

Coronavirus: COVID-19
Current Update – April 16 2021

As of April 16th, 2021, Canada has a total of 1, 103, 441 confirmed cases of COVID-19. Ontario has 408, 383 cases and Toronto has 130, 502 cases.

Ontario breaks daily COVID-19 record yet again with more than 4, 800 new cases

Yesterday, Ontario reached a new high of cases, and today it happened yet again. Today, 4, 812 new cases were recorded, up from yesterday's 4, 726 cases.

Of today's new cases, 1, 469 are in Toronto, 851 in Peel Region, 491 in York Region, 366 in Ottawa, 268 in Durham Region, 204 in Hamilton, 192 in Niagara Region, 175 in Halton Region, and 123 in Middlesex-London. The seven-day average is 4, 292 new cases per day.

Tragically, the number of patients in an Intensive Care Unit (ICU) with the disease has also reached an unprecedented high: 701 people. Of those patients, at least 480 of them are breathing with the help of a ventilator.

The medical director of critical care at Michael Garron Hospital said the surge in ICU cases will likely mean that hospitals will have to soon put a triage protocol in place. This means that doctors will have to prioritize patients based on their likelihood of survival.

“Every hospital has gone through simulation of this,” said Dr. Michael Warner. “It is our greatest fear and I actually can't see a situation where some form of triage doesn't take place.”

In early April, the Ontario COVID-19 Science Advisory Table said that people who contract the COVID-19 variants have a 103% increased risk of ending up in an ICU and a 56% increased risk of death. In the last 24 hours, 25 more people have died due to the virus.

Provincial officials are reporting another 2, 897 confirmed cases of the UK variant in lab-positive COVID-19 tests, as well as 4 cases of the South African variant and 11 of the Brazilian variant. In total, scientists have confirmed 30, 175 cases of the UK variant in Ontario.

In the past 24 hours, more than 115, 634 doses of a COVID-19 vaccine were given out. So far, over 341, 933 Ontarians have received both doses. This marks the third day in a row in which more than 100,000 people were given a dose of a vaccine.

Source:

<https://toronto.ctvnews.ca/ontario-breaks-daily-covid-19-record-again-with-more-than-4-800-new-cases-1.5390144>

Ontario releasing new COVID-19 modelling data as cases soar

At 1:00 PM on Friday, new modelling data was presented by Dr. Adalsteinn Brown, the co-chair of Ontario's COVID-19 science advisory table. He was joined by Ontario's Chief Medical Officer Dr. David Williams.

These are the most important take-aways from the modelling data:

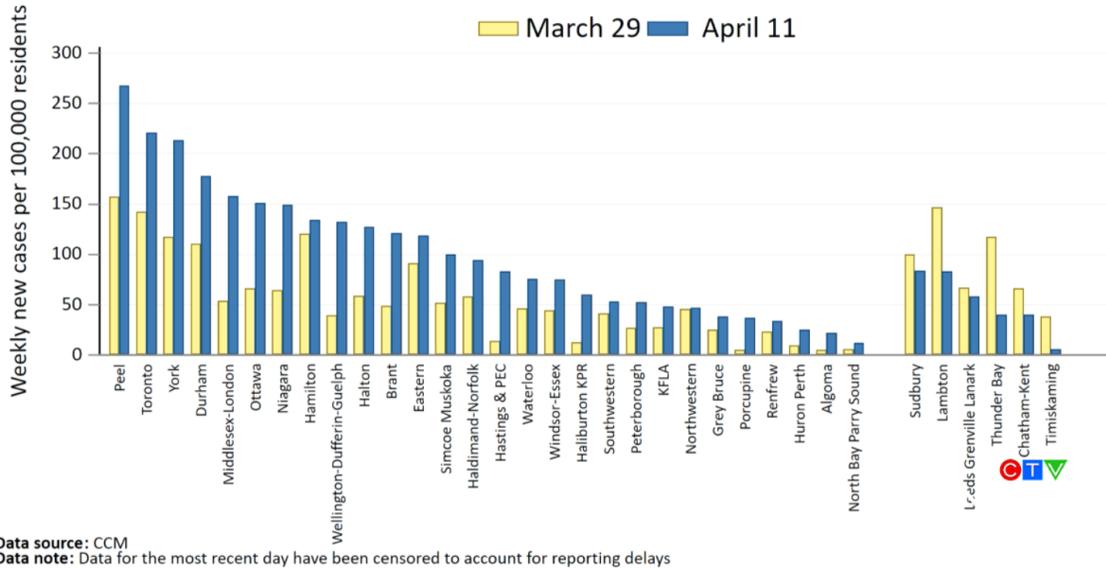
- COVID-19 cases, hospitalizations, and Intensive Care Unit (ICU) occupancy are at their highest levels since March 2020, and variant cases continue to rise sharply.
- The number of people in ICUs across the province is compromising care for all patients.
- Although vaccination is improving the situation, vaccination is not reaching people who are at high-risk fast enough to counteract the levels of serious illness due to the virus.
- Without stronger, system-level, public health measures and immediate support for essential workers and high-risk communities, high case rates will persist into the summer, and perhaps through it.
- People in Ontario can help themselves and others by limiting leaving the house to trips that are truly necessary, as well as always wearing a mask and staying 6 feet apart when you are in contact with anyone outside of your household.

