

British Columbia (BC) COVID-19 Situation Report

Week 1: January 3 – January 9, 2021

Table of Contents		Provincial COVID-19 cases decreased since peak in November, Incidence remains elevated but stable
Pandemic phase definitions	2	<p>There were 3,845 new cases reported in week 1 (75 per 100K), very similar to reports in week 53 (3,719; 72 per 100K) and a 28% decrease from the peak in week 48 (5,330; 104 per 100K). Cumulatively, there have been 58,677 COVID-19 cases in BC to end of week 1 (1,140 per 100K population). Incidence by episode date in week 1 was 60 per 100K, subject to change as data, notably onset dates, become more complete.</p> <p>Incidence in week 1 exceeded 100 per 100K in Northern (NHA) and 80 per 100K in Fraser (FHA). Vancouver Coastal (VCHA) and Interior (IHA) health authorities reported ~50 cases per 100K. Incidence in Vancouver Island (VIHA) was more than 15 per 100K. In weeks 51-53, incidence increased in NHA and VIHA, stabilized in VCHA and IHA and decreased in FHA. Incidence decreased in recent weeks in all age groups, although it was still elevated for the highest risk group of adults 80+ years at 84 per 100K.</p> <p>Whereas testing rates and percent positivity were stable between weeks 46-51, recent weeks show a decrease in testing and fluctuations in percent positivity, likely owing to changes in testing criteria and decreased testing during the holiday. Positivity in week 1 exceeded 16% in NHA; 7% in FHA, VCHA, and IHA; and 2% in VIHA. Since week 44, positivity was stable in the Lower Mainland, but increased elsewhere in BC. In week 1, positivity was lowest in the elderly ages 80+ years (6%) and highest in children 10-14 (12%) and 15-19 years (11%).</p> <p>Cumulatively, there have been 3,261 cases hospitalized in BC to the end of week 1. Whereas the weekly tally of admissions increased steadily from weeks 41-51 (from 68 to 257), it remained elevated but irregular in weeks 52 to 1 (~200).</p> <p>Cumulatively, there have been 1,012 deaths in BC to end of week 1. The number of deaths per week increased substantially from weeks 42-50 (from 3 to 115 per week) and has since decreased to 55 deaths in week 1. In week 1, 35/55 (64%) deaths were associated with a care facility outbreak and 52 (95%) were 70+ years.</p> <p>Cumulatively, there have been 271 care facility outbreaks to end of week 1, with 4 reported in week 1 (2 FHA, 1 NHA, and 1 VIHA). The number of care facility outbreaks has been declining since week 46 (29).</p> <p>Recently, emerging COVID-19 variants have been reported globally. To date, 4 BC cases have been identified with the United Kingdom variant, and 1 BC case with the South African variant.</p>
Epidemic curve	2	
Weekly incidence by health authority and health service delivery area	2	
Test rates and % positive	4	
Age profile, testing and cases	5	
Severe outcome counts	8	
Age profile, severe outcomes	9	
Likely sources of infection	10	
Care facility outbreaks	11	
Clinical indicators	12	
Emerging respiratory pathogens update	12	

NEW in this week's report:

- Pandemic Phase 3c has been added reflecting re-implementation of public health measures. This phase starts on November 8, so part of Phase 3b in previous reports is now included in Phase 3c.
- Laboratory testing guidelines were updated on Dec 17 (week 51) to include new evidence of COVID-19 symptoms: <https://www.healthlinkbc.ca/covid-19/testing>
- The main data sources for this report include health authority line lists and Provincial Laboratory Information Solution data.
- Report date used previously is now replaced with surveillance date (laboratory result date, if unavailable then report date).
- Episode date is now defined as dates of illness onset, hospital admission, or death. When those dates are unavailable, earliest laboratory date (collection date or result date) is used, and if unavailable surveillance date used.
- A new section I has been added reflecting new emerging respiratory variants.

BELOW ARE IMPORTANT NOTES relevant to the interpretation of data displayed in this bulletin:

- Episode-based tallies for recent weeks are expected to increase as case data, in particular onset dates, are more complete.
- Per capita rates/incidences are based on PEOPLE2020 population estimates (n=5,139,568 for BC overall).
- Laboratory data include Medical Service Plan (MSP) (e.g. clinical diagnostic) as well as non-MSP (e.g. screening) specimens. The percent of specimens testing positive is presented here for all specimens tested as well as separately for MSP-funded specimens only. Given the systematically lower likelihood of test positivity among screening vs diagnostic specimens, summary analyses are foremost based on MSP-funded diagnostic specimens unless otherwise specified.

***Table of [pandemic phases](#) defined by implementation or relaxation of population-level mitigation measures in BC:**

PRE-PHASE 1	PHASE 1	PHASE 2	PHASE 3a	PHASE 3b	PHASE 3c
Pre-implementation Jan 15 (wk 3) to Mar 13 (wk 11) 2020	Implementation Mar 14 (wk 11) to May 18 (wk 21) 2020	Initial relaxation May 19 (wk 21) to Jun 23 (wk 26) 2020	Further relaxation Jun 24 (wk 26) to Sept 12 (wk 37) 2020	Start of school year Sept 13 (wk 38) to Nov 7 (wk 45) 2020	Re-implementation Nov 8 (wk 46) to Current (wk 1) 2021
From earliest symptom onset date	From start of March break Additionally: ○ Mass gatherings >50 banned (Mar 16) ○ Traveller self- isolation required (Mar 17) ○ Service restrictions (Mar 18) ○ US/Canada border closure (Mar 20)	Re-opening of services Additionally: ○ Gradual/part-time return to school of K-12 students for 2019-20 school year (Jun 1)	Broader re- opening Additionally: ○ Re-opening non- essential travel in BC, hotels, TV/film ○ Return to in-class learning for 2020- 21 school year, partial week (Thurs, Sept 10)	From first complete epidemiological week of 2020-21 school year	Core bubble interaction only ○ Lower mainland restrictions (Nov 7) ○ Province-wide restrictions (Nov 19)

A. COVID-19 case counts and epidemic curve

Report tallies by week

As shown by the gray line in [Figure 1](#), there were 3,845 (75 per 100K) new COVID-19 cases reported in week 1 of 2021, which represents a 3% increase from reports in week 53 (3,719; 72 per 100K) and a 28% decrease from week 48 (5,330; 104 per 100K). Note that the weekly tally by surveillance date includes cases with illness onset date in preceding weeks. Analyses instead based on episode date may better represent the timing of epidemic evolution. The bars in [Figure 1](#) display the epidemic curve based on episode date, coloured by health authority. Episode-based tallies for recent weeks are expected to increase as case data, in particular onset dates, become more complete ([Figure 1](#)).

