

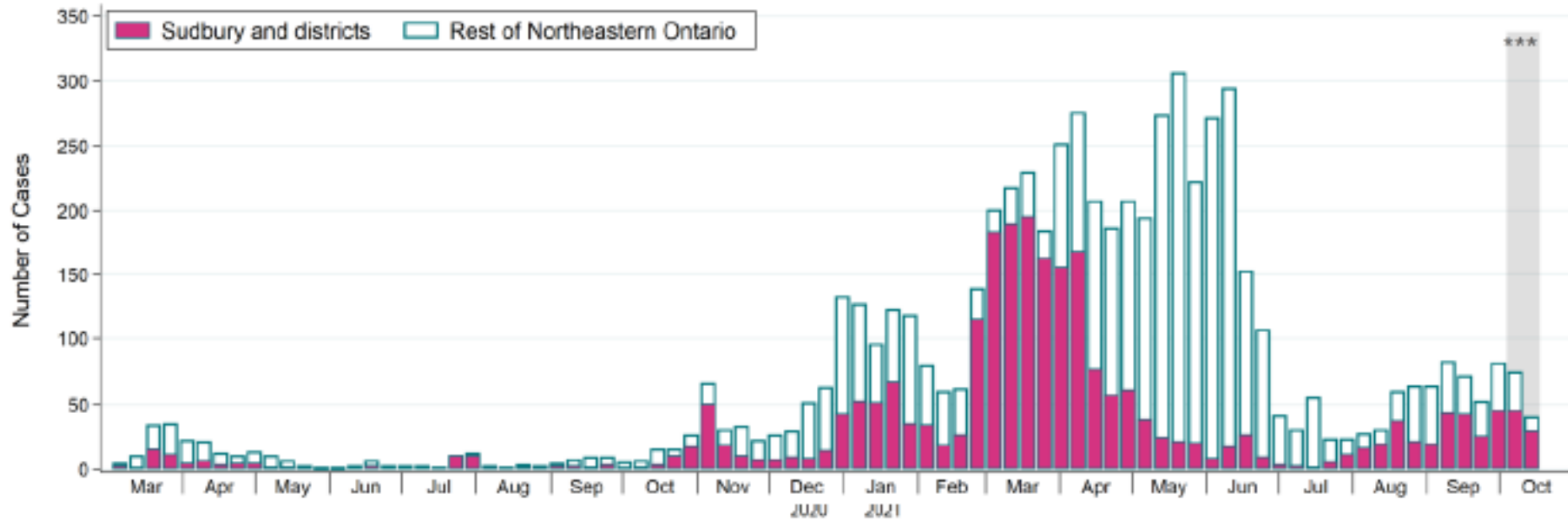
COVID-19 Pandemic Status Update Response, Resources and Recovery

Board of Health

October 21, 2021

Response

Case status – Sudbury & Districts and NE Ontario



To October 20, 2021:
2 604 total cases
92 active cases

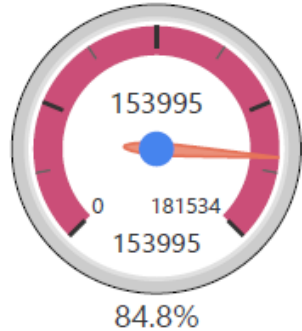
	PHSD	N Ontario	Ontario	Canada
Active cases/100K	46	17	25	82
7 day new cases/100K	39	14	19	53

Current to October 19, 2021

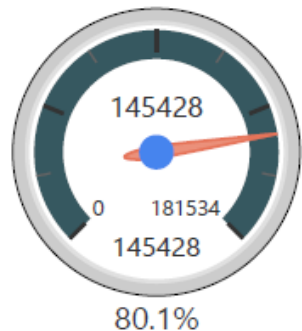
Update on COVID-19 vaccinations

PHSD vaccination coverage rates in 12+ regional population

Residents received Dose 1



Residents Fully Vaccinated



Region	# Dose 1	# Dose 2	# Dose 3
Chapleau Area	2,789	2,612	20
Greater Sudbury	127,158	120,749	1,692
Lacloche Foothills	7,571	7,180	94
Manitoulin Island	11,362	10,083	187
Sudbury East	5,115	4,804	33
Total	153,995	145,428	2,026