Below are some graphs from Dr. Brown's presentation. Under each graph, there is an explanation of what that data means. All of these explanations come from Dr. Brown.

After these graphs, there are quotes from Dr. Brown and Dr. Williams in response to questions from the community.

Graph 1:

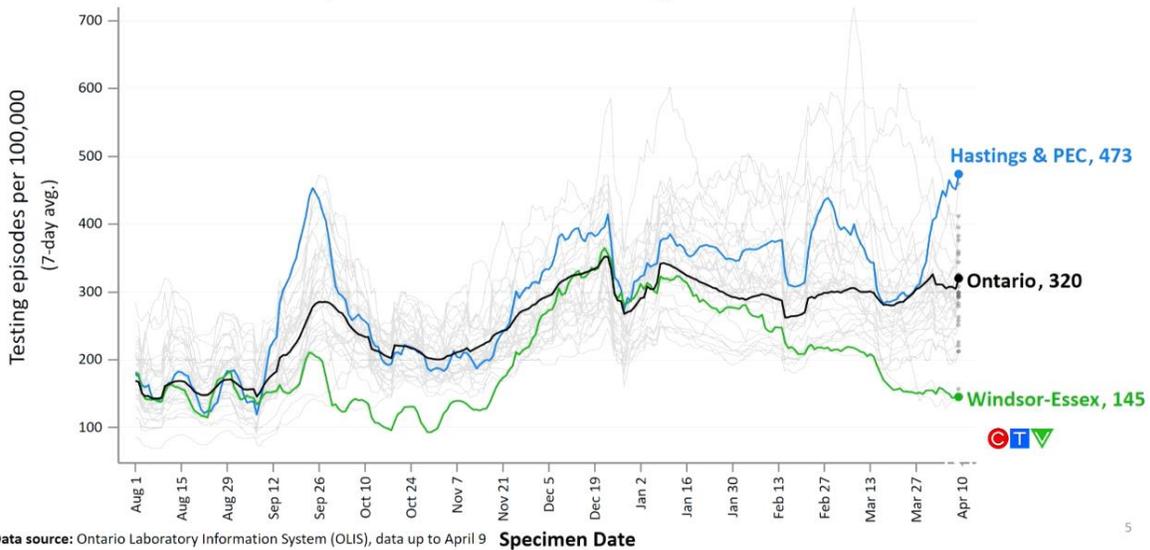
Cases are **rapidly** increasing in most Public Health Units



This graph compares the number of new cases per 100,000 residents based on data that is two weeks apart. It shows that cases are rapidly increasing in most public health units. Dr. Brown noted that many public health units are seeing this number double.

