

# **An Update on COVID-19**

## **Presentation for the Board of Health**

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**June 8, 2020**

# **Update on COVID-19 Budgetary Impacts**

## **Memorandum from the Ministry of Health regarding Extraordinary Expenses Associated with COVID-19**

- \$100 million in additional funding for the public health sector
- Re-imburement of one-time extraordinary costs incurred to manage the response to COVID-19
- Public health units expected to exhaust their base budget before applying for reimbursement

## Ministry of Health's 2020 Cost-Shared Budget for TPH \*

- \$191.1 million: \$143.5 million provincial; \$47.6 million municipal
- \$35.0 million of the \$191.1 million is for 'standard' communicable disease control activities
- \$5.0 million of the \$191.1 million is for the Infectious Diseases Control Initiative, the program is responsible for managing communicable disease like COVID-19

\* The 2020 Budget is based on communication from the Ministry of Health in September 2019

## COVID-19 Response Forecasted Expenditures \*

- January 1 – May 31
  - \$33.7 million:
    - \$28.7 million funded by the base budget
    - \$5.0 million in extra-ordinary costs
- \$5.0 million in extra-ordinary costs:
  - \$4.6 million for salary and benefits
  - \$0.4 million for supplies

\* Forecast is subject to change as TPH's response changes to address new developments

## COVID-19 Response Forecasted Expenditures \*

- January 1 – December 31
  - \$120.2 million:
    - \$96.8 million funded by base budget
    - \$24.4 million extra-ordinary costs
- \$24.4 million extra-ordinary costs:
  - \$21.6 million for salary and benefits including \$8.1 million for additional case and contract staff
  - \$2.8 million for supplies

\* Forecast is subject to change as TPH's response changes to address new developments

## COVID-19 Response Expenditures Impact on Overall Ministry of Health Cost-Shared Budget

- Forecasted funding shortfall of \$13.1 million \*

\* Forecast is subject to change as TPH's response changes to address new developments

# Update on Current Data and Response



1. Prevent Loss of Life
2. Preserve the Capacity of the Healthcare System
3. Minimize the Social and Economic Impacts

## SUMMARY OF COVID-19 CASES IN TORONTO



All Cases

Case Count*	12,538
Recovered Cases	9,623
City Incidence Rate per 100,000 People	459
Fatal Cases	928
Ever Hospitalized	1,636
Ever in ICU	355



Currently Hospitalized	347
Currently in ICU	80

As of June 6, 2020



CASES IN THE COMMUNITY	62%
Recovered Cases	6,086
Median Age At Time of Illness	45
Percent Female	49%
Percent Male	51%
Fatal Cases	208
Median Age of Deaths	72

CASES IN INSTITUTIONS**	38%
Recovered Cases	3,537
Median Age At Time of Illness	63
Percent Female	61%
Percent Male	35%
Fatal Cases	720
Median Age of Deaths	89

\*Includes confirmed and probable cases

\*\*Institutions include long term care homes, retirement homes, chronic care & hospitals

†Gender was unknown or other for some cases

- Infections from COVID-19 continue to circulate in Toronto.
- Toronto Public Health is intensively managing and carefully monitoring the local situation.
- As of June 6, there are 12,538 cases of COVID-19 diagnosed in Toronto, including:
  - 11,421 confirmed cases and 1,117 probable ones
  - 347 people in hospital
  - 80 people in intensive care
  - And tragically, 928 deaths

# Role of Toronto Public Health in COVID-19 Response

To date, Toronto Public Health has redeployed approximately 1,026 staff and led additional recruitment to respond to COVID-19 through:

**Investigating Over  
12,500 COVID-19  
Cases**

**Answering Over  
40,600 Hotline Calls  
From Residents**

**Investigating Over  
3,000 Complaints**

As Toronto Public Health continues to respond to the COVID-19 pandemic, we will:

- Engage in ongoing management of COVID-19 cases in the community and outbreaks in congregate settings;
- Provide public health guidance to the City; and,
- Scale up critical public health services as a result of re-opening (e.g., food inspections)

