Public health and COVID-19

Board of Health, April 16, 2020

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Medical Officer of Health and Chief Executive Officer

Public Health Sudbury & Districts



Public health and COVID-19

No

• Not COVID-19 101

Yes

- Brief history
- Local epidemiology
- Public health measures

COVID-19: Key public health measures timeline



Enhance capacity for contact tracing

Closure of parks and outdoor recreational amenities

Limit outings to essentials needs

Self-isolation for individuals over 70, compromised immune systems or underlying medicál conditions

Extended school closure

Minister's Order made March 13

Jan 24

novel

coronavirus a

Rapid testing

ramp-up

case and

contact

of all

cases

Aggressive

confirmed

management

reportable

disease

Essential visitors only in LTC and other Jan 25 congregate care settings **February**

> Stop cycling intermittent inmates and personal visits in correctional facilities

Prohibit gatherings over 250 people

March 16

Practice physical distancing

Self-isolate for 14 days if travelled outside Canada

Prohibit gatherings over 50 people

work

where

possible

Make virtual

Closure of public arrangements gathering places and establishments

March 17

March 21

Work deployment for health services providers

March 23

Closure of non-essential workplaces

March 24

Work deployment for LTC homes

March 25

Prohibit gatherings greater than 5 people

Second Week of March

public

schools

March 12

Closure of

Jan 25

Ontario confirms first case of COVID-19

March 10 First Case in NE

(Greater Sudbury)

Third Week of March

March 17

March 11)