Graph 2:

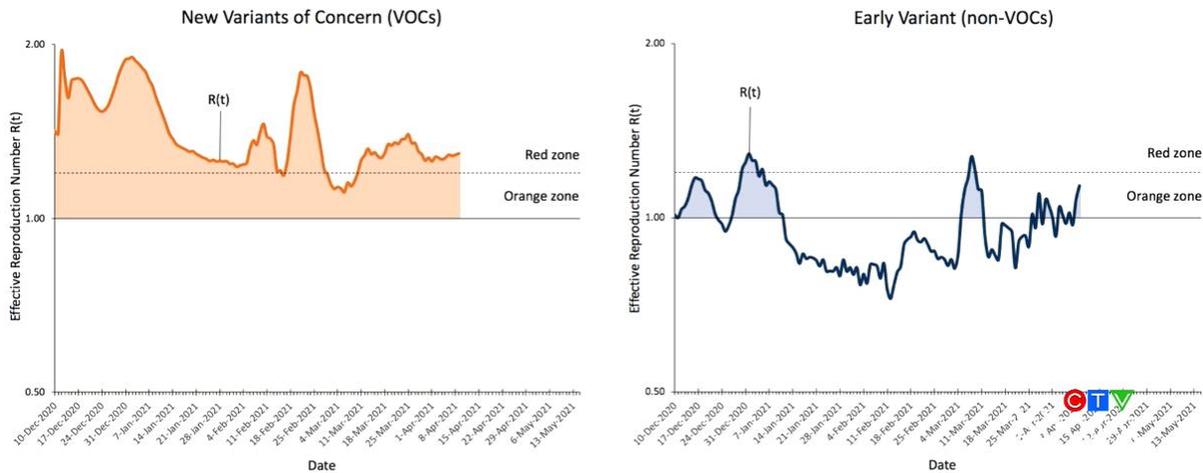
Ontario testing rates are flat – the increase in cases is because there are more cases, not more tests being done



This graph shows that the rate of the number of tests being done in the province is “flat”, meaning that the increase in cases is **not** the result of more cases being done. Dr. Brown described the increase in cases as exponential, substantial, real, and sharp.

Graph 3:

The number of variant cases continues to rise and variants now dominate, but even the original strain is rising.