Episode-based cumulative incidence: provincially and by health authority (HA) (not shown)

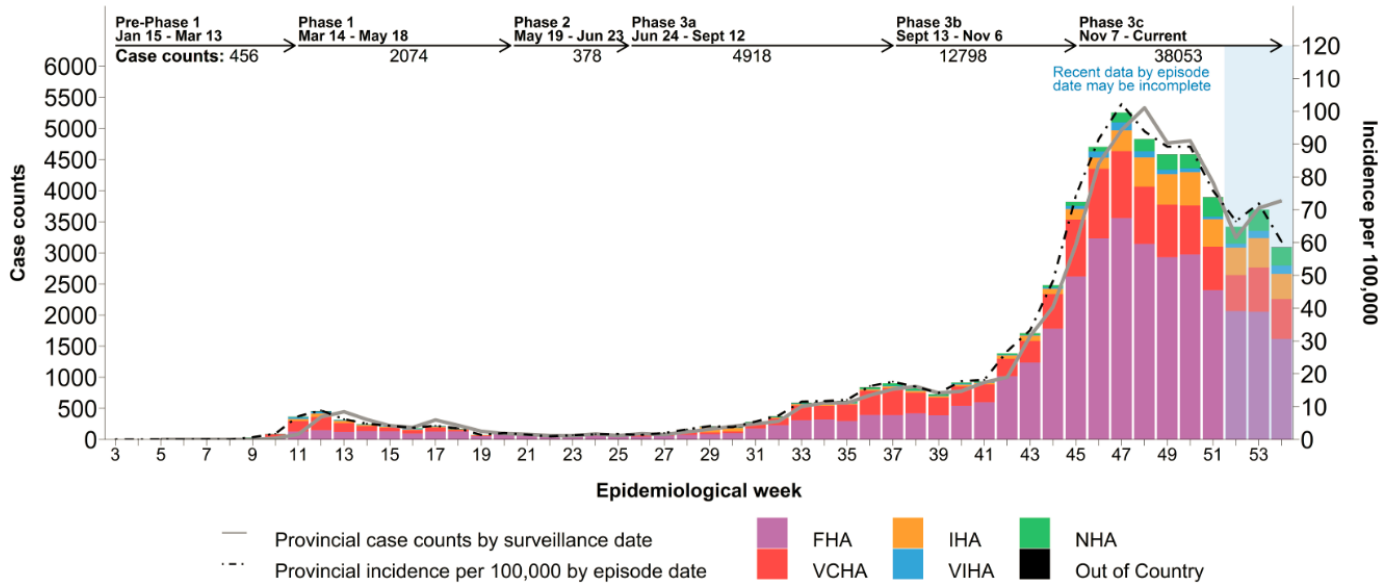
Provincially, between week 3 (mid-January 2020) and week 1 (early January 2021), there have been 58,677 cases in total in BC, corresponding to a cumulative incidence of 1,140 per 100K. By HA, this cumulative tally (and incidence) includes: 36,591 cases in Fraser Health Authority (FHA: 1,887 per 100K); 13,447 cases in Vancouver Coastal Health Authority (VCHA: 1,111 per 100K); 4,742 cases in Interior Health Authority (IHA: 568 per 100K); 2,618 cases in Northern Health Authority (NHA: 911 per 100K); and 1,170 cases in Vancouver Island Health Authority (VIHA: 135 per 100K).

Episode-based weekly incidence: provincially and by HA and health service district area (HSDA)

As shown in [Figure 1](#), COVID-19 incidence showed steady increase from week 41 of Phase 3b (18 per 100K) to week 47 of Phase 3c (102 per 100K) which experienced the highest number of cases by episode date to date. This was followed by a decline in cases until the end of week 52 (67 per 100K). As of data extraction for the current bulletin, there were 3,694 and 3,092 cases with episode date in weeks 53 and 1, respectively, corresponding to incidences of 72 and 60 per 100K. Episode-based rates in recent weeks are subject to change as data (notably onset dates) become more complete.

As shown in [Figure 2](#), week 1 incidence was highest in NHA at 101 per 100K, followed by FHA at 83 per 100K. Rates in IHA and VCHA were comparable at 49 and 53 per 100K, respectively. Incidence was the lowest in VIHA at 16 per 100K. In recent weeks 51 to 53, NHA (107 to 119 per 100K), and VIHA (5 to 13 per 100K) showed increasing trends; VCHA (58 to 59 per 100K) and IHA (53 to 57 per 100K) were stable; and FHA experienced a decrease (124 to 106 per 100K). Rates in these HAs were driven by: Fraser South and Fraser East; Vancouver and Richmond; Okanagan and Thompson Cariboo Shuswap; Central and North Vancouver Island health service district areas (HSDAs), and all HSDAs in NHA.

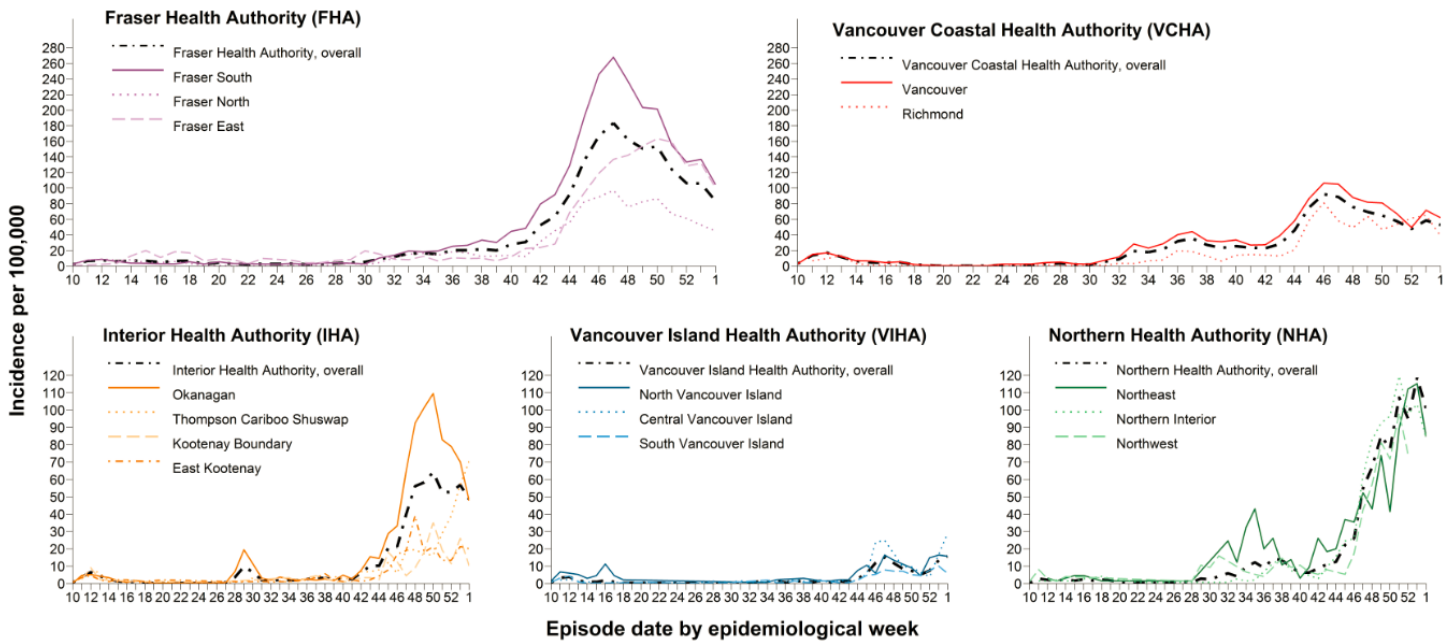
Figure 1. Episode-based epidemic curve (bars)^a, surveillance date (line) and health authority (HA), BC January 15, 2020 (week 3) – January 9, 2021 (week 1) (N= 58,677)



The average weekly rate by phase in Figure 1 is derived as the incidence divided by the number of weeks for: Pre-Phase 1 (8 weeks), Phase 1 (9 weeks), Phase 2 (5 weeks), Phase 3a (11.5 weeks), Phase 3b (8 weeks), and Phase 3c (8 weeks).

a. First onset date of a case in BC was January 15, 2020. Displayed data extracted after noon on Friday, January 15, 2021.

