

# **An Update on COVID-19 Presentation for the Board of Health**

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**Medical Officer of Health  
Toronto Public Health**

**September 21, 2020**

# **Overview: How We Got Here, Where We Are**



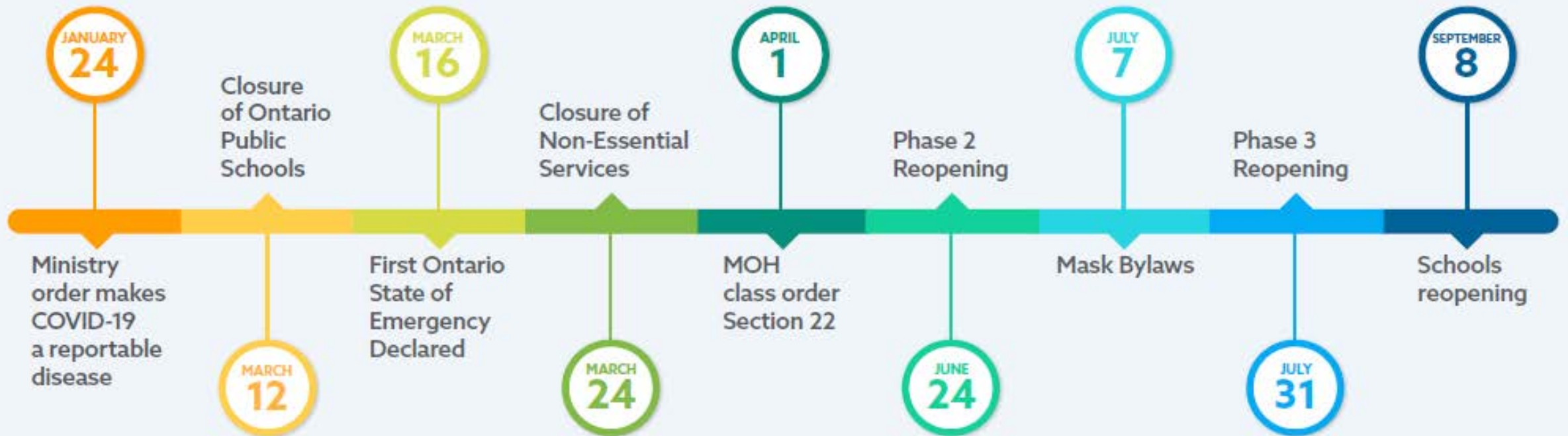
- Minimize loss of life to COVID-19
- Conserve the capacity of the healthcare system to minimize loss of life and maximize chance of recovery
- Minimize adverse effects on our economy and our general health, well-being and quality of life



