

Update on COVID-19 Projections

Science Advisory and Modelling Consensus Tables

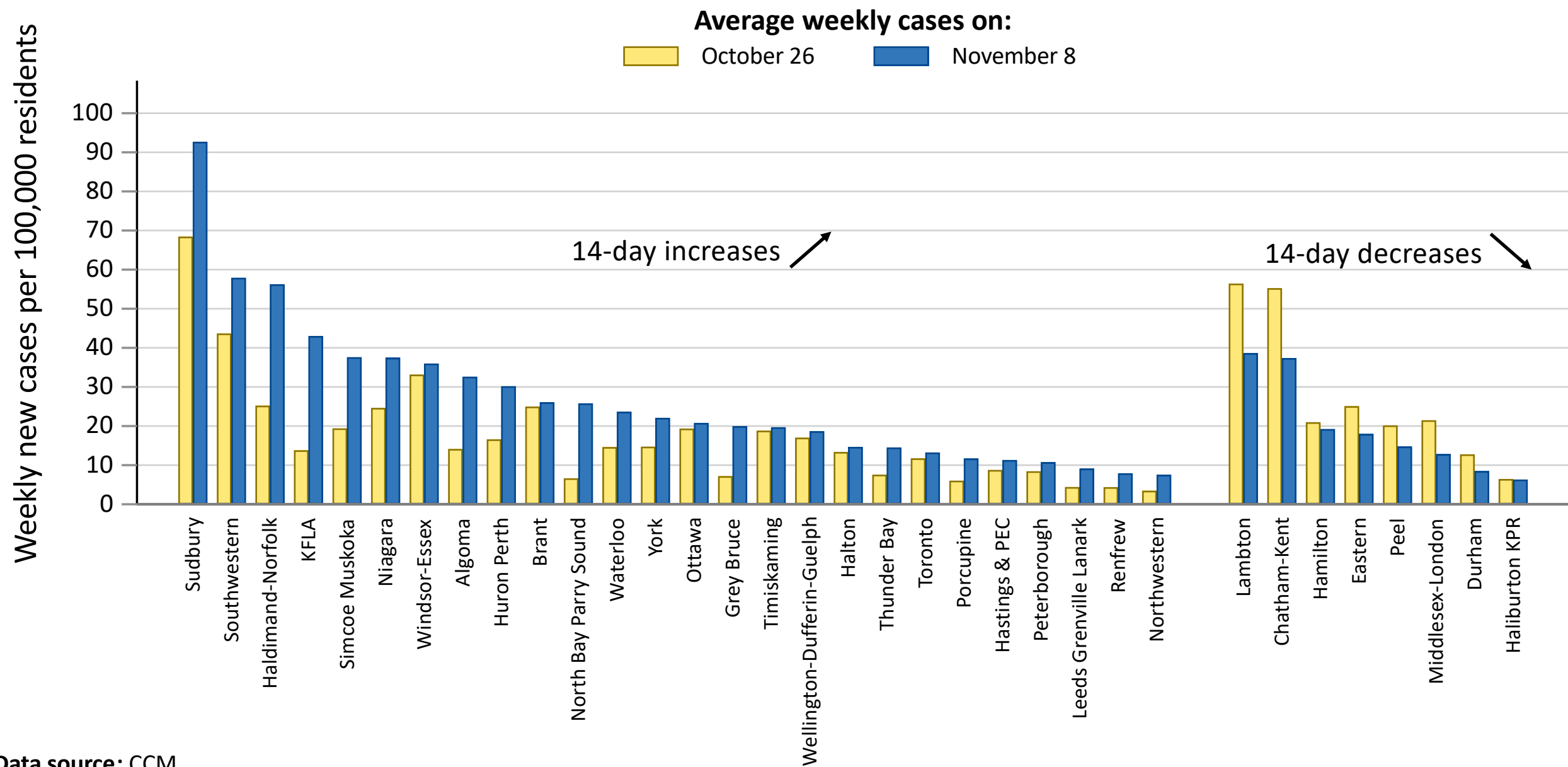
November 12, 2021



Key Findings

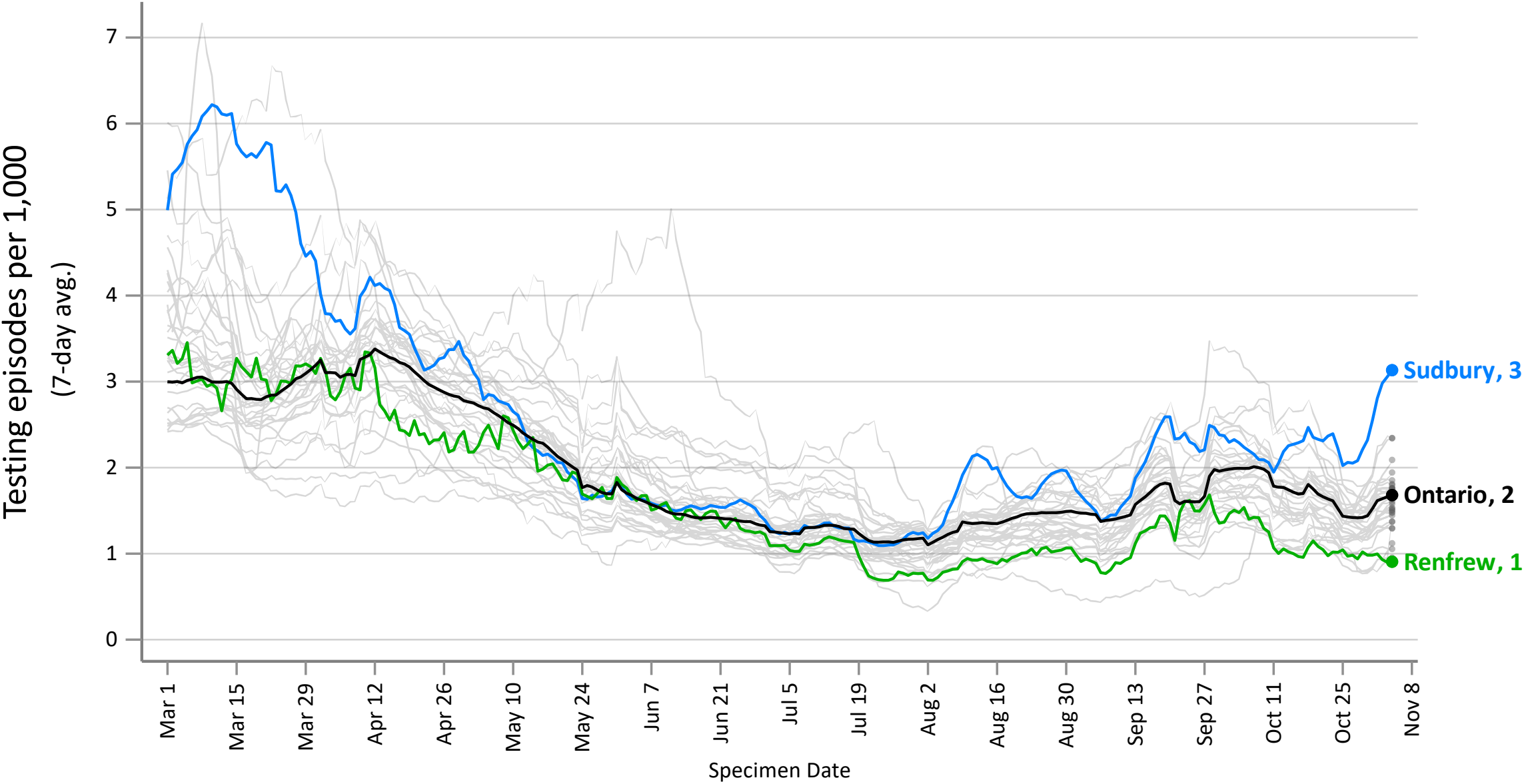
- COVID-19 cases are rising in most Public Health Units. Testing is flat, but positivity is rising in several Public Health Units. This indicates a real rise in cases.
- Hospitalizations and ICU occupancy are stable right now but overall occupancy of ICUs is likely to increase.
- The impact of COVID-19 remains highly inequitable. Those with lower income, essential workers, and minority groups are at highest risk.
