

Update on COVID-19
Dr. Eileen de Villa, Medical Officer of Health
January 25, 2021 at 2 p.m.
Toronto City Hall, 100 Queen St. W.

- Thank you, Mayor Tory, and good afternoon. Today I am reporting 767 new cases of COVID-19. 13 more people are in hospital, bringing the total to 508. Sadly, 15 people have died.
- With regard to COVID-19 data, I want to let you know about a temporary change in our reporting that will be reflected next week.
- We will still provide the new cases over the previous day, as well as total cumulative cases, new hospitalizations since the previous day, ICU admissions, and intubations, deaths since the previous day and cumulative deaths.
- The reason for the temporary change is that Toronto Public Health is migrating to the provincial case and contact technology system.
- This will bring all public health units in the province into the same system.
- This is entirely technology systems-related, and the project is expected to be completed next week.
- The project does not affect Toronto Public Health's day-to-day operations, so otherwise it is entirely business as usual.
- On another note, there is a lot of discussion today about COVID-19 variants and the risks they pose.
- The U.K. variant B.1.1.7 is now confirmed as the strain of COVID-19 that spread through Barrie's Roberta Place long-term care home.
- My understanding is that 129 people lived there.



Public Health

- 127 tested positive, as have almost ninety people who work there – about half the staff.
- 40 people have died.
- This is a terrible price paid and a stark warning for the rest of us.
- Toronto Public Health has today contacted all long term care and retirement homes, as well as complex continuing care and rehabilitation hospitals, to get them to review, audit, and reinforce their current infection prevention and control measures for COVID-19.
- These measures include screening of residents, staff and anyone who must necessarily enter these facilities, universal masking, supply and use of personal protective equipment, consistent, thorough hand washing protocols and requirements, physical distancing measures, environmental cleaning, surveillance testing and auditing.
- Other congregate and group settings are being similarly advised.
- Toronto Public Health's Communicable Disease Liaison Unit is engaged, along with our long-term care and retirement home liaisons, and the infection prevention and control advisors and supports available through Toronto hospitals.
- In this environment it is a relief that the first round of vaccinations have been delivered in Toronto at all 87 long-term care homes and all high-risk retirement homes.
- The fact is infection prevention and control is truly everybody's job now – everywhere in Toronto.
- There is still a lot of work to do to conclusively understand the extent to which the known variants are more transmissible or if they cause more serious disease.

- We know the U.K. B.1.1.7 variant is in Ontario.
- We must assume it will spread.
- With that in mind the most important thing to do is to act in ways that protect yourself and everyone around you.
- COVID-19 is a dangerous virus in any form.
- We never know if infection will lead to mild illness or to worse.
- A survey out of the U.K. in November found that 1 in 5 people still had symptoms five weeks after their acute COVID infection had passed.
- 1 in 10 identified symptoms 12 weeks or more after their initial infection.
- This is a phase of the pandemic where the choices we make will have real impacts on the health of others – for better or worse.
- We can create barriers to variants spreading widely – if we avoid situations where COVID-19 can spread.
- You have heard before what I am going to say next.
- I hope you will take it to heart more than at any other time.
- This means keeping apart as much as possible.
- It means making as few exceptions to contact as we can.
- So I want to return to actions I advised often last fall.
- Every time you have to make a decision that could put you in contact with other people – or require you to leave home – ask yourself: is this something I have to do or is this something I want to do?

- And if it's something I want to do, can I not do it? Can I defer it or can I do it online?
- And if none of those are possible, what is my plan to make the activity as low contact as I possibly can?
- You know I am sympathetic to the sacrifices and the strain of life in the COVID-19 pandemic, but for now the time has passed for focusing on impositions, inconveniences or frustration.
- This current situation, in the simplest terms, is not good.
- For now, we need to focus on things as they are – and do everything we can to make sure things don't get worse.
- Many people today are noting an anniversary we'd like to forget.
- A year ago we announced the first confirmed case of COVID-19 in Toronto.
- I wonder who imagined then what life would look like a year later?
- Almost 83,000 cases in Toronto.
- More than 5,200 people hospitalized.
- And 2,324 lives have been lost to COVID-19.
- I believe it is possible that in 2021 we can pick up with the best of where we left off: with schools back, with the freedom to move, with one another's company – and do it all in safety.
- But there's still a way to go and it will demand a lot from everyone.
- But we have learned a lot.
- And we know what to do.

- I encourage you to imagine that a year from now life can look so much better than it does right now – and to lean in hard in the effort to get us there sooner, healthier and together.

-30-

Media contact: Lenore Bromley, Toronto Public Health, 416-338-7974,
Lenore.Bromley@toronto.ca