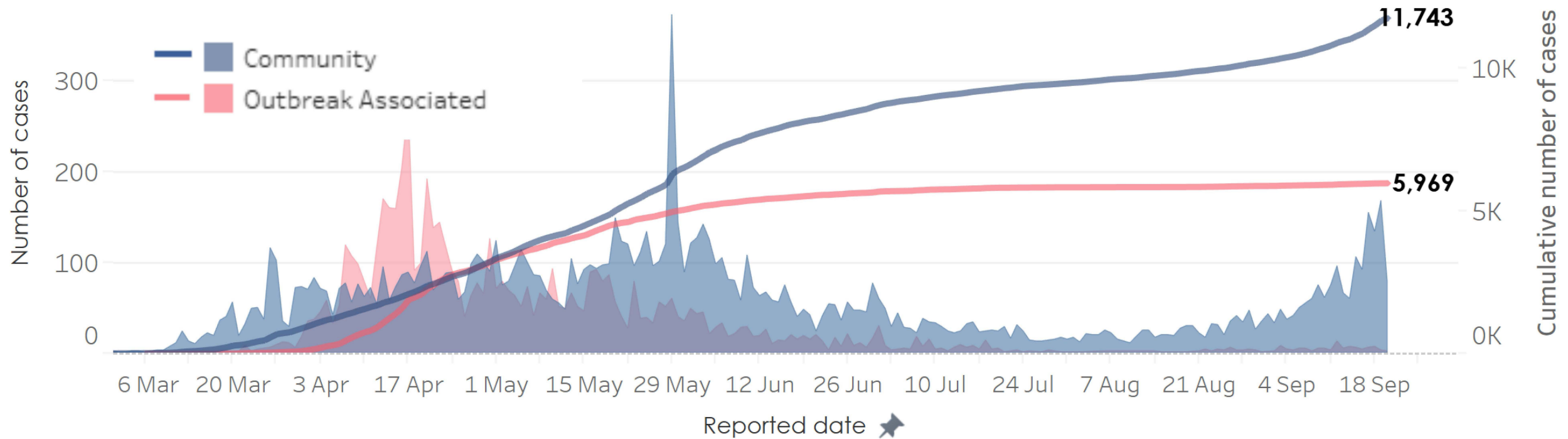


# Key Milestones in COVID-19 Response

Public Health Emergency requiring an unprecedented response



## New COVID-19 cases, by setting



## Current Data and Trends

## SUMMARY OF COVID-19 CASES IN TORONTO



All Cases	
Case Count*	17,528
Recovered Cases	15,322
City Incidence Rate per 100,000 People	591
Fatal Cases	1,178
Ever Hospitalized	1,985
Ever in ICU	426

Currently Hospitalized	33
Currently in ICU	8

As of September 19, 2020



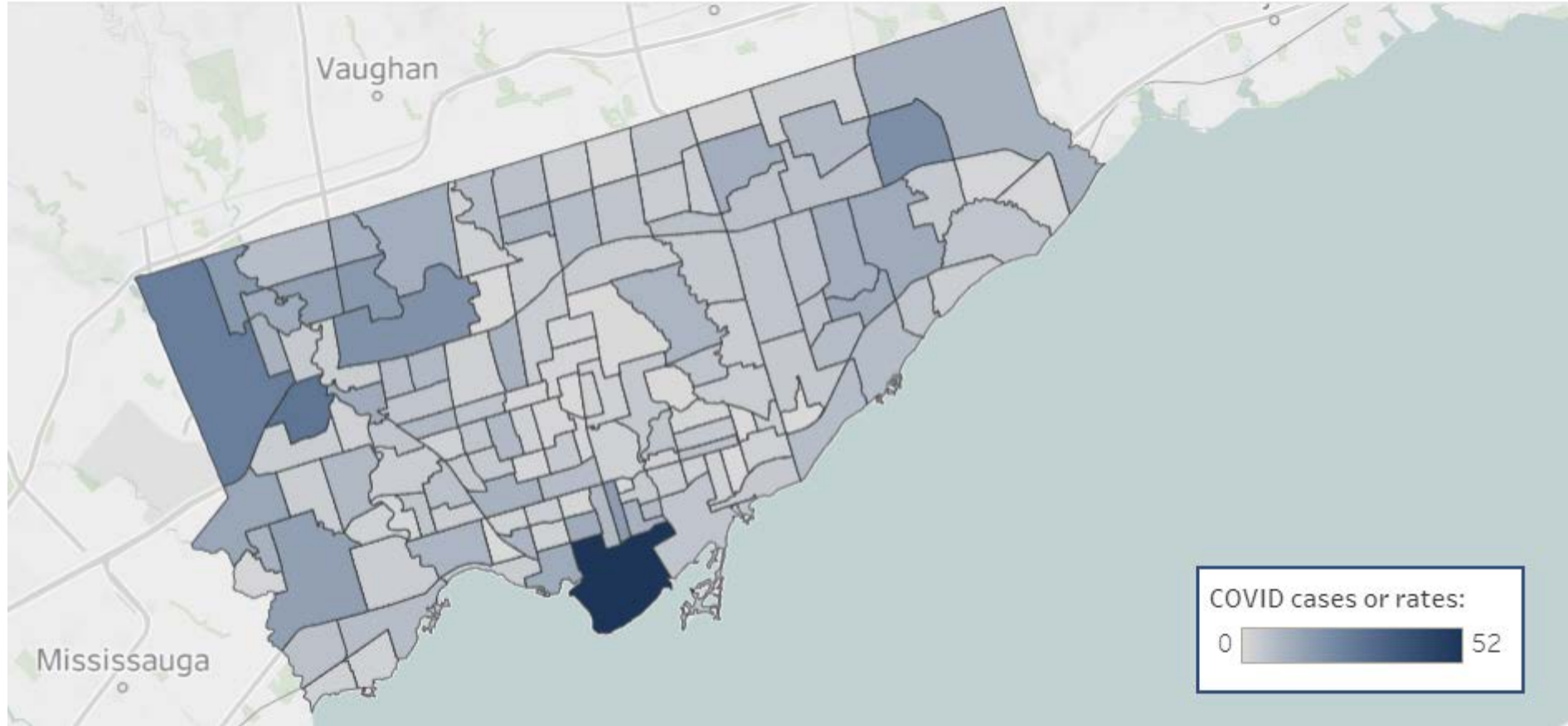
CASES IN THE COMMUNITY	66%
Recovered Cases	10,348
Median Age At Time of Illness	44
Percent Female	49%
Percent Male	51%
Fatal Cases	257
Median Age of Deaths	72
OB ASSOCIATED CASES**	34%
Recovered Cases	4,974
Median Age At Time of Illness	61
Percent Female	61%
Percent Male	36%
Fatal Cases	921
Median Age of Deaths	88