- Vaccination remains the most effective protection against COVID-19 infection, hospitalization and long COVID-19, but there are critical gaps in coverage across communities.
- Experience in Europe and across Canada show that cases can rise quickly, with subsequent increases in hospital admissions, ICU occupancy, and deaths.
- A deliberate pause on re-opening is the right decision at this time. Policies that support wearing masks properly indoors and getting fully vaccinated will be helpful.

Cases are increasing in most public health units



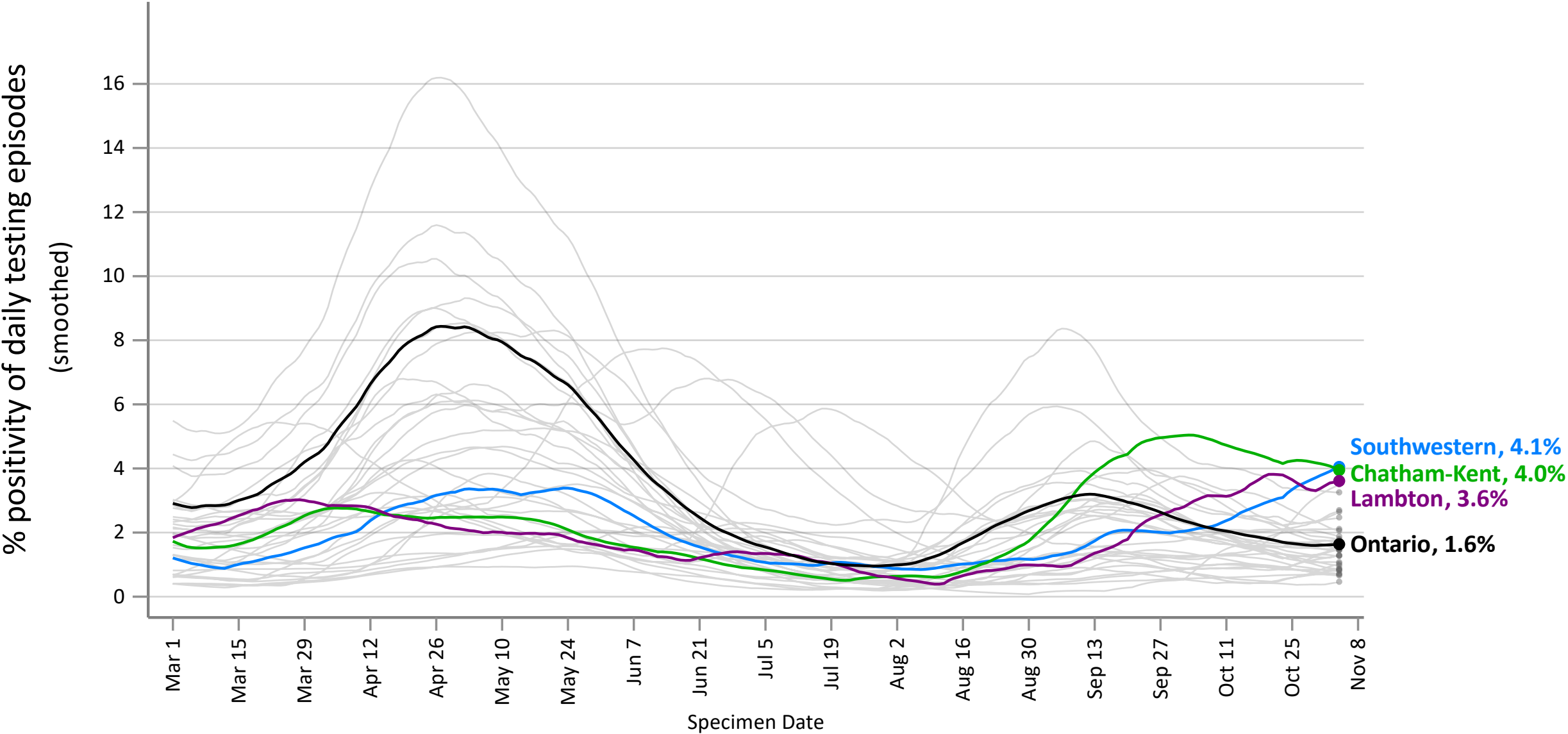
Data source: CCM
Data note: Data for the most recent day have been censored to account for reporting delays

