# **COVID-19: Monthly Update**

November 12, 2020



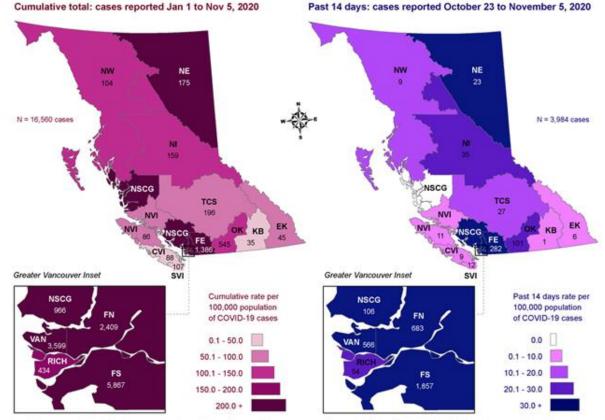




### **Epidemiology**

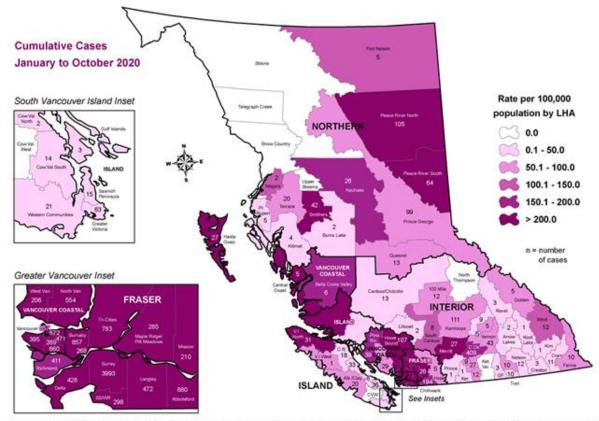
### How and Where the Virus Has Affected People in BC

Geographic
Distribution of
COVID-19 by
Health Service
Delivery Area of
Case Residence



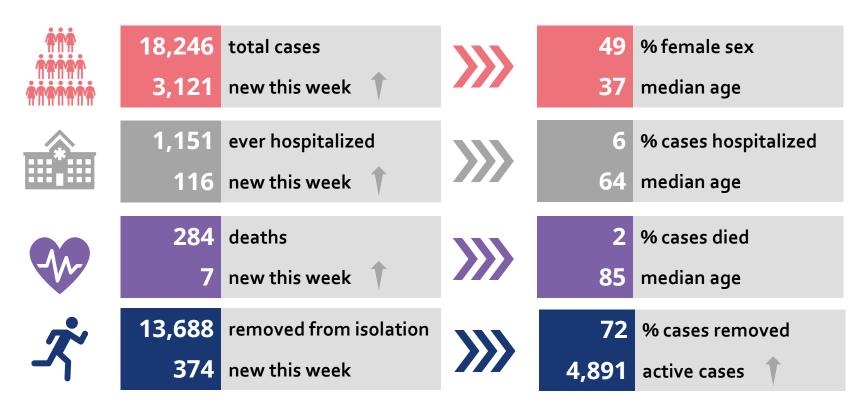
Notes: Causes are mapped by location of residence: causes with unknown residence and form out of province are not mapped. Bulla source: the 5 regional health authorities on Bittish Columbia; we operate in a live database environment and cause information from the health authorities are updated as it becomes available. How to interpret the maps: The map on the left ((bille) illustrates the groupraphic distribution of all reported causes from January 1, 2000 conversars. The map on the right (brown) illustrates the reported causes during the past 14 days. Health Service Delivery Assas (HSDA) with higher rates are illustrated in darker colour shading. The number of reported cause appears under each HSDA labet. Note that not all COVID-19 infected individuals are treated and reported, the virus may be circuiting underected in the commonly including in a rease where no causes have been identified by suble health. Mallo provide health of all covides health of a created November 5, 2000 by BCCDC.

Geographic
Distribution of
Cumulative
COVID-19 by
Local Health
Area of Case
Residence