Figure 2. Weekly episode-based incidence rates by HA and health service delivery area (HSDA), BC March 1, 2020 (week 10) – January 9, 2021 (week 1)



B. Test rates and percent positive

In BC, laboratory-based surveillance captures mostly symptom-based diagnostic testing conducted under the Medical Service Plan (MSP) funding scheme, as well as any non-MSP funded screening tests. As shown by the bars in [Figure 3](#), there was a large decrease in the total weekly number of specimens tested, both MSP and non-MSP funded, from >75,000 in week 51 to ~45,000 in each of weeks 52 and 53 (Dec 20 and Dec 27), respectively. This is likely owing to changes in testing criteria implemented in week 52 (Dec 20) as well as decreased testing during the holiday period. The weekly number of tests increased to approximately 56,500 in week 1 of 2021, remaining substantially lower than weeks 46-50 (Nov 8-Dec 6).

As shown in [Figure 3](#), from week 46 to 51 (Nov 8-Dec 13) percent positivity plateaued for all specimens and started to decrease in MSP-funded specimens only. In week 52 (Dec 20) and 53 (Dec 27), percent positivity increased; this may be associated with a decrease in the number of tests conducted during this period, targeting people more likely to be positive. Positivity decreased in week 1 (Jan 3), concurrent with an increase in testing. As shown in **Panel A** of [Figure 4](#), the per capita testing rate in week 1 was highest in FHA and VCHA. As shown in **Panel B**, percent positivity for MSP-funded specimens was highest in NHA at 16.7% followed by FHA at 9.0%, IHA at 8.3% and VCHA at 7.2%, and lowest in VIHA at 2.9%. In NHA, IHA, and VIHA, positivity in MSP-funded specimens increased since week 44 (from 2.8%, 1.7%, and 0.4% respectively), but was relatively stable in the Lower Mainland.

Figure 3. Number of specimens tested and percent SARS-CoV-2 positive, by collection week, BC March 15, 2020 (week 12) – January 9, 2021 (week 1)^a

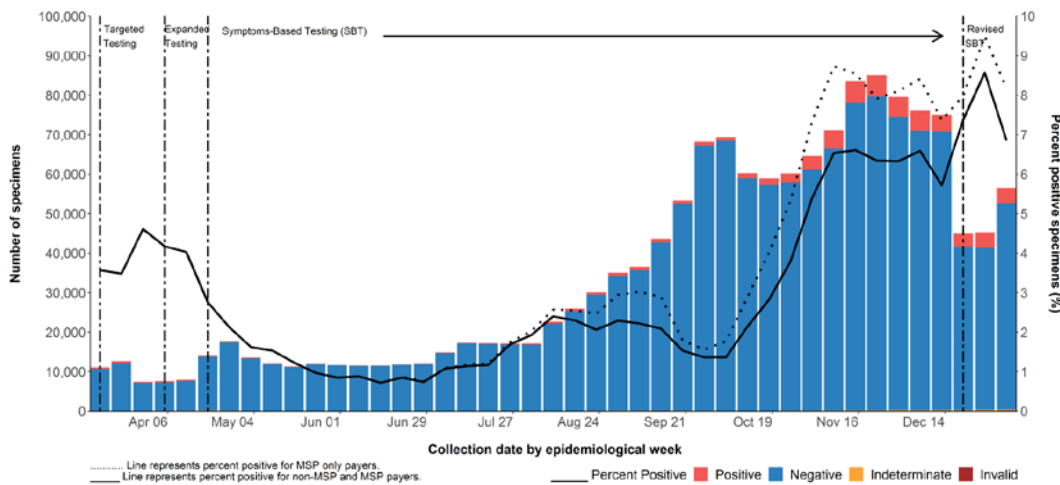
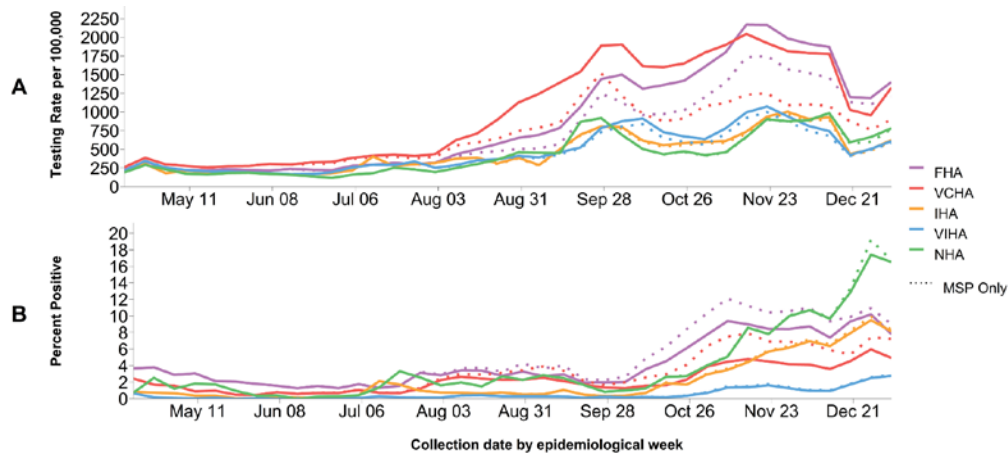


Figure 4. Testing rates and percent SARS-CoV-2 positive by health authority and collection week, BC March 15, 2020 (week 12) – January 9, 2021 (week 1)^a



a. PLOVER extract on Thursday, January 14, 2021.

C. Age profile – Testing and cases

Testing rates by age group

As shown by the coloured bars in [Figure 5](#), testing rates in week 1 compared to prior weeks 46-53 of Phase 3c were lower in all age groups except in adults 60+. The highest testing rates in week 1 were among older adults 80+ years, a change from weeks 46-53 of phase 3c where adults ages 20-39 had the highest testing rates.

