

## **COVID-19 REPORT**

The daily summary provided by Public Health Ontario, “At A Glance”, provides several useful links on the current status of prevalence, screening, transmission prevention and more about the current COVID-19 pandemic. Information is gathered provincially, nationally (Public Health Agency of Canada) and internationally from sites such as the Centre for Disease Control (CDC) in the US and the World Health Organization (WHO).

[PHO daily report, Apr 29](#)

The Epidemiological Summary from PHO gives the most current information for Ontario. As of yesterday:

- 16,187 confirmed cases of COVID-19 in Ontario reported to date.
- 41.7% of cases are male, 57.3% are female.
- 11.6% of cases were hospitalized.
- 1,082 deaths have been reported
- 190 outbreaks have been reported in long-term care homes.
- 530 deaths have been reported among residents/patients in long-term care homes.
- 1 reported death of staff in long term care

There are no deaths in the relatively few cases under the age of twenty. Mortality is clearly related to age:

- 20-39 – 7 deaths, 0.2 %
- 40-59 – 49 deaths, 1.0 %
- 60-79 - 282 deaths, 7.9%
- 80 and over – 744 deaths, 20.3%

The elderly in long term care are especially vulnerable because of the age, co-morbid conditions and limited life expectancy. The above data gives the mortality in LTC as 49%. A disproportionate higher mortality is reported in the media. If only one staff or resident tests positive for COVID-19, a home is in outbreak. There are approximately 650 LTC homes in Ontario. Hence, 71% of LTC homes in Ontario are not in outbreak.

[PHO Epidemiologic summary, Apr 29](#)

Like over two-thirds of Ontario's LTC homes, the Ivan Franko home in Toronto is free of COVID-19. Ivan Franko is an older home. Their emergency and pandemic plans went into effect on March 16. "Diligence remains the watch word." The 85 residents and 100 staff remain free of COVID-19

[Ivan Franko Care Home, CBC The National, Apr 27](#)

Another success story comes from Kingston. On March 18, the day after all nonessential businesses were closed, the city re-assigned their six public health inspectors to help long-term care and retirement homes prepare for the pandemic. The inspectors worked through the checklist with staff at all 27 homes in Kingston and surrounding communities to ensure they were taking every precaution to limit the spread of COVID-19. Kingston stands out because its pandemic planning addressed the frail elderly. "I don't want to criticize decision makers in health care, but the tendency is to focus everything on acute care and the community is a bit of a second thought" says Cathy Szabo, CEO of Providence Care.

[Kingston Avoids Brunt of COVID-19, Globe and Mail, Apr 28](#)

In a letter to the editor today, OLTCC member, Dr. Ruth Goldman writes:

As a physician working in long-term care for more than 30 years in both private and public homes, I am thrilled to say that with personal protective equipment, planning and a little bit of luck, my two facilities have been spared from COVID-19 so far. I would like to clarify something about long-term care and nursing homes. They are just that: homes.

Loved ones are residents, not patients. We have always encouraged socialization in our facilities, with music, activities and even hugs. Staff become family to our residents, as many actual families visit less frequently over time. It is no surprise to me that frail seniors in long-term care are at the centre of the outbreak – we are not a hospital. We do not have countless staff and large rooms where residents can be isolated. We are home.

Governments should make promised changes to long-term care, but they should not act like what has happened was not predictable from the start.

[Letters to Editor, Globe and Mail, April 30](#)