Ontario reports Emergency first COVID-19 Declaration death (from

Fourth Week of March

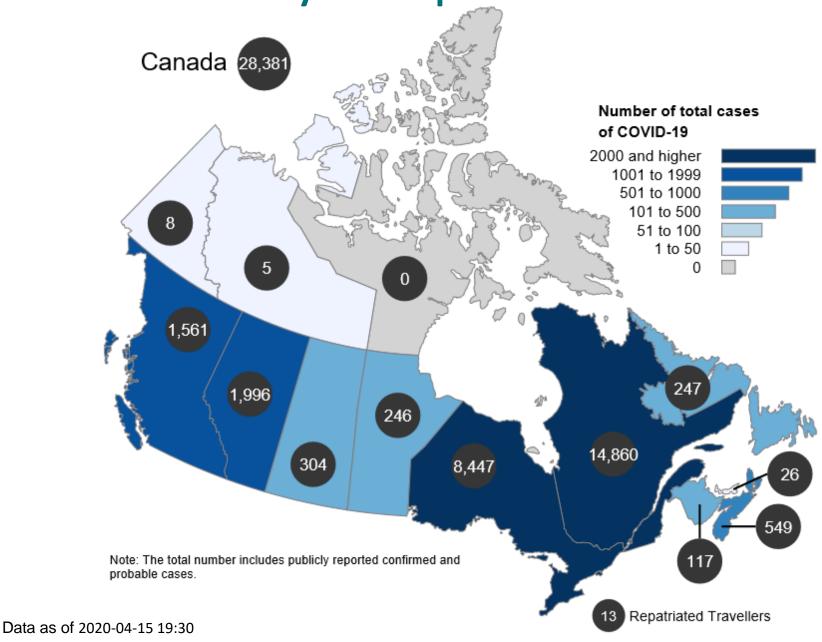
March 24

Ontario reports first deaths (2) in LTC homes

of March/Early April

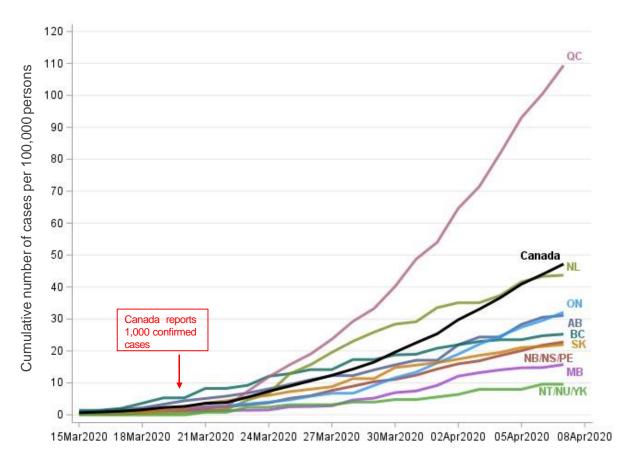
Last Week

The situation today – a snapshot



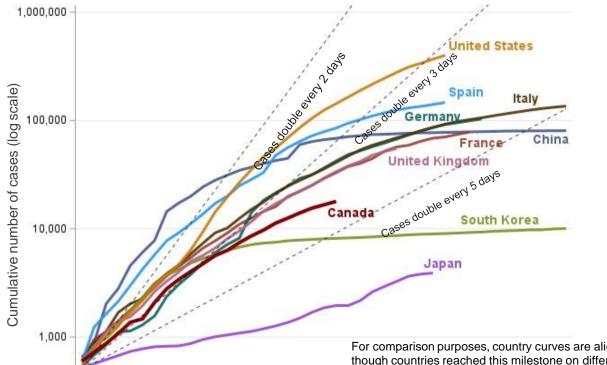
https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html

Canada has a series of regional epidemics



- Differences in laboratory testing and confirmation strategies explain some variation by province/territory
- Territories have very low rates of transmission so far

Community transmission started later in Canada allowing us to act early



- Canada's epidemic is in earlier stages
- Canada has a slower increase in total number of cases
- Canada's per capita testing rate is higher than most countries
- Many countries reached their first 500 cases before community transmission started in Canada
- This allowed Canada to learn from other countries' experiences and approaches and to act earlier in the epidemic's progression

For comparison purposes, country curves are aligned to day 0, the day the country reached 500 cases, even though countries reached this milestone on different calendardates

20 Days since 500th reported case

18

22 24 26 28 30 32 34 36

Ontario Health North Regional Table

COVID-19 Cases in the North



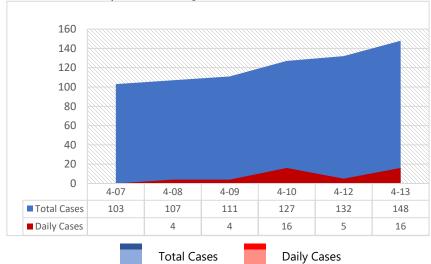
Total Confirmed Cases

148

Total Deceased

3

+16 from previous day



Data as of April 13, 2020 unless specified otherwise

Active Cases in Hospital and LTC

In ICU Apr 12

4 confirmed

13 suspected

Hospitalized (incl. ICU) Apr 12

12 confirmed

95 Suspected

LTC homes with confirmed cases Apr 12

1

+0 from previous day

LTC homes with outbreaks

+0 from

+0 from previous day

LTC HOMES with +ve

Extendicare

Timmins

Ontario Health North Regional Table

COVID-19 Assessment Centre Testing

30 of 31 Assessment Centres reporting

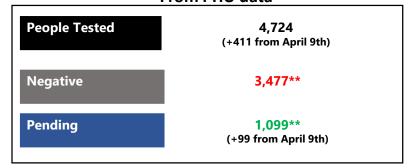
	12-Apr	Cumulative
Assessments	241	3,857
Tests completed	119	2,030

Testing results by Public Health Unit (PHU) district

PHU Districts	Positives	Negatives	Pending
Algoma (SAH, NSHN, LDHC, SJGH)	10	741	144
NBPS (MGH, WNGH, NBRHC, WPSHC)	11	n/a	n/a
Northwestern (AGH, DRHC, LWDH, RLMCMH, RHC, SLMHC)	10	384	222
Porcupine* (LMH, AGH, BMH, NDH, SH, SMRF, TDH, WAHA, HCH)	39	494	149
Sudbury & District (HSN, SSCHS, MHC, EGH)	36	999	485
TBDHU (GDH, NDMH, NOSH, MGH, SJCG, TBRHC)	33	671	53
Timiskaming* (KDH,TH, EDH)	9	188	46
Total (Daily)	148	3,477	1,099

PHU report as of April 13, 2020 at 12:18 pm (from web sites)

Cumulative North Results From PHU data



Resolved	54 (+8 from April 9th)	