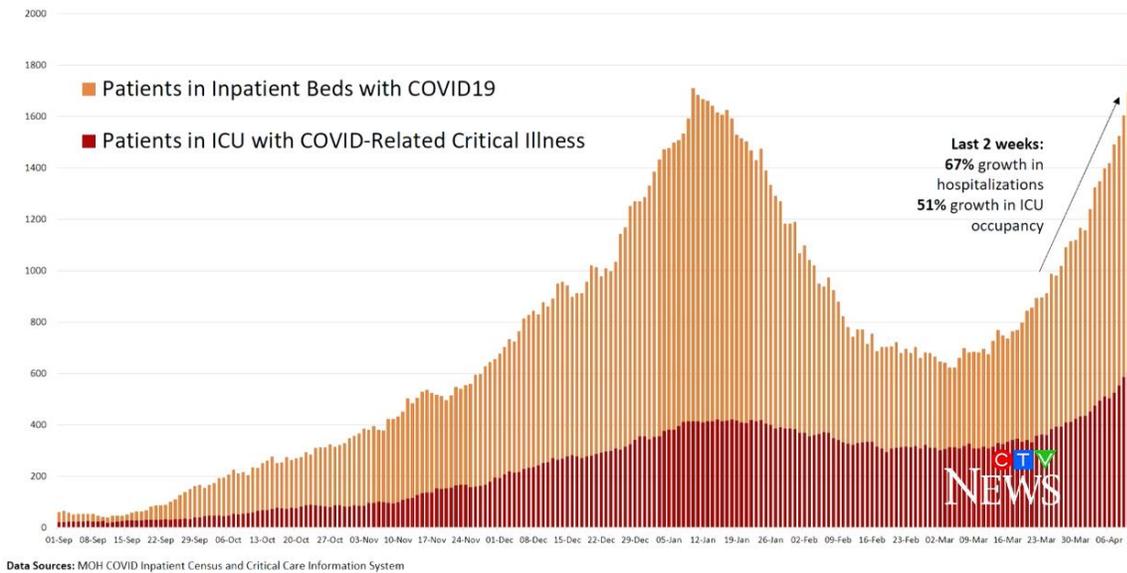


This graph shows that the number of cases of COVID-19 variants continues to rise, and variants now dominate the total number of COVID-19 cases. We’re also seeing a rise in cases of the original strain, which includes earlier variants of COVID-19 that came from China.

Dr. Brown added: “We have known that these variants of concern are more transmissible.” The fact that the Effective Reproduction Number is above 1 is a sign that cases will continue to grow substantially and rapidly.

Graph 4:

A record number of Ontarians are in hospital due to COVID-19



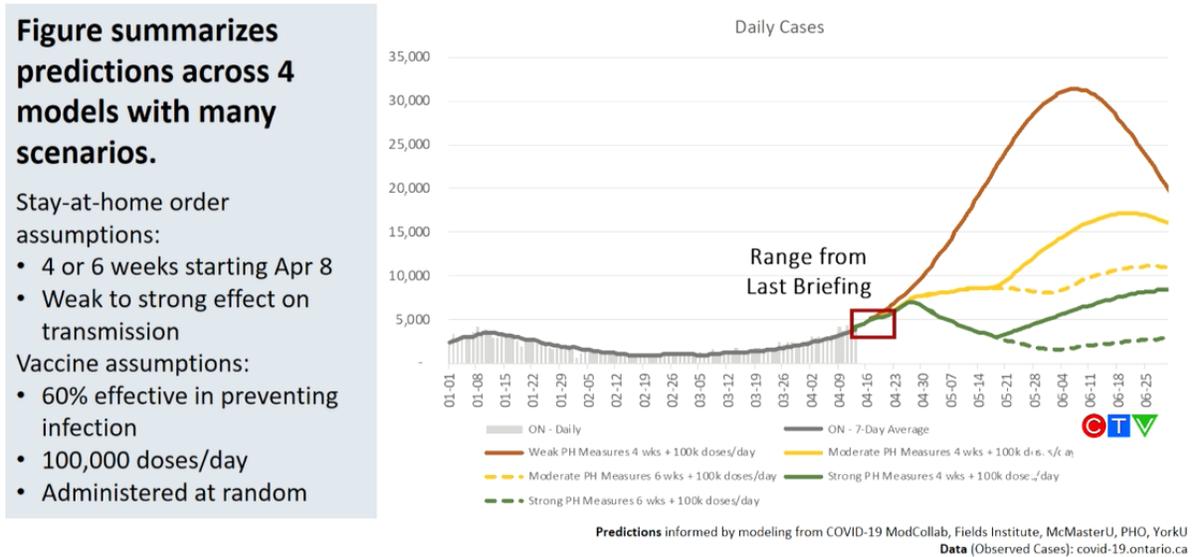
Currently, Ontario's hospitals have the highest number of patients infected with COVID-19 than ever before during the pandemic.

Why is that? At the end of the first wave, ICUs had a chance to clear out all of their patients, so that they were emptier. As a result, ICUs were able to accommodate a high volume of new patients during the second wave. The number of hospitalized people is currently much higher than ever before because the ICUs are filling up with new patients while they are still treating patients from the second wave.

Earlier in the presentation, Dr. Brown noted that 70 people were admitted to ICUs across the province within the past 24 hours. On top of that, people who are infected with a variant of concern are more likely to be hospitalized and admitted to an ICU.

Graph 5:

A 6 week stay-at-home order with a vaccination rate of at least 100K doses per day is the only way to flatten the curve.



This graph shows scientists' predictions of how COVID-19 cases will change during the next two weeks of the third wave. The red box on the chart shows that the scientists' predictions from two weeks ago were accurate when you look at the real cases that we are seeing now.

