

Update on COVID-19 Projections

Science Advisory and Modelling Consensus Tables

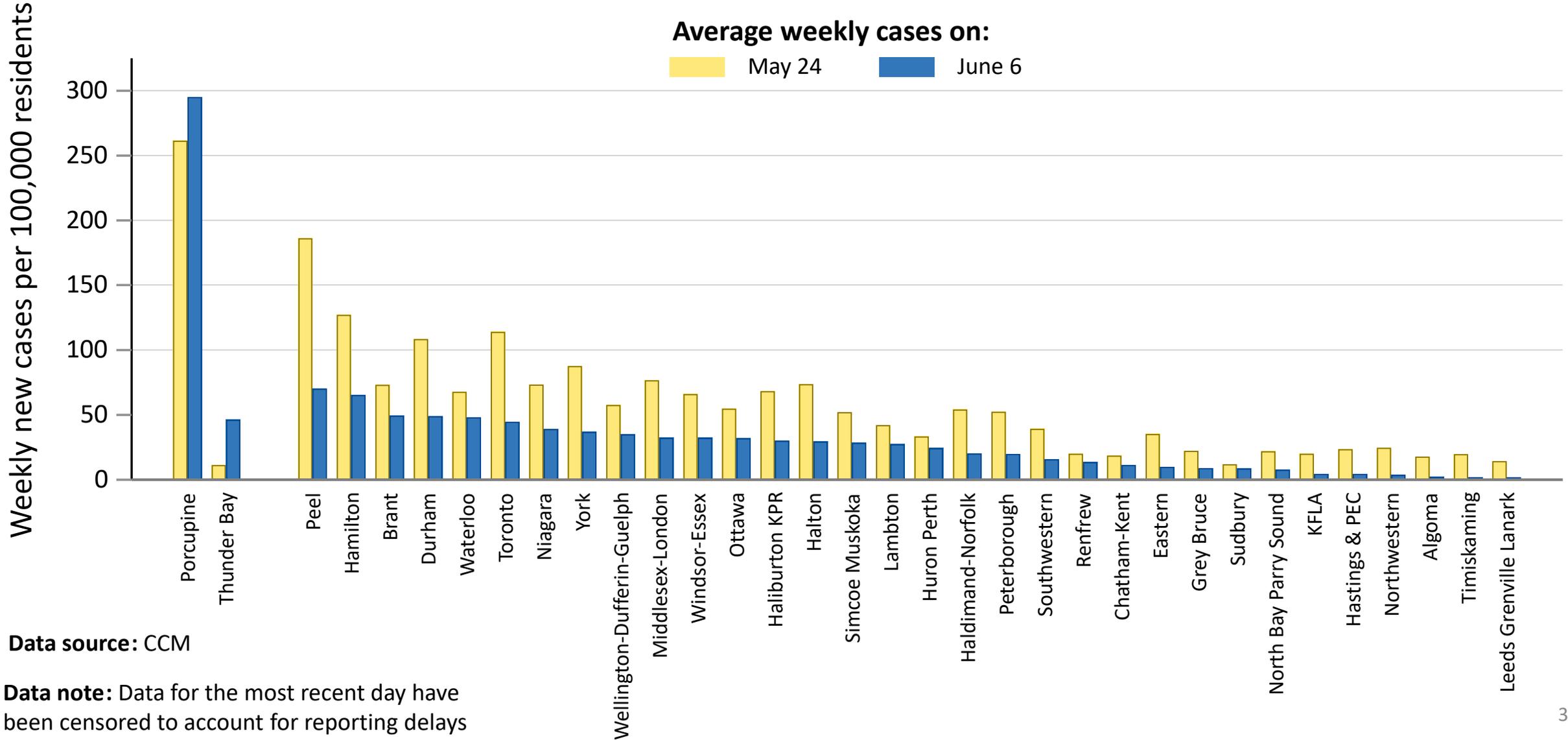
June 10, 2021



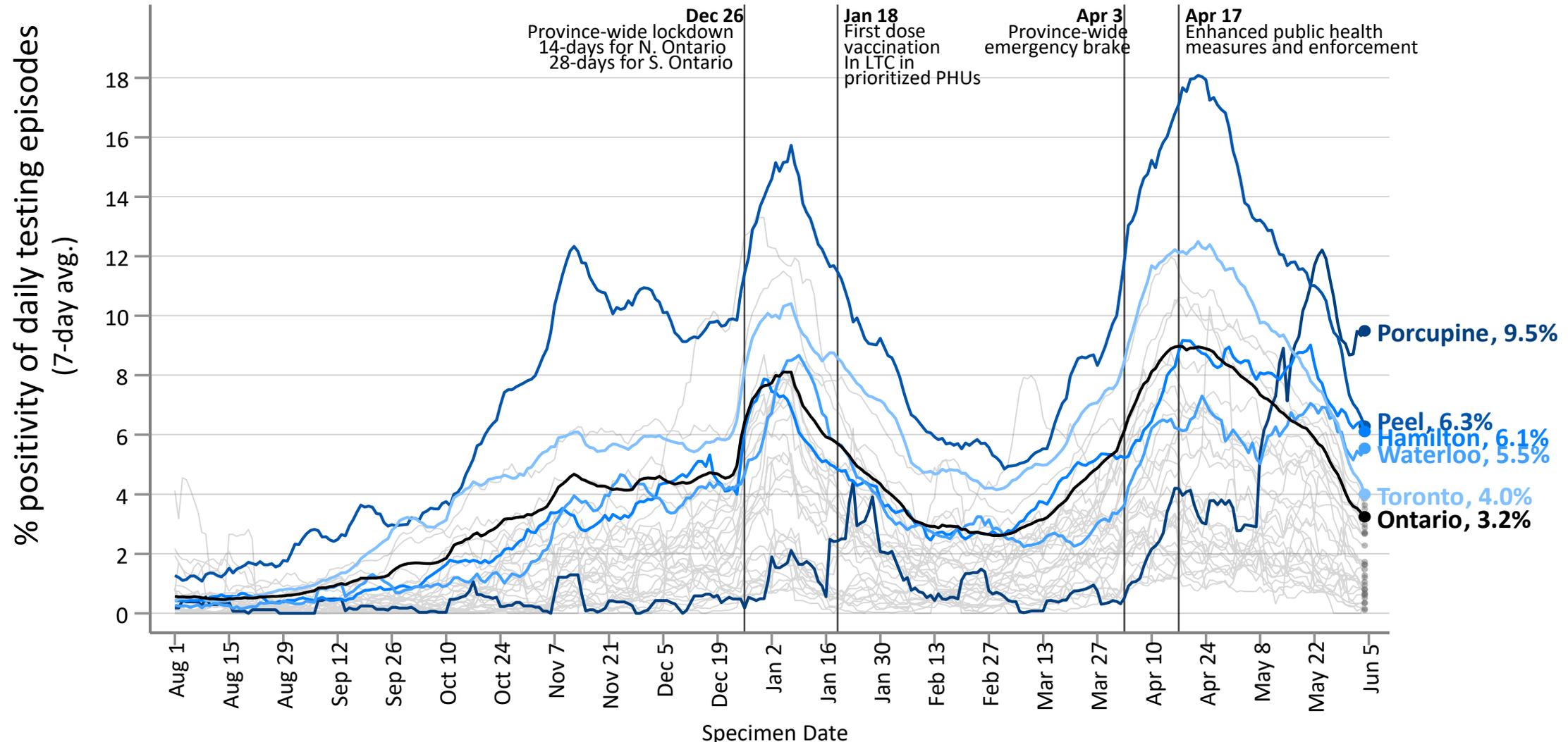
Key Findings

- Cases, percent positivity, and hospitalizations have all dropped sharply thanks to the commitment of Ontarians.
- Cases should continue to decline for the next 10 days. As vaccination continues, it will be important to monitor carefully for new variants and continue assessing for signs of breakthrough and serious infection.
- The Delta variant is more transmissible and may be more dangerous. It will likely be the dominant form of the virus this summer. It is critical to control the spread of this variant.
- To avoid a fourth wave, we need to continue to **ensure first and second doses in high-risk communities**, continue **tailoring vaccine clinics to community needs**, and ensure strong testing and case and contact tracing.

