

**Report to  
Rapport au:**

**Ottawa Board of Health  
Conseil de santé d'Ottawa  
30 November 2020 / 30 novembre 2020**

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**Submitted by  
Soumis par:**  
**Dr./D<sup>re</sup> Vera Etches, Medical Officer of Health / Médecin chef en santé publique**

**Contact Person  
Personne ressource:**  
**Dr./D<sup>re</sup> Vera Etches, Medical Officer of Health / Médecin chef en santé publique**  
***vera.etches@ottawa.ca***

**Ward: CITY WIDE / À L'ÉCHELLE DE LA VILLE      File Number: ACS2020-OPH-MOH-0009**

**SUBJECT: UPDATE AND NEXT STEPS ON COVID-19 RESPONSE**

**OBJET: MISE À JOUR ET PROCHAINES ÉTAPES SUR LA RÉPONSE À LA COVID-19**

#### **REPORT RECOMMENDATION**

**That the Board of Health for the City of Ottawa Health Unit receive this report for information.**

#### **RECOMMANDATION DU RAPPORT**

**Que le Conseil de santé de la circonscription sanitaire de la Ville d'Ottawa prenne connaissance de ce rapport à titre d'information.**

#### **BACKGROUND**

Ottawa Public Health (OPH) has been monitoring the novel coronavirus, now known as COVID-19, since early January 2020, responding to the pandemic with an Incident

Management System (IMS) initiated on January 27, 2020, and building the response into more of a routine operation since September 21, 2020.

The Board of Health has received regular verbal updates from Ottawa's Medical Officer of Health and, at its meeting of September 21, 2020, considered a written report titled [Update on COVID-19 and Next Steps](#). As noted in the September report, some communities have been disproportionately affected by the pandemic. Measures to address this disproportionate impact have become a focus of the health unit's pandemic response. OPH also continues to monitor and work to address some of the unintended consequences of the pandemic response, most notably the impact on residents' mental health and emotional well-being.

All levels of government have been actively involved in many aspects of the COVID-19 response, as have partners from multiple sectors. The goals of the response continue to be to minimize hospitalizations and death while also minimizing societal disruption.

The purpose of this report is to provide the Board of Health with an update on the local situation and an overview of OPH's ongoing work to: continue to build its case and contact management surge capacity; address the needs of communities at higher risk; analyse information to find key contributors to COVID-19 transmission; and increase promotion of mental health supports.

## **DISCUSSION**

### **Update on the Local Situation**

Throughout this pandemic, OPH has been monitoring the local situation closely through its [Daily COVID Dashboard](#) and seeking to learn from the experiences of other jurisdictions. Recent trends in Ottawa's COVID-19 data have been positive, though hospitalizations are stable, not declining. Further, [wastewater data](#) shows the level of COVID in the community may not be rapidly declining, however this is not unexpected given that previous experience shows the rate of decline in COVID-19 in the community is usually slower than the rate of a rise.

Given the goal of minimizing hospitalizations and death and given that the risk of serious illness from COVID-19 increases progressively with age, part of OPH's response to the pandemic has focused on preventing and managing outbreaks in long-term care homes (LTCH) and retirement homes (RH). At the same time, OPH's data demonstrates that, of the local hospitalizations related to COVID-19, approximately 50% are from the community, versus institutional settings. This tells us that LTCH residents

are not the only ones vulnerable to severe illness from COVID-19, though the majority of deaths have been among older adults related to LTCH outbreaks.

On November 13, 2020, the Government of Ontario released an updated [COVID-19 Response Framework for Keeping Ontario Safe and Open](#), which provides a colour-coded system (Green = Prevent, Yellow = Protect, Orange = Restrict, Red = Control and Grey = Lockdown) as well as indicators and thresholds for regions to move from one level to the next. This framework also ensures that public health measures are targeted, incremental and responsive to help limit the spread of COVID-19 while keeping schools and businesses open, maintaining health system capacity and protecting vulnerable populations. This is in line with OPH's approach to the pandemic response and the need for our community to learn to maintain a balance with COVID in the community. Discussions are continuing about the specific measures that may be required in the "red-control" and "grey-lockdown" situations.