\*Includes confirmed and probable cases

\*\*Outbreak associated cases include persons with COVID-19 within a defined group or setting. These are generally in healthcare (e.g., long-term care homes, hospitals) and residential or congregate settings (e.g., homeless shelters, group homes), but can also be in workplaces and other settings

†Gender was unknown or other for some cases

# Neighbourhood Map – Sporadic Case Counts in Last Three Weeks



## COVID-19 Monitoring Dashboard

**Current Overall Status: Yellow**

Indicators Need Attention

Red

**Yellow**

Green



Virus Spread & Containment

Status: **Yellow**



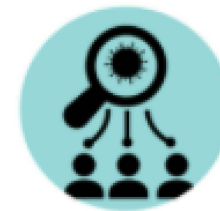
Laboratory Testing

Status: **Yellow**



Health System Capacity

Status: **Green**



Public Health System Capacity

Status: **Green**

## Virus Spread and Containment

Status: YELLOW - Indicators need attention

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

89

Goal: sustained decrease over 14 day period

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

1.7

Goal: sustained decrease over 14 day period

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

2

Goal: sustained decrease in active outbreaks



## Laboratory Testing

Status: YELLOW - Indicators need attention

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

**25%**

within 24 hours  
(7 day moving average)

Goal: ≥ 60% within 24 hours

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

**81%**

within 48 hours  
(7 day moving average)

Goal: ≥ 80% within 48 hours

COVID-19 Laboratory Tests Percent Positivity,  
previous week average<sup>2</sup>

**1.3%**

See technical notes for updated indicator definition (as  
of June 15)

