
| Kingston, Frontenac and Lennox & Addington Public Health | 49 | 23.0 | 129 | 60.6 |
| Leeds, Grenville & Lanark District Health Unit | 55 | 31.8 | 125 | 72.2 |
| Renfrew County and District Health Unit | 21 | 19.3 | 36 | 33.1 |
| TOTAL EASTERN | 1,659 | 86.1 | 2,461 | 127.8 |

| Public Health Unit Name | Cases reported week 13 | Rate per 100,000 population Reported week 13 | Cases reported week 14 | Rate per 100,000 population Reported week 14 |
|--|------------------------------|---|------------------------------|---|
| Durham Region Health Department | 1,034 | 145.1 | 1,527 | 214.3 |
| Haliburton, Kawartha, Pine Ridge District Health Unit | 75 | 39.7 | 121 | 64.0 |
| Peel Public Health | 3,513 | 218.7 | 4,730 | 294.5 |
| Peterborough Public Health | 67 | 45.3 | 79 | 53.4 |
| Simcoe Muskoka District Health Unit | 456 | 76.1 | 654 | 109.1 |
| York Region Public Health | 2,088 | 170.3 | 2,865 | 233.7 |
| TOTAL CENTRAL EAST | 7,233 | 161.4 | 9,976 | 222.6 |
| Toronto Public Health | 5,768 | 184.9 | 7,575 | 242.8 |
| TOTAL TORONTO | 5,768 | 184.9 | 7,575 | 242.8 |
| Chatham-Kent Public Health | 61 | 57.4 | 38 | 35.7 |
| Grey Bruce Health Unit | 63 | 37.1 | 65 | 38.3 |
| Huron Perth Public Health | 19 | 13.6 | 46 | 32.9 |
| Lambton Public Health | 136 | 103.8 | 114 | 87.0 |
| Middlesex-London Health Unit | 670 | 132.0 | 831 | 163.7 |
| Southwestern Public Health | 93 | 44.0 | 125 | 59.1 |
| Windsor-Essex County Health Unit | 305 | 71.8 | 311 | 73.2 |
| TOTAL SOUTH WEST | 1,347 | 79.7 | 1,530 | 90.5 |
| Brant County Health Unit | 113 | 72.8 | 219 | 141.1 |
| City of Hamilton Public Health Services | 726 | 122.6 | 826 | 139.5 |

| Public Health Unit Name | Cases reported week 13 | Rate per 100,000 population Reported week 13 | Cases reported week 14 | Rate per 100,000 population Reported week 14 |
|---|------------------------------|---|------------------------------|---|
| Haldimand-Norfolk Health Unit | 74 | 64.9 | 129 | 113.1 |
| Halton Region Public Health | 551 | 89.0 | 922 | 148.9 |
| Niagara Region Public Health | 549 | 116.2 | 739 | 156.4 |
| Region of Waterloo Public Health and Emergency Services | 321 | 54.9 | 467 | 79.9 |
| Wellington-Dufferin-Guelph Public Health | 255 | 81.8 | 459 | 147.2 |
| TOTAL CENTRAL WEST | 2,589 | 90.9 | 3,761 | 132.0 |
| TOTAL ONTARIO | 18,929 | 127.3 | 25,663 | 172.6 |