Current to October 20, 2021

316,886

Total Doses Administered

161,648

Dose 1 Administered

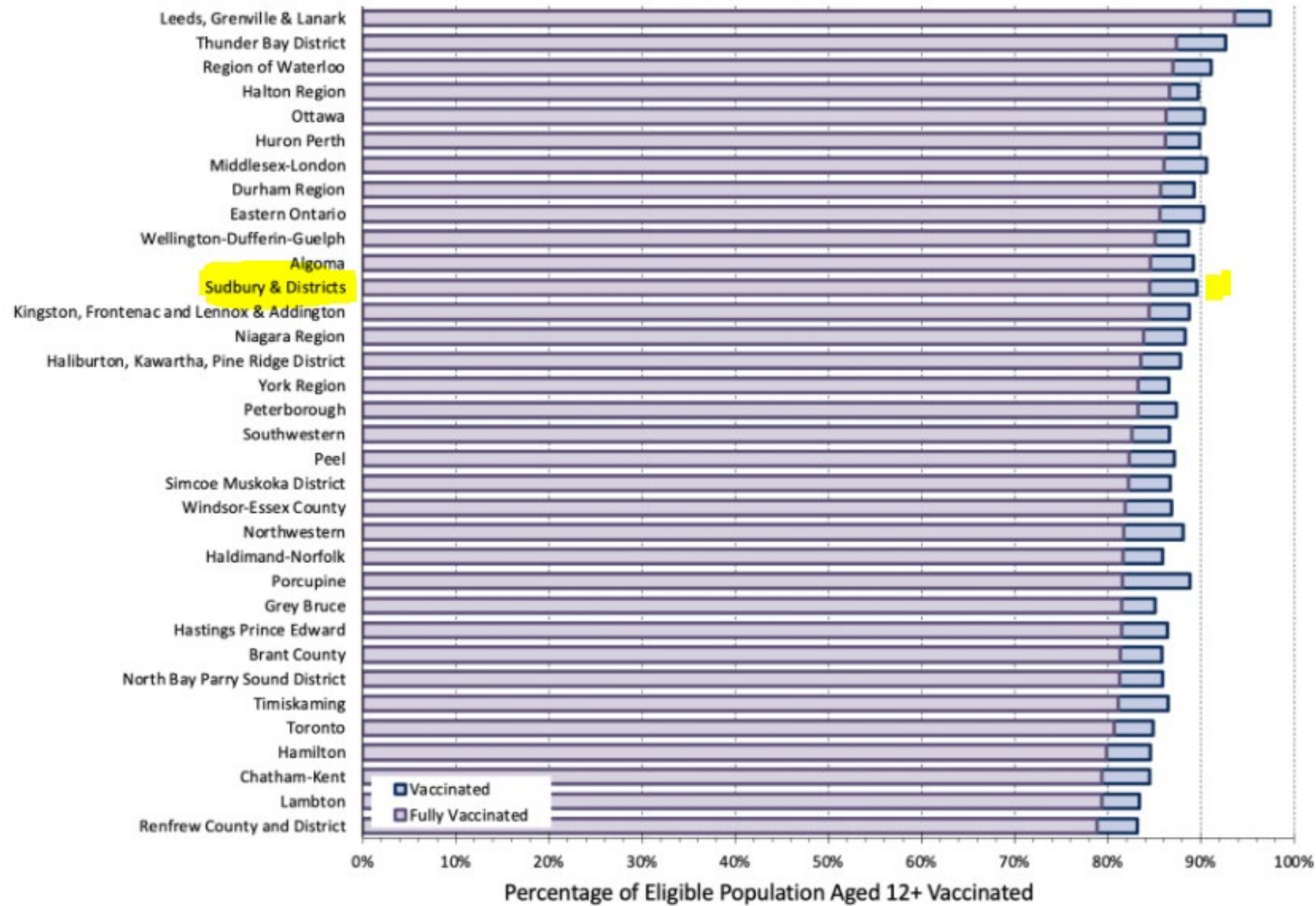
153,216

Dose 2 Administered

2,022