Goal: <10% positivity

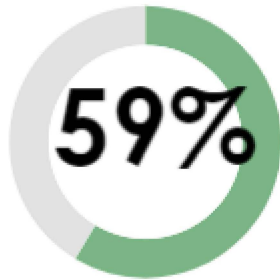


# Monitoring Dashboard – Health System Capacity

## Health System Capacity

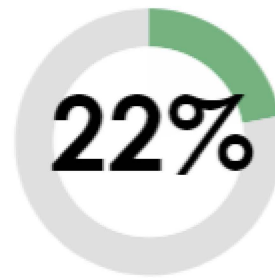
Status: GREEN - Indicators at goal

ICU bed occupancy rate<sup>3</sup>



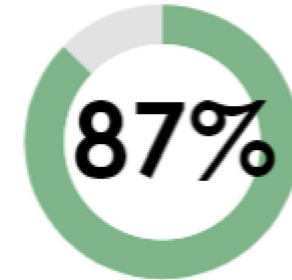
Goal: <90% occupancy

ICU-ventilator bed occupancy rate<sup>3</sup>



Goal: <60% occupancy

Acute bed occupancy rate<sup>3</sup>



Goal: <90% occupancy

Estimated number of days of PPE available, Toronto Hospitals<sup>4</sup>

N95 Masks

484



Surgical Masks

114



PPE Eyewear

177



Gloves

79

## Public Health System Capacity

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



**92.6%**

September 13 to September 15, 2020

Goal: > 90% contacted

Percent of newly reported contacts successfully reached within 24 hours



**98.5%**

September 11 to September 13, 2020

Goal: >90% successfully reached

Over the past month:

- Increasing trend in cases since Stage 3 reopening July 31<sup>st</sup> 2020
- Infections are widely spread across the City
- 2/3 of cases have been less than 40 years old

- Approximately 50% of COVID-19 cases reported to date are confirmed as having acquired the illness from a close contact
  - This includes exposure in the household, at social events, in workplaces
- About 20% of cases are from community transmission, meaning the infection cannot be traced to a known link
- About 13% of cases list travel as their source of infection, many of these cases are linked to travel within Canada

# Responding to Resurgence

1. Adapt our organization to meet the response
2. Adjust Public Health Strategies throughout resurgence
3. Immunization: Flu and COVID-19
4. Operate Toronto COVID-19 Isolation Centre
5. Adjust COVID-19 messaging
6. Advocate for Provincial Policy & Extend local by-law for physical distancing, bars/restaurants and masks
7. Work with the Province to Strengthen the System

# 1. Adapt Our Organization to Meet the Response

PHIM/ MOH: Dr. Eileen de Villa					
Public Health Programs	COVID-19: Operations	COVID-19: Planning	COVID-19: Liaison	COVID & Non-COVID: Finance & Administration	COVID & Non-COVID Strategy Support for PHIM and MOH
<b>Dr. Melvin Hsu</b> <b>Dr. Rita Shahin</b>	<b>Dr. Howard Shapiro</b> <b>Karen Beckermann</b>	<b>Dr. Michael Finkelstein</b> <b>Effie Gournis</b>	<b>Nicole Welch</b> <b>Dr. Vinita Dubey</b>	<b>Althea Hutchinson</b> <b>Teresa Defina</b>	<b>Gayle Bursey</b> <b>J. Figliano-Scott</b>
<b>Healthy Environments</b> <ul style="list-style-type: none"> <li>Environmental Health Risk Assessment, Inspection and Investigation</li> <li>Food Safety</li> <li>Vector borne illness</li> </ul>	Community Case and Contact  Outbreak: Long-term Care & Retirement Homes  Outbreak: Congregate Settings  Data Management	Epidemiology and Data Analytics Unit  Situational Assessment  Evaluation and Quality Improvement  Mass Immunization Planning	Emergency Operations Centre Leads: Interdivision  COVID-19 Enforcement Team  School COVID-19 Response Team  Community Engagement and Outreach  General Liaison and Recovery	Safety  Logistics & Supplies  Human Resources  Information Technology  Finance  Hotline/Call Centres  Information Management & COVID Documentation  Granting Programs e.g. Toronto Urban Health Fund and Student Nutrition Program	Communication and COVID Emergency Information Management  Strategic Support for COVID response: Board of Health, Council, Strategy Command, Provincial Federal Issues Management  Strategic Support for Critical Public Health Programs: Board of Health Council, Provincial & Federal Issues Management  Policy Development
<b>Communicable Disease Control</b> <ul style="list-style-type: none"> <li>Communicable Disease Notification Unit</li> <li>Communicable Infectious Disease Infection Control (Blood borne, Infection, Prevention and Control)</li> <li>Infectious Disease Program</li> <li>Communicable Disease Liaison Unit, Personal Service Setting Inspections)</li> <li>Sexual Health Clinics</li> <li>Sexually Transmitted Infections</li> <li>Tuberculosis Program</li> <li>Harm Reduction Services</li> <li>Sexual Health Information Online Ontario</li> </ul>					
<b>Dental &amp; Oral Health</b>					

# 1. Adapt Our Organization to Meet the Response

Work with the province and stakeholders to develop strategies to support staff to meet the competing demands related to COVID-19 response and critical public health programs.