Cases have decreased sharply in almost all Public Health Units

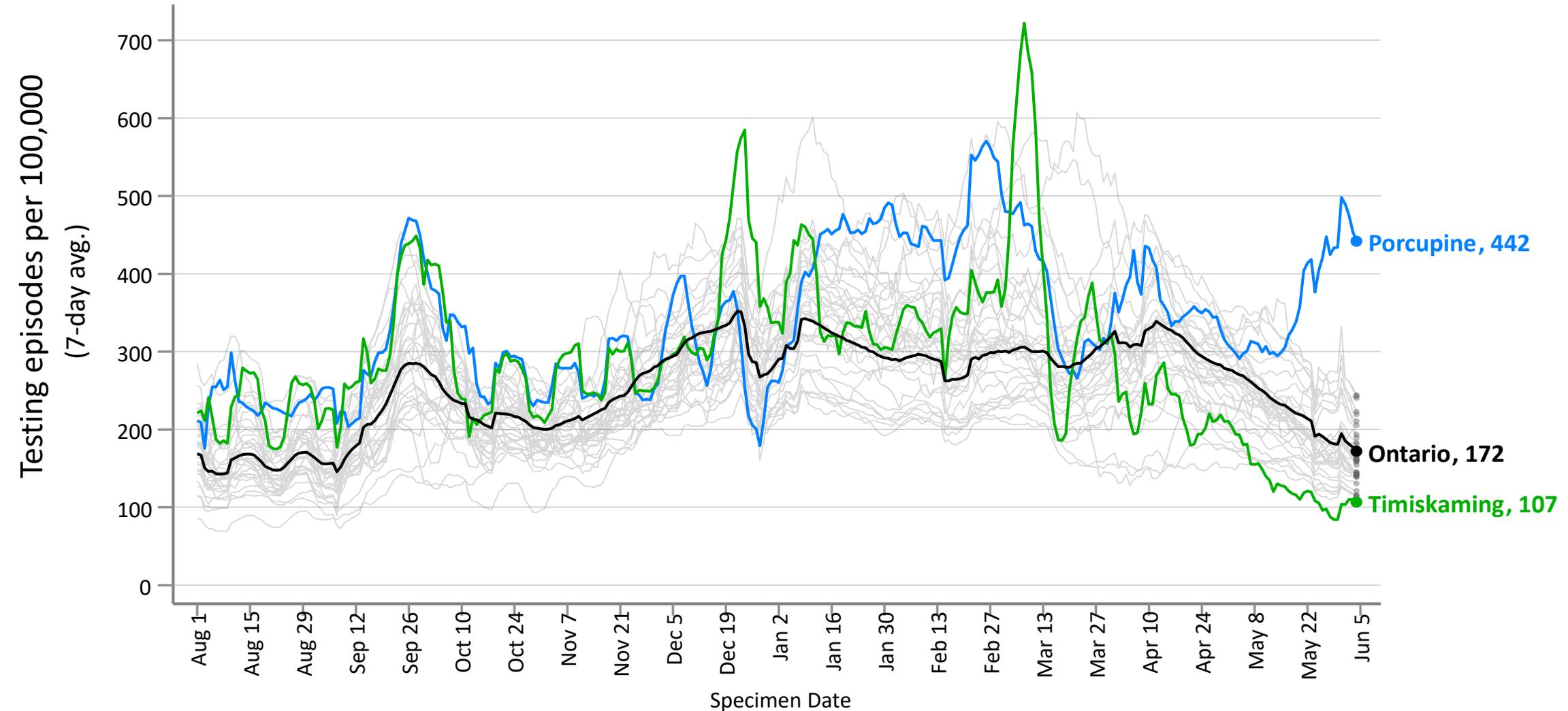


% positivity has declined sharply since the last briefing



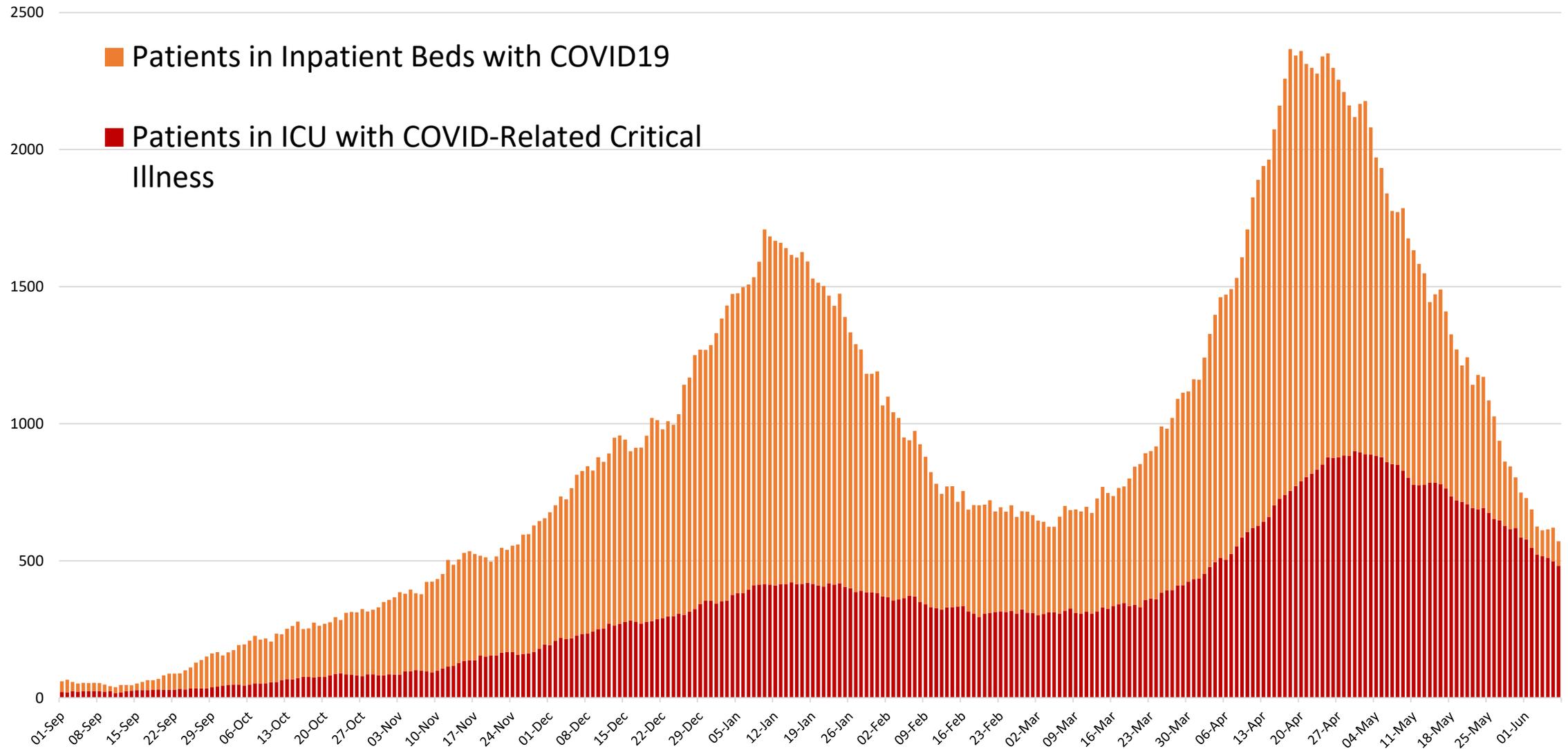
Data source: Ontario Laboratory Information System (OLIS), data up to June 4