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 April 10 for Lineage B.1.1.7* | Cumulative case count up to April 10 for Lineage B.1.351 | Cumulative case count up to April 10 for Lineage P.1 | Cumulative count up to April 10 for Mutations** |
|---|---|--|--|--|
| Northwestern Health Unit | 11 | 0 | 0 | 15 |
| Thunder Bay District Health Unit | 0 | 0 | 0 | 9 |
| TOTAL NORTH WEST | 11 | 0 | 0 | 24 |
| Algoma Public Health | 4 | 0 | 0 | 3 |
| North Bay Parry Sound District Health Unit | 31 | 27 | 0 | 13 |
| Porcupine Health Unit | 4 | 2 | 0 | 4 |
| Public Health Sudbury & Districts | 32 | 0 | 0 | 518 |
| Timiskaming Health Unit | 21 | 1 | 0 | 0 |
| TOTAL NORTH EAST | 92 | 30 | 0 | 538 |
| Ottawa Public Health | 833 | 6 | 0 | 856 |
| Eastern Ontario Health Unit | 233 | 2 | 0 | 253 |
| Hastings Prince Edward Public Health | 4 | 0 | 0 | 153 |
| Kingston, Frontenac and Lennox & Addington Public Health | 93 | 0 | 0 | 113 |
| Leeds, Grenville & Lanark District Health Unit | 111 | 0 | 0 | 29 |
| Renfrew County and District Health Unit | 41 | 0 | 0 | 11 |
| TOTAL EASTERN | 1,315 | 8 | 0 | 1,415 |
| Durham Region Health Department | 1,885 | 1 | 8 | 1,610 |

| Public Health Unit Name | Cumulative case count up to April 10 for Lineage B.1.1.7* | Cumulative case count up to April 10 for Lineage B.1.351 | Cumulative case count up to April 10 for Lineage P.1 | Cumulative count up to April 10 for Mutations** |
|--|---|--|--|--|
| Haliburton, Kawartha, Pine Ridge District Health Unit | 36 | 0 | 0 | 146 |
| Peel Public Health | 6,757 | 13 | 39 | 3,532 |
| Peterborough Public Health | 123 | 0 | 0 | 169 |
| Simcoe Muskoka District Health Unit | 956 | 2 | 16 | 685 |
| York Region Public Health | 3,704 | 3 | 26 | 2,247 |
| TOTAL CENTRAL EAST | 13,461 | 19 | 89 | 8,389 |
| Toronto Public Health | 4,098 | 25 | 79 | 12,100 |
| TOTAL TORONTO | 4,098 | 25 | 79 | 12,100 |
| Chatham-Kent Public Health | 18 | 1 | 0 | 82 |
| Grey Bruce Health Unit | 55 | 0 | 0 | 29 |
| Huron Perth Public Health | 8 | 0 | 0 | 33 |
| Lambton Public Health | 187 | 0 | 0 | 51 |
| Middlesex-London Health Unit | 700 | 0 | 0 | 185 |
| Southwestern Public Health | 158 | 0 | 0 | 30 |
| Windsor-Essex County Health Unit | 267 | 0 | 0 | 74 |
| TOTAL SOUTH WEST | 1,393 | 1 | 0 | 484 |
| Brant County Health Unit | 91 | 0 | 4 | 130 |
| City of Hamilton Public Health Services | 617 | 0 | 2 | 831 |
| Haldimand-Norfolk Health Unit | 17 | 0 | 0 | 82 |
| Halton Region Public Health | 1,168 | 0 | 1 | 488 |

| Public Health Unit Name | Cumulative case count up to April 10 for Lineage B.1.1.7* | Cumulative case count up to April 10 for Lineage B.1.351 | Cumulative case count up to April 10 for Lineage P.1 | Cumulative count up to April 10 for Mutations** |
|--|---|--|--|--|
| Niagara Region Public Health | 347 | 0 | 0 | 491 |
| Region of Waterloo Public Health and Emergency Services | 327 | 1 | 0 | 563 |
| Wellington-Dufferin-Guelph Public Health | 520 | 0 | 1 | 172 |
| TOTAL CENTRAL WEST | 3,087 | 1 | 8 | 2,757 |
| TOTAL ONTARIO | 23,457 | 84 | 176 | 25,707 |

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 where lineage B.1.1.7 was identified by genomic analysis and those presumed to be B.1.1.7 based on a positive N501Y and negative E484K mutation.

^{**} Mutations includes all confirmed COVID-19 cases with the following mutations detected, reported from the Investigation Subtype field: N501Y and E484K, N501Y (E484K unknown), E484K (N501Y negative), E484K (N501Y unknown)

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For Further Information

For more information, email cd@oahpp.ca.

Public Health Ontario

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