Percent positivity by age group

As shown by the dots in [Figure 5](#), the percent positivity in week 1 remains elevated and was substantially higher in children ages 0-19 than prior weeks 46-53 of Phase 3c whether based on all specimens (black dots) or restricted to MSP specimens only (grey dots). Percent positivity remained stable for adults ages 20-79 in week 1 as compared to the rest of Phase 3c; and percent positivity decreased from 7.9% to 6.2% in elderly adults ages 80+ in week 1 as compared to the rest of phase 3c. With restriction to MSP specimens only, percent positivity in week 1 was lowest in the elderly ages 80+ years (6.2%), but otherwise exceeded 7% in all other age groups, highest in children 10-14 (12%) and 15-19 years (11%).

Case distribution by age group

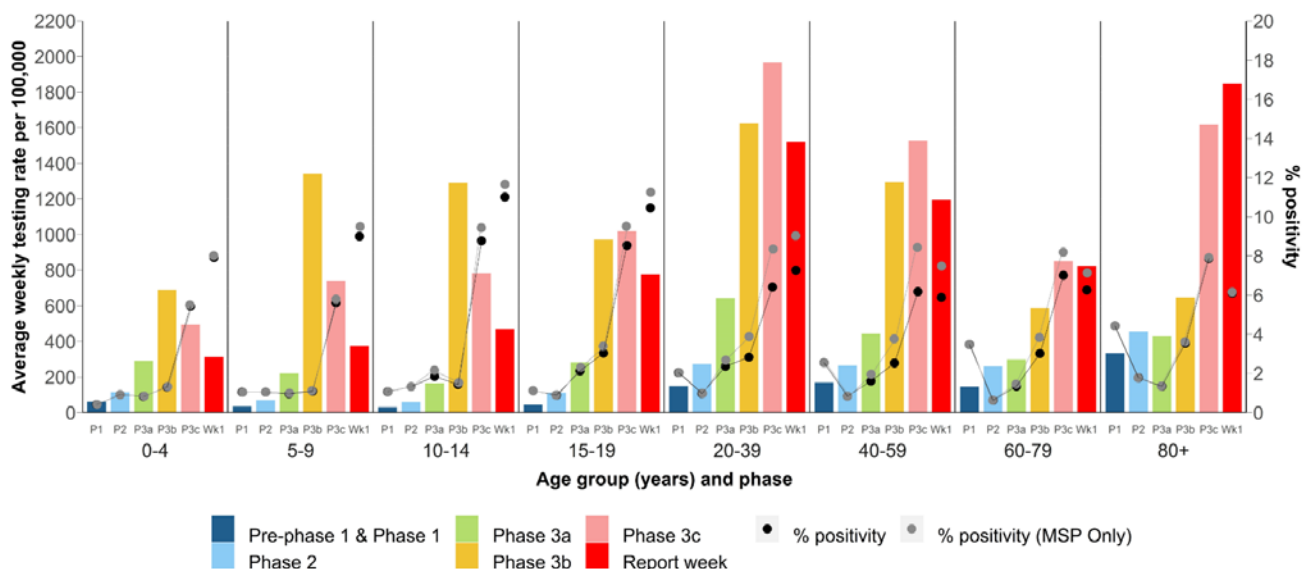
As shown in [Figure 6](#) and [Figure 7](#), the percentage contribution of most age groups has been relatively stable in week 1 compared to weeks 46-53 of Phase 3c, with a slight increase over the last 2 weeks in ages 20-39 years. Whereas in Phase 3a adults 20-39 years comprised more than half of all cases (53%), they contributed less in subsequent phases and in current report week 1 (42%). From week 42 to week 1, the contribution of adults 80+ has increased from 1.2% to 6.4% of cases.

Weekly incidence by age group

As shown in [Figure 8](#), incidence in week 1 showed signs of decrease in all age groups compared to prior weeks. As compared to prior bulletins, the difference in incidence between current week 1 and all prior weeks of Phase 3c shown in [Figure 9](#) is decreasing for most years of age, with the exception of the very old (82 and 88 year olds). In week 1, incidence was highest in adults 20-29 years (109 per 100K), but this is ~30% lower than the peak in week 46 (157 per 100K). Elderly adults 80+ years still have the second highest incidence in week 1 (84 per 100K).

Median age of cases across the pandemic is 37 years: 52 years in Pre-/Phase 1; 39 years in Phase 2; 33 years in Phase 3a; 36 years in Phase 3b; 38 years for prior weeks 46-53 of Phase 3c (excluding week 1) and 36 years in week 1 (not shown).

Figure 5. Average weekly SARS-CoV-2 testing rates and percent positive by known age group and phase^a, BC January 20, 2020 (week 4) – January 9, 2021 (week 1)^b



- Phase based on specimen collection date, of which January 20 was the earliest. The average weekly rate by phase is derived as the phase-specific per capita test rate divided by the number of weeks for Pre-Phase 1 + Phase 1 (P1: 17 weeks), Phase 2 (P2: 5 weeks), Phase 3a (P3a: 11.5 weeks), Phase 3b (P3b: 8 weeks), and Phase 3c, excluding the current report week (P3c: 8 weeks). The current report week, although part of Phase 3c, is excluded from Phase 3c as displayed here to enable comparison.
- Laboratory extract from PLOVER on January 14, 2021. Testing rates displayed are based on all specimens (MSP and non-MSP).

Figure 6. COVID-19 case distribution by known age group (years) and episode date, BC March 15, 2020 (week 12) – January 9, 2021 (week 1) (N= 58,144)^a