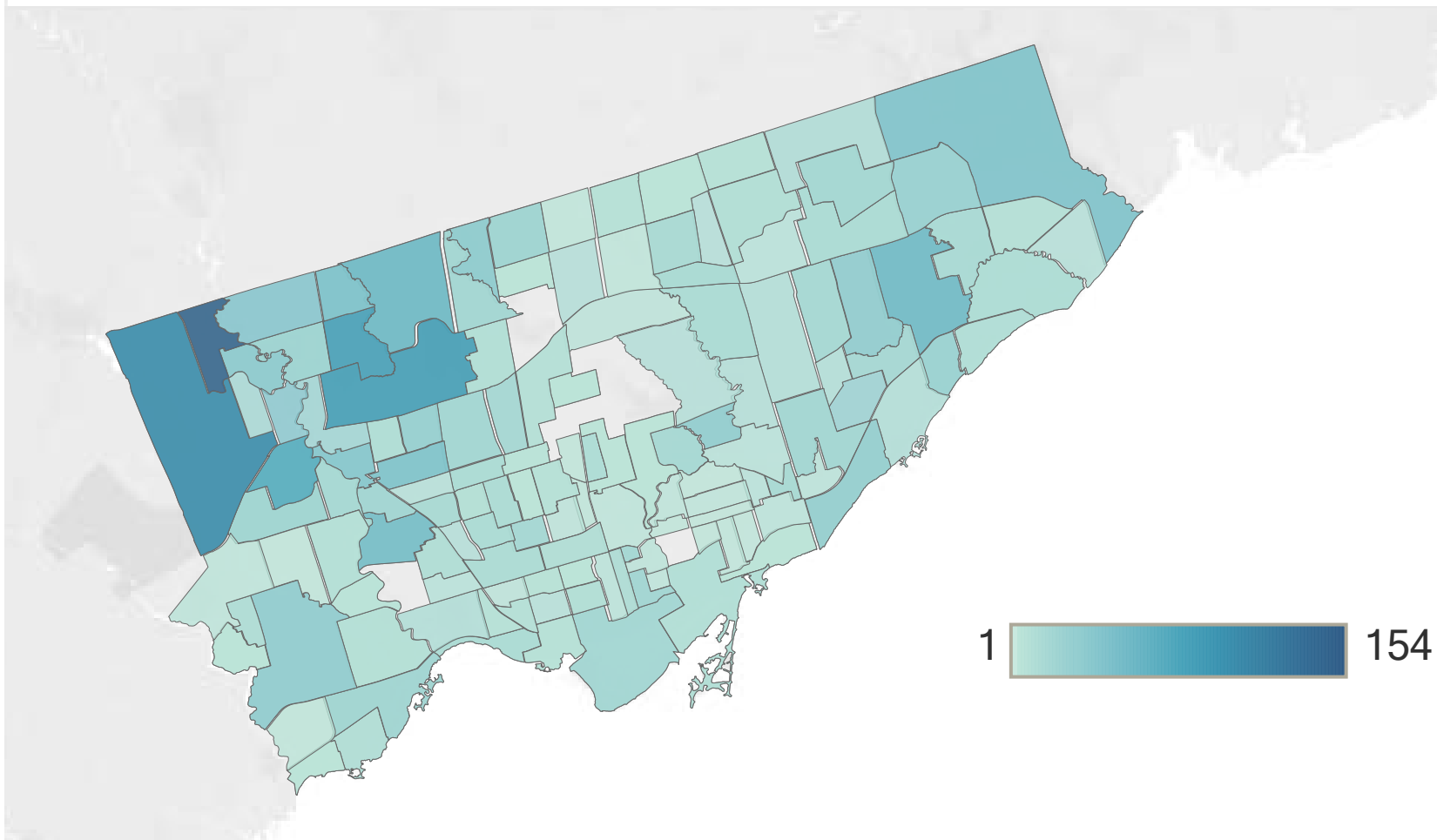
# Epidemic Curve – Last 2 Weeks



As of June 6, 2020

# Neighbourhood Map – Case Counts in Last Three Weeks

Cases of COVID-19: City of Toronto, May 16, 2020 to June 6, 2020



As of June 6, 2020

## COVID-19 Monitoring Dashboard

**Red** - Trending away from goal, **Yellow** - Trend is stable, **Green** - Trending towards goal



Virus Spread & Containment

Status: **Red**



Testing

Status: **Yellow**



Health System Capacity

Status: **Green**



Public Health System Capacity

Status: **Yellow**

As of June 6, 2020

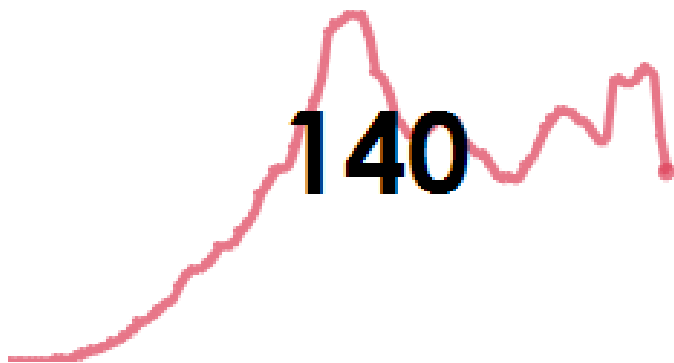