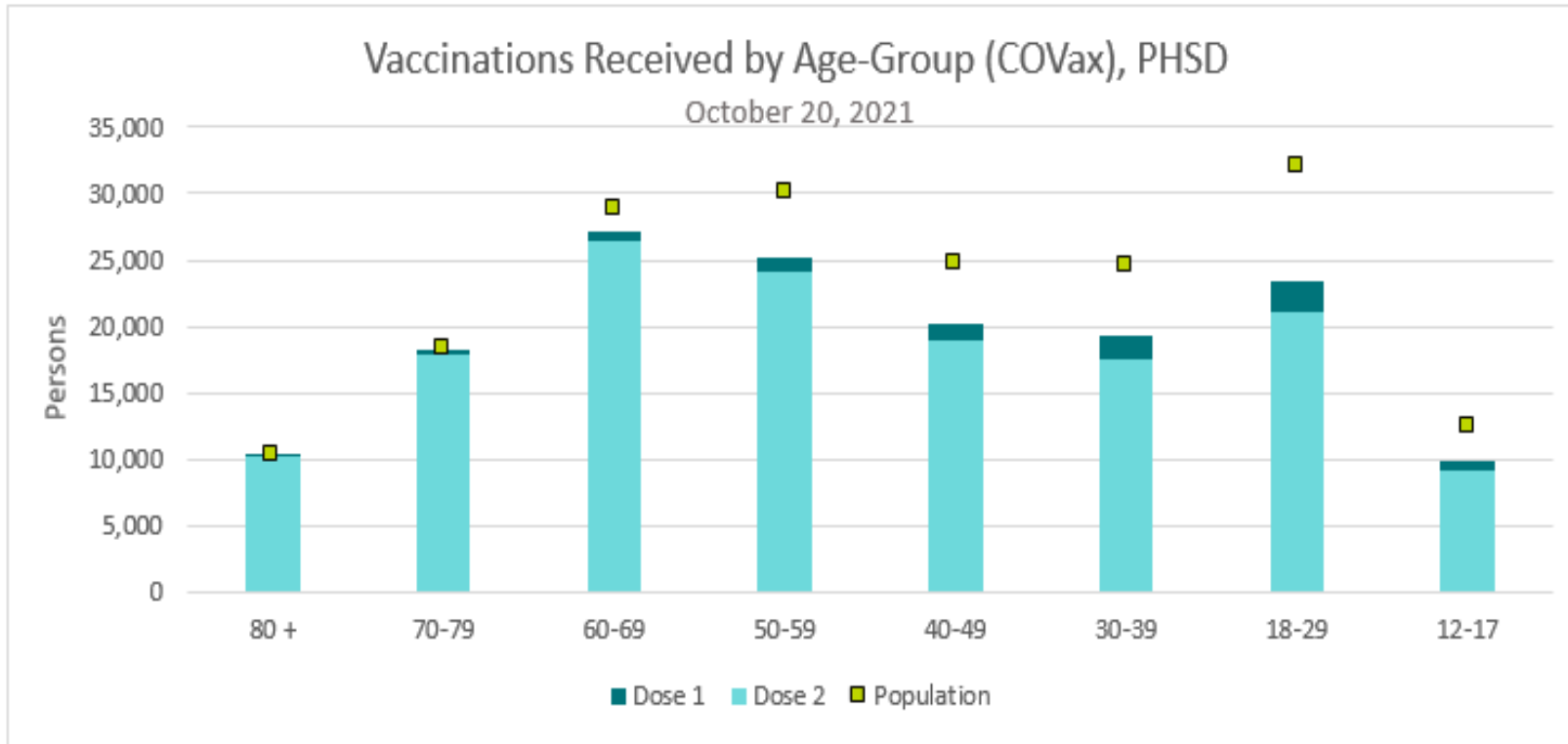
3rd. Doses Administered

Percentage Vaccinated, by PHU



Source: Ontario Dashboard: COVID-19 Science Advisory Table Accessed October 20, 2021