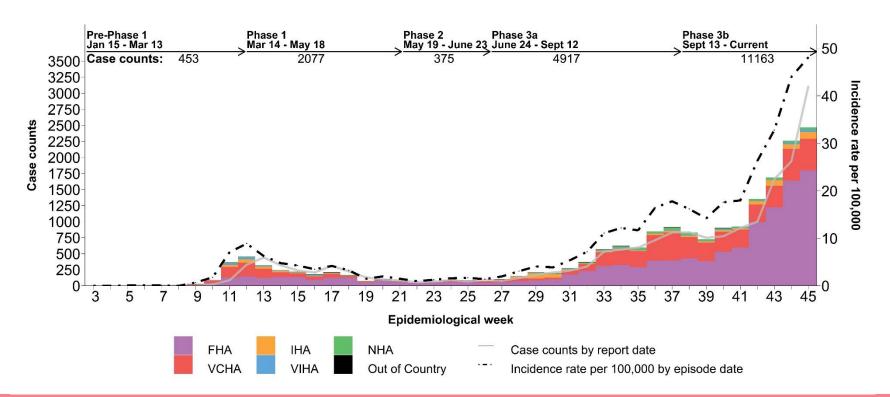
Notes: Cases are mapped by location of residence; cases with unknown residence and from out of province are not mapped. Data source: the 5 regional health authorities of British Columbia, we operate in a live database environment and case information from the health authorities are updated as it becomes available. How to interpret the maps: The map illustrates the geographic distribution of reported cases from January 1 to October 31, 2020. Local Health Areas (LHA) with higher rates are illustrated in darker colour shading. The number of experted cases appears in each LHA. Note that the number of cases in the LHA may not represent the location of exposure (e.g. people who acquired disease while traveling or morking elsewhere), and that not all COVID-19 infected individuals are tested and reported; the visus may be circulating undetected in the community, including in areas where no cases have been identified by public health.

#### **Weekly Profile of COVID-19 Cases**

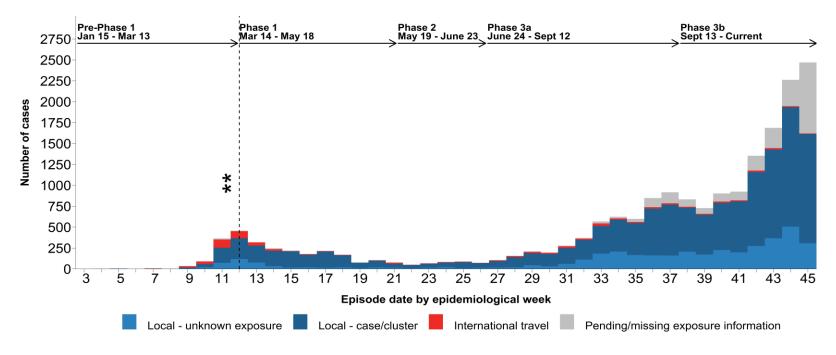


Note: Weekly comparison represents provincial data from November 1 - Nov 7 compared to October 25 - October 31, 2020.

#### Epidemic Curve, COVID-19 Cases in BC by Reported Date January 15 – November 7, 2020



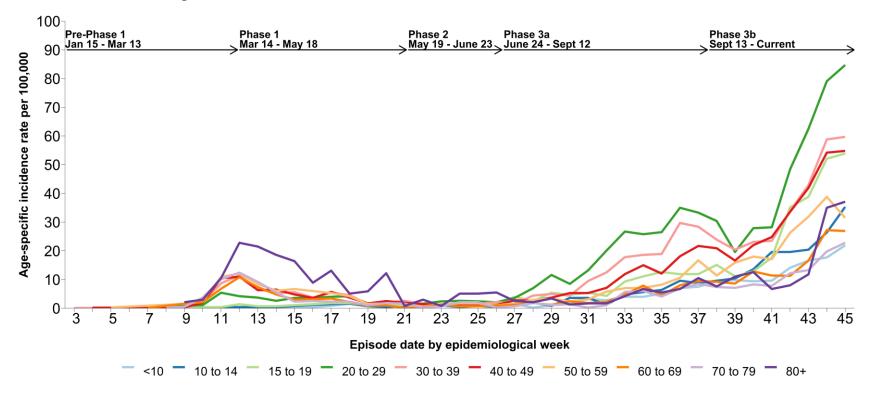
#### Likely Source of Infection for Cases by Episode Date, January 15 – November 7, 2020



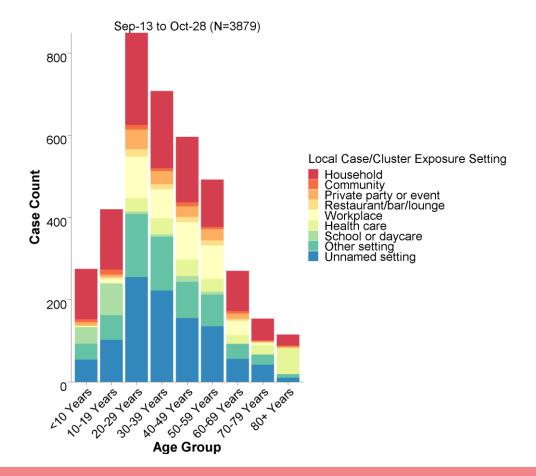
<sup>\*</sup> March 16: Entry of foreign nationals banned; symptomatic individuals banned from flights to Canada; international flights restricted to four national airports.

\*\* March 20: US/Canada border closed to non-essential travel.

