



Huron Perth Public Health

Report of the Medical Officer of Health

February 25, for Board Meeting of March 4, 2022

Health Protection

COVID-19 Update

Federal Developments

On February 4, 2022, Canada's Chief Public Health Officer, Dr. Tam stated that we need to recognize "this virus is not going to disappear. We need to be able to address the ongoing presence of the SARS-CoV-2 virus in a more sustainable way." She suggested that public health policies, including vaccine passports, need to be "re-examined" as we look at how to adapt to the continuing presence of this virus. So that we're not "in a crisis mode all the time as we fight this virus."

On February 11, Federal Health Minister Duclos reported that 85% of Canadians had received their first dose, 75% had received two doses and 50% of those eligible had received the booster dose. As only 55% of 5-11 year old's had received at least one dose, Minister Duclos encouraged all parents to get their eligible children vaccinated. He referred parents to Health Canada website to help them make an informed decision. The Minister noted that while case counts have been decreasing across Canada, hospitalizations and ICU admissions remain high. He emphasized the importance of limiting the spread of the virus as much as possible. While individual efforts including the layering of personal protections are helping to stop transmission and mitigate severe illness across Canada, vaccination remains the most effective way to protect against severe COVID-19 disease. He explained that the public health measures in place are temporary; some may be with us for a long time and others will be re-evaluated and lifted when science and prudence allow. Dr Tam added that health authorities in Canada are looking ahead to longer term, including planning for the possibility of emergence of new variant.

Prime Minister evoked the *Emergency Measures Act* on February 14, in response to the 'Freedom Convoy' protests in Ottawa and in some border communities; this was subsequently revoked on February 23.

On February 14, the Council of Chief Medical Officers of Health (CCMOH) of Canada issued a statement on the next phase of the COVID-19 pandemic response: <https://www.canada.ca/en/public-health/news/2022/02/statement-from-the-council-of-chief-medical-officers-of-health-ccmoh-on-the-next-phase-of-the-covid-19-pandemic-response.html>

Some of the key messages include:

- Vaccination, together with all the public health measures and changes we have made to our way of living, working and socializing, has worked to minimize COVID-19 harms in Canada. These measures have saved lives but have come at a cost.
- With the decline of the Omicron wave, and as we transition away from the crisis phase, it is now time to rebalance our collective efforts towards a more sustainable approach to long term management of COVID-19.
- As we enter the transition phase, we should anticipate additional waves and outbreaks. Progress may not be linear. Future COVID-19 activity will depend on factors such as waning immunity, potential for

repeated emergence of highly immune-evasive and/or more severe variants of concern, and seasonal dynamics

- The pandemic has revealed and amplified deeply entrenched health, social, and economic inequities that exist in Canada – and we can see, more than ever before, the interaction of the social determinants of health in shaping negative health outcomes and driving health inequities.
- The reality is that COVID-19 will be with us for the foreseeable future and there will continue to be new and important roles for public health to play. A strong and resilient public health system is Canada's best defense against future public health threats.

On February 15, the Government of Canada announced it would be lightening border measures as part of the transition of the pandemic response:

<https://www.newswire.ca/news-releases/government-of-canada-lightens-border-measures-as-part-of-transition-of-the-pandemic-response-813109302.html>

On February 17, the *National Advisory Committee on Immunization* (NACI) [issued guidance on the use of Novavax Nuvaxovid](#), the first protein-based COVID-19 vaccine authorized for use in Canada. This will be another tool in the toolbox, which may increase vaccination rates among those that remain hesitant to accept an mRNA vaccine, although NACI continues to recommend mRNA vaccines as the first choice.

Dr. Tam provided an update on the latest COVID-19 modelling data on February 18, that shows “Canada is past the peak of the Omicron wave.” Health officials “are hopeful [Canada is] approaching a period of reduced transmission, allowing Canadians a chance to regain a sense of normalcy.” She further cautioned that “while Omicron activity has likely peaked, easing of public health measures could still lead to resurgence.” Current levels of immunity in the Canadian population are expected to limit Omicron's impact going forward.