Testing has declined. Continued strong monitoring will be critical for control of the pandemic.



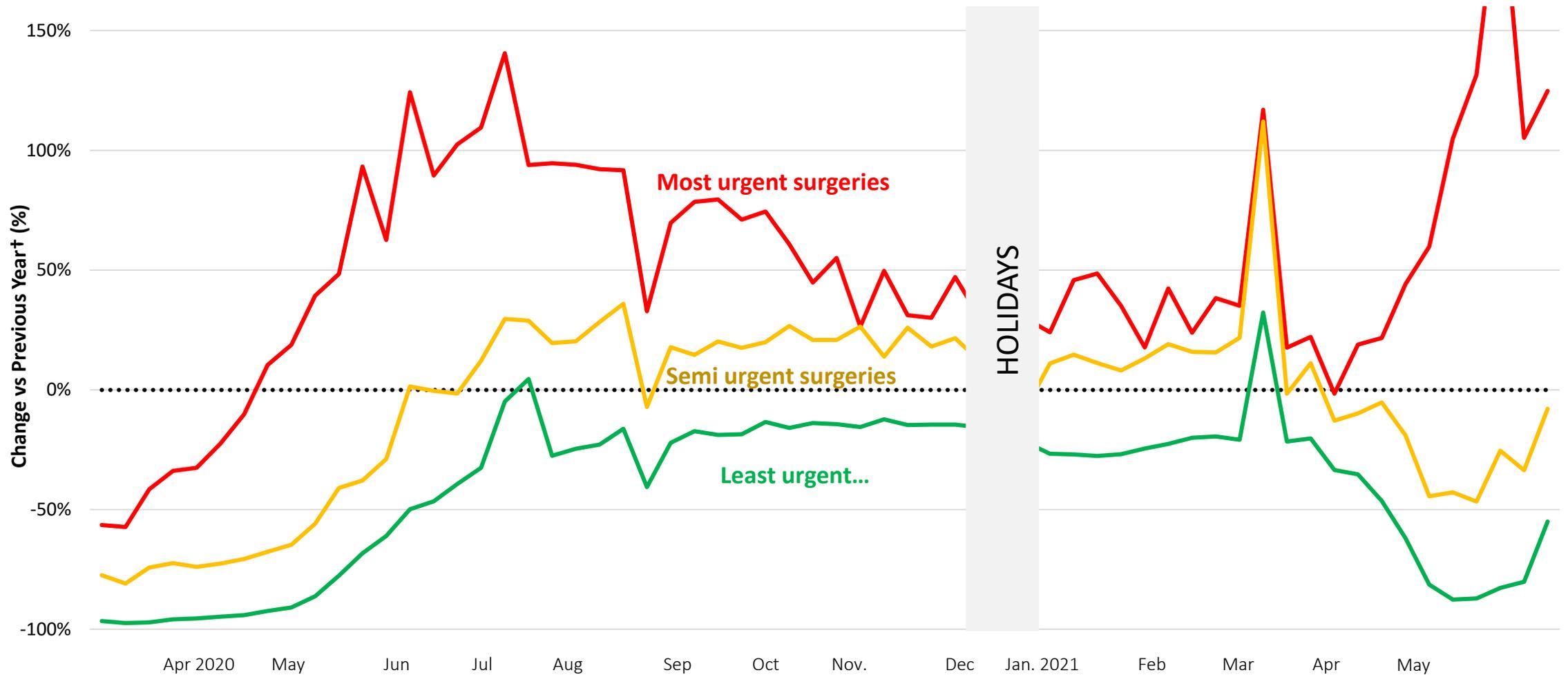
Data source: Ontario Laboratory Information System (OLIS), data up to June 4