# Age-Specific Incidence Rates Per 100,000 Population January 15 (Week 3) – November 7, 2020 (Week 45)



Exposure Settings By Age Group in Phase 3b (September 13 - October 28)

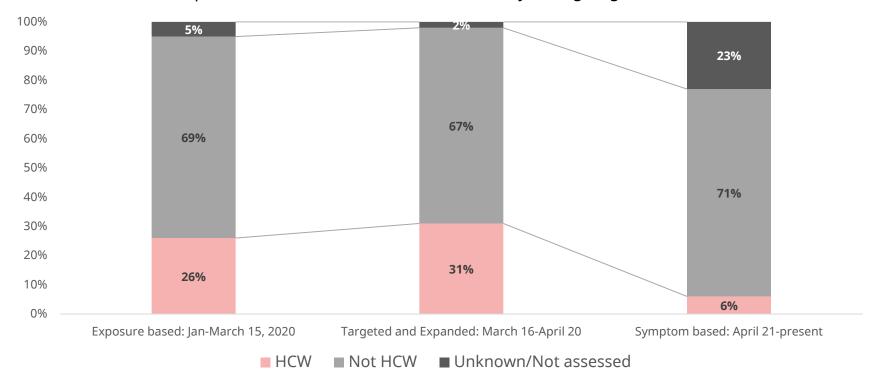


# 1 in 10 Individuals Who Had COVID-19 Identified as Health-Care Workers (HCW)

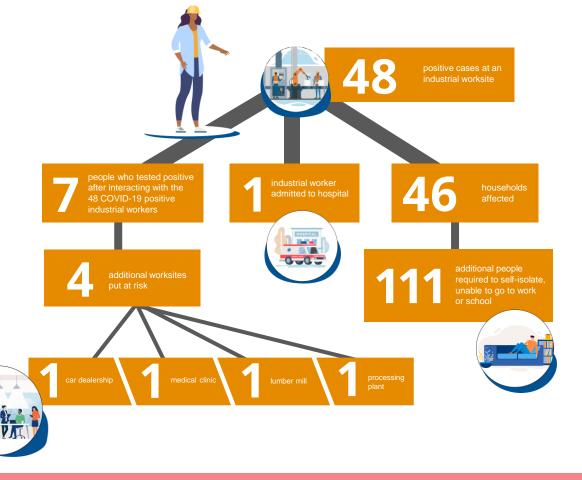
Health-care worker role	Number (n)	Proportion (%)
Nurse	215	18.3
Care aide	201	17.1
Dental professional	83	7.1
Administrative	65	5.5
Licensed practical nurse (LPN)	55	4.7
Physician	50	4.3
Housekeeping	30	2.6
Kitchen staff	23	2
Laboratory technician	17	1.4
Student	17	1.4
Emergency medical personnel	14	1.2
Lab technician	1	0.1
Student (medical, dental, nursing, lab)	1	0.1
Volunteer	1	0.1
Other	308	26.3
Unknown	92	7.8
Total	1173	100

#### The Proportion of Health-Care Worker Cases Has Declined Over Time

Proportion of health-care worker cases in BC by testing stage over time.

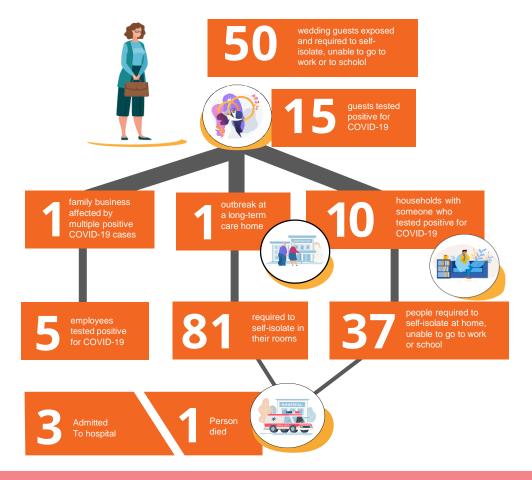






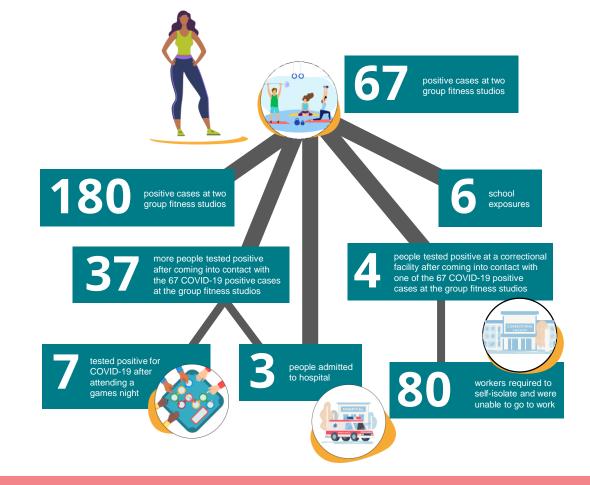
Based on actual case data.