[Latest COVID-19 Federal Modelling Data](#): also showed that:

- Nationally, while reported **Omicron cases have peaked**, infection rates remain high and severe outcome trends are decreasing but still elevated.
- Elevated laboratory test positivity indicates persistent widespread disease activity nationally.
- Wastewater surveillance is helping estimate the size and trend of the Omicron wave.
- Hospitalization rates remain at record high levels despite showing signs of peaking in some jurisdictions, but ICU rates remain relatively low.
- Hospitalization rates remain elevated across all age groups; however, rates have decreased among older adults.
- More than 5.6 million eligible Canadians need one or more doses of COVID-19 vaccines to complete their primary series.
- There is room to improve booster dose coverage in Canada, particularly among adults aged 50+ who are at higher risk of severe outcomes.
- Fully vaccinated people are at significantly reduced risk of hospital admission, particularly after an additional dose to protect against severe illness due to Omicron.
- While easing of public health measures could result in a resurgence of cases in Canada, the impact on hospitalizations is forecast to be lower.
- The SARS-CoV-2 virus that causes COVID-19 has continuously evolved and we can expect this pattern to continue.

Provincial Developments

The Ontario Science Table provided two modelling reports in February. The following are the key messages from February 1st report (<https://covid19-sciencetable.ca/sciencebrief/update-on-covid-19-projections-16/>) :

- It is challenging to model the spread of COVID-19 because of changes in provincial testing.
- Various indicators suggest that this phase of the Omicron wave has plateaued or is in decline.
- Public health measures helped control this phase. Relaxation of these measures will increase the spread of COVID-19.
- The size of any resurgence is difficult to predict and will depend on vaccination, the spread of Omicron, and changes in behavior (e.g., mobility, masking).
- Surveillance will be important to detect changes in the trajectory of the pandemic.
- Ontario data shows that vaccination (including third doses) provides strong protection against serious illness. Increasing vaccine uptake across all groups will reduce the impact of the pandemic.
- Omicron appears to affect the upper respiratory tract more than the lower respiratory tract, and therefore may have a different clinical course.
- Hospitals are caring for the highest number of people with COVID-19 with admissions being at highest levels across all age groups. ICU occupancy continues to be high. Staffing in hospitals remains critical.

An update on COVID-19 projections (additional modelling on booster doses) was further posted on February 8, showing:

- We expect hospitalizations to rebound after reopening on January 31, and to remain at a prolonged peak, except under the most favourable assumptions.
- ICU occupancy will likely rebound after reopening on January 31. Regardless, the pressure on ICUs will be prolonged

Omicron trends continued to decline in February, although overall transmission remained high. Key provincial developments include:

- On February 3, Ontario's Chief Medical Officer of Health, Dr. Moore, said that health care indicators suggest the situation is improving but we must "remain vigilant and adhere to the measures that are helping reduce transmission". He noted that the province would need to reassess the vaccine certificate system as Ontarians learn to live with COVID-19, and in the context of high vaccination rates and anti-viral therapies. Masking would likely be the last measure to be dropped. The provincial government also announced it would expand eligibility for PCR tests to household members of health-care workers who deal directly with patients, as well as ease some restrictions for visitors to long-term care facilities.
- On February 09, the government announced access to free rapid testing kits to the general public for at-home use. Health Minister, Christine Elliot said that her government will proceed with cautious approach to removing the restrictions as planned. Dr. Peter Juni, Scientific Director at the *Ontario Science Advisory Table* said that unless the proof of vaccination program is changed to reflect the booster shot, the requirement could be "reconsidered relatively soon, and then lifted."
- On February 10 Ontario announced a cautious and gradual resumption of surgeries and procedures. It is important to note that hospital capacity, while improving, is still stretched with high rates of COVID admissions coupled with staff absences, and capacity varies across the province.
- The return to school (as of January 17) has been successful; school absences and closures remain low, and pediatric admissions have continued to trend downward. On February 11, Dr. Moore announced an immediate return to extra-curricular activities including high contact sports and musical activities for students. Students continue to be required to wear facemasks on school premises but may temporarily remove them to enable participation in an activity as needed. As of February 24, the Ministry of