COVID-19 hospitalizations and ICU occupancy have dropped



Data Sources: MOH COVID Inpatient Census and Critical Care Information System

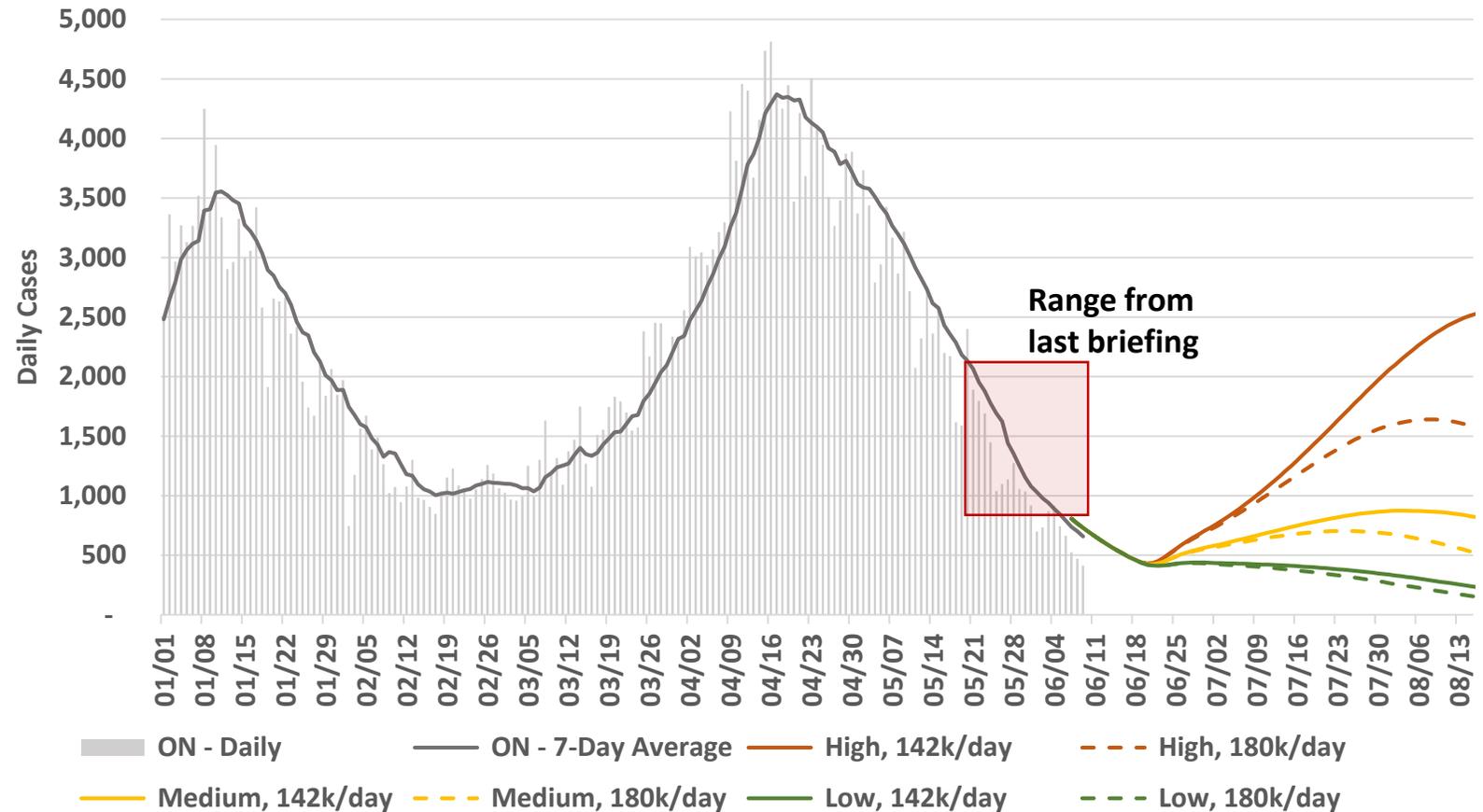
Continuing control of the pandemic will be key to reducing the access-to-care deficit