# From Just One COVID-19 Positive Wedding Guest...



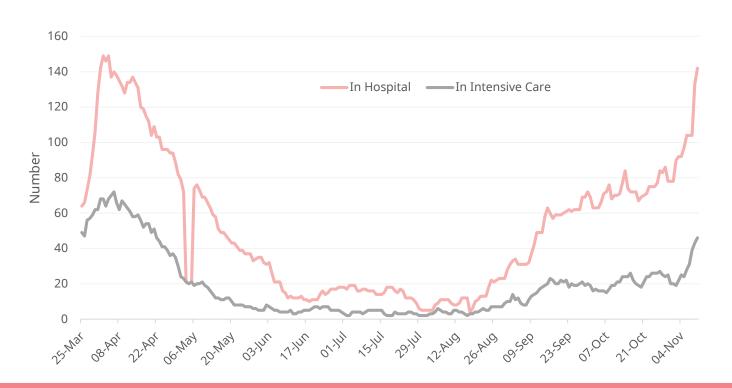
Based on actual case data.

From Just One COVID-19 Positive Person at a Fitness Class...

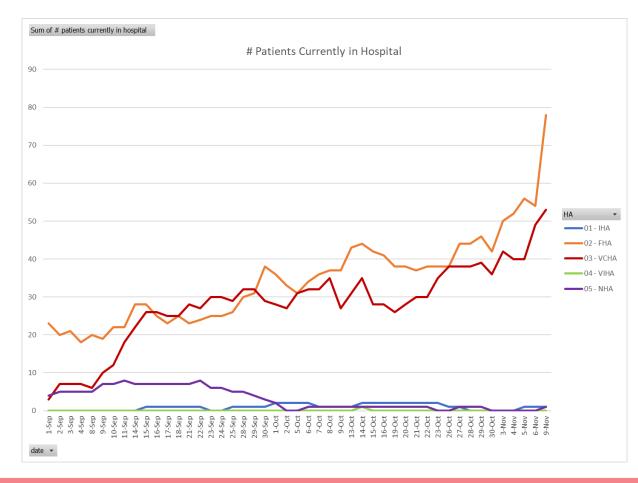


Based on actual case data.

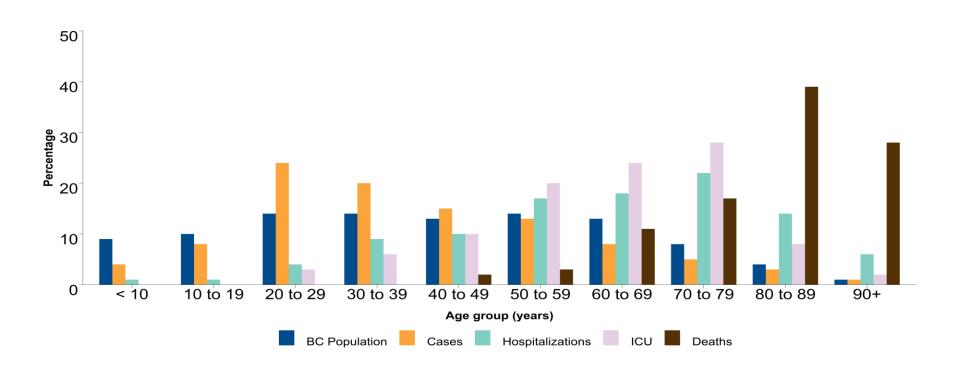
# COVID-19 Hospitalizations and Intensive Care Admissions in BC March 25 - November 10, 2020



#### Hospitalizations by Health Authority



# Percentage Distribution of COVID-19 Cases, Hospitalizations, ICU Admissions and Deaths by Age, Compared to BC Population





### **School Update**

COVID-19 Testing and Cases Among School-aged Children

#### Most School-aged Children (5-18 Years) With Symptoms Do Not Have COVID-19



- 500,000+ students and educators are back to school
- 2. Some students, educators and staff have tested COVID +
- 3. Like earlier in the pandemic, school-aged children still <10% of cases



Testing rates have increased:



From August To October

2. 6.4 in 10 tests now spit and gargle













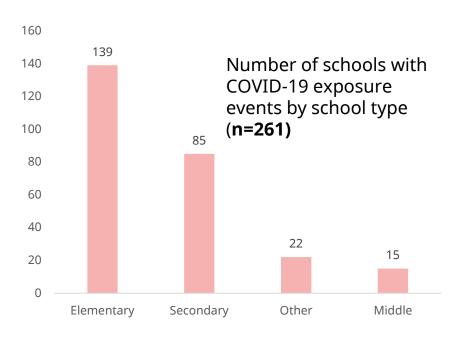
3. Only 17 in 1000 tests are COVID +

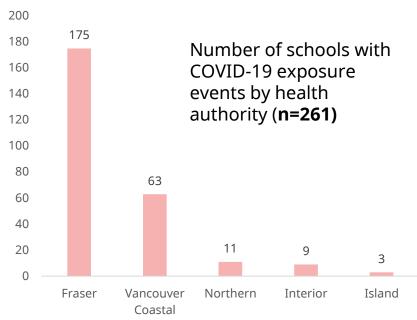


983

#### **COVID-19 Exposures in a School Setting**

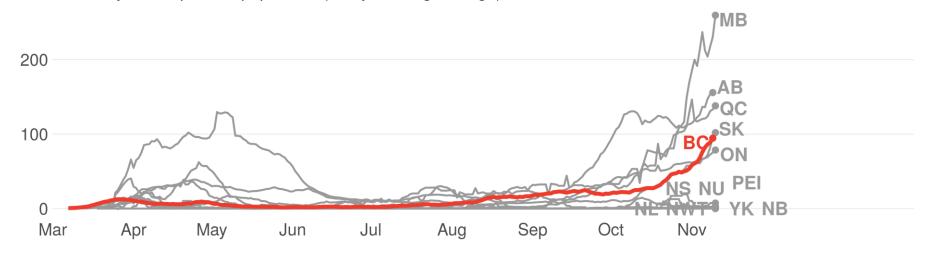
As of Nov. 5, there have been 261 school exposures in BC's 1,942 schools. More than three quarter of BC schools are elementary schools. That means around 9 in 10 schools have not had a school exposure. The exposures represent both students and adults in the school community.



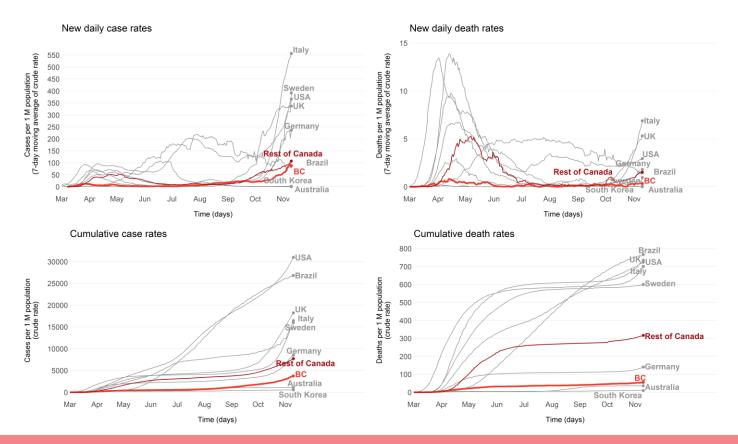


#### **Daily Case Rates Across Canada**

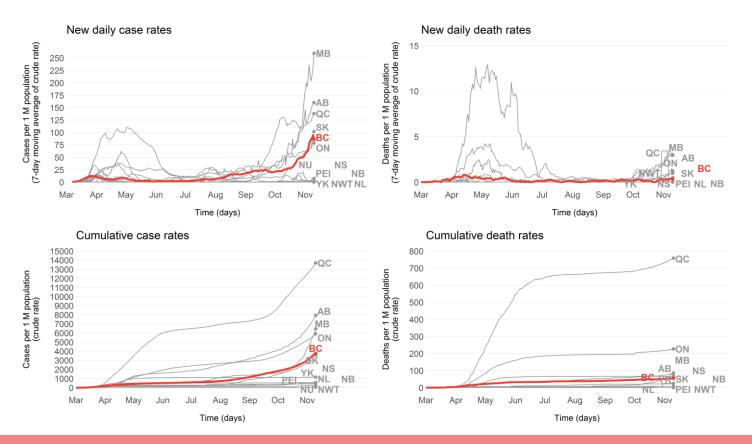
New daily **cases** per 1 M population (7-day moving average)



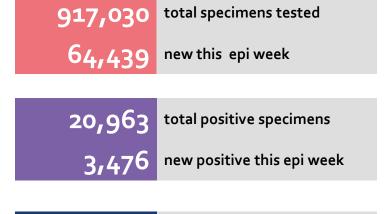
#### **International Cases**



#### **Cases and Deaths in Canada**



#### **Weekly Summary of COVID-19 Lab Testing**



**↑** 7% from last week

5.4% positivity★ 42% from last week

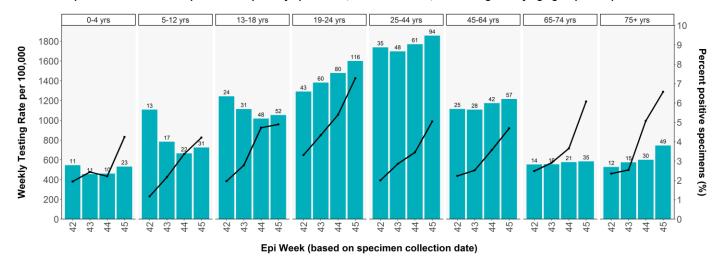
26 hr mean turnaround time (TAT)