Deaths 3

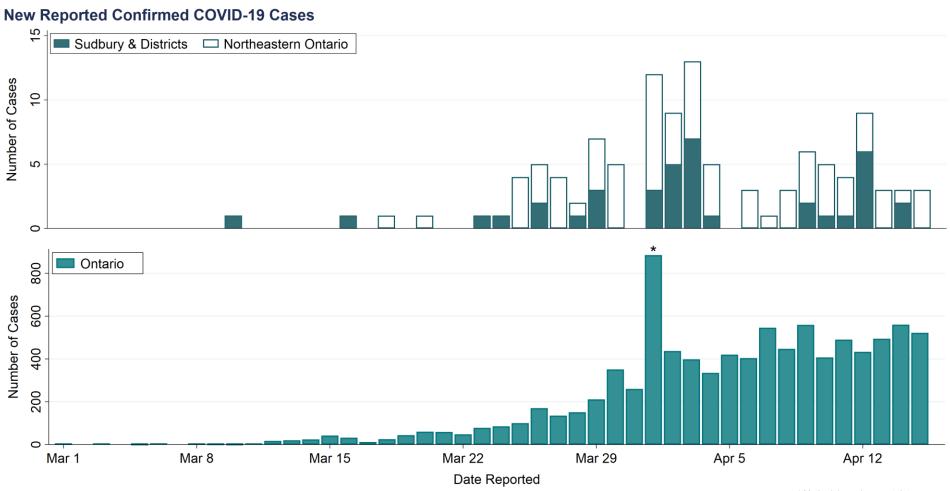
^{**}NBPS data missing

Northern health unit COVID-19 reporting current as of April 15, 2020

Location	Total Confirmed Cases	Difference from Previous Report	Negative	Resolved	Deceased	Pending	Total Tested	% of Positive Tests	Population	Case Fatality Rate	Number of Tests per 100,000 Pop'n
Canada	27,557	1,394		8,553	954		462,353	6.0%	37,590,000	3.5%	1,230.0
Ontario	8,447	494		3,902	385	4,429	119,092	7.4%	14,570,000	4.6%	817.4
Southern Ontario	8,286	NA		3,809	382		112,706	7.4%	13,766,200	4.6%	818.7
Northern Ontario	161	21	3,975	93	3	1,470	6,386	3.3%	803,800	1.9%	794.5
Algoma	10	0	802	4	0	165	977	1.2%	113,084	0.0%	864.0
NBPS	14	0		6	0		794	1.8%	127,875	0.0%	620.9
Northwestern	11	0	500	10	0	143	654	2.2%	82,231	0.0%	795.3
Porcupine	42	3	593	21	2	176	811	6.6%	82,165	4.8%	987.0
PH Sud. & Dists.	38	0	1,142	28	1	635	1,815	3.2%	198,852	2.6%	912.7
TBDHU	36	0	720	20	0	296	1,052	4.8%	151,884	0.0%	692.6
Timiskaming	10	0	218	4	0	55	283	4.4%	33,049	0.0%	856.3

^{*}Data Sources Include: Statistics Canada, Government of Canada COVID-19 Update, Ontario MOH COVID-19 Update, integrated Public Health Information System (iPHIS) database, Northerwestern Health Unit, Thunder Bay District Health Unit, Algoma Public Health, North Bay Parry Sound District Health Unit, Public Health Sudbury & Districts, Porcupine Health Unit, Timiskaming Health Unit

Regional data – Sudbury and districts, north east and Ontario – as of April 15, 2020

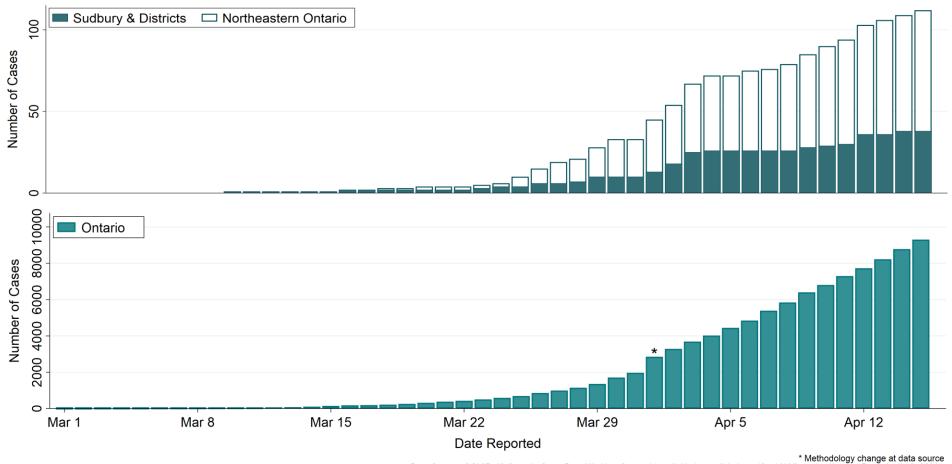


* Methodology change at data source

Data Source: COVID-19 Canada Open Data Working Group. https://github.com/ishaberry/Covid19Canada. (Access Date: April 16, 2020).

