

Intelligence MEMOS



From: Daniel Schwanen and Rosalie Wyonch
To: Premier Doug Ford and Health Minister Christine Elliott
Date: October 22, 2020
Re: **WHAT'S THE COVID-19 PLAN?**

The resurgence of COVID-19 cases in Ontario since mid-August has so far not been as severe as in other jurisdictions that have recently imposed sweeping restrictive measures to control their second wave of the pandemic. We are sure that you agree we should keep it that way.

To do so, Ontario should bring forth a clear plan to sustainably lower the prevalence of COVID-19 in Ontario toward the less worrisome levels it briefly reached in summer – fewer than 1,000 active cases across the province, or about one-sixth of current levels.

What would such a plan look like?

The key tools and capabilities at Ontario's disposal to carry out such a plan remain the ones that provide authorities and the public, as quickly and accurately as possible, knowledge of where infected individuals are, and the ability to isolate them until they recover, treat them if required, and keep them from vulnerable populations.

Ontario has made great strides on testing compared with the early days of the pandemic, expanding the ability of Ontarians to be tested, for example by offering tests through pharmacies. While Ontario tests at three to four times the rate than it did in late April and uncovers proportionally more cases, it also appears that there is under-testing in some areas exhibiting a high percentage of positive tests.

Ontario should do the same as the Australian state of Victoria, which not only provides a detailed list of outbreaks with each daily [press release](#), but also specifically asks those likely to be exposed to the outbreak to get tested, and provides directions to test site, including mobile units dispatched as required to supplement existing facilities, as was done to control the spring's outbreak in old-age residences in Ontario and some neighbourhood hotspots.

The current delays in getting test results undermine the ability of authorities and the public to respond to the information in a way that can effectively limit the spread of the disease and ultimately save lives. Ontario should provide the resources and minimum standard of accessibility and turnaround to Ontarians for whom testing is required or recommended (which may mean a longer wait list for those who are asymptomatic and have not been exposed) as well as being more forthcoming about the challenges it is facing in producing rapid results and tracing contacts.

Once cases are identified, 90 percent receive a [follow-up interview](#) to determine close contacts for exposure notification within 24 hours. But the same performance metric for notification of cases of possible exposure isn't reported.

Tracing exposures and testing/isolating potential cases is critical to containing community transmission. New Zealand is an example of highly successful containment. The mean time between symptom onset and isolation in New Zealand is [-2.7 days](#), meaning COVID-19 patients are isolated before developing symptoms. As a result, economic and social activities are more or less normal; for example, widespread use of masks isn't necessary due to tight control of community spread. Current health information available in Canada might not allow for the time between symptom onset and isolation to be reliably estimated.

As cases rise, contact tracing resources have had to be redeployed toward those cases most likely to pose a risk for others, meaning other cases are not followed up on. We believe more resources should be allocated to contact tracing, which is labour-intensive, but does not require extensive training. The COVID alert tracing app relies on voluntary participation and anonymous reporting and, while useful, its [early use has been disappointing](#).

Where possible, Ontario should also be much clearer about what milestones for key indicators – active cases, test results and backlogs, outbreaks, and utilization of hospital and other health facilities and resources – need to be reached to trigger the application or removal of specific restrictive measures. By articulating what possible restrictions could be put into place and the thresholds of case increases or speed of infection spread that would trigger them, in combination with more detailed information about the ongoing pandemic, people and businesses can plan for different possibilities with more certainty and will expect (and hopefully be more receptive to) restrictions when they become necessary.

The plan also needs to focus on other ways to encourage, or at least not discourage, public and business cooperation. In a subsequent post, we will examine why improving Ontario's communications with respect to the guidelines and rules it expects the public to follow, and why, should be an essential part of the plan to get us through the pandemic.

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