Vaccination coverage by age



Age Group	Dose 1 % Coverage	Dose 2 % Coverage
80 +	100.0%	98.9%
70-79	99.6%	97.8%
60-69	94.2%	91.9%
50-59	83.4%	79.7%
40-49	81.9%	76.7%
30-39	78.6%	71.3%
18-29	73.1%	65.9%
12-17	79.4%	73.0%

Current to October 20, 2021

Case and contact management update

Current focus



- Continued **intensive case and contact management** of all cases to limit the spread
- Increasing **complexity** of cases
- Management of **outbreaks** including school, workplace, institution, community, homeless/vulnerable

Looking ahead



- Continued increased case **complexity**, including breakthrough cases (vaccinated)
- Potential for **waning immunity** BUT potential for **decreasing severity** and **number of cases**.
- Unknown potential **changes to provincial guidance** for case and contact management

Vaccine program update

Current focus



- Continued efforts to reach all eligible residents for **first and second doses** (critical for Delta)
- **Coverage** among those aged 18-39 biggest concern
- **Third dose administration** to priority groups:
 - Persons who are immunocompromised
 - Residents of long-term care homes, retirement homes, Elder Care lodges, other seniors' congregate settings

Looking ahead

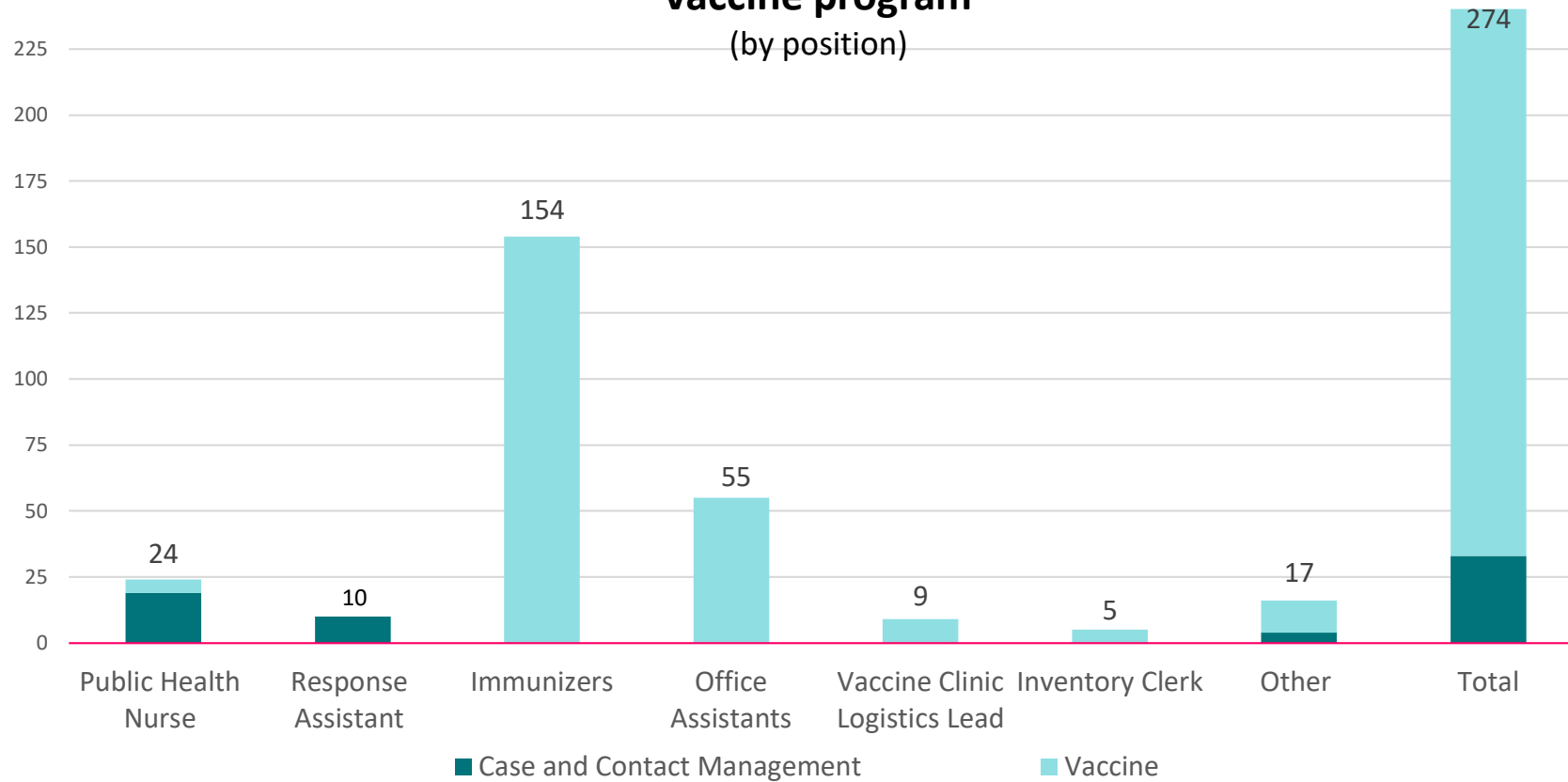


- **Booster (third) dose expansion** potential for 70+, Indigenous Peoples, health care workers
- Approval of vaccines for **5–11-year-olds** (2 doses)
- Likelihood of booster doses for other groups
- **Integration** with other vaccination efforts:
 - Influenza vaccination
 - Vaccination catch-up

Resources

Staffing to support COVID-19 response

Temporary staff hired in 2021 to support case/contact management and vaccine program
(by position)



We have also leaned on our permanent staff.

To date for 2021:

- **\$3,710,000** in total overtime pay
- **12,562 hours** in total *management* overtime

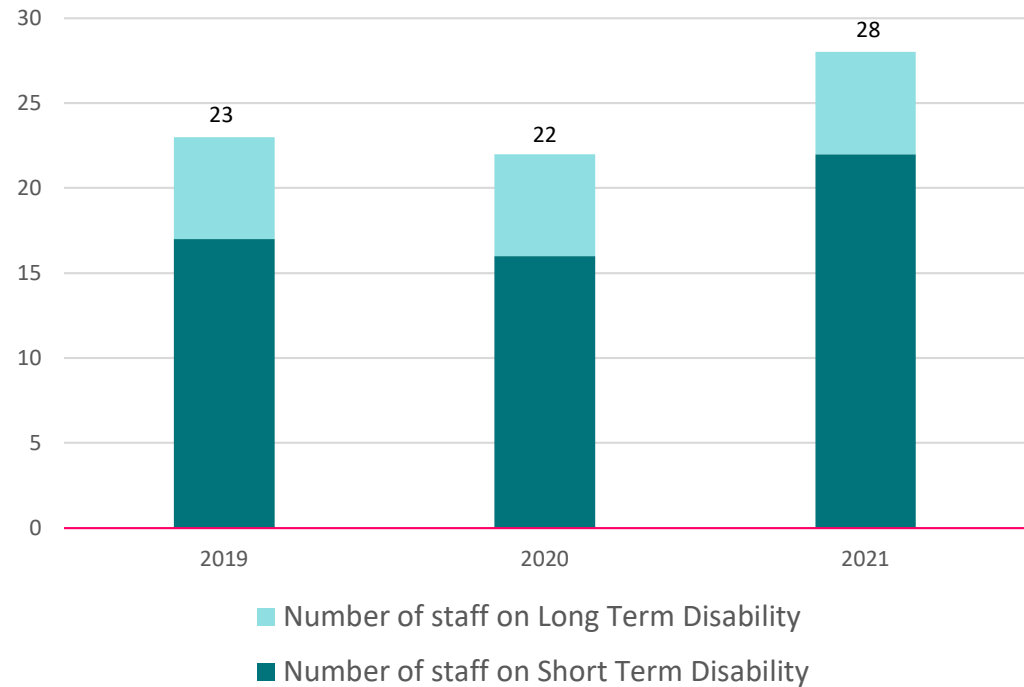
Indicators of impact on PHSD workforce 2019-2021*