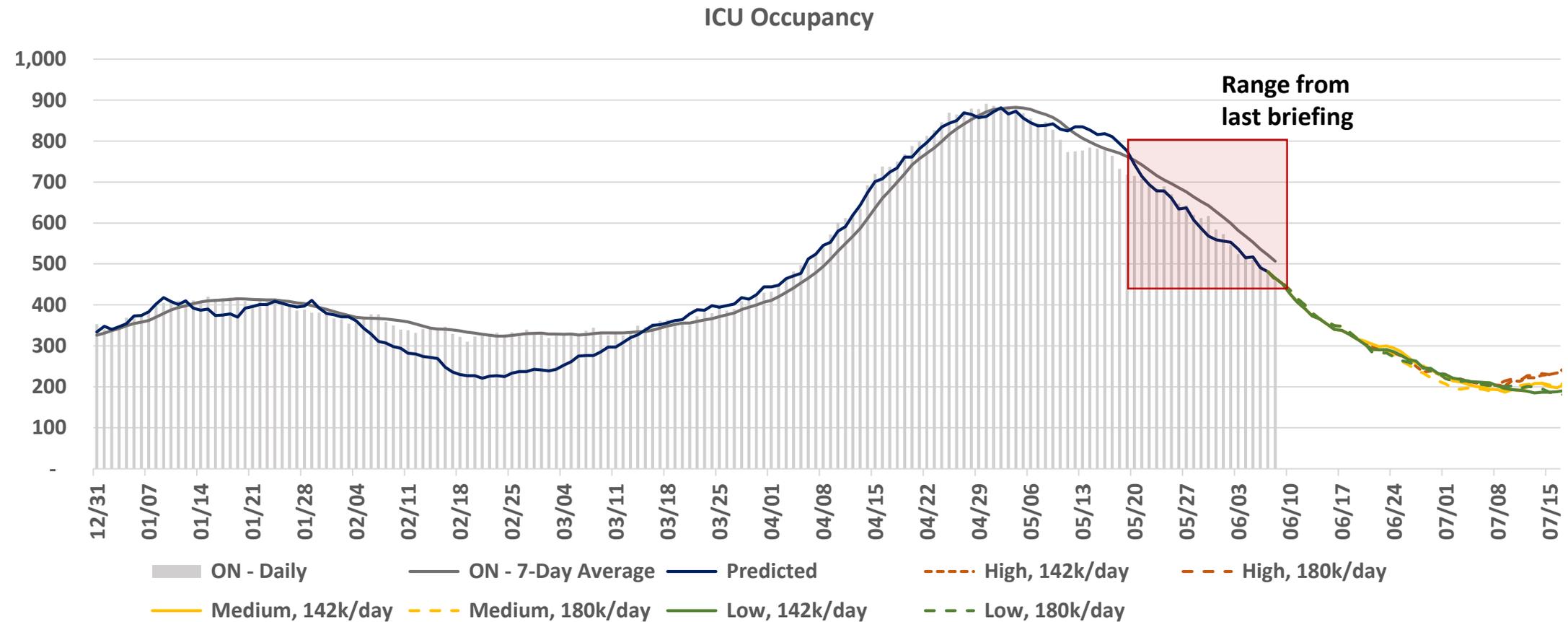
Ontarians' commitment to public health measures means we are doing much better since the last briefing

Figure shows predictions based on 4 models.