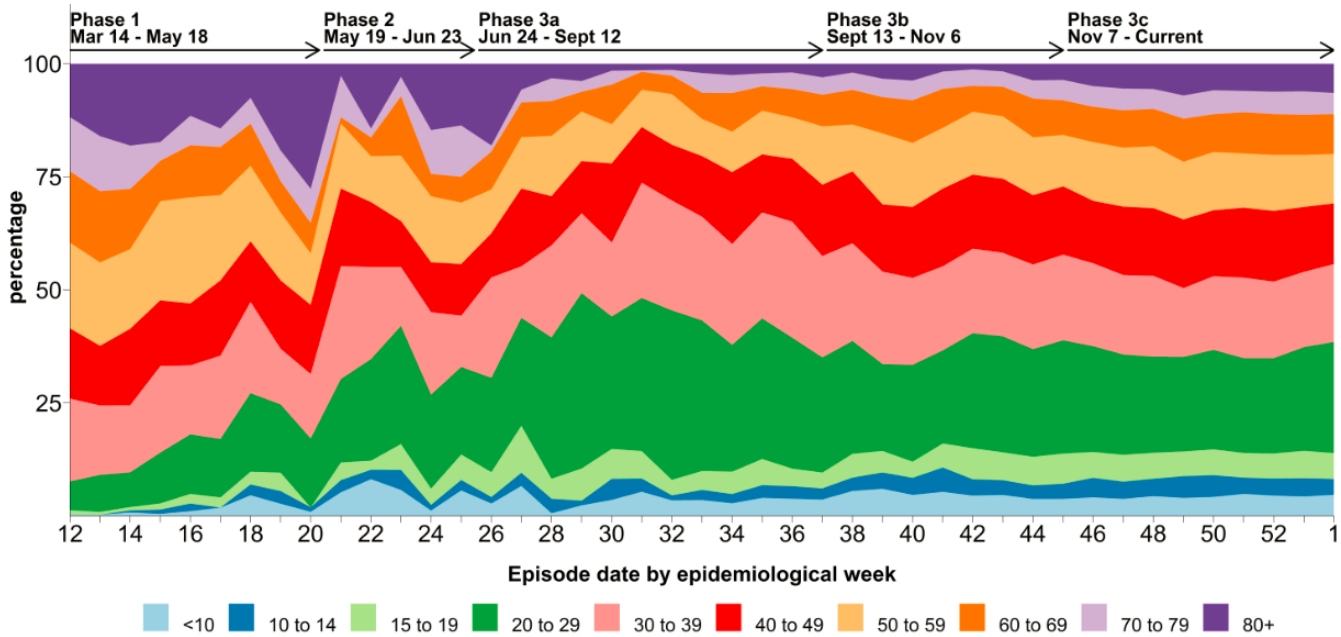
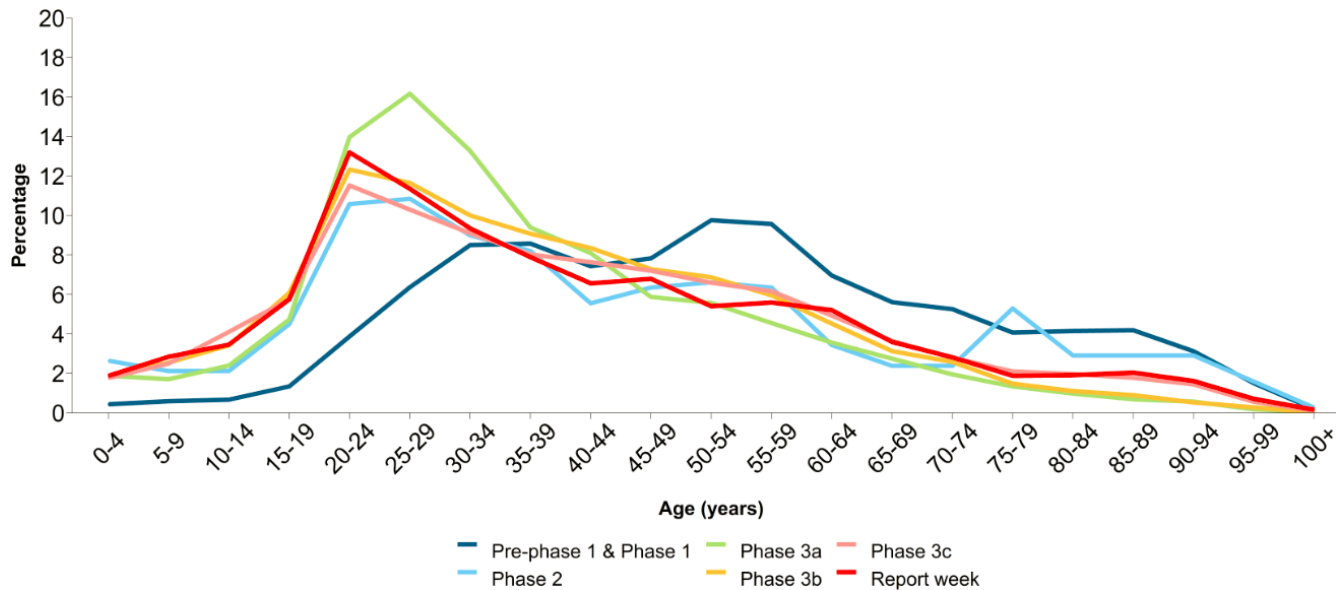


Figure 7. COVID-19 case distribution by known age group (years) for pandemic phases and current report week^b, BC January 15, 2020 (week 3) – January 9, 2021 (week 1) (N= 58,655)^a



- a. Among those with available age information only.
- b. The current report week, although part of Phase 3c, is excluded from derivations across prior weeks of Phase 3c to enable comparison, as displayed.

Figure 8. Weekly age-specific incidence per 100K population by epidemiological week, BC January 15, 2020 (week 3) – January 9, 2021 (week 1) (N= 58,655)^a

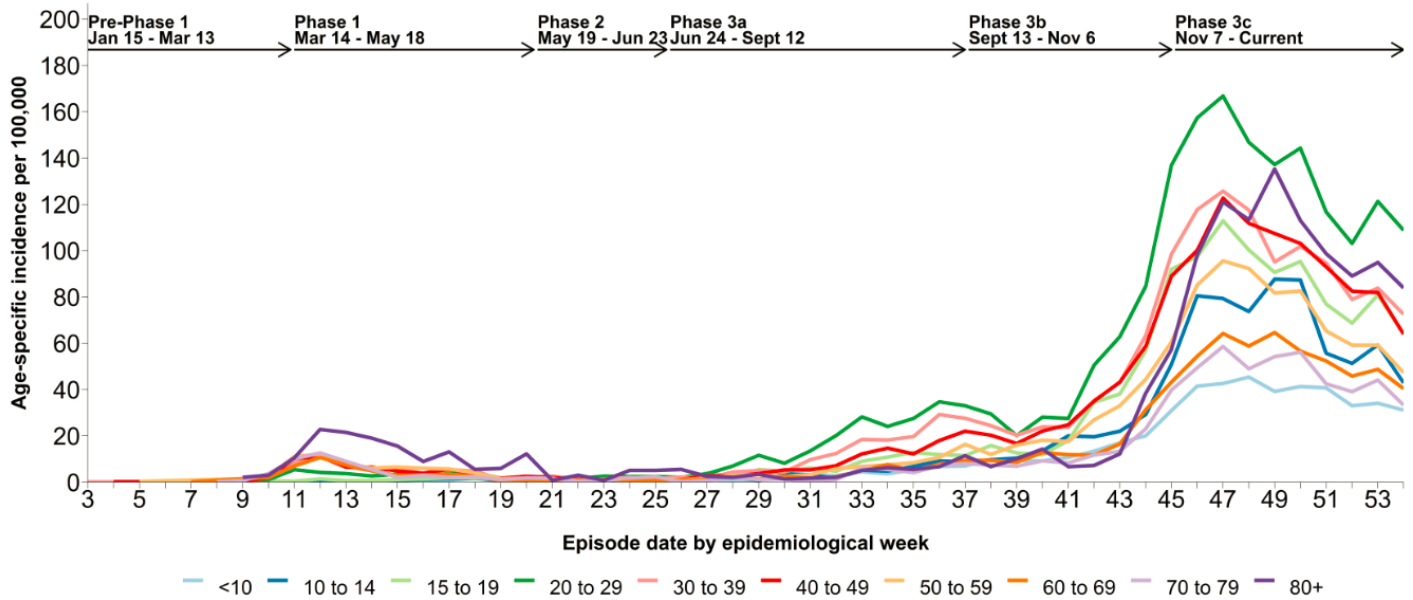
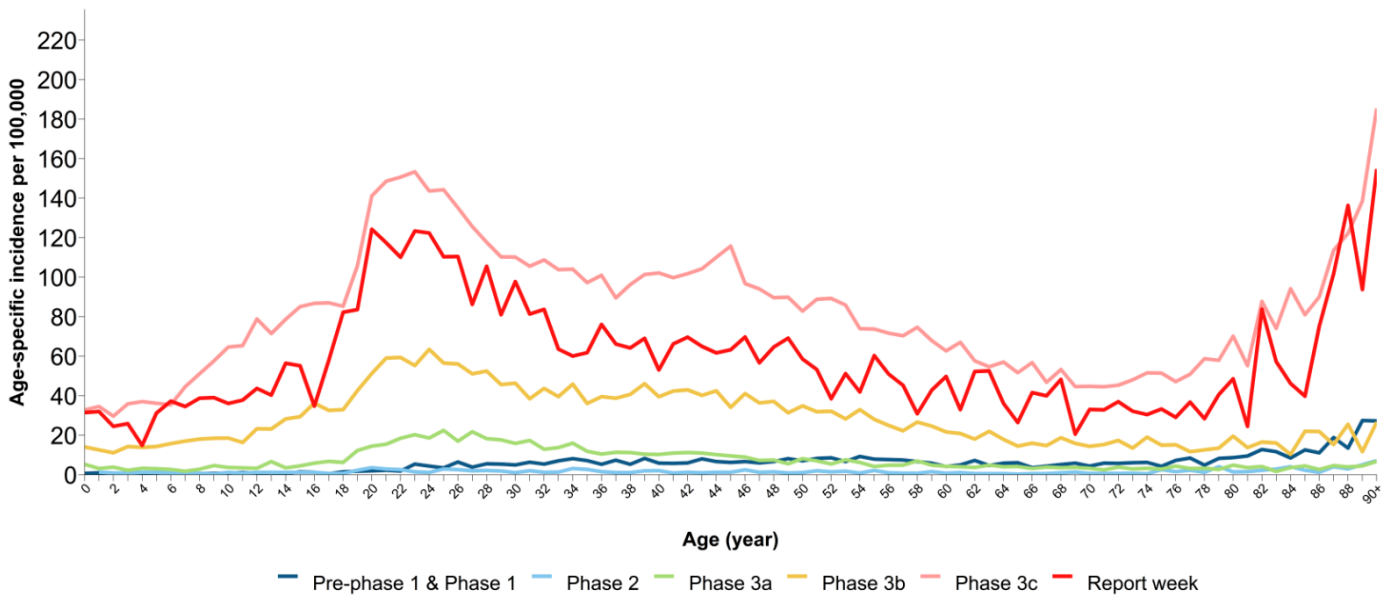