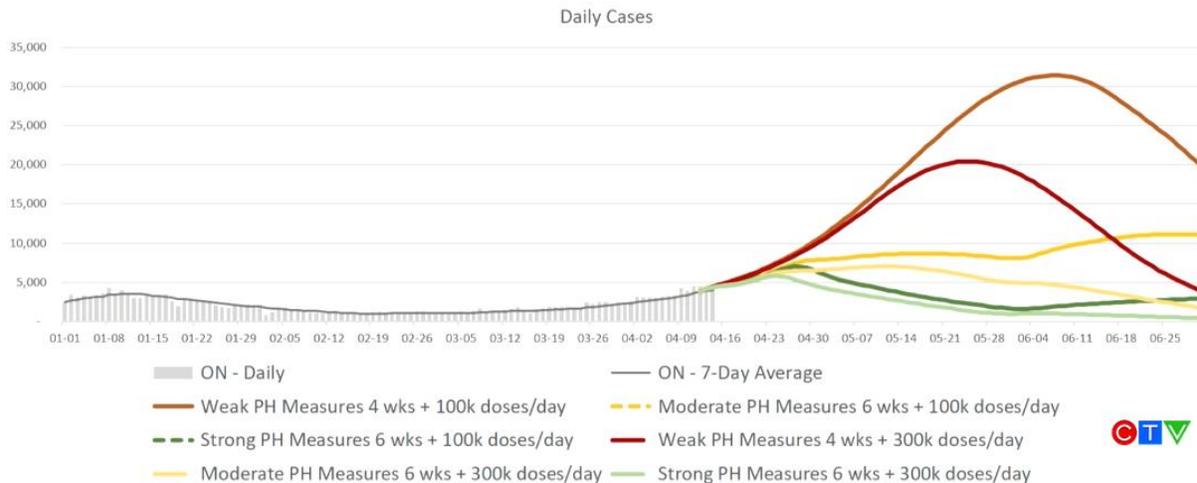
These red, yellow, and green lines represent how the next two weeks could look based on different levels of public health measures. The red line represents how the curve will grow if there are weak public health measures in place, including no lockdown. The solid yellow line represents how the curve will grow if there are moderate public health measures for 4 weeks. The dotted yellow line represents how the curve will grow if there are moderate public health measures for 6 weeks. Note that the yellow and red lines still show an increase of cases.

According to this presentation, the only way to flatten the curve is to have strong public health measures, which are represented by the two green lines. The solid green line represents how the curve will grow if there are strong public health measures for 4 weeks. Note that the number of cases is expected to increase again. The dotted green line represents how the curve will grow if there are strong public health measures for 6 weeks. Note that the number of cases does not increase as much as the dotted green line, the yellow lines, and the red line.

All of these numbers are dependent on a variety of variables, which are listed in the grey box. Note that one of the assumptions is 100,000 doses of vaccines given per day. If more or fewer doses of vaccines are given, these numbers would change.

Graph 6:

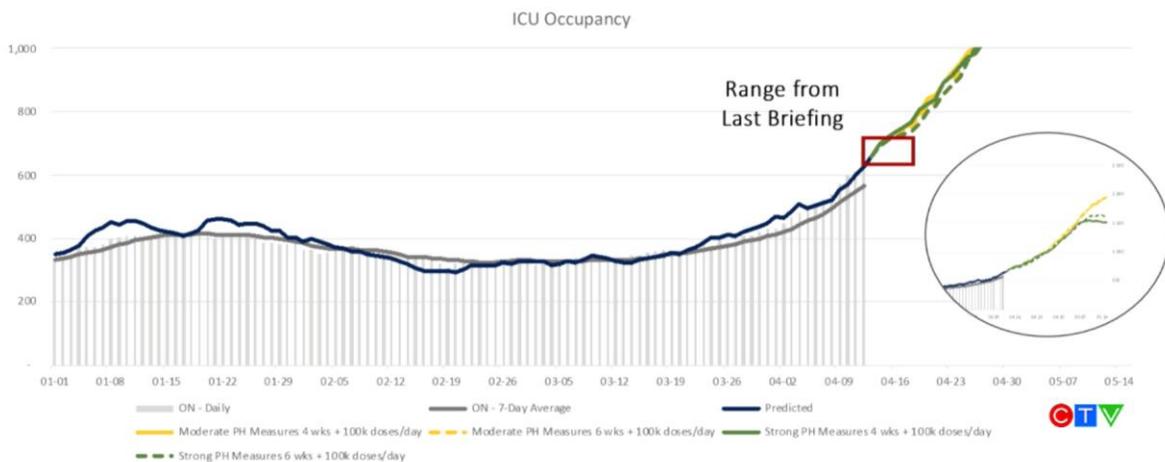
Under every scenario, more vaccines mean a faster resolution in the long-run