Currently, OPH is in the 'Orange' or 'Restrict' zone but a rapid rise in COVID-19 infection rates is always possible. Accordingly, staff is actively assessing what additional approaches will help with control of COVID-19 transmission.

### **Case and Contact Management Capacity**

One of the main goals of case and contact follow-up is to reduce transmission in the community through early detection and isolation of people who test positive for COVID-19, as well as their close contacts. The Province has established performance targets for case and contact management of COVID-19 whereby local public health units are expected to reach 90% of all persons diagnosed with the virus and their contacts within 24 hours of the health unit being notified of the positive test result. While this can prove difficult when there is a high volume of people who test positive, OPH has put in place several processes to meet these service standards. As of the date this report was submitted, OPH's time to follow up is over 90% for both people who test positive and for high-risk contacts.

Of note, OPH continues to ensure that it has the appropriate internal staffing levels to ensure the timely follow-up of people who test positive, as well as their contacts. OPH is actively working with Federal and Provincial governments to onboard and train contact tracers who can assist with various case management and contact tracing activities. As of the date this report was submitted, 50 external resources have already begun this work and the goal is to onboard approximately 115 external resources by the end of January 2021.

To also assist with timely follow-up of any person who tests positive and their contacts, OPH has leveraged the use of technology by automating some of its processes. For example, working with school partners, OPH uses emails and/or automated text messages known as SMS messages to quickly reach high-risk contacts who have been exposed in a school-setting. In addition to this, OPH is required to conduct daily monitoring of people who test positive, and their contacts. This is also predominantly accomplished using technology. These types of practices have allowed OPH to ensure timely follow-up while also ensuring that internal and experienced OPH staff is available to assist with more complex case management activities, such as outbreaks and clusters.

As part of its streamlining through digitization efforts, OPH developed and implemented its own COVID-19 Ottawa Database (COD), which enabled rapid scaling up of the health unit's COVID-19 operations and capacity. Recently, the Province introduced its own COVID Case Management (CCM) reporting system and is now requiring that all local health units migrate to this provincial tool and reporting database. This migration is presenting challenges and risks given the short timelines provided to complete the migration. Further, OPH has identified risks relating to privacy and security, and the potential loss of current functionality, data collection and reporting capabilities. There are also human resource implications given the need to train 600+ staff, as well as anticipated process inefficiencies given that time trials indicate it may take longer to enter the same data into CCM, when compared to OPH's COD system. That said, OPH looks forward to leveraging the promised benefits of the provincial CCM system, which include integration with the Ontario Laboratory Information System (OLIS), the ability to rapidly onboard external resources to provide surge capacity support, and alignment with the plan to expand its use as a replacement for the current provincial communicable disease reporting system (iPHIS).

Case management is also important for ensuring that residents who test positive for COVID-19 are connected to community and social supports. Additionally, OPH is pursuing Federal government funding to open a voluntary isolation centre to provide a space for any person that has tested positive and has challenges with self-isolation in their home setting. This is especially important given that we know household contacts are at much greater risk of contracting COVID-19.

### **Addressing the Needs of Populations at Higher Risk**

Building on lessons learned from early COVID-19 outbreaks in LTCH/RHs in Ottawa, OPH has worked closely with partners on processes to strengthen and streamline responses, including weekly meetings across agencies to address issues and concerns

and to ensure collaboration, ongoing communications with facilities, preventative visits and phone calls to review infection prevention and control (IPAC) strategies and practices, and daily reporting on outbreak status. Further, in situations where OPH has identified deficiencies at a LTCH/RH and/or has had concerns about compliance, the health unit has moved swiftly to issue letters of expectation (LOE), which outline the noted deficiencies and timelines for compliance. In the event of non-compliance with the LOE, OPH will move to issue an Order under the *Health Protection and Promotion Act* to require further supports to implement required practices.