Testing rates are flat at the provincial level



Data source: OLIS via SAS VA, data up to November 4

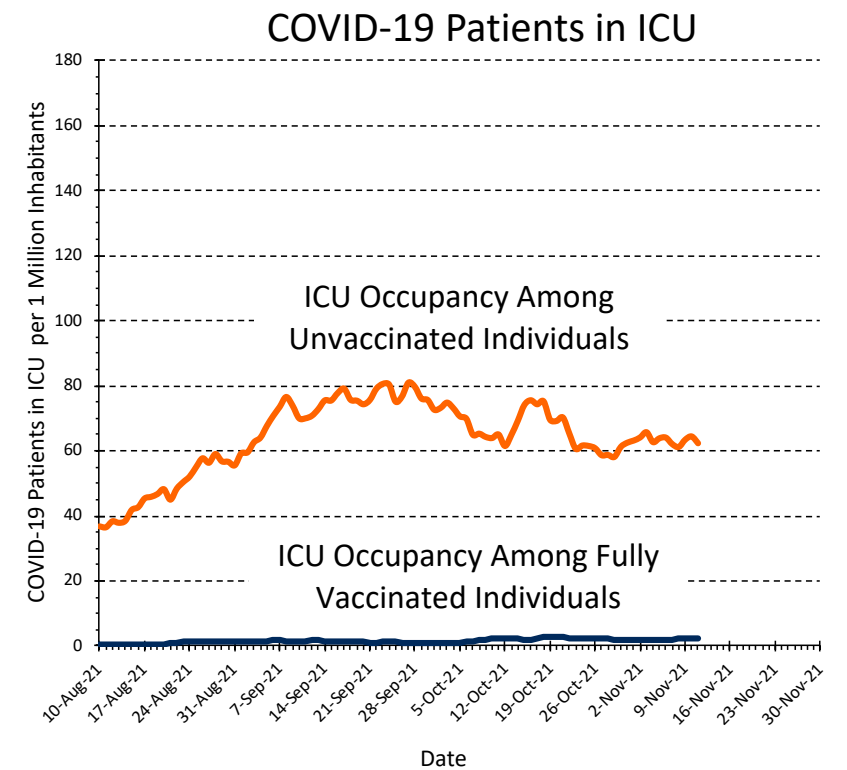
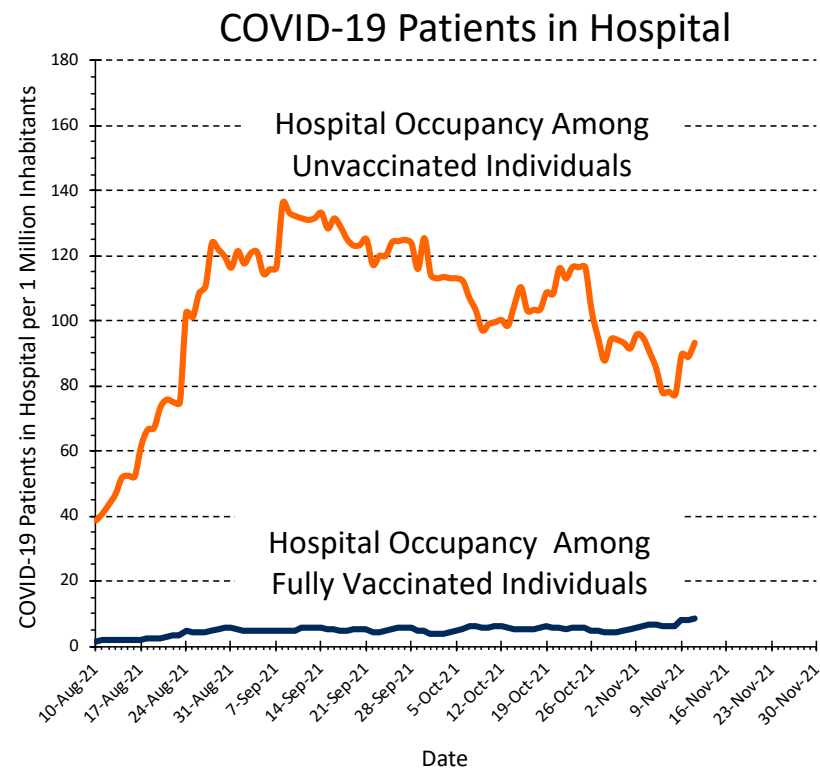
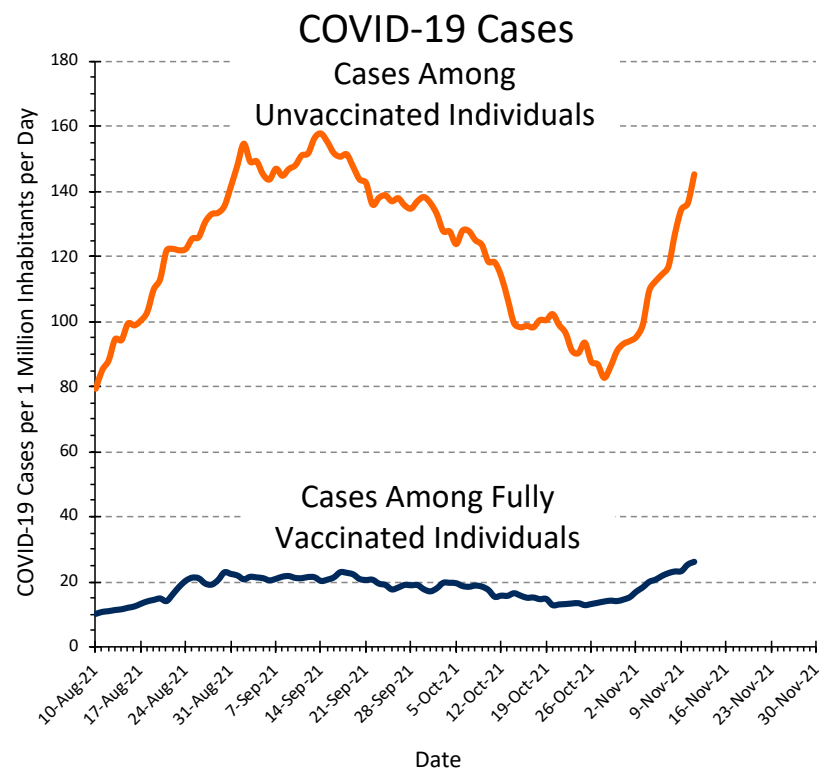
Test positivity is rising in several Public Health Units