# Virus Spread and Containment



# Monitoring Dashboard – Virus Spread Indicators

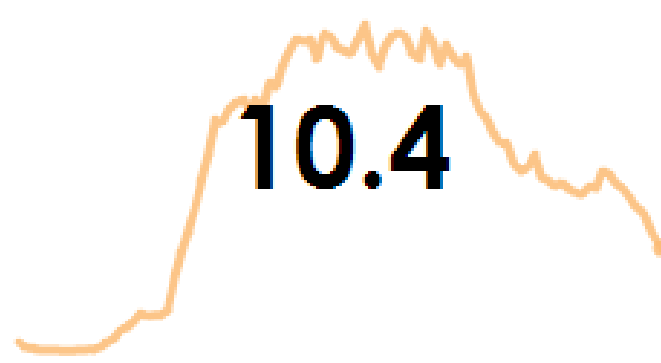
## Virus Spread and Containment

New COVID-19 cases, 7 day moving average<sup>1</sup>



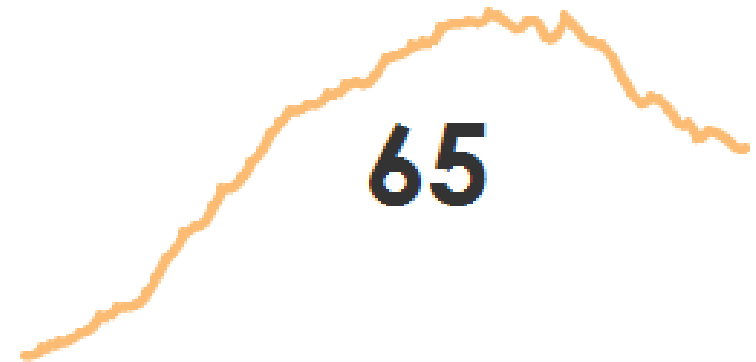
Goal: Sustained decrease over 14 day period

New Hospitalizations, 7 day moving average<sup>1</sup>



Goal: Sustained decrease over 14 day period

Active daily COVID-19 outbreaks in Institutions<sup>1</sup>



Goal: sustained decrease in active outbreaks

# Incidence Tracking Capacity

# Monitoring Dashboard – Testing Indicators

## Testing

Percent of new COVID-19 tests with a turnaround time of 24hrs<sup>1</sup>

**23%**

within 24 hours  
(7 day moving average)