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Public Health Sudbury & Districts confirmed cases

Total Number of tests Conducted	1948
Results Pending	640
Negative	1267
Confirmed positive	41
(includes resolved and deceased)	
Resolved	29
Deceased	1
By Geographic Area	
Greater Sudbury	37
Sudbury District	2
Manitoulin District	2

Age Group	Count (n)	Percentage (%)
0 to19	3	7.3
20 to 39	11	26.8
40 to 59	14	34.1
60 to 79	13	31.7
80+	0	0

Sex	Count (n)	Percentage (%)
Females	20	48.8
Males	18	43.9
Not Specified	3	7.3

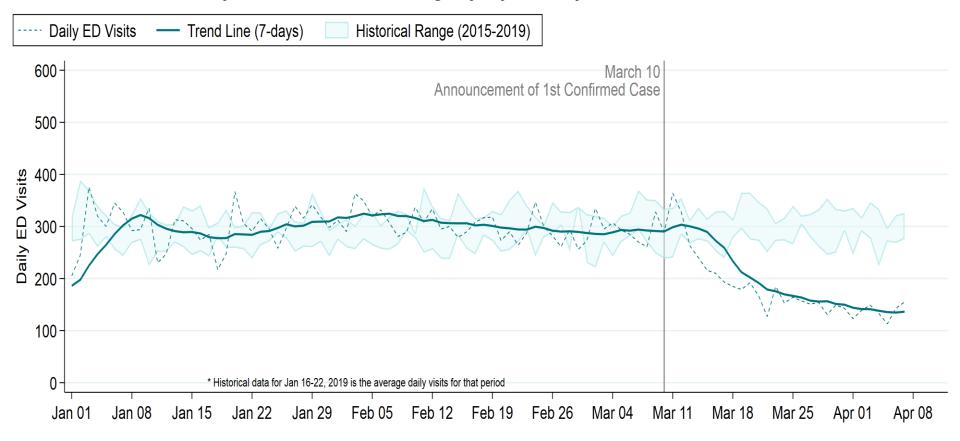
^{*} Data current as of noon April 16, 2020

Confirmed cases by exposure type and status

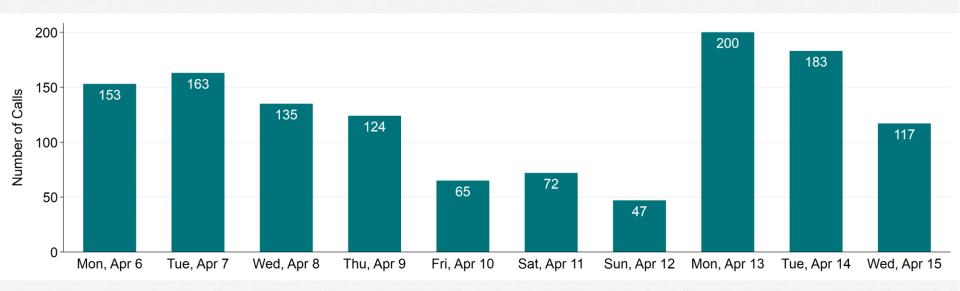
	Count (n)	Percentage (%)				
Exposure type						
Travel	15	36.6				
Contact with a case	15	36.6				
Travel and contact with a case	6	14.6				
No travel and no contact with a known case	5	12.2				
Pending/undetermined	0	0.0				
Status (at date of reporting)						
Self-isolating	37	90.2				
Hospitalized	3	7.3				
Deceased	1	2.4				

^{*} Data current as of noon April 16, 2020

FIGURE 3: ED visits for all syndromes with historical range, by day, Sudbury and Manitoulin Districts



Incoming COVID-19 calls to Public Health Sudbury & Districts Call Centre



^{*} Data current as of 6:00 pm April 15, 2020

Public Health Services

- Limited office hours
- Essential work
 - Virtual where possible
 - Precautions if face-to-face required (prescreening, PPE, distance)
- Otherwise redeployment to COVID-19 response
- Cross-training
- Default to remote work (March 13)
- Most provincial reporting deferred

https://www.phsd.ca/health-topicsprograms/diseases-infections/coronavirus/publichealth-services

Estimated additional costs to March 31, 2020

Item	Total
Additional hours	4387*
Financial impact	\$165,000
Non-salaried	\$53,700
Total	\$218,700

^{*}Under-estimate as management under-reported to date

Public health measures

In absence of...