Figure 9. Average weekly incidence per 100K population by single year of age for pandemic phases 3a, 3b, 3c and current report week^b, BC January 15, 2020 (week 3) – January 9, 2021 (week 1) (N= 58,655)^a



a. Among those with available age information only.

b. The current report week, although part of Phase 3c, is excluded from derivations across prior weeks of Phase 3c to enable comparison, as displayed.

D. Severe outcome counts and epi-curve

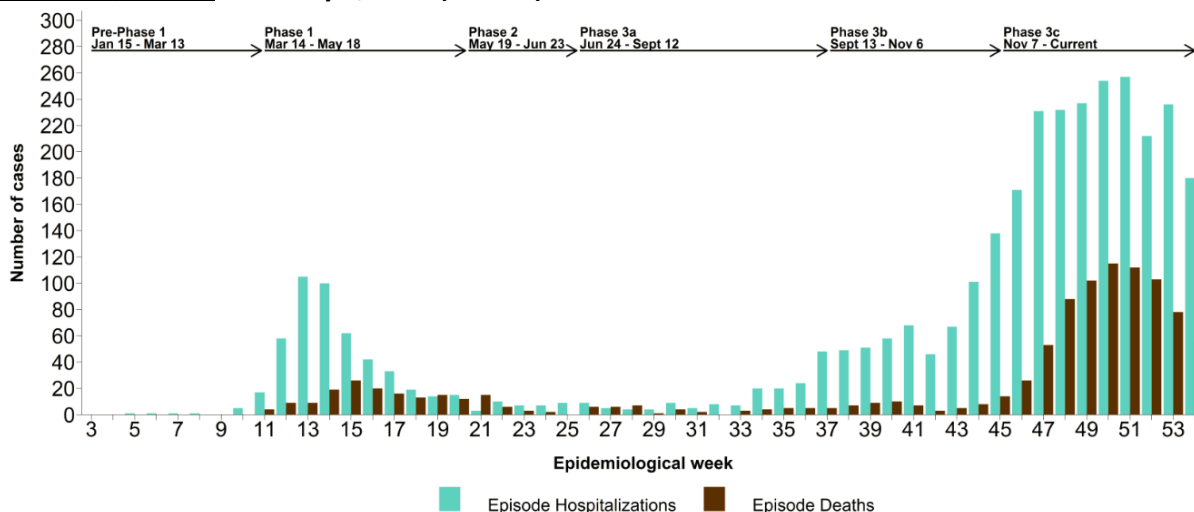
The tally of severe COVID-19 outcomes by pandemic phase is shown in [Table 1](#) and by week in [Figure 10](#). Whereas hospital admissions increased steadily from weeks 41-51 (from 68 to 257 per week), the number of admissions remained elevated and irregular in weeks 52 to 1 (~200), which is about double the first wave peak of 105 admissions in week 13. The number of deaths per week also increased substantially from weeks 42-50 (from 3 to 115 per week), and has since decreased steadily to 55 deaths in week 1. While severe outcome dates will become more complete with more incoming data, thus far most recent week 1 death count is double the first wave peak of 26 deaths in week 15. In week 1, 52/55 (95%) deaths were in 70+ year olds. Of the 1,012 total deaths in BC to date, 739 (73%) were associated with a care facility outbreak and 710 (96%) of these care facility deaths were 70+ years old (data not shown). Overall, males comprise 29,520/58,398 (51%) cases, 1,821/3,239 (56%) hospitalizations, 481/772 (62%) ICU admissions, and 548/1,011 (54%) deaths to date (not shown).