Goal:  $\geq 60\%$  within 24 hours

As of June 6, 2020

Percent of new COVID-19 tests with a turnaround time of 48hrs<sup>1</sup>

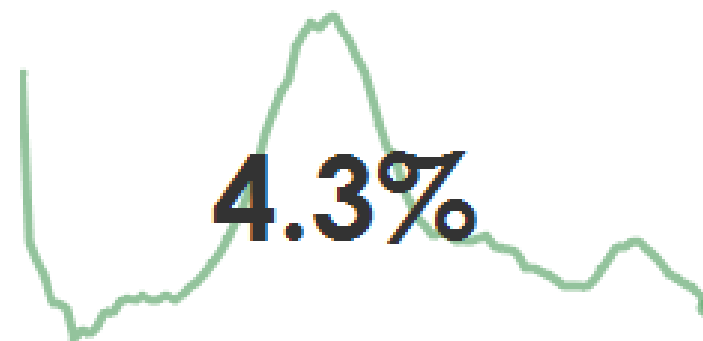
**55%**

within 48 hours  
(7 day moving average)

Goal:  $\geq 80\%$  within 48 hours

As of June 6, 2020

COVID-19 Laboratory Tests Percent Positivity, 7 day moving average<sup>3</sup>

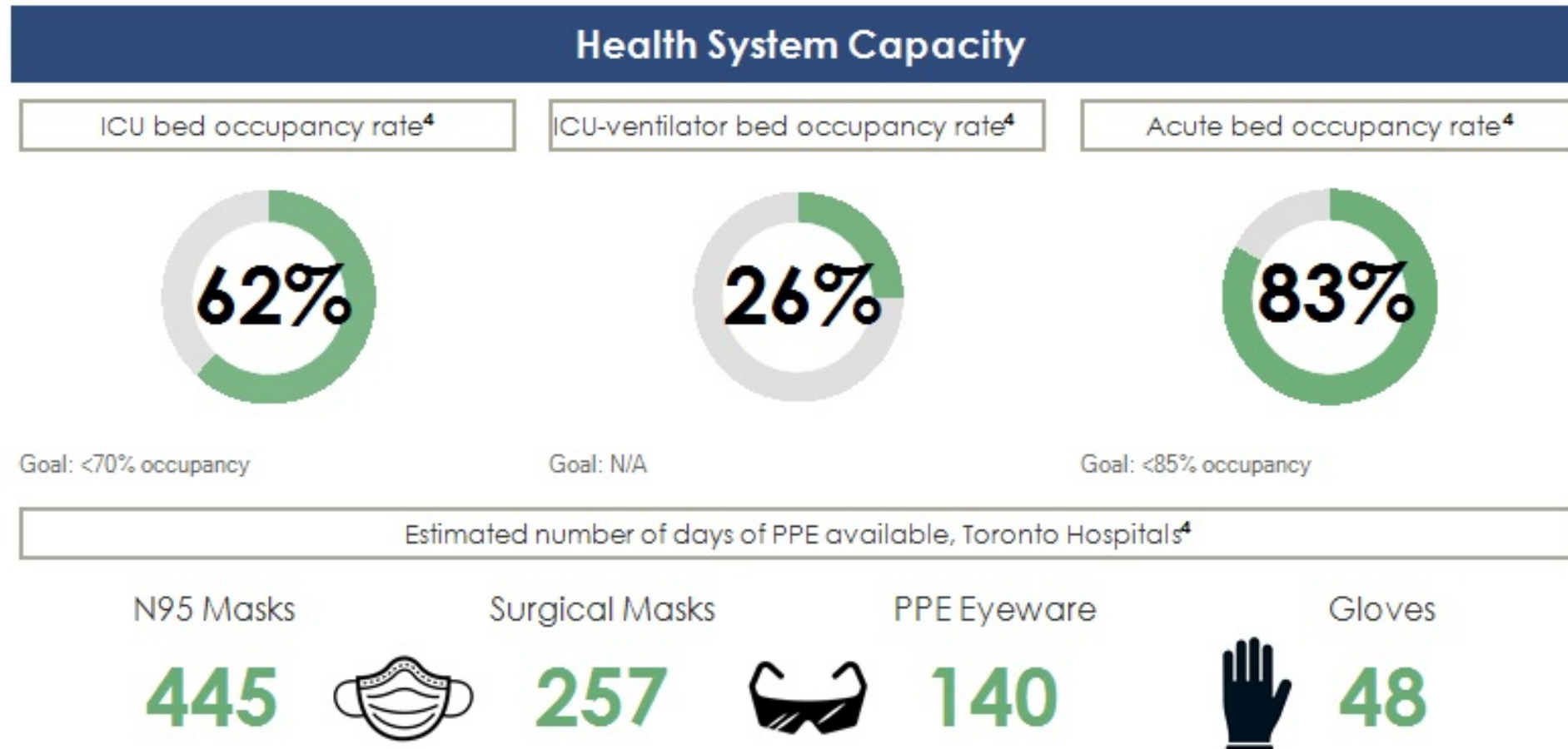


Goal:  $< 10\%$  positivity

As of May 30, 2020

# Health System Capacity

# Monitoring Dashboard – Health System Indicators



As of May 31, 2020

# Public Health Capacity

# Monitoring Dashboard – Public Health Capacity Indicators

## Public Health System Capacity

Percent of newly reported confirmed COVID-19 cases reached within 24 hours



**72.2%\***

June 1 - 3, 2020

Goal: > 90% reached

\* Down from 88.7% (May 26-28/20)  
largely due to hospital reporting delays

Percent of newly reported COVID-19 contacts reached within 24 hours



**100%**

June 1, 2020

Goal: >90% reached

# Provincial and City of Toronto Recovery & Rebuild



# Provincial Reopening Framework

- On May 14, the Province of Ontario announced *A Framework for Reopening Our Province*, outlining principles to reopen businesses, services, and public spaces based on the following four criteria:

1. Virus Spread and Containment	2. Health System Capacity	3. Public Health System Capacity	4. Incidence Tracking Capacity
Ensures loosening of measures is appropriately timed with the progression of the epidemic in Ontario	Ensures there is an effective response to any potential case resurgence	Ensures there is an effective public health response to any potential case resurgence	Ensures that any potential resurgence in cases can be identified promptly

- The Province will take a phased approach and will follow three stages to loosen emergency measures and re-open the economy, with public health and workplace safety as the top priority.
- The Province is currently in Stage 1 of the Provincial Recovery Framework.

# Indicators for Monitoring Progress To Rebuild --Monitoring Dashboard

- Medical Officers of Health in Ontario have developed a set of indicators that would inform provincial and local decision-making on recovery issues, building on the categories of the Provincial Framework:

1. Virus Spread and Containment
2. Health System Capacity
3. Public Health System Capacity
4. Incidence Tracking Capacity

- Toronto Public Health have used these indicators to inform the Monitoring Dashboard.