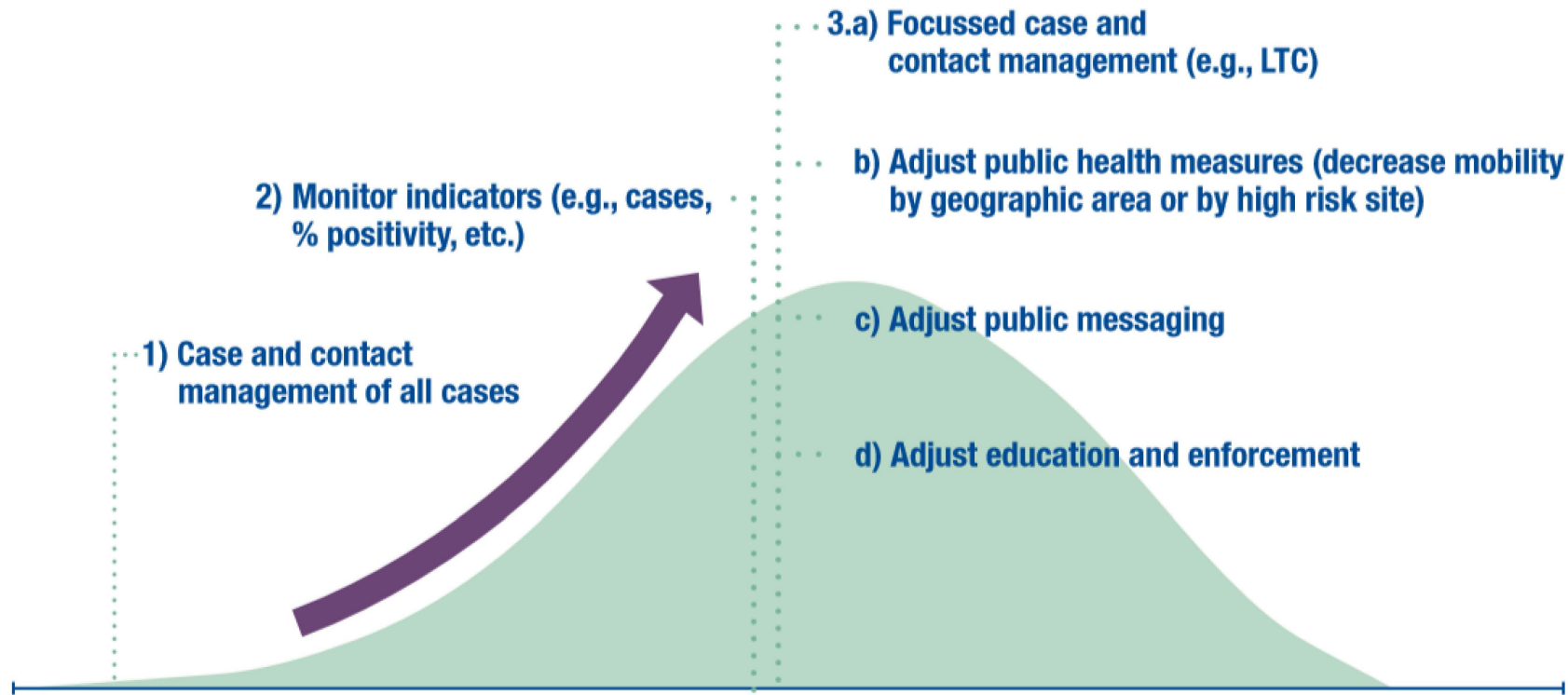
Redeploy as many staff as possible, including those on secondment, to sustain the response.