Table 1. COVID-19 severe outcomes by episode date, health authority of residence, and phase, BC January 15, 2020 (week 3) – January 9, 2021 (week 1)

Health authority of residence:	FHA	IHA	VIHA	NHA	VCHA	Outside Canada	Total n/N (%)
Ever Hospitalized	1,898	242	60	246	806	9	3,261/58,677 (6)
Pre-Phase 1 & Phase 1 (17 weeks)	244	31	24	13	161	2	475/3,261 (15)
Phase 2 (5 weeks)	26	1	0	5	6	1	39/3,261 (1)
Phase 3a (11.5 weeks)	104	7	0	7	39	2	159/3,261 (5)
Phase 3b (8 weeks)	324	16	2	30	205	1	578/3,261 (18)
Phase 3c (8 weeks, excluding week 1)	1,109	160	29	166	363	3	1,830/3,261 (56)
Week 1	91	27	5	25	32	0	180/3,261 (6)
Ever ICU	382	71	15	72	234	2	776/58,677 (1)
Pre-Phase 1 & Phase 1 (17 weeks)	75	15	8	7	71	1	177/776 (23)
Phase 2 (5 weeks)	6	0	0	3	4	0	13/776 (2)
Phase 3a (11.5 weeks)	26	3	0	4	14	1	48/776 (6)
Phase 3b (8 weeks)	61	4	0	14	59	0	138/776 (18)
Phase 3c (8 weeks, excluding week 1)	197	43	6	37	79	0	362/776 (47)
Week 1	17	6	1	7	7	0	38/776 (5)
Deaths	571	43	13	39	346	0	1,012/58,677 (2)
Pre-Phase 1 & Phase 1 (17 weeks)	55	2	5	0	84	0	146/1,012 (14)
Phase 2 (5 weeks)	22	0	0	0	5	0	27/1,012 (3)
Phase 3a (11.5 weeks)	20	0	0	1	23	0	44/1,012 (4)
Phase 3b (8 weeks)	31	1	1	2	28	0	63/1,012 (6)
Phase 3c (8 weeks, excluding week 1)	408	31	6	30	202	0	677/1,012 (67)
Week 1	35	9	1	6	4	0	55/1,012 (5)

a. Cases with unknown outcome are included in the denominators (i.e. assumed not to have the specified severe outcome).

Figure 10. COVID-19 hospitalization admissions (n= 3,261) and deaths (n= 1,012) by episode date^a, BC January 15, 2020 (week 3) – January 9, 2021 (week 1)



a. Data are displayed by episode date (i.e. date of hospital admission or date of death, and if those dates are missing, then surveillance date).

E. Age profile, severe outcomes

As shown in [Table 2](#) and [Figure 11](#), adults 70+ years comprise 10% of COVID-19 cases, commensurate with their share of the general population of BC (13%), but are greatly over-represented among hospitalizations (44%) and deaths (90%).

Older adults 60-69 years comprise 8% of COVID-19 cases, and a greater proportion of hospitalizations (18%) but a lower proportion of deaths (7%) relative to their share of the BC population (13%).

Adults 40-59 years comprise 28% of COVID-19 cases and 23% of hospitalizations, which is commensurate with their share of the BC population (27%), but they are under-represented among COVID-19 deaths (3%).

Adults 20-39 years comprise a greater share of COVID-19 cases (41%) than their share of the BC population (28%), but are under-represented among COVID-19 hospitalizations (13%) and deaths (<1%).

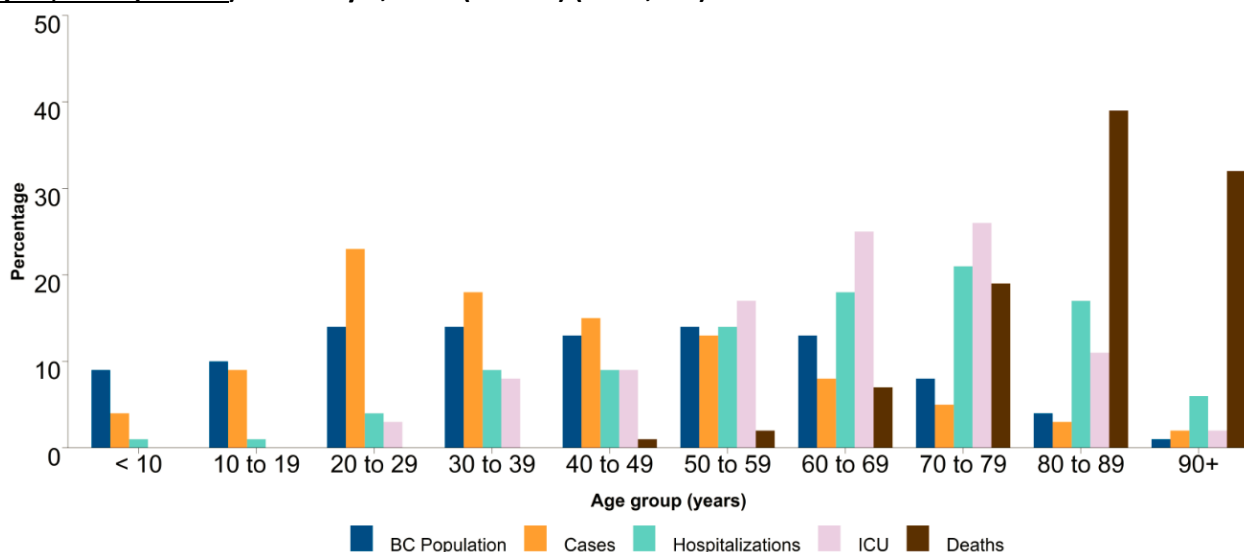
Children <20 years are under-represented overall among COVID-19 cases (13%) as well as severe outcomes (2% or less), relative to their share of the BC general population (19%).

Median age after vs. before Phase 3a is similar for both hospitalizations (66 vs. 68 years) and deaths (86 vs. 85 years).

Table 2. Age distribution^a: COVID-19 cases, hospitalizations, ICU admissions, deaths and BC population January 15, 2020 (week 3) – January 9, 2021 (week 1)

Age group (years)	Cases n (%)	Hospitalizations n (%)	ICU n (%)	Deaths n (%)	General BC population n (%)
<10	2,424 (4)	36 (1)	2 (<1)	0 (0)	469,351 (9)
10-19	5,374 (9)	31 (1)	3 (<1)	0 (0)	527,805 (10)
20-29	13,279 (23)	142 (4)	21 (3)	0 (0)	697,691 (14)
30-39	10,578 (18)	285 (9)	62 (8)	4 (<1)	735,052 (14)
40-49	8,717 (15)	304 (9)	66 (9)	9 (1)	646,035 (13)
50-59	7,478 (13)	449 (14)	130 (17)	24 (2)	718,272 (14)
60-69	4,899 (8)	573 (18)	194 (25)	69 (7)	673,131 (13)
70-79	2,802 (5)	685 (21)	200 (26)	188 (19)	435,062 (8)
80-89	2,004 (3)	549 (17)	85 (11)	391 (39)	187,443 (4)
90+	1,100 (2)	207 (6)	13 (2)	327 (32)	49,726 (1)
Total	58,655	3,261	776	1,012	5,139,568
Median age	37	66	65	86	41

Figure 11. COVID-19 cases, hospitalizations, ICU admissions and deaths by age group, and BC population January 15, 2020 (week 3) – January 9, 2021 (week 1) (N=58,655)^a



a. Among those with available age information only.