- Partial reopening June 14
- Vaccinating 140k-180k/day
- Delta VOC considered
- Different levels of disease spread after Step 1 opening



If we continue to control COVID-19, we can drop below 200 COVID-19 patients in ICUs by mid-July and begin to resume normal hospital operations

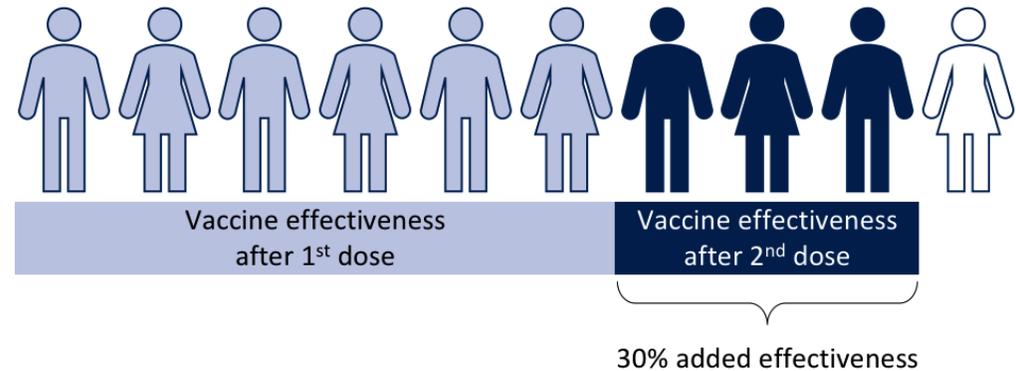


The 2nd vaccine dose is more than 2x as effective against the Delta variant – it is key to get 2nd doses in arms

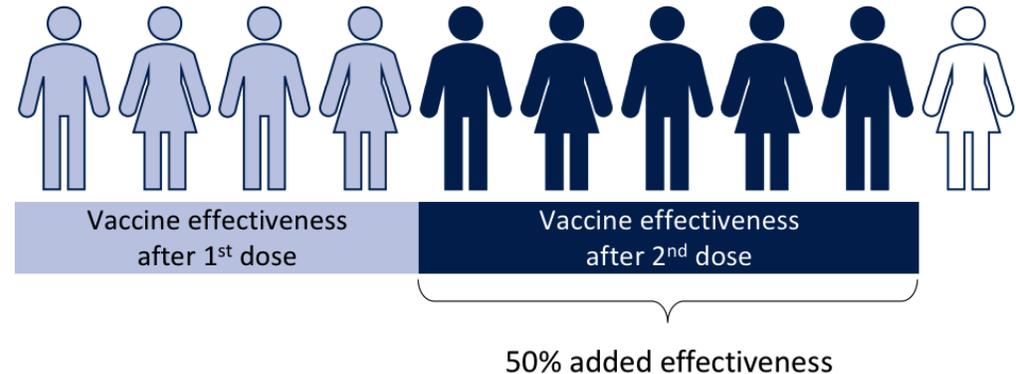
Delta variant (B.1.617.2)

- About 50% more transmissible than Alpha (B.1.1.7)
- Will likely be the dominant variant in the early summer
- Risk of hospitalization may be increased
- 1st dose of vaccine less effective against symptomatic disease but it may protect against severe disease

Alpha (B.1.1.7.)



Delta (B.1.617.2)



Continuing a strategy based on age and community risk will help control the spread and impact of the Delta variant

Protect all regions with 1st doses, avoid 'pockets' with low coverage

- Minimize risk of introduction and propagation of Delta-variant
- Continue core public health functions of case and contact tracing, testing