*2021 is partial year to October 15, 2021

Staff Retirements and Resignations



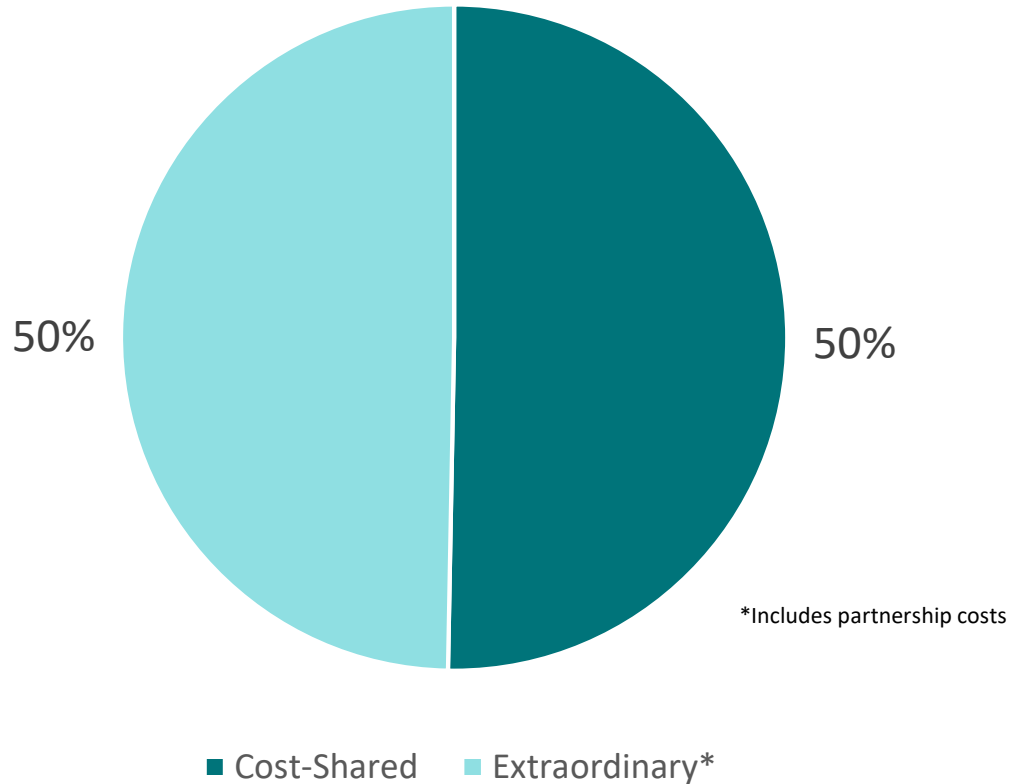
Disability Status



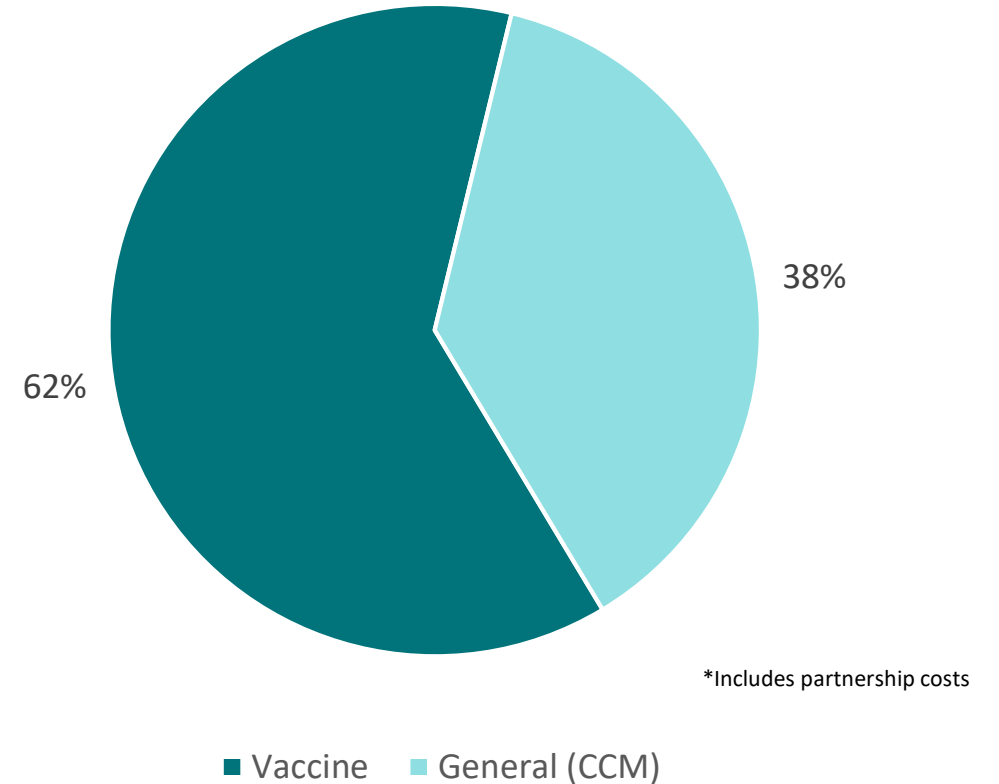
COVID-19 total expenses in 2021

Actual and projected totals \$33 million

Total COVID-19 Expenses by Funding Source



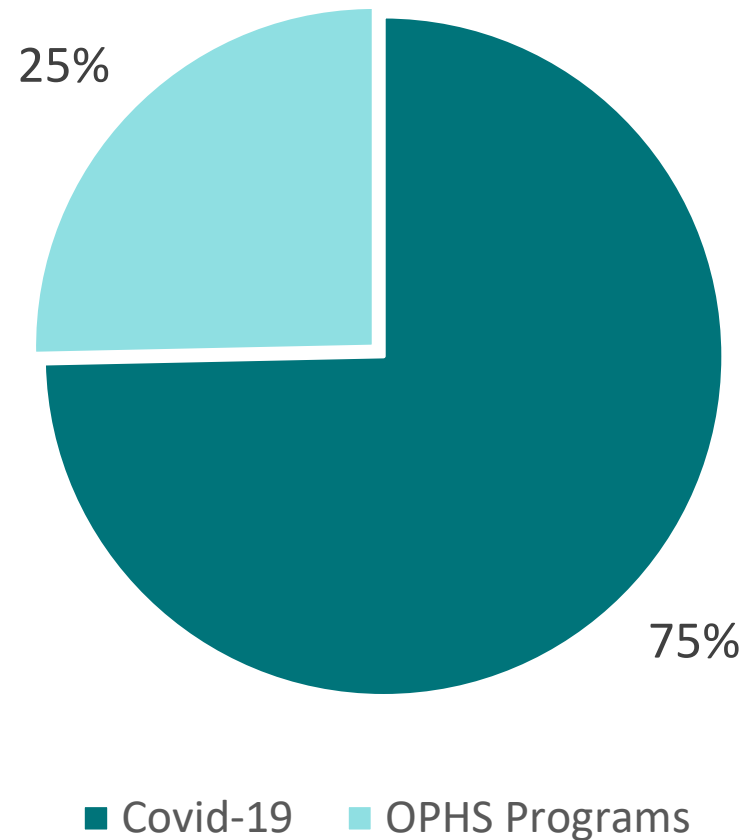
Total* Covid Expenses, by Program



Cost-shared expenses: COVID-19 and non-COVID-19 programs

2021 actual and projected totals \$24.9 million

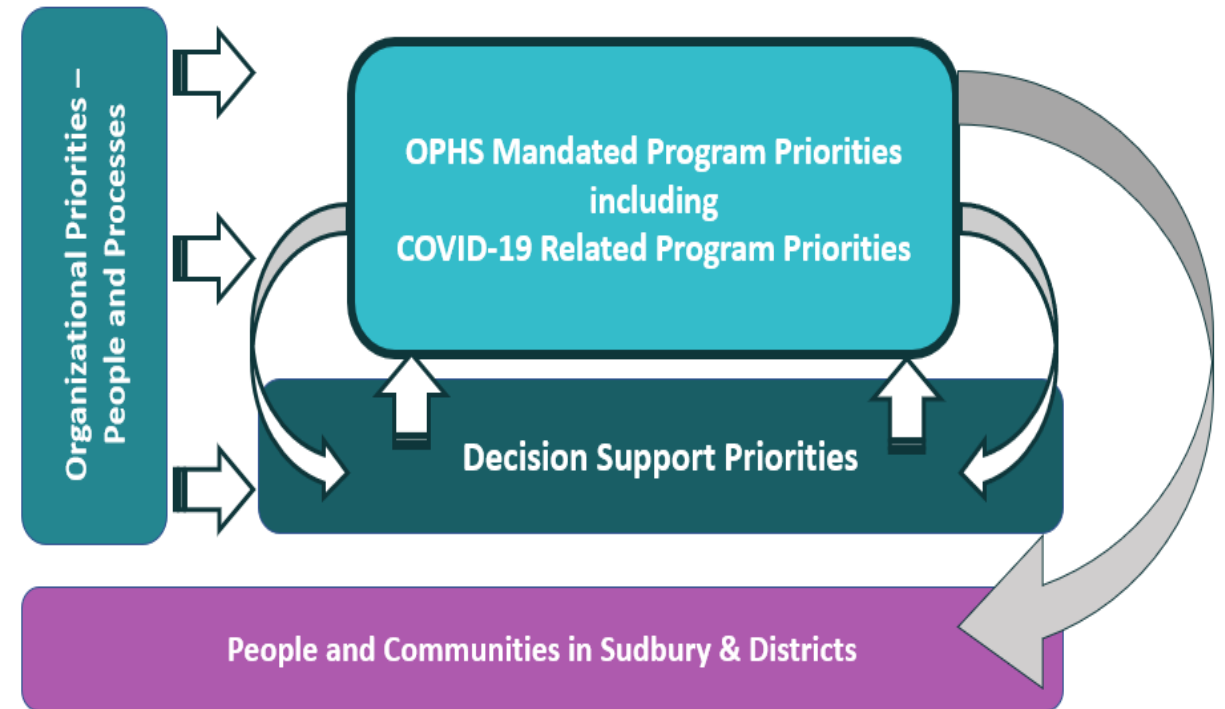
Total Cost-Shared Expenses Jan to Dec 2021



Recovery

On the horizon: from response to recovery

- Ongoing COVID-19 **work ahead** – cases and vaccines
- Catch-up to address public health wait list and mitigate **impacts of pandemic** and **pandemic response** on community health
- Resumption of **priority programming** of the Ontario Public Health Standards
- Support for **our people**
- *What do we need to do in 2022 to be in the best position to fully restore public health programming in 2023?*



Implications for 2022

- Planning for 2022 is informed by 2021 experience
- COVID-19 Public Health response is not feasible with current PHSD staff complement
- Health risks associated with cessation/reduction of non-COVID-19 public health programming are increasingly urgent and must be addressed
- Assumptions:
 - The intensity of COVID-19 response in 2022 will be at 2021 level until April 2022 followed by gradual reduction over time
 - Ministry of Health COVID-19 extraordinary funds will be available to boards of health in 2022 for eligible expenses not covered within cost-shared budget
 - Anticipated government relaxation of COVID-19 precautions will increase risk of transmission
 - Increased vaccination coverage rates and vaccine eligibility will mitigate the risk of transmission and disease severity
- PHSD must strike a more sustainable balance between COVID-19 response and OPHS priority programs
- PHSD will work immediately to strike a more sustainable balance between temporary staff **recruitment**, permanent staff **overtime**, and the **redeployment** of permanent staff to COVID-19

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