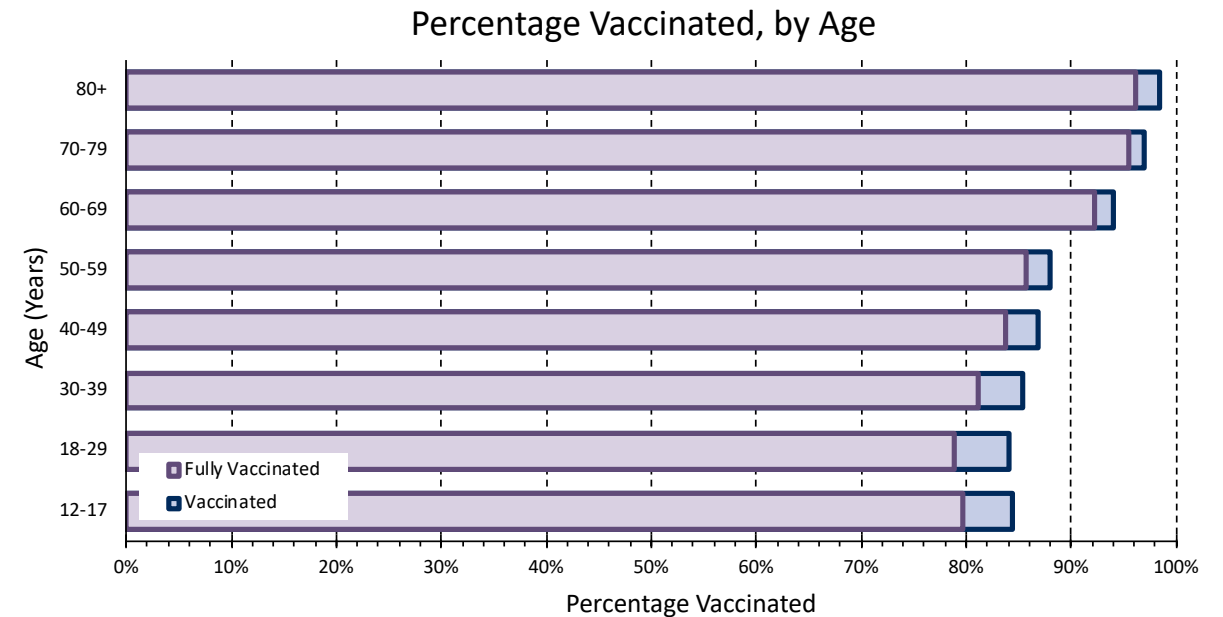
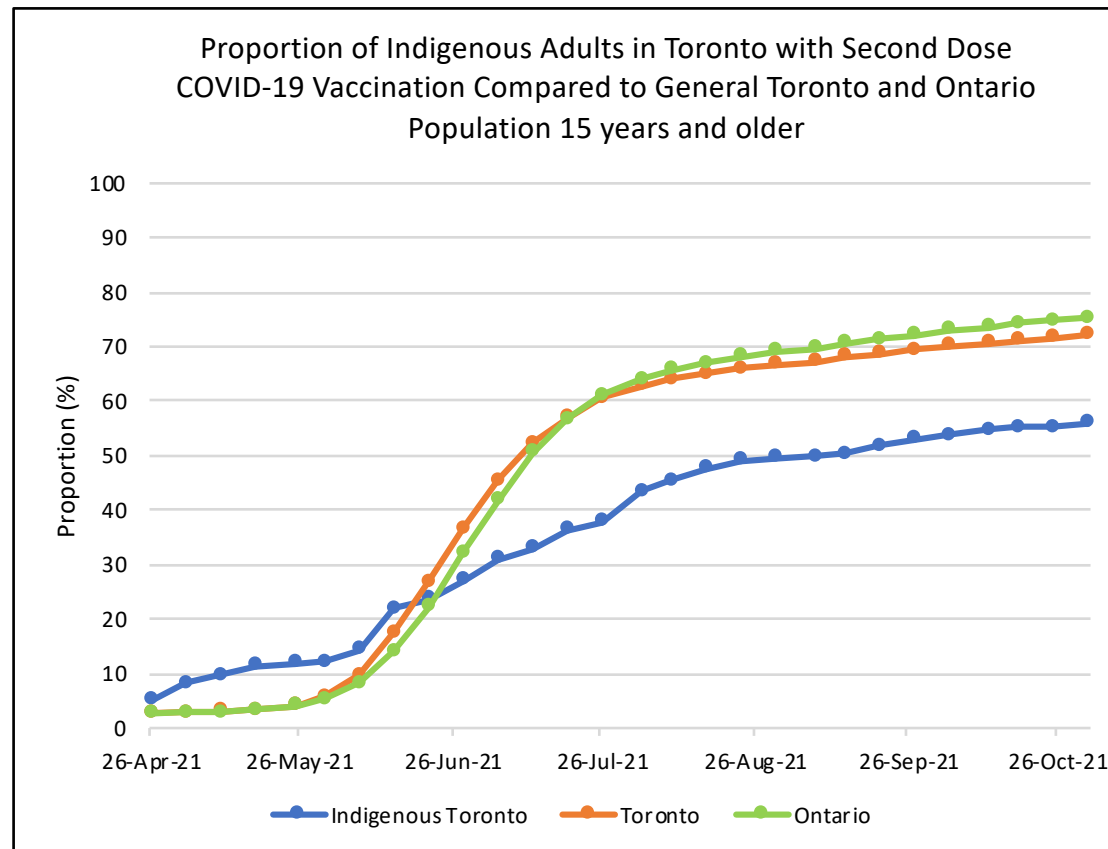
Data source: OLIS via SAS VA, data up to November 4
The most recent 3 days have been removed to account for incomplete data.