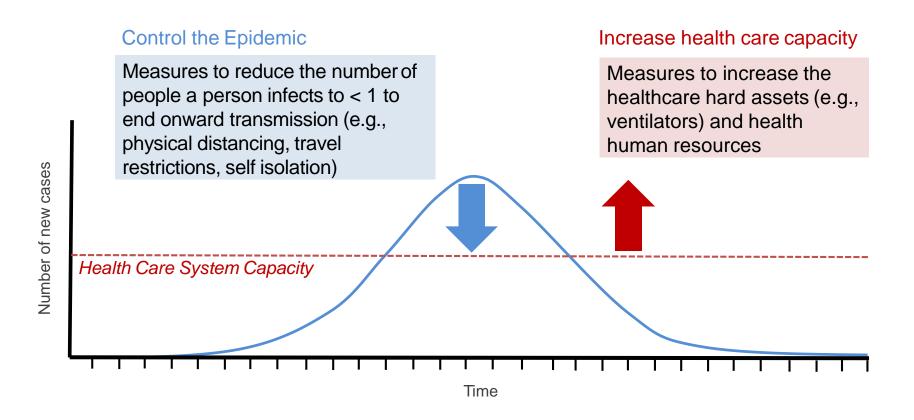
- Vaccine
- Specific treatment



We have...

- Distance (masks when can't)
- Hand/respiratory hygiene
- Travel restrictions
- Case detection and isolation
- Quarantine of contacts and travellers

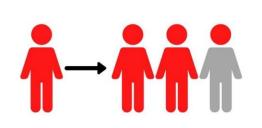
Our strategy: Control epidemic, increase health care system capacity

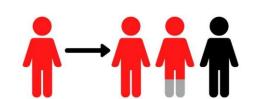


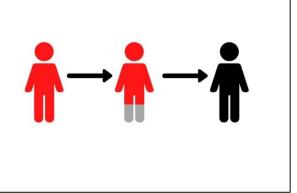
If each person infects fewer than one person on average, the epidemic dies out

Where we've been

Where we want to be



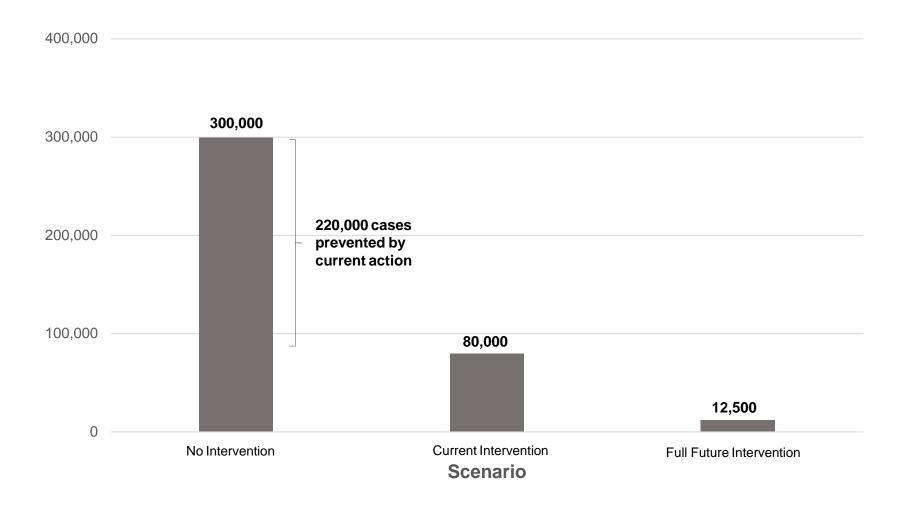




Prior to stronger public health measures, each infected person (case) in Canada infected 2.19 other people on average Today, stronger physical distancing and self-isolation are helping to reduce the average number of people each case infects