This graph imagines: “What would happen to current COVID-19 trends if we distributed 300, 000 vaccines per day in relation to strong (green), moderate (yellow), or weak (red) public health measures?” This chart shows that strong public health measures have a significant impact on the duration and trajectory of the waves.

Graph 7:

As predicted, ICU occupancy is rising dramatically. System-level public health measures will help blunt some of the impact.

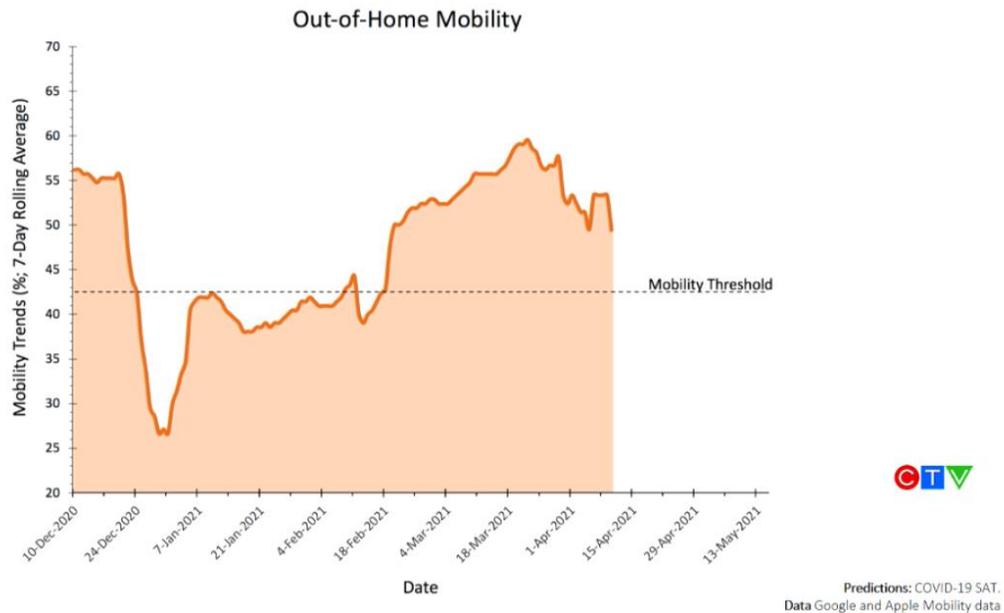


Predictions: COVID-19 ModCollab.
Data (Observed ICU Occupancy): CCSO

The number of people in ICUs is expected to continue to grow for the next 2 weeks regardless of public health measures. Stronger and longer public health measures would push down the overall number of people we could see in ICUs in the long run. This graph only shows the growth of the number of people who would need the ICU unit due to COVID-19. It does not factor in the number of patients who would need an ICU for any other reason.

Graph 8:

Mobility has declined slightly but not enough to bring current growth under control.



This growth shows the amount that people have been moving around and leaving their houses. The data in this chart was acquired through our cell phone data which tracks our movement. Note the dramatic decrease in mobility around late December. This aligns with the public health measures that were put in place on December 26th. Note that the curve on the far right side of the graph is starting to come down. This is likely due to the current stay-at-home order.