Vaccination continues to be highly effective

Unvaccinated people have a 6-fold higher risk of symptomatic COVID-19 disease, a 11-fold higher risk of being in the hospital and 26-fold higher risk of being in the ICU compared to the fully vaccinated



Vaccination coverage is increasing slowly but this hides important differences across communities and age groups

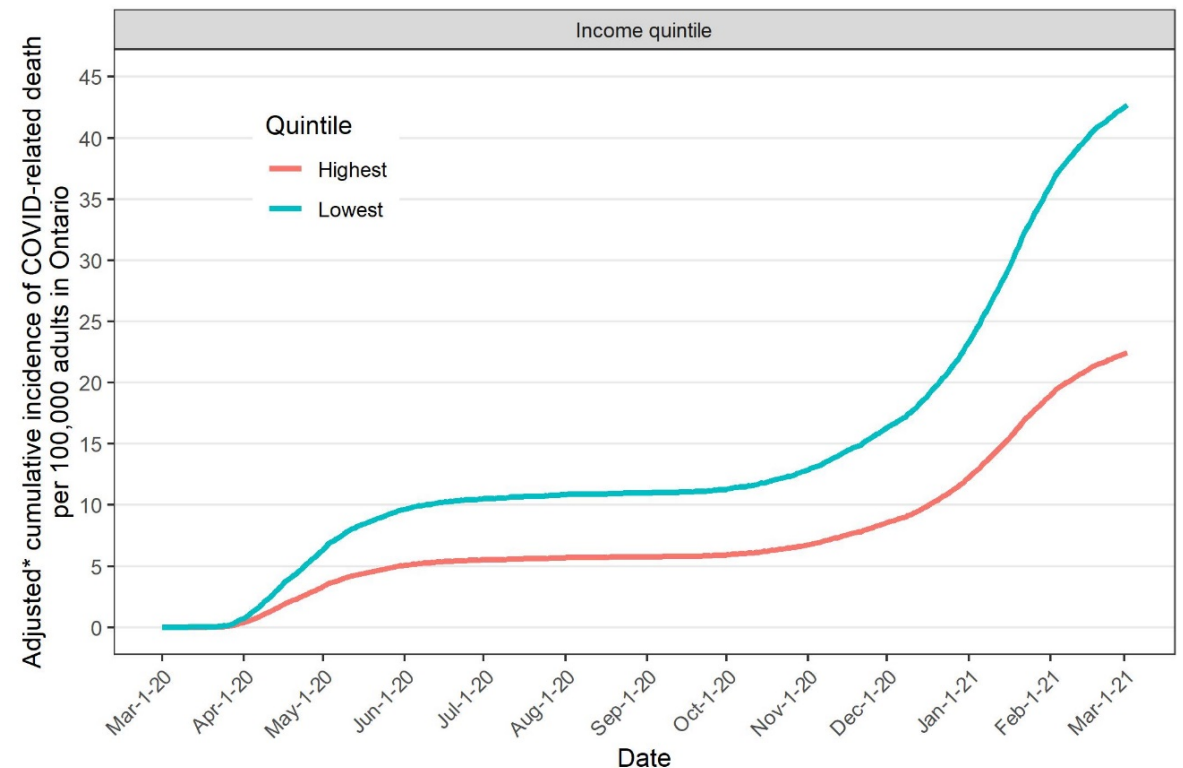


Source: Our Health Counts (OHC) Toronto ICES COVID-19 AHRQ linkage project
<http://www.wellivinghouse.com/resources/ohc-toronto-ices-covid-19-linkage-project/>

Data: <https://data.ontario.ca/>
Analysis: Secretariat of the Science Advisory Table (<https://covid19-sciencetable.ca/ontario-dashboard/>)

Social and structural inequalities determine COVID-19-related mortality, even after accounting for age, sex, and clinical factors

- Available data show people with lower income, essential workers, and visible minorities have experienced the highest risk of COVID-19-related mortality.
- Inequalities in COVID-19-related mortality stemmed from differential exposures, and access to and reach of interventions such as testing and isolation.