Education is reporting only 2/4844 school closures (<https://www.ontario.ca/page/covid-19-school-closures-and-absenteeism>)

- On February 11, Ontario Premier Doug Ford also declared a province-wide state of emergency as part of an effort to end truck blockades (protesting COVID-19 restrictions) in the province; this was later revoked on February 23.
- On February 14, the government announced it would [cautiously and gradually easing public health measures](#), accelerating the move to the second phase of its COVID-19 reopening plan to February 17 (rather than February 21). All capacity limits in restaurants, bars, cinemas and gyms were lifted. Finance Minister Bethlenfalvy released the 2021-22 Third Quarter Finances, which shows \$2.3 billion in new investments in response to the Omicron variant, including additional funding to support hospitals, workers and business supports.
- Ontario achieved its vaccine target of '90/90' for residents aged 12 years and older on February 16; 92.4% first dose and 90.2% second dose.
- Starting the week of February 17, information on how the province is [strengthening Ontario's pandemic supply chain](#) will be made readily available. This includes data on the amounts of PPE and critical supplies being distributed across the province.
- Booster dose eligibility continued to expand in February; to 12 – 17 year olds with risk factors on Feb 07, and then to all on adolescents on Feb 18, (this is a provincial direction that goes beyond NACI).
- Capacity to provide access to therapeutics, which include Remdesivir (an IV antiviral), Paxlovid (oral antiviral) and Sotrovimab (monoclonal therapy), continues to be expanded in Ontario.

Huron Perth Developments

COVID-19 activity and indicators also continue to trend downward in Huron Perth over February. As of the morning of February 25, HPPH is reporting a total lab-confirmed case count of 5,604, with 183 hospitalizations (5 current), 92 deaths and more than 140 outbreaks.

Vaccine uptake also continues to decline. As of Feb 21, 292,181 COVID-19 vaccine doses have been administered in Huron Perth, with coverage as follows:

Population	Aged 5 years +/18+
% with at least one dose	84.2
% fully vaccinated	80.7
% fully vaccinated with 3 doses	51.5/61.0
% fully vaccinated with 4 doses	1.5/1.7

As COVID-19 demands decrease, the Senior Leadership Team is facilitating a safe and gradual transition to an updated temporary Organization Chart; one that will permit resumption of paused public health programs and services, and clearance of back-logs, while also ensuring a continued robust COVID-19 response, with the ability to redeploy staff back into COVID as needed and in accordance with Ministry direction.

For the month of March, HPPH is offering COVID-19 vaccination clinics in many smaller communities across Huron and Perth. HPPH expects to scale back its vaccination clinics in April and beyond, while ensuring Huron Perth residents are aware of local vaccination opportunities.

With smaller scale vaccination efforts, reduced number of cases/outbreaks and public health measures lifting, the Communications Team is shifting its support to both continued COVID response as well as recovery support.

Stakeholder calls are in the process of being sunsetted and several communications team members are redeploying to other departments. Continued communications work in COVID response includes:

- Promotion of February and March HPPH vaccination clinics, especially for children ages 5-11 as well as immunocompromised and marginalized populations
- Supporting school team with information about children's use of face coverings
- Supporting businesses and the public with information on the lifting of public health measures
- Ongoing phone and email support to stakeholders regarding public health guidance
- Ongoing support to COVID intake with complex or challenging inquiries from the public

The communications team is working towards a gradual transition so that the team is able to continue COVID response as well as support other departments as they slowly resume programming.

Respectfully submitted by

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