Graph 9:

Mobility has declined slightly across settings. Further reducing mobility and always wearing a mask and distancing is how Ontarians help reduce cases.



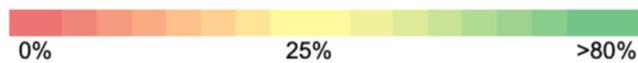
This graph shows a slight decrease in mobility in three indoor settings: workplaces, retail and recreation settings, and transit. Note that the curve on the far right side of the graph is starting to come down. This is likely due to the current stay-at-home order.

Graph 10:

Vaccination by risk is improving but remains a key to controlling spread

Figure excludes long-term care vaccination – at least 1 dose as of April 12, 2021

Age group	Neighbourhood Risk*										Overall
	1 = high incidence of COVID-19 infections					10 = low incidence of COVID-19 infections					
	1	2	3	4	5	6	7	8	9	10	
80+	65%	68%	70%	75%	77%	77%	79%	81%	82%	82%	76%
75-79	63%	68%	70%	73%	75%	74%	75%	77%	74%	71%	72%
70-74	57%	64%	62%	66%	65%	64%	63%	62%	51%	39%	58%
65-69	42%	48%	44%	39%	41%	38%	36%	34%	22%	19%	35%
60-64	40%	42%	38%	36%	35%	34%	30%	27%	23%	27%	33%
55-59	20%	25%	21%	20%	21%	22%	20%	20%	17%	17%	20%
50-54	14%	18%	13%	13%	13%	13%	13%	13%	13%	14%	14%
45-49	9%	14%	9%	11%	11%	11%	11%	11%	13%	14%	11%
40-44	7%	9%	9%	10%	10%	11%	10%	11%	12%	13%	10%
16-39	5%	7%	6%	8%	8%	8%	8%	8%	10%	10%	8%
Overall	15%	20%	18%	19%	20%	20%	19%	19%	20%	20%	23%



Source: ICES 15

This graph shows the percentage of the populations in areas with high and low risks of COVID-19 infections. The columns 1 to 10 represent different neighbourhoods with various levels of COVID-19

infections. Column 1 shows data on neighbourhoods with the most cases and column 10 shows data on neighbourhoods with the least cases. The rows indicate the age group of people within those neighbourhoods. The column that is labelled “Overall” shows the percentage of people who have been vaccinated within different age groups. The row that is labelled “Overall” shows the percentage of people who have been vaccinated within different neighbourhoods.

Note that this graph does not include people who were vaccinated in Long-Term Care homes.

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After this data was presented, Ontario’s Chief Medical Officer Dr. David Williams remarked that today’s statistics confirmed the predictions based on the modelling data, which were shared two weeks ago. Dr. Williams noted that even if there are strong public health measures, people also have to follow the measures. If people don’t respect strong public health measures, then in reality the data will look like the yellow line, when measures are moderate and not strong. Likewise, if people don’t respect moderate public health measures, then the data will look like the red line, when measures are low and not moderate. Dr. Williams said, “We’re doing our part to make sure public health measures are strong. We need you to do your part.”

During the question and answer period, Dr. Brown remarked: “If we have a very strong adherence to the public health measures, if we were able to really tamp down the spread of the virus right now and if we are able to get as many vaccines as we can into arms ... if that were to happen, you could see very low case numbers by the end of June. You really could see the receding of the pandemic, and barring the sort of things that are hard to anticipate around the new variants, you could see something of a summer, but it really requires everyone to pull together.”

Someone asked: What are strong public health measures?

Dr. Brown says that there is no single solution, but doing a series of things would help improve the current situation. He mentioned that the rate of vaccinating people in high-risk communities needs to double down. High-risk communities have a higher risk of exposure through no fault of their own. High-risk communities include essential workers, multigenerational households, and people who don’t have appropriate housing.

Other examples of strong public health measures include having the list of open workplaces as small as possible and limiting mobility into and around the province. Friday’s modelling data showed that mobility in Ontario has declined slightly but not enough to bring current case growth under control. He said that a province-wide approach is best since we have seen that people travel from public health units with tighter restrictions to different public health units that have more lenient restrictions.