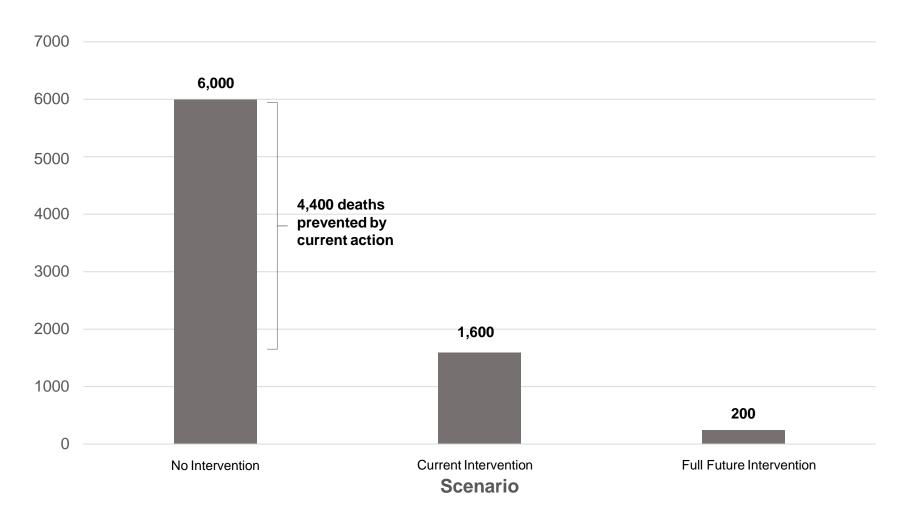
Goal: Each person infects fewer than one person on average; epidemic dies out

Projected Ontario Cases by April 30, 2020



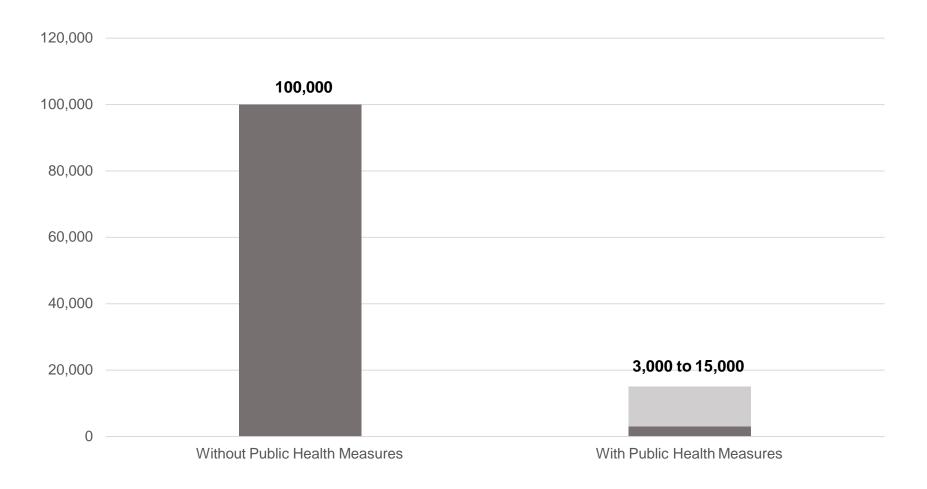


Projected Ontario Deaths by April 30, 2020





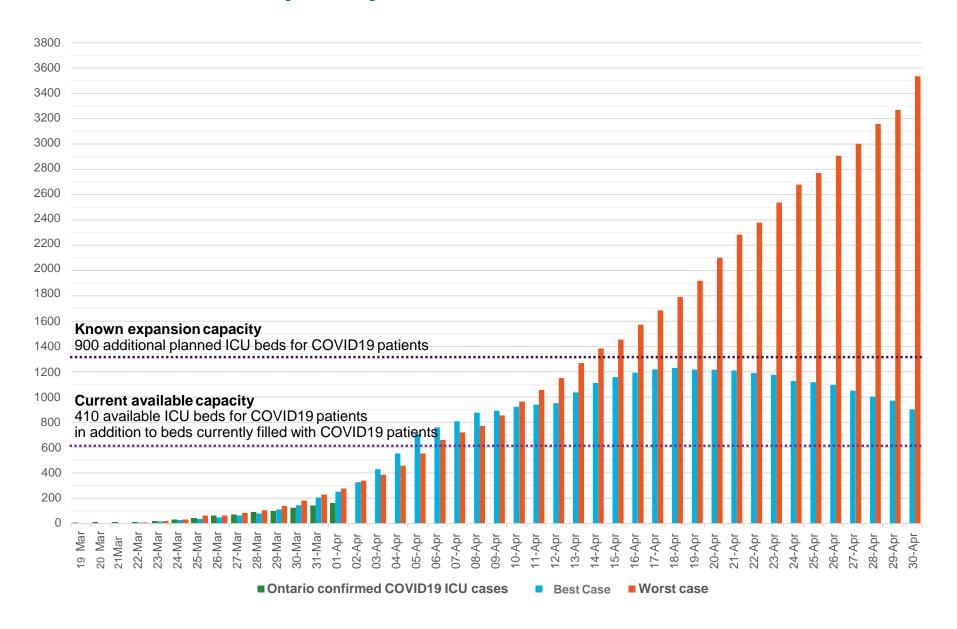
Projected Ontario Deaths over Course of Pandemic