In reviewing COVID-19 outbreaks in Ottawa's LTCH/RHs during wave 1 versus those in wave 2, data demonstrates that despite a higher number of LTCH outbreaks being declared in the second wave, overall morbidity and mortality has been lower. Wave 2 outbreaks have involved fewer cases and fewer deaths, and the average outbreak duration has been shorter. This indicates that enhanced case detection and IPAC measures are mitigating the impact of COVID-19 on this vulnerable population.

As previously highlighted, health inequities have been amplified by the COVID-19 pandemic, which has had more negative impacts on low-income, racialized communities. OPH continues to collect information about social determinants of health for people who test positive and is aiming to close the gap in COVID-19 infection rates between communities based on these variables.

OPH is working closely with community partners to provide wrap-around care and support to individuals in communities disproportionately affected by COVID-19. This involves meaningful engagement with partners rooted in the community to assess and respond to immediate and emerging needs. In collaboration with the Ottawa Health Team – Équipe Santé Ottawa (OHT-ESO), OPH has established a referral process to better assist individuals requiring additional support isolating and meeting immediate needs in doing so, including access to testing, shelter and housing, food, and mental health services. OPH case managers are directly referring individuals to their local Community Health Centre for follow-up.

OPH has also supported the OHT-ESO in developing a COVID Neighbourhood Engagement approach, coordinating with numerous partners and community agencies, including ward councillors, to provide on the ground and door-to-door outreach in neighbourhoods with a higher proportion of individuals testing positive for COVID-19. This outreach includes assessing residents' needs and perceptions related to COVID-19, sharing multi-lingual COVID-19 prevention information and signage, Community Health Centre intake services, referring individuals to COVID-19 assessment or care

centres, and conducting testing on-site as needed. To date, this outreach has occurred in a number of neighbourhoods with promising results.

When it comes to school settings, OPH's objective is to help keep Ottawa schools as safe as possible and open for the overall health and wellbeing of families. School-aged children are benefiting from in-person learning and social connections, which positively impact early childhood development, with long-term benefits to overall health. Keeping schools open also allows parents to maintain employment and income, supporting the local economy. OPH supports schools through providing infection prevention and control guidance, reinforcing screening to limit the entry of COVID-19, mitigating the risk of the spread of infection by supporting the isolation of high-risk contacts, and working to build the resiliency of the school community. The health unit and its COVID School Support Team continuously look for feedback from teachers, school staff, principals, parents and students to identify gaps and improve processes.

### **Identifying Key Contributors to COVID-19 Transmission**

OPH continues to expand our understanding of the types of settings and situations that have the most impact on COVID-19 transmission in our community and is seeking academic partners to better explore exposure risks as well as a broader assessment of the harms from different public health measures.

Recently, OPH published a report on [Acquisition exposures of COVID-19](#), which provided an analysis of where people who have tested positive for COVID-19 may have been exposed to or were able to transmit the virus to others. Common risk factors identified across the exposure settings analyzed in this report include:

- Socializing outside of one's own household where talking, eating and drinking was involved – whether that occurred in homes, bars and restaurants, patios or parks. This finding is consistent with a recent case-control study by the U.S. Centers for Disease Control and Prevention (CDC) that found people who tested positive for the virus were more than twice as likely to have reported dining at a restaurant (including indoor, patio, and outdoor seating) than those who tested negative.
- Close contact in small spaces during social and workplace settings – indoors at home and in sports venues, small poorly ventilated spaces such as locker rooms, cars, meeting rooms, and break rooms.
- Inadequate/inconsistent mask use when interacting with people outside of one's own household in crowded environments and where physical distancing is not

maintained – when socializing, coaching, teaching or caring for friends, family, students or clients

These locally identified risk factors align with what the World Health Organization has identified as the ‘Three Cs’ where COVID-19 spreads more easily, particularly when all three overlap: 1) crowded places with many people nearby, 2) close contact setting with close-range conversations, and 3) confined and enclosed spaces with poor ventilation.