Dr. Brown also noted that it would be helpful if there were more of a sick leave benefit in addition to the current federal benefit, and if sick leave benefits were easier to access. He also encouraged simple precautions that anyone could take, including wearing a mask, limiting trips outside to those that are absolutely essential, and maintaining a distance of 6 feet.

Dr. Brown states that there is an early indication that public health measures are not working as well as the government had hoped. He said, “The rate of growth, at this point, is so significant that it would be a hard thing to wait this out,” he said. “We’ve not seen that precipitous drop in mobility, you can see it coming down, but it has not been as sharp as in previous times, and that mobility is a very strong predictor of cases.”

Dr. Williams said: “My main concern is that people aren’t taking this seriously.”

Source:

<https://toronto.ctvnews.ca/covid-19-cases-in-ontario-will-remain-high-into-summer-without-six-week-stay-at-home-order-modelling-shows-1.5389971>

Ontario’s COVID-19 Vaccine booking portal:

Those eligible for a vaccine can book here: <https://covid-19.ontario.ca/book-vaccine/>.

Or by phone at: 1-833-943-3900.

For general information about vaccines, call: 1-888-999-6488.

In Toronto? Here’s a safe transportation option to go to your vaccine appointment:

Wheel-Trans is committed to providing vaccine rides to the elderly and people with disabilities in Toronto. Wheel-Trans is offering individual rides to City-run mass vaccination sites, pharmacies, doctor’s offices and clinics that are giving out vaccines. Customers may be joined by one Support Person on their Wheel-Trans ride.

You may be eligible for Wheel-Trans service if your disability prevents you from using the TTC’s conventional transit for all or part of their trip.

If you are not yet a Wheel-Trans customer, and you think you may qualify for Wheel-Trans service, you are invited to apply by calling Wheel-Trans Customer Service at 416-393-4111, Monday to Friday from 8 a.m. to 4 p.m.

Existing Wheel-Trans customers can book their rides to and from their vaccine appointments by calling Wheel-Trans Reservations at 416-393-4222, seven days a week from 7 a.m. to 11 p.m. or through the Wheel-Trans Self-Booking Website. Access the website by clicking here: <https://mywheel-trans.ttc.ca/SelfBooking2020/Login?ReturnUrl=%2fSelfBooking2020>.

UPCOMING EVENTS:

March of Dimes

Caregiver Webinars

Caregiver Connection Group – Caregiver conversation series – 10 weeks

Date: Starting Thursday, March 4th, at 2:00pm – every Thursday, join anytime

To register for any or all sessions: <https://www.eventbrite.ca/e/march-of-dimes-canada-caregiver-conversation-series-tickets-142228614615?aff=ebdsoporgprofile>

The Importance of Socialization for Family Caregivers

Date: Monday, April 19th at 2:00pm

To register:

<https://www.eventbrite.ca/e/the-importance-of-socialization-for-family-caregivers-registration-146947573147?aff=ebdsoporgprofile>

If you or someone you know uses Augmentative and Alternative Communication (AAC), and requires resources related to COVID-19, please contact Sarah (sarah.nydp@gmail.com) and she can assist you in accessing and/or creating various communication tools.

If you think you may be experiencing symptoms of COVID-19, take the self-assessment at www.ontario.ca/coronavirus. Follow all directions from your medical provider or your local health unit at the following phone numbers:

Telehealth Ontario: 1-866-797-0000

Toronto Public Health: 416-338-7600

Peel Public Health: 905-799-7700

Durham Region Health Department: 905-668-7711

York Region Public Health: 1-877-464-9675

Please refer back to previous updates as lots of important information has been provided that may still be relevant. If you have any questions or require more information on how you can protect yourself and those around you from the COVID-19 virus, please contact our Outreach Communication Facilitator Sarah, at 416-222-4448 or sarah.nydp@gmail.com