*Adjusted for age, sex, and clinical factors.
Cases diagnosed up to January 31, 2021

Source: Covid-19 Heterogeneity Research Group

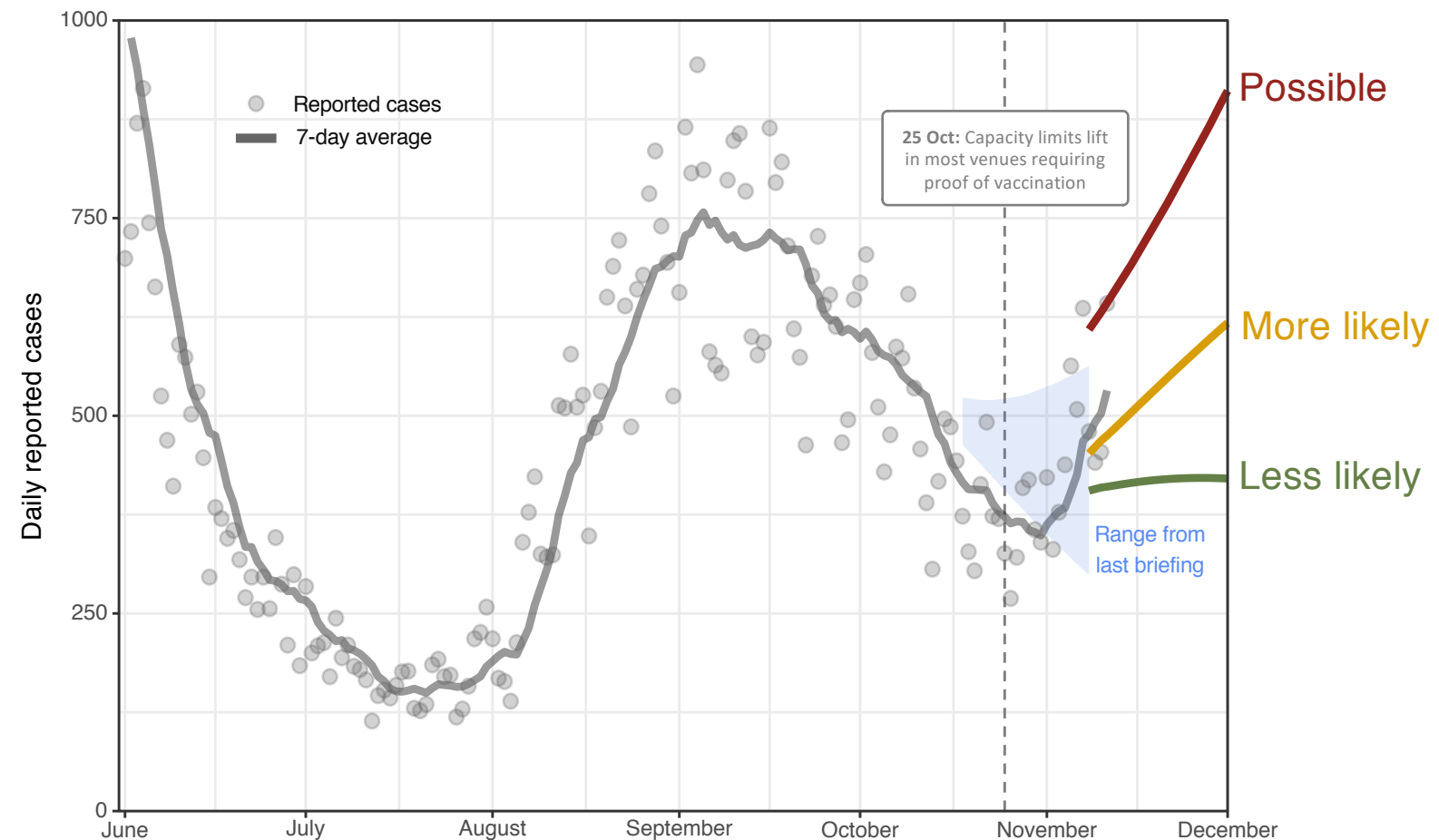
Ontario's case counts are rising, and the immediate future is uncertain

Figure shows predictions based on a consensus across models from 5 scientific teams.

