



Region of Waterloo
PUBLIC HEALTH AND
EMERGENCY SERVICES

COVID-19 Update – Board of Health

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Public Health and Emergency Services
January 6, 2021

Current status of COVID-19

- There has been a resurgence of new infections following the holidays. This is the situation across many areas in Ontario.
- As of January 4, 2021:
 - Twenty of 34 health unit areas experienced their highest rate of cases per 100,000 population per week.
 - Seventeen health unit areas had passed a rate of 100 cases per 100,000 per week
 - Five had passed 200 per 100,000 per week.
- As of January 5, 2021 the number of active infections and hospitalizations in the province have also reached pandemic highs.
- As of January 5, 2021:
 - Waterloo Region's rate was 128 per 100,000 per week
 - Ontario's rate was 154 per 100,000 per week
- Locally, we continue to see high numbers of new cases every day, with multiple outbreaks in workplaces and congregate care settings being declared daily, and continual hospitalizations, ICU admissions and, sadly, deaths.
- There is widespread transmission of COVID-19 in Waterloo Region and, like most of Ontario, our rates have never been higher.
- This continues to put our health care system under significant strain.
- We continue to be need to be under lockdown measures.

Workplace outbreaks

- Workplace outbreaks are among the most frequent outbreaks in Waterloo Region as well as Ontario
- The graph shows the most common work place outbreaks in Waterloo Region, since the start of the Pandemic to January 4, 2021

- The number of workplace outbreaks do not tell the whole story however. In addition to the number of workplace outbreaks, there are many more instances of workplace exposures
 - On January 5, 2021 we had 10 workplace outbreaks, but there were also a total of 145 workplaces where at least one employee had tested positive; 74 of which have two or more employees who have tested positive.
 - This is reflective of COVID-19 being widespread in our community, and therefore being commonly detected among people who work.
- The number of workplace outbreaks has significantly increased in the second wave, in particular since November when our numbers started to surge. About 85 per cent of workplace outbreaks between May and December were declared in November and December.
- Workplace outbreaks span the gamut of industries and sectors, with most occurring in the following industries:
 - Manufacturing/Industrial (24.7 per cent);
 - Food and Beverage Services (13.0 per cent);
 - Sports & Fitness (9.1 per cent);
 - Food Processing (9.1 per cent);
 - Trades & Related Services (7.8 per cent);
 - Construction (7.8 per cent);
- In Ontario, workplace outbreaks were the second highest source of outbreaks accounting for 31.4% of all outbreaks in Ontario for the period up to December 26, 2020

Workplace Outbreaks & Exposures and Paid Sick Leave

- The rise in workplace outbreaks has highlighted an important need for paid sick time.
- **Despite Public Health requirements, paid sick time is not available for many employees and people without paid sick time may be less likely to self-isolate**
 - Public Health guidance requires people to self-isolate, for a minimum of ten days when they have COVID-19, and 14-days when they are a close contact of a case.
 - In 2016, over one-half of Canadian workers said they did not have paid sick days (58.0 per cent); almost three-quarters of workers in the lowest income group said the same (74.3 per cent).
 - Studies from the H1N1 pandemic show that people without paid sick time are likely to attend work while sick.
- **Research suggests that paid sick time can reduce the spread of illness in the workplace, among other public health benefits**
 - Lessons from the H1N1 pandemic suggest that paid sick days may be effective in reducing the spread of infectious illnesses in the workplace.

- One study found the availability of paid sick leave reduced H1N1 infection in the workplace by 20 per cent. Another found a higher incidence of influenza-like illness in workplaces that did not have paid sick leave.
- Adequate paid sick time has also been associated with an increase in uptake of influenza vaccination, which could make it a significant facilitating factor as Ontario and Waterloo Region work to rollout COVID-19 vaccines.
- **Those most impacted by illnesses like COVID-19 may not be able to afford to stay home from work when sick or when they need to self-isolate**
 - Similar to other influenza-like illnesses (e.g., H1N1), data shows that COVID-19 disproportionately affects people living in low income.
 - In Waterloo Region, 26.0 per cent of COVID-19 cases between July 17th and October 21st reported a household income of less than \$30,000, whereas only 8.9 per cent of the total population reported the same in the 2016 Census.
 - Workers with lower household incomes are unlikely to be able to afford staying home for the minimum of ten days when they are sick or 14 days when they are a close contact of a case, considering nearly half of Canadians feel they are always just one or two missed pay cheques away from being poor.

Closing remarks

- COVID-19 is widespread in our community and across Ontario.
- While the Provincial Shutdown is necessary, we cannot rely on the shutdown measures alone. We also each have a role to play.
 - By staying home, avoiding social gatherings, and by limiting the number of trips outside the home we make, we are protecting family, friends, and neighbours.
 - If we do not give the virus the ability to easily transmit from one person to another, we will start to slow the spread of COVID-19 in our community.
 - We need to make the most of the Provincial Shutdown.
- The rise in workplace exposures and workplace outbreaks highlights the need for paid sick time.
 - People without paid sick time may be less likely to self-isolate;
 - Paid sick time can reduce the spread of illness in the workplace; and
 - Workers with low income who are disproportionately affected by COVID-19 also face the greatest financial hardships when required to self-isolate at home.