24 [19-31] Median [Q1-Q3] TAT

Data source: PLOVER extract at 10:30am on Nov 12, 2020. Integrated Lab Data extract at 10:30am on Nov 12, 2020. Epi week 45 ( Nov 1-7)

#### Proportion of SARS-CoV-2 Positive\* Respiratory Specimens and Testing Rate by Age Group And Epi Week in BC

Proportion of SARS-CoV-2 positive\* respiratory specimens, incidence rate\*\*, and testing rate by age group and epi week in BC



Percent positive specimens

Data source: PLOVER 09-Nov-2020

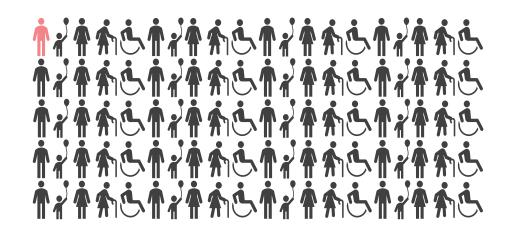
<sup>\*</sup>Non-resulted specimens are excluded. Specimens collected from individuals with unknown age are excluded.

<sup>\*\*</sup>Numbers on top of histogram bars are the incidence rate per 100,000.

#### By September, COVID-19 Sero-Prevalence Still Low in BC, at About 1%

About 1 in 100 residents tested antibody positive in September

After June re-opening, BC successfully controlled community transmission this summer





2000 anonymized residual samples from Lower Mainland residents of all ages were tested for antibodies in September

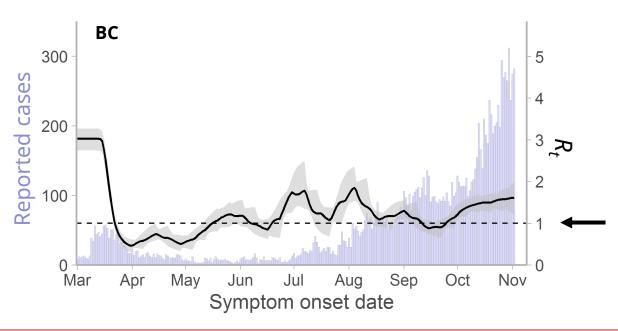


19 of 2000 (1%) overall tested positive 8 of 400 (2%) aged 20-39 years positive

Antibody screening study led by Drs. Danuta Skowronski and Mel Krajden of the BC Centre for Disease Control (BCCDC) and BCCDC Public Health Laboratory (PHL), in partnership with LifeLabs. Funded by the Michael Smith Foundation for Health Research and the Public Health Agency of Canada (PHAC). Views expressed herein do not necessarily represent the views of PHAC.

#### **Dynamic Compartmental Modelling: Recent Trends**

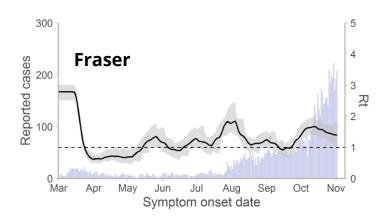
Provincially, our model-based estimate of  $R_t$  (average daily number of new infections generated per case) remains above 1.

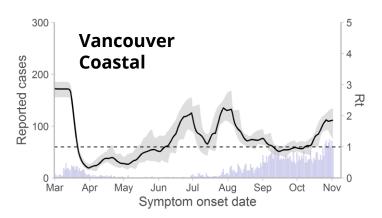


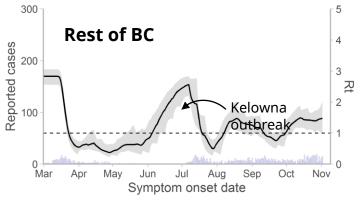
Solid black line: median  $R_{\rm t}$  based on data up to Nov 9, 2020; Grey band: 5%-95% credible interval; Purple bars: reported cases, excluding reportable outbreaks.

#### **Dynamic Compartmental Modelling: Recent Trends**

Our model suggests that  $R_t$  is now close to or above 1 in several regions of BC.



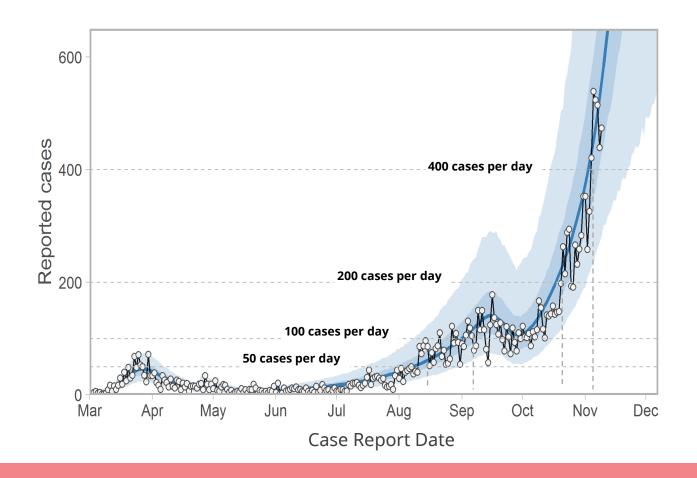




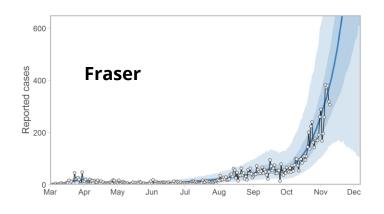
#### Dynamic Compartmental Modelling: Recent Trends