Carefully assess how resources are deployed and look to partners for additional support.



## 2. Adjust Public Health Strategies

### Public Health Strategies during Resurgence



# 3. Immunization: Flu and COVID-19



### Toronto COVID-19 Isolation Centre

- Partnered with Public Health Agency of Canada and Health Canada
- Received \$13.9 Million dollars to fully fund the isolation centre for one year
- Isolation Centre opened September 12 and can house up to 140 people at a time,
- The site will provide isolation space for people with COVID-19, or those at risk of COVID-19, who are not able to adequately self-isolate at home. Individuals volunteer to stay at site.
- While at the site, an individual is provided with lodging, daily meals and incidentals, and daily check-ins by phone from TPH Communicable Disease Investigator.

# 5. Adjust Messages to Evolving Situation

- As much as possible, limit your contact with people who don't live with you
- Three steps for self-protection:  
    Watch your distance, Wear your mask, Wash your hands
- Think about where you're going and whether it is necessary

## 6. Advocate for change in Provincial Policy and Local By-Laws

Clarify “Social Gatherings” and discuss additional options

Support Enhanced Enforcement on Existing Restrictions

Extend local By-laws for Distancing, Bars/Restaurants and Mask Requirements

# 7. Working with the Province to Strengthen the System

## Toronto Public Health continues to work with the Province to:

- Explore new testing technologies and develop a clear testing strategy aimed at:
  - Suspected cases, contacts and high-risk/high-need situations
  - Mobile testing for school community
- Improve the turnaround time for laboratory tests
- Identify indicators/triggers to rapidly shift to new approaches, using objective criteria to respond to resurgence

# Recommendations

# Recommendation One: Implement strategies to mitigate health inequities

- Toronto Public Health is conducting surveys and consultations to further develop tailored responses to meet the needs of marginalized communities, including those related to social determinants of health.
- Toronto Public Health is employing multilingual outreach workers to increase awareness and understanding of COVID-19 and to enhance the health promotion capacity of community agencies.

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

Request the Medical Officer of Health work with the Executive Director of Social Development, Finance and Administration, the Executive Director of the Housing Secretariat and the General Manager of Toronto Employment and Social Services to explore how to implement strategies such as those identified in this report, to address the social determinants of health for the City of Toronto's most vulnerable populations who have been adversely affected by the COVID-19 pandemic.



## Recommendation Two: Ask the Ministry of LTC to invest in on-site infection control expertise

- Given the challenges during wave one related to maintaining infection control and prevention support in the long-term care home sector, it is important going forward to ensure adequate resources are in place for the homes to implement effective infection prevention and control measures.
- While long-term care homes are mandated to provide on-site infection control it is challenging for homes to ensure that there are dedicated staff to provide this function.

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

Urge the Ministry of Long-Term Care to fund on-site, dedicated infection control specialized expertise at each long-term care facility and invest in training for existing practitioners to contribute to system-wide improvements related to infection control within each site.

## Recommendation Three: Ask the Government of Canada to improve quarantine data-sharing system

- At a federal level, there exists a significant delay between the time a returning traveller provides destination information to the Canada Border Services Agency and its subsequent transfer to the Public Health Agency of Canada.
- This prevents timely enforcement of the Isolation Order by appropriate bodies including, Toronto Police Service. There exists opportunity for e-solutions to improve timeliness and result in improved ability for local enforcement to gain compliance with the Isolation Order.

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

Urge the Federal Government to utilize a data system that will quickly transmit information about arriving international travellers to local enforcement authorities to support compliance with the Quarantine Act.

**Recognizing that this is the challenge of our lifetime, going forward we need to:**

- Evaluate and create innovative strategies to respond to resurgence
- Plan to deliver mass immunization when COVID-19 vaccines are widely available
- Continue to provide strong case and contact management and policy change in order to:
  - Minimize adverse effects on our economy
  - Conserve the capacity of the healthcare system
  - Preserve general health and well being.