## Ontario Public Health Unit Core Indicator Framework for COVID-19 Monitoring

	Virus Spread and Containment		Health System Capacity		Public Health System Capacity		Incidence Tracking Capacity	
	Provincial Framework							
Purpose	Ensures loosening of measures is appropriately timed with the progression of the epidemic in Ontario		Ensures there is an effective response to any potential case resurgence		Ensures there is an effective public health response to any potential case resurgence		Ensures that any potential resurgence in cases can be identified promptly	
Dimensions	<ul style="list-style-type: none"><li>A consistent two-to-four week decrease in the number of new daily COVID-19 cases</li><li>A decrease in the rate of cases that cannot be traced to a source</li><li>A decrease in the number of new COVID-19 cases in hospitals</li></ul>		<ul style="list-style-type: none"><li>Sufficient acute and critical care capacity, including access to ventilators, to effectively respond to potential surges</li><li>Ongoing availability of personal protective equipment (PPE) based on provincial directives and guidelines</li></ul>		<ul style="list-style-type: none"><li>Approximately 90 per cent of new COVID-19 contacts are being reached by local public health unit (PHU) officials within one day, with guidance and direction to contain community spread</li></ul>		<ul style="list-style-type: none"><li>Ongoing testing of suspected COVID-19 cases, especially of vulnerable populations, to detect new outbreaks quickly</li><li>A shift to new and other ways of testing and contact tracing to promote widespread tracking of cases</li></ul>	
Indicators and Rationale for Local Monitoring	Indicator	Rationale	Indicator	Rationale	Indicator	Rationale	Indicator	Rationale
	7-day moving average of daily new COVID-19 cases (non-institutional / congregate care setting) by specimen collection date <sup>1</sup>	Measures ongoing transmission in community settings	Per cent of acute care beds occupied <sup>2</sup>	Measures reserved capacity to accommodate future need	Per cent of newly reported COVID-19 cases (confirmed and probable) reached within 24 / 48 hours of reported date <sup>3</sup>	Measures ongoing public health unit ability to ensure timely case isolation and contact identification	Per cent of positive COVID-19 tests with a turnaround time (duration between specimen collection date and reported date) of 24 / 48 hours <sup>3</sup>	Measures ongoing ability to initiate timely case isolation
	Per cent of new COVID-19 cases that are non-epi linked (no link to confirmed case, outbreak or travel) <sup>1</sup>	Measures the degree of transmission from unknown sources	Per cent of intensive care unit beds occupied <sup>2</sup>	Measures reserved capacity to accommodate future need			COVID-19 per cent positivity <sup>3</sup>	Measures testing capacity and disease activity
	7-day moving average of daily new hospitalized COVID-19 cases by admission date <sup>1</sup>	Measures severity and state of infection in the community	Per cent of intensive care unit beds with ventilators occupied <sup>2</sup>	Measures reserved capacity to accommodate future need				
	New and cumulative number of institutional and congregate care settings in COVID-19 outbreak <sup>1</sup>	Measures the degree of transmission in vulnerable settings; potential future impact on Health System Capacity	Days of personal protective equipment stock in reserve	Measures reserved capacity to accommodate future need				

Data Sources: 1) IPHS, CORES, The COO, CCMTol; 2) Ontario Ministry of Health COVID-19 Command Dashboard; 3) Chung H, Fung K, Ishiguro L, Paterson M, et al. Characteristics of COVID-19 diagnostic test recipients, Applied Health Research Questions (AHRQ) # 2021 0950 080 000. Toronto: Institute for Clinical Evaluative Sciences; 2020.

Notes: Data source for 'Days of personal protective equipment stock in reserve' to be determined by public health unit.

Through Public Health Measures and good public compliance we have been successful to date in achieving the Responses Objectives:

1. Prevent Loss of Life
  - Avoided the large number of fatalities that were predicted
2. Preserve the Capacity of the Healthcare System
  - Did not overwhelm the healthcare system
3. Minimizing the Social and Economic Impact
  - While we still see community cases in Toronto and we will need to carefully monitor our situation, while we focus on this objective

The City's recovery and re-build efforts will include the following critical elements:

- Gradual and controlled re-introduction of economic and social activities
- Mitigation of the risks which are inherent in these activities
- Prevention of transmission through:
  - public education;
  - support for businesses and organizations;
  - careful monitoring; and
  - focussed public health management.

# Provincial Recovery Stage 1

- Ontario is in Stage 1 of the phased recovery plan.
- Some businesses and amenities, including retail stores with street-front entrances, golf courses and off-leash dog parks are allowed to open with appropriate public health measures in place.
- The City of Toronto's Recovery and Rebuild team, led by Saäd Rafi with Dr. David Mowat is providing public health guidance to support City Divisions, programs and services, external businesses and workplaces, and community agencies in defining how they resume operations.

- Guidance is developed using best available evidence about risk and mitigation measures.
- General guidance: separate documents for City Services, Businesses, Voluntary Sector.
  - Links to checklists, modular information of general applicability (e.g. elevators, cleaning protocols), posters
- Certain high-risk or complex issues require specific guidance (e.g. day camps, personal service settings, restaurants).
- For food establishments, Toronto Public Health will be providing advice to support them to reopen safely.