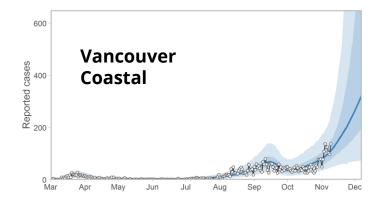
Current estimated doubling time: **13 days** 

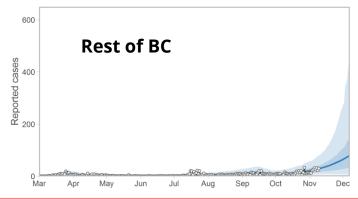
Solid blue line: median model fit; shaded bands: 50% and 90% credible intervals; Open circles: all reported cases, excluding reportable outbreaks, March 1 – Nov 9, 2020.



#### **Dynamic Compartmental Modelling: Recent Trends**









#### **Health Human Resources**

#### **Health Human Resources – Contact Tracing**

- Significant progress made to hire contact tracers across the province, in particular in the Lower Mainland. This week alone an additional **56 roles** were filled.
- To date, 636 individuals have been hired

   more than the 500 initially announced
   in August, and 608 announced in
- In addition, government has recently approved increases to several health authorities, bringing the total number to be hired to over 800.
- Contact tracers can be deployed to regions most in need.

Health Authority	Hired to Date	In interview/ offer stage	
Fraser Health	237	86	
Interior Health	24	15	
Northern Health	22 0		
Vancouver Coastal Health	181	71	
Vancouver Island Health	47	0	
Provincial Health Services Authority	125	0	
Total	636	172	

#### **Health Human Resources Supporting Seniors**

#### Visitation and Infection Prevention Control: 2000 FTEs

- Funding has been provided to operators and recruitment is ongoing
- As of Nov. 9, approximately **826 FTEs** have been hired across all health authorities

#### Health Career Access Program (HCAP):

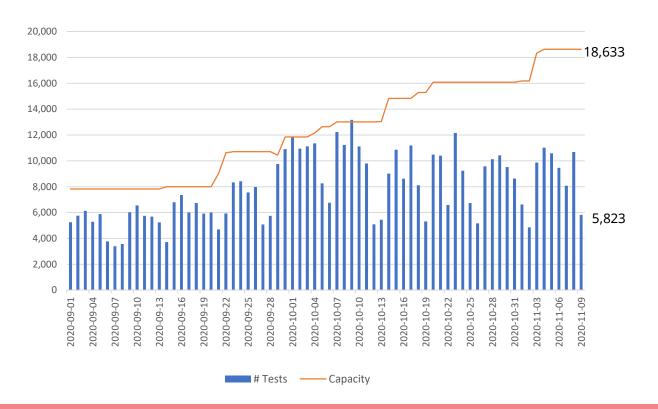
- **8,949** participants have expressed interest in the program and nearly **5,000** have undergone a preliminary interview/screening process.
- **So far, 360 sites out of 564** have expressed interest in becoming HCAP employers. Regional allocation plans are now being finalized. Ministry officials continue to work with remaining operators to support their participation in HCAP.
- 101 health-care support worker positions have already been allocated across BC through early adopter cohorts. Training is being done in collaboration with 5 post-secondary institutions: Selkirk College, College of New Caledonia, Langara College, Vancouver Community College and North Island College.



## **Lab Services Capacity**

#### **Province Testing and Capacity**

Testing capacity has steadily increased and can easily accommodate an increase in testing if required.





### **Hospital Capacity**

#### **Hospital Occupancy Rates as of Nov.9, 2020**

на	٧	Current Occupancy Rate (Base Beds)	Vacant Base Beds	Base Beds	Surge Occupancy Rate	Vacant Surge Beds	Surge Beds	Grand Total Occupancy Rate (Base+Surge)	Grand Total Vacant Beds (Base+Surge)	Grand Total Beds (Base+Surge)
⊟FH	A	93.4%	89	1339	0.0%	431	431	70.6%	520	1770
BIHA	4	93.5%	77	1192	0.0%	278	278	75.9%	355	1470
⊟ин	Α	93.0%	25	359	0.0%	133	133	67.9%	158	492
⊟PH	SA	67.3%	52	159	0.0%	50	50	51.2%	102	209
∃vc	Н	98.1%	32	1654	0.0%	843	843	65.0%	875	2497
∃VII	A	90.9%	116	1277	0.0%	59	59	86.9%	175	1336