This brings us back to the notion of learning to maintain a balance, with COVID in our community. It’s important for residents to understand the risks associated with different settings, situations and activities so they can be better equipped to make decisions about the locations they visit and the activities in which they engage.

OPH continues to work on communication strategies to help in this regard, including but not limited to building on the new One Million Reasons campaign.

### **Addressing Other Harms to Health**

We know the pandemic has impacted residents’ mental health, resilience and substance use. For many, it has also impacted their employment and income.

Throughout the pandemic, data from hospitals, community services and surveys have highlighted that Ottawa residents are experiencing worsened mental health and emotional well-being, loneliness, weaker community connectedness, and elevated risks related to substance use, opioids and suicide.

OPH is continually working to increase awareness of mental health and addictions supports and resources and to reduce stigma that prevents many from seeking out these supports. Improving mental health and reducing the harms associated with substance use continue to be priorities for OPH. This includes working with partners to address gaps and barriers to providing in-person services as this is helpful and meaningful to clients. It is encouraging to hear that community mental health and substance use services are returning to some form of in-person service.

Important pieces to this work include working with partners to advance suicide and overdose prevention efforts and continuing in-person harm reduction and supervised consumption services. On November 20, 2020, the Ottawa Community Action Plan Virtual Summit will bring together OPH and its many partners to look at what work has been done and what more can collectively be accomplish.

Lastly, OPH recognizes that a healthy population and a healthy economy go hand in hand. Accordingly, OPH has been engaging the local business community to ensure

they have the tools and resources they need to operate as safely as possible in a time of COVID. In addition, OPH has engaged local businesses in health promotion campaigns to encourage safer practices in workplaces and businesses.

## **NEXT STEPS**

Looking ahead to when a COVID-19 vaccine will be available and, working with municipal partners through the City's COVID-19 Vaccine Distribution Task Force as well as with provincial partners and other local health units, OPH is preparing for its role in ensuring a critical mass of Ottawa's population is able to access the vaccine in a timely manner. To this end, the health unit is learning from its ongoing experience of operating influenza vaccination clinics in the context of a pandemic, which have provided an opportunity to practice approaches that can be applied to future COVID vaccination clinics, such as: use of an online appointment system; enhanced communications; screening of staff, volunteers and clients; physical distancing in terms of the clinic layout; IPAC practices, including the need for personal protective equipment; enhanced environmental cleaning; and new and innovative partnerships to integrate other immunizers from physicians' offices into the OPH-led sites.

Keeping COVID-19 levels as low as possible until the population's level of immunity against the virus is sufficient means continuing to make the basic practices of mask wearing, physical distancing with people outside our households, staying home when sick (except to get a COVID-19 test), and keeping hands clean routine for people in Ottawa through the winter months.

Lastly, in the weeks and months ahead, OPH will continue to promote outdoor winter activities to encourage physical and mental well-being and build on its new One Million Reasons communications campaign to combat COVID fatigue and remind everyone of their reasons for continuing to protect themselves and each other.

## **RURAL IMPLICATIONS**

There are no rural implications associated with this report.

## **CONSULTATION**

Throughout the pandemic response, OPH has engaged with various partners and stakeholders, including but not limited to: OPH employees and clients; City of Ottawa partners; elected officials at the municipal, provincial and federal level; the Ontario Minister of Health and Public Health Ontario; community partner agencies, including health sector partners as well as local school boards and post-secondary institutions;



the local business community, and other local public health units in neighbouring jurisdictions and across the province.

**LEGAL IMPLICATIONS**

There are no legal impediments to receiving this report for information.

**RISK MANAGEMENT IMPLICATIONS**

There are no risk implications associated with this report.

**FINANCIAL IMPLICATIONS**

There are no financial implications associated with this report.

**ACCESSIBILITY IMPACTS**

There are no accessibility impacts associated with this report.

**ALIGNMENT WITH OTTAWA PUBLIC HEALTH STRATEGIC PRIORITIES**

This report aligns with all aspects of Ottawa Public Health's 2019-2022 Strategic Plan.

**DISPOSITION**

This report is presented to the Board of Health for information.