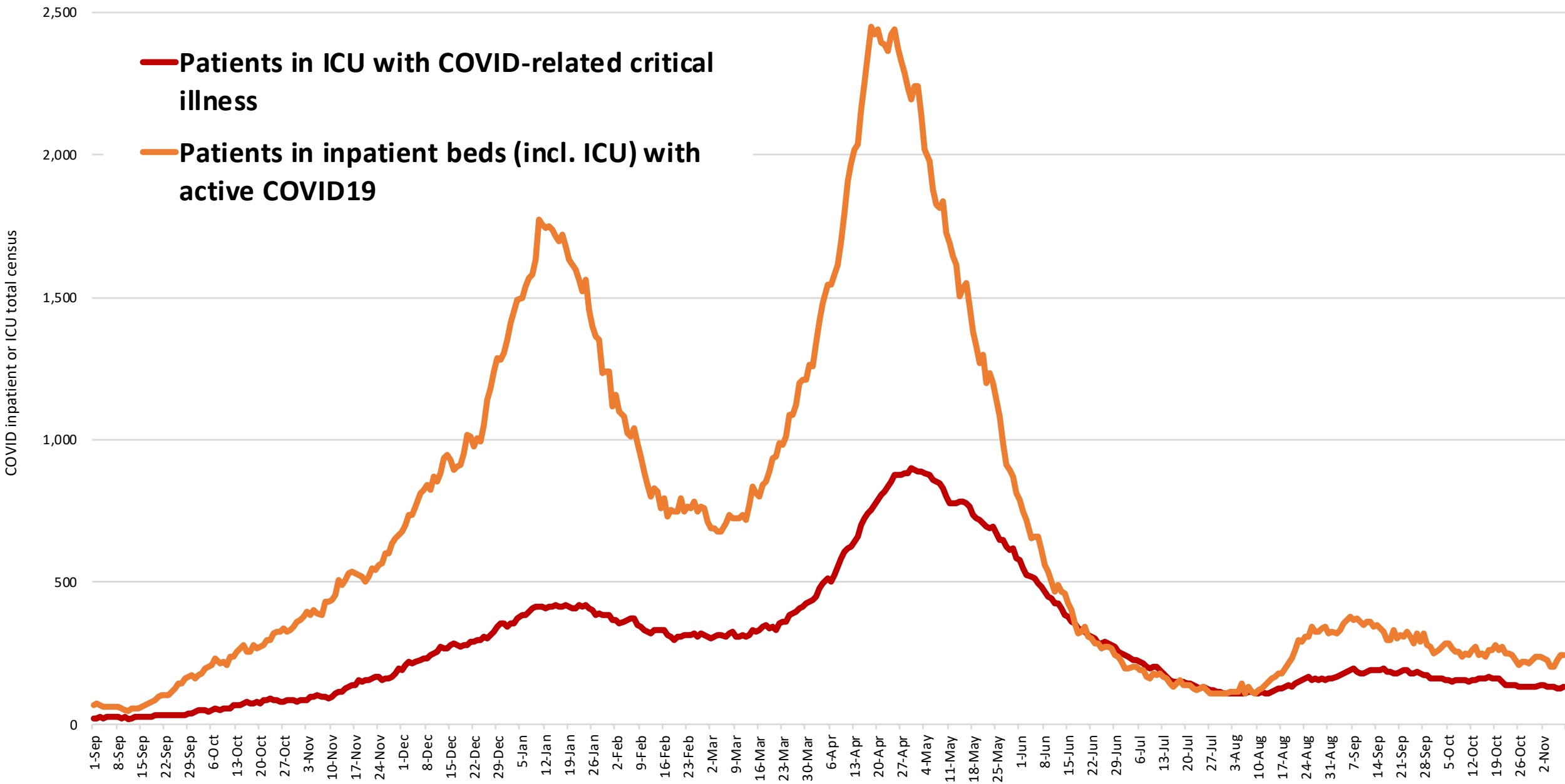
- Current projections include Oct 25 opening but no further opening.
- All scenarios assume continued public health measures.
- Because current surge is very recent, predictions are unstable and may be conservative.

Sources of recent and ongoing increased transmission:

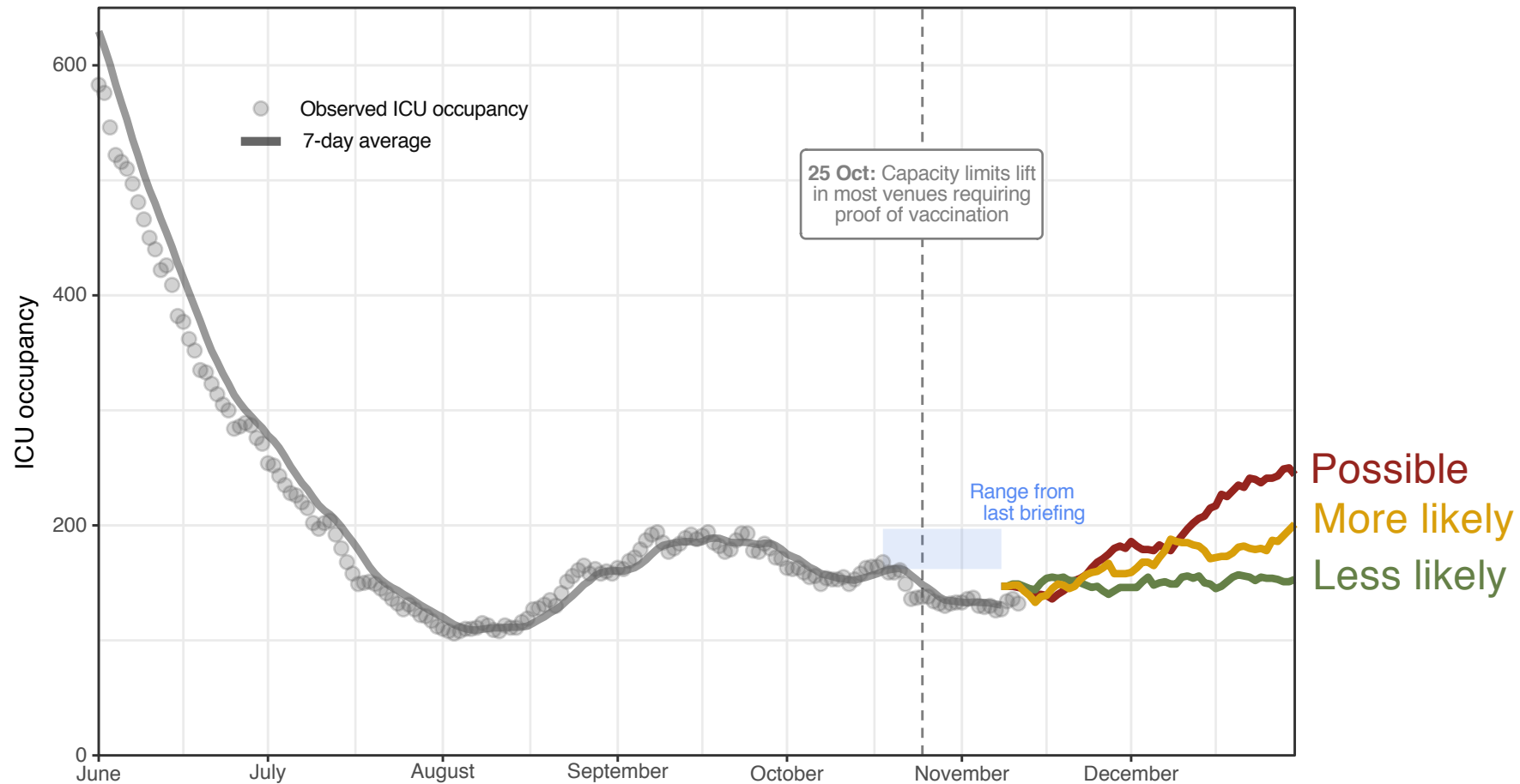
- Colder weather with more time indoors
- Lifting of capacity limits
- Indoor gatherings