#### **Critical Care**

Includes ICU, HAU, CSICU, CCU, PICU Excludes NICU

на 🐣	Current Occupancy Rate (Base Beds)	Surge Occupancy Rate	Vacant Surge Beds	Surge Beds	Grand Total Occupancy Rate (Base+Surge)	Grand Total Vacant Beds (Base+Surge)	Grand Total Beds (Base+Surge)
<b>⊟ FHA</b>	80.1%	0.0%	115	115	43.4%	142	251
∃IHA	82.1%	0.0%	23	23	64.5%	38	107
<b>⊟ NHA</b>	68.3%	0.0%	23	23	43.8%	36	64
<b>⊟ PHSA</b>	58.3%	0.0%	16	16	25.0%	21	28
<b>⊟VCH</b>	88.4%	0.0%	82	82	55.5%	98	220
<b>⊟VIHA</b>	58.8%		0	0	58.8%	40	97
Grand							
Total	77.2%	0.0%	259	259	51.1%	375	767



### **Surgical Renewal Commitment**

#### **Surgical Update**

- On May 7, health authorities began calling all patients waiting for surgery to confirm that they were ready, willing, and able to proceed with their surgery in a COVID-19 environment.
- To date <u>107,789</u> patients have been contacted about their surgery with five of six health authorities having completed calls to all patients on the waitlist prior to May 7. Island Health expects to complete this work in the coming weeks.
- Health authorities resumed non-urgent surgeries on May 18 and have completed a combined total of <u>159,634</u> surgeries as of **Nov. 8**, <u>2020</u>, of which <u>124,078</u> were urgent and non-urgent scheduled surgeries, and <u>35,556</u> were unscheduled or emergency surgeries.

Health Authority	Surgeries Completed Since May 18
Fraser Health	43,794
Interior Health	29,204
Northern Health	9,277
Vancouver Coastal Health	37,573
Vancouver Island Health	33,312
Provincial Health Services Authority	6,474

#### **Weekly Surgical Updates**

All HA Completed Cases:						
Week Inclusive of:	Scheduled	Unscheduled	Total			
March 16-March 22	2,178	1,312	3,490			
March 23-March 29	1,157	1,096	2,253			
March 30-April 5	1,142	1,036	2,178			
April 6-April 12	972	1,105	2,077			
April 13 - April 19	991	1,238	2,229			
April 20-April 26	1,277	1,268	2,545			
April 27-May 3	1,432	1,300	2,732			
May 4-May 10	1,508	1,301	2,809			
May 11-May 17	1,766	1,457	3,223			
May 18-May 24	2,603	1,382	3,985			
May 25-May 31	4,004	1,380	5,384			
June 1-June 7	4,780	1,430	6,210			
June 8-June 14	5,154	1,385	6,539			
June 15-June 21	5,312	1,364	6,676			
June 22-June 28	5,577	1,432	7,009			
June 29-July 5	4,060	1,437	5,497			
July 6-July 12	5,178	1,435	6,613			
July 13 - July 19	5,279	1,577	6,856			
July 20-July 26	5,207	1,475	6,682			
July 27-August 2	4,455	1,503	5,958			
August 3-August 9	3,570	1,416	4,986			
August 10-August 16	4,907	1,529	6,436			
August 17-August 23	4,912	1,546	6,458			
August 24-August 30	4,949	1,472	6,421			
August 31-Sept 6	4,790	1,412	6,202			
Sept 7-Sept 13	4,452	1,423	5,875			
Sept 14-Sept 20	5,648	1,387	7,035			
Sept 21-Sept 27	5,800	1,445	7,245			
Sept 28-Oct 4	5,660	1,486	7,146			
Oct 5-Oct 11	5,674	1,432	7,106			
Oct 12-Oct 18	4,587	1,348	5,935			
Oct 19-Oct 25	5,856	1,367	7,223			
Oct 26-Nov 1	5,853	1,326	7,179			
Nov 2-Nov 8	5,811	1,167	6,978			
Cumulative total inclusive of March						
16-May 17 (wrap up)	12,423	11,113	23,536			
Cumulative total inclusive of May						
18-November 8	124,078	35,556	159,634			



### Influenza Vaccine Update

BC has ordered 1,970,000 doses of influenza vaccine so far and is in the process of purchasing 271,600 additional doses.

**Total Doses Distributed Total Doses Distributed** as of Nov 1, 2020 as of Nov 1, 2020 **FHA** 326,400 612.045 IHA 165,340 318,040 NHA 46,330 75,425 **VCHA** 332,840 529,100 **VIHA** 193,410 316,520 Total 1,064,320 1,851,130

This will provide a total of 2,241,600 doses of influenza vaccine, a 47% increase over last year.

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