

**Update on COVID-19**

**Dr. Eileen de Villa, Medical Officer of Health**

**April 21, 2020 at 3:45 p.m.**

**Members' Lounge, Toronto City Hall, 100 Queen St. W.**

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- As of 12:30 p.m. today there are 3,820 cases of COVID-19 in Toronto. This includes 3,462 confirmed cases and 358 probable ones. There are 281 cases that have been hospitalized, and there are 109 in intensive care units. I'm sad to report that we continue to see deaths in our community. In total 190 people have died of COVID-19 in Toronto. On behalf of my team, we offer our sincerest condolences to everyone who has lost their loved ones to COVID-19.
- Today, I'm providing you with a further update on our local COVID-19 data. In particular, within the context of what is occurring provincially and nationally.
- The first slide shows that the trajectory for cases of COVID-19 is lower for Toronto, Ontario and Canada than other countries such as Spain and the United States. These countries have unfortunately seen a large number of cases since their COVID-19 outbreaks began.
- We believe, at this point, that the number of cases to date in Canada, Ontario and locally in Toronto is lower than originally forecasted. This is due in part to the strong public health measures that were put in place early in our outbreak and the fact that our residents took these measures seriously. Thank you everyone for following the advice to stay home and practise physical distancing. I know it has been difficult but I hope you are now seeing the benefits of these actions.
- The second slide shows us the actual number of cases we have experienced in Toronto over time. Specifically, it shows that we believe we are now in the peak period of the epidemiological curve of our community outbreak.
- I use the term "peak period" because a peak is really not just one day, nor is it one number, as the number of cases on any day during the peak will vary. The reality is that we will only know when we have hit our peak for COVID-19 cases after it has passed. This is because we need to see the number of new cases levelling and then going down to know that we have experienced this milestone and see exactly what has occurred.

## Public Health

- Managing outbreaks is part of our core work in public health. We do analyses to make predictions to inform our public health actions. We monitor what is occurring to adjust our actions as needed. It is only at the very end of an outbreak that we can know exactly what happened. This occurs once we have all of the confirmed facts and numbers.
- In this instance, as it relates to slide two, as we move down the curve, the timeline of the outbreak may be shorter or longer. This depends in part on our ability as a community to remain diligent in following the public health and physical distancing measures we have put in place.
- Slide three illustrates how we can now look back to understand what has occurred in our city. This slide shows the number of hospitalizations, ICU admissions and deaths to date. This information helps us understand how we have used our healthcare system resources during this outbreak.
- As I shared with you yesterday, the information on slide three should be considered with cautious optimism. It illustrates that we are seeing our curve flattening.
- This slide also illustrates the impacts of our collective work to prevent overburdening of our healthcare system, and to ensure that critical health resources remain in place for those who need them most.
- This is an important indicator for us to continue to monitor as we move down the curve. It will help us to plan and know when can begin to ease some of our local public health and physical distancing measures.
- It is critical that we ensure that we have healthcare resources and capacity in place to manage outbreaks we are seeing among vulnerable groups including our long-term care homes and shelter settings.
- The City is looking to support the ten long-term care homes it operates through the redeployment of some members of my team at Toronto Public Health, particularly registered nurses and registered practical nurses, whose unique skills are needed to provide care to some of our city's most vulnerable residents.

- We also need to ensure that our health system remains strong to help to continue to manage this outbreak through the second wave. We know that we will experience another COVID-19 wave because we have yet to reach a high level of immunity in our community.
- We will continue to see COVID-19 spreading in our community until we start to experience herd immunity. This will not happen until many people are infected with COVID-19 and recover and they build immunity that lasts, or we develop a vaccine. We know that treatments and a vaccine for COVID-19 are several months, if not more than a year away. This is why we continue to ask everyone to stay home and practice physical distancing so that the rate of infection does not overburden our local health system.
- The final slide tells the tale of the two outbreaks we are experiencing. We know from our data that we have an outbreak within the general community which we believe is peaking.
- A key point on this slide is the information on the cases in institutions. Of note, we see that females represent approximately 60% of our cases in long-term care homes, retirement homes, chronic care and hospital settings. We believe that this is because on average females tend to live longer than males and therefore comprise a significant proportion of people in these settings. In addition, knowing that these data also reflect staff cases, we know that women are more likely to be employed in professions in these settings.
- These slides summarize some of the main types of data we are analyzing at this time. In addition, I am pleased to announce that starting today, a data dashboard with data that depicts the two COVID-19 outbreaks we are experiencing —community and institutional — will be available on our website. The dashboard will be updated frequently so that you can track in real time how the outbreaks are evolving in our community.
- Finally, I have been asked to provide updates about the situation in specific long-term care homes and shelters:
  - At Eatonville Care Centre, there are approximately 130 COVID-19 cases at this home, which is an increase of 16 cases since yesterday. Tragically, there have been 30 deaths at this home.



## Public Health

--Lastly, at the Willowdale Welcome Centre, there are approximately 110 positive COVID-19 cases in this setting, associated with the testing efforts undertaken at this site. These are premised on verbal reports received today.

- The large number of cases reported in these settings is due to a very proactive approach that has been taken within these facilities where all residents and staff have been tested to ensure that there is a good understanding of the status of their outbreaks. This approach also allows for thorough follow up to occur and for the situations to be well-managed going forward.
- This concludes my remarks for today. In the meantime, please remember that the most important thing you can do is to continue to stay home, stay safe and take care of each other.

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