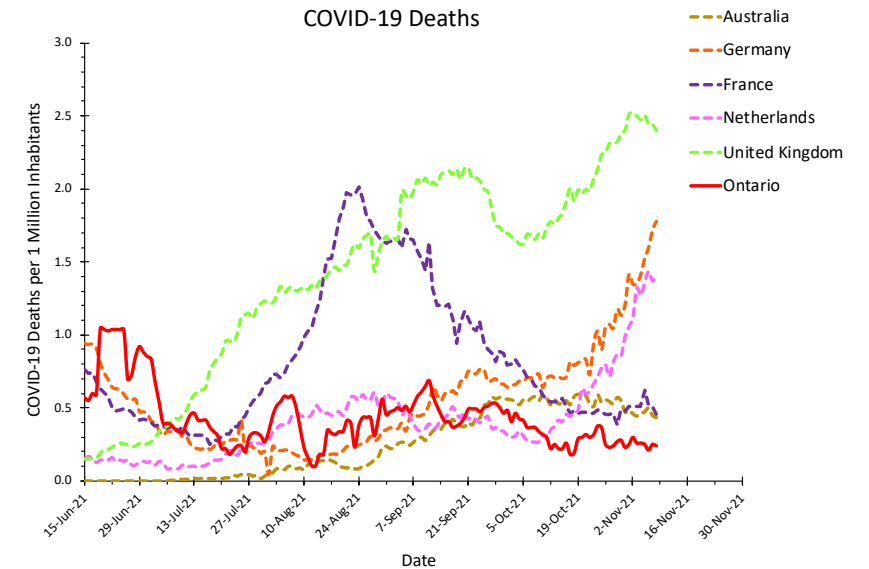
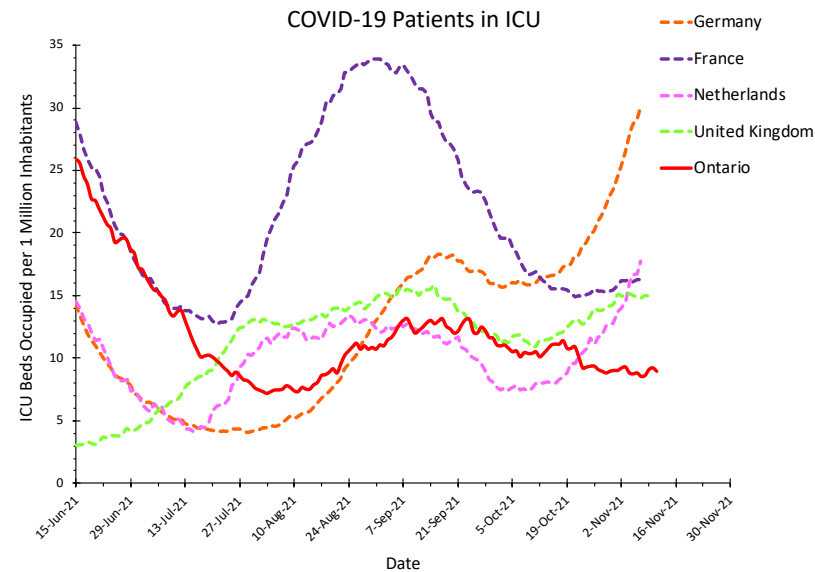
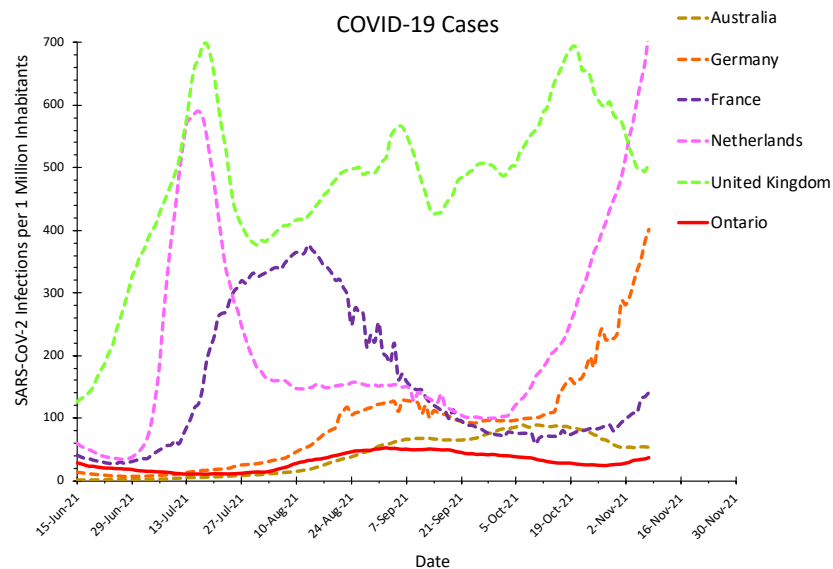
Hospitalizations and ICU occupancy are currently stable



ICU occupancy is stable right now but as cases increase, ICU occupancy will also increase



Rising cases, ICU occupancy and deaths in European peer jurisdictions show potential risk



Ontario Stringency Index (41) similar to Germany (44), Netherlands (41) and UK (41). Australia and France are at ≥ 60 .
Ontario vaccine coverage (76% of population fully vaccinated) higher than peer countries (~68%).

Key Findings

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For table membership and profiles, please visit the [About](#) and [Partners](#) pages on the Science Advisory Table website.