Projected Deaths



Ontario ICU capacity for COVID-19



The intersection of immediate legal jurisdiction exposed during a pandemic



Provincial emergency orders

Emergency status on COVID-19

- Update on April 14 In an effort to stop the spread of COVID-19 and keep people at home, the Government of Ontario has extended the Declaration of Emergency and emergency orders to May 12. These orders include the closure of non-essential workplaces and restrictions on social gatherings and events, among others.
 - No gatherings with more than 5 persons
 - Essential businesses
 - Redeployment of staff
 - Disclosures of COVID-19 cases
 - Limiting work to one LTCH
 - Etc.

https://www.ontario.ca/page/emergency-information#emergencyorders

Guidance for the health sector

http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/2019 guidance.aspx

Health Sector Resources

- Guidance for Primary Care Providers in a Community Setting
- Guidance for Acute Care
- Guidance for Home and Community Care Providers
- Outbreak Guidance for Long-Term Care Homes (LTCH)
- Guidance for Long-Term Care Homes
 - Long-Term Care Homes COVID-19 Screening Checklist
- Guidance for Paramedic Services
- Guidance for Independent Health Facilities
- Community Labs and Specimen Collection Centres
- Guidance for Community Pharmacies
- Guidance for Occupational Health and Safety
- Guidance for Consumption and Treatment Services
- Quick Reference Public Health Guidance on Testing and Clearance

Health Protection and Promotion Act: Section 77.7 directives

Chief Medical Officer of Health – opinion there exists/may exist a immediate risk to health...

•	<u>Directive #5 for Hospitals within the meaning of the Public Hospitals</u> <u>Act</u>	March 31, 2020
•	<u>Directive #4 for Ambulance Services and Paramedics under the</u> <u>Ambulance Act Â</u>	March 30, 2020
•	<u>Directive #3 for Long-Term Care Homes under the Long-Term Care</u> <u>Homes Act, 2007</u>	March 30, 2020
•	<u>Directive #2 for Health Care Providers (Regulated Health</u> <u>Professionals or Persons who operate a Group Practice of Regulated Health Professionals)</u>	March 19, 2020
•	Directive #1 for Health Care Providers and Health Care Entities	March 30, 2020

Health Protection and Promotion Act: Section 22 orders (individuals and class)



COVID-19 Class Order: April 1, 2020

Under what authority did Toronto Public Health issue a class order related to the COVID-19 outbreak to require persons to self-isolate?

The Health Protection and Promotion Act authorizes the Medical Officer of Health to make a class order to address the risks presented by the potential spread of COVID-19 to residents of Toronto.

Why did the Medical Officer of Health issue this class order?

Based on the continuing increase in the number of people contracting COVID-19 in Toronto, and experiences in similar cities around the world, this is a targeted mandatory measure that will strengthen our ability to reduce the loss of life from COVID-19, and preserve and protect the capacity of our health care system to respond and to provide care for those who need it.

While most people who have or may have COVID-19, as well as their close contacts, have been compliant with instructions from public health authorities to self-isolate, there are individuals who do not take these measures seriously enough. This class order is a legal tool to help us ensure that everyone who needs to complies with the direction to self-isolate.

Issues

- Testing Yes
 - April 15, 2020 testing guidance update
 - 1. Hospital inpatients
 - 2. Residents living in long-term care homes and retirement homes
 - 3. Residents in other congregate settings
 - 4. Persons working in congregate settings
 - 5. HCW/caregivers/first responders
 - 6. Persons living with #5
 - 7. Remote/isolated/rural/Indigenous
 - 8. Specific priority populations
 - 9. Essential workers
 - 10.Cross-border workers
- Masks Maybe
- Travel No
- How long Who knows...

- www.phsd.ca
- https://www.phsd.ca/health-topicsprograms/diseasesinfections/coronavirus



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