## Provincial Recovery Stage 2

- Announcement from the Province is expected about Orders allowing Stage 2 of re-opening.
- Work on public health guidance progresses, but anticipating timing and order of re-opening is challenging.
- Mitigation of risk will be achieved through creating distancing, cleaning and use of non-medical masks.
- Announcement on some form of regional variation of the timing of recovery, based upon local data, is expected.
- As of Friday, June 5, the Province announced an extension of the Emergency Order until June 19.

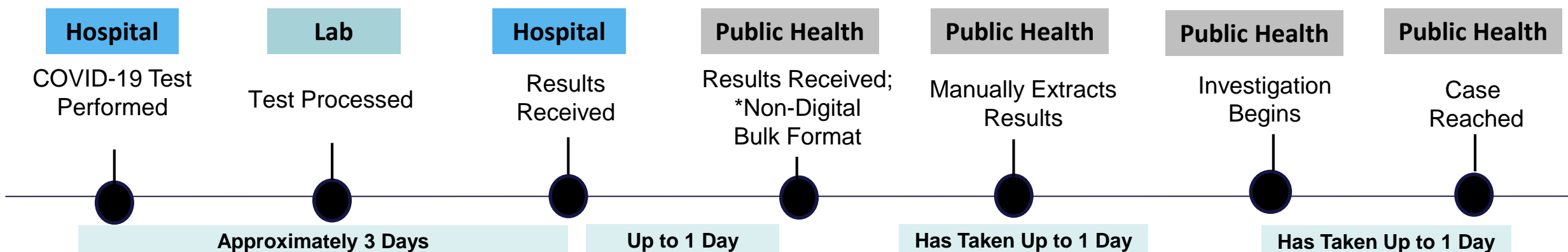
# Recommendations



# Recommendation One: Create an Efficient COVID-19 Response System

- Effective case and contact management is currently challenged by several issues related to the transfer of information from laboratories to Toronto Public Health, creating delays.

## Process to Reach Cases



## The Medical Officer of Health recommends that the Board of Health and City Council:

- Request the Ministry of Health to create an efficient system of transferring information from laboratories to public health units, including any necessary policy changes to information systems and changes to the *Laboratories Act*, or orders under the *Emergency Management and Civil Protection Act*.

- The Province leads all COVID-19 testing and provides testing guidance in Ontario.
- Testing for COVID-19 is vitally important, but concentrating only upon the number of tests performed is not an optimal strategy. Testing must be seen as a means to reduce the transmission of COVID-19 through case and contact management.
- As of May 29, the Province released the next phase of its COVID-19 testing plan, which includes:
  - 1. Assessment Centre Testing**
  - 2. Targeted Campaigns**
  - 3. Outbreak Management**

## Recommendation Two: Provincial COVID-19 Testing Strategy

- There is a need for a clear and consistent approach to COVID-19 testing outlined in a Provincial COVID-19 Testing Strategy, developed with broad input from public health and infectious disease specialists.

**The Medical Officer of Health recommends that the Board of Health and City Council:**

2. Request the Ministry of Health to urgently develop a Provincial COVID-19 Testing Strategy based upon clear objectives and the best available scientific evidence.

## Recommendation Three: Local Recovery Indicators

- Medical Officers of Health in Ontario have developed a set of indicators that would inform provincial and local decision-making on recovery issues.

### **The Medical Officer of Health recommends that the Board of Health and City Council:**

3. Request the Ministry of Health to adopt recovery indicators developed by Medical Officers of Health in Ontario to inform provincial and local recovery decision-making.

## Recommendation Four: Additional Resources for Toronto Public Health

- A large number of Toronto Public Health staff have been redeployed and recruited to support the COVID-19 response; in particular for case and contact management.
- At the same time, plans are underway to support the resumption of some of Toronto Public Health's services, such as inspection of food establishments.

### **The Medical Officer of Health recommends that City Council:**

4. Request that the City Manager work with the Medical Officer of Health to develop enhanced approaches to providing coordinated support to Toronto Public Health based on the experience to date (e.g., human resources, legal services, information technology, procurement and other support functions), for use in response to future COVID-19 activity and other health emergencies.