Protect regions at high-risk of Delta with increased 1st and 2nd dose coverage

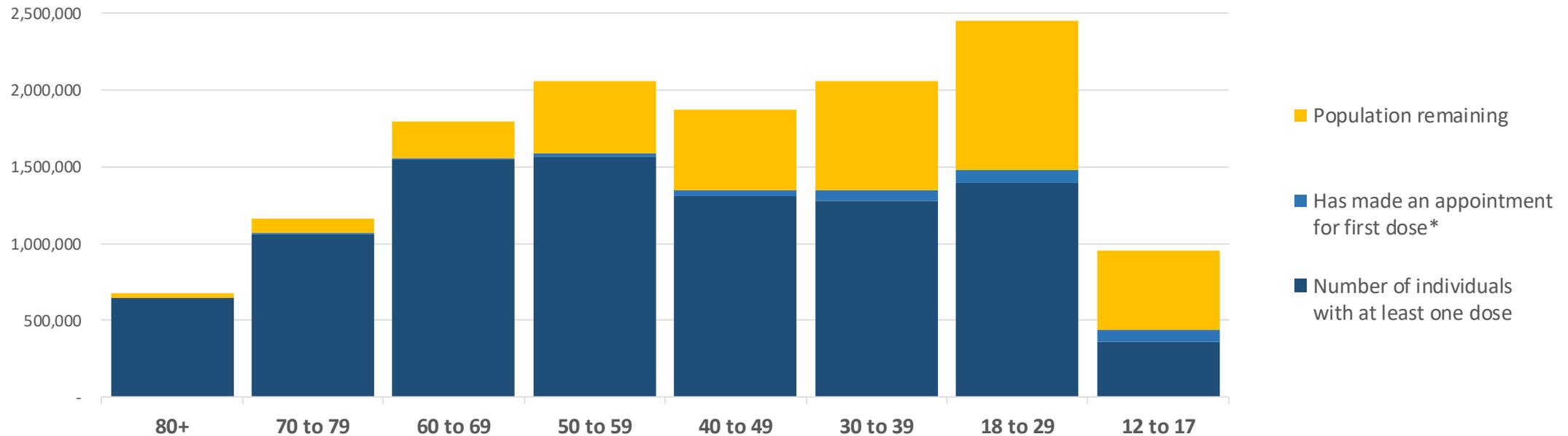
- Control surges in Delta-high-risk areas
- Minimize risk of spillover into other areas
- Continue core public health functions of case and contact tracing, testing

Benefits of continuing a focus on high-risk communities

- Compared to a pure age-based allocation, continuing a high-risk community strategy reduces the overall case count by 39% (both with 2nd dose eligibility at 6 weeks)
- Much of the reduction in cases are in lower-risk communities; benefitting all communities

Technical Note: Modelling based on 2nd dose coverage of 45% in high-risk regions and 25% in all other regions by the end of June, 70% 1st dose coverage for all regions

Vaccination coverage continues to increase



* Note that this is just *Pending Appointments*. Anyone who has made an appointment and received a vaccine will be counted under “Individuals with at least one dose”. Data for Appointments reflect 21 PHUs that are captured through the provincial booking system. Appointments made through other systems (e.g., local PHU booking systems, pharmacies, primary care) are not included.

^ Age is based on year of birth.

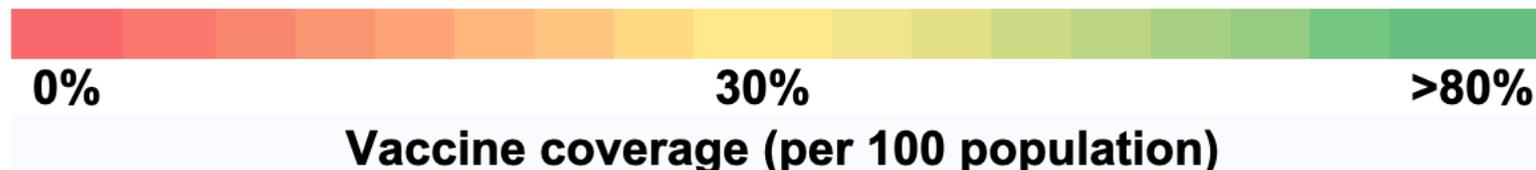
Data Sources

MOF 2020 Population Projections
 COVAX analytical file, extracted 8:00pm June 6 2021, CPAD, MOH
 COVAX Skedulo, extracted 6:00pm June 6 2021

The high-risk community strategy has helped

Figure excludes long-term care vaccination – at least 1 dose as of June 7, 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+	76%	77%	80%	82%	83%	84%	85%	87%	88%	88%	83%
75-79	78%	80%	82%	84%	85%	86%	87%	88%	89%	88%	85%
70-74	78%	81%	82%	83%	85%	85%	85%	87%	88%	86%	84%
65-69	79%	81%	80%	81%	83%	83%	83%	85%	85%	83%	82%
60-64	79%	80%	79%	79%	81%	81%	81%	82%	82%	80%	81%
55-59	77%	78%	75%	75%	77%	77%	77%	78%	77%	74%	76%
50-54	75%	75%	73%	71%	73%	73%	74%	75%	72%	67%	73%
45-49	72%	72%	70%	67%	70%	69%	70%	70%	66%	62%	69%
40-44	68%	69%	67%	64%	67%	66%	67%	66%	61%	58%	65%
16-39	66%	66%	63%	57%	59%	57%	59%	55%	49%	46%	58%
12-15	40%	45%	39%	34%	37%	36%	32%	28%	19%	24%	34%
Overall (12+)	69%	71%	69%	66%	68%	68%	69%	67%	66%	65%	68%



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