F. Likely sources of infection

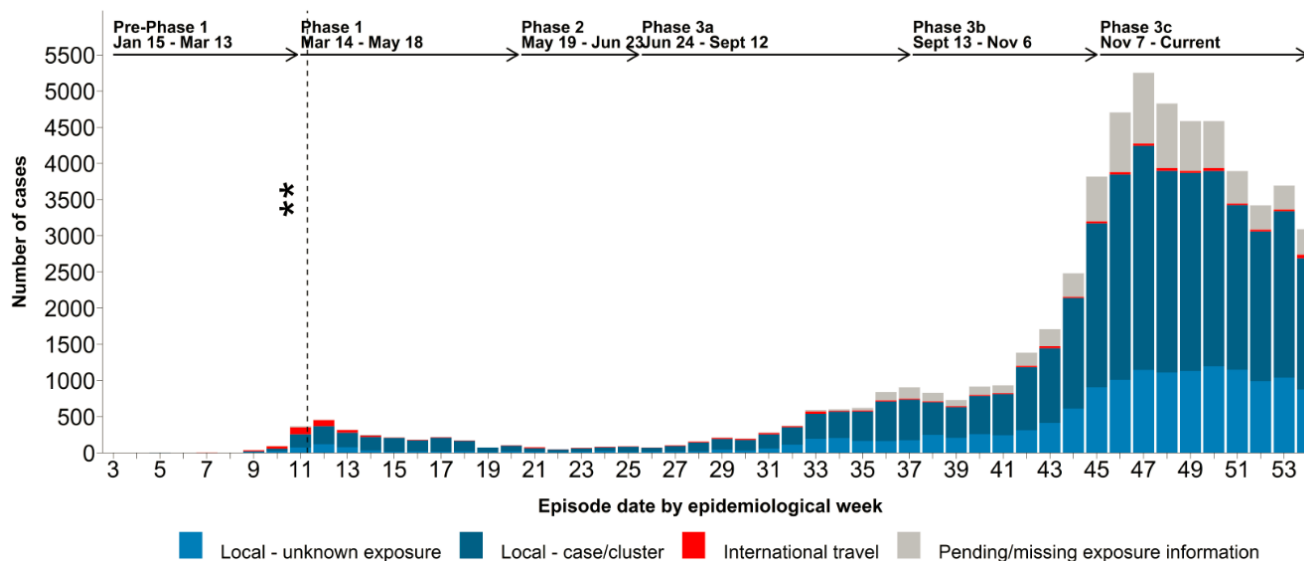
As shown in [Table 3](#) and [Figure 12](#), local contact with a known case or cluster has most often been considered the source of infection across all pandemic phases to date.

Since around mid-Phase 3a more cases have cited unknown local exposure or that information remained pending or missing. International travel has been cited less often since Phase 3b and these patterns have been generally maintained through week 1 during which international travel was cited by 2% of cases.

Table 3. Likely source of COVID-19 infection by pandemic phase of episode date, BC January 15, 2020 (week 3) – January 9, 2021 (week 1)

Phase n (row %)	International travel	Local – case/cluster	Local - unknown	Pending/missing
Pre-Phase 1	135 (30)	209 (46)	96 (21)	16 (4)
Phase 1	188 (9)	1,501 (72)	346 (17)	39 (2)
Phase 2	30 (8)	263 (70)	83 (22)	2 (1)
Phase 3a	180 (4)	3,169 (64)	1,194 (24)	375 (8)
Phase 3b	139 (1)	7,670 (60)	3,198 (25)	1,791 (14)
Phase 3c (excluding Week 1)	238 (1)	20,799 (59)	8,774 (25)	5,150 (15)
Week 1	49 (2)	1,813 (59)	877 (28)	353 (11)
Total	959 (2)	35,424 (60)	14,568 (25)	7,726 (13)

Figure 12. Likely source of COVID-19 infection by episode date, BC January 15, 2020 (week 3) – January 9, 2021 (week 1)



** March 16: Travel related restrictions introduced.

G. Care facility outbreaks

As shown in [Table 4](#) and [Figure 13](#), 271 care facility outbreaks were reported in total in BC to the end of week 1. There were 4 new care facility outbreaks reported in week 1 (2 of which were reported by FHA, 1 by VIHA and 1 by NHA). Facility outbreak tallies by earliest onset date are highest thus far in week 46 (29 outbreaks).

Thirty-five of the 55 deaths in total (64%) reported in week 1 in BC involved adults in a care facility setting in FHA (22 deaths), IHA (8 deaths), VCHA (4 deaths), and NHA (1 deaths). Of the 35 deaths, 34 were elderly adults 70+ years.

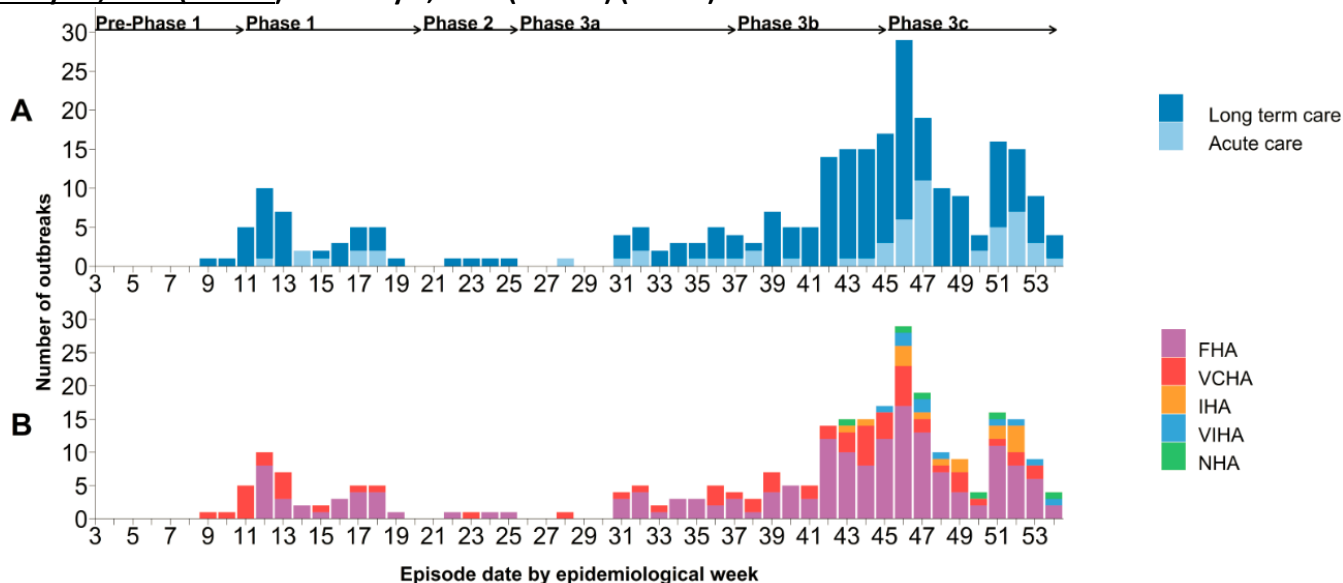
Of 38,053 cases overall in BC with episode date in Phase 3c, 3,456 (9%) were associated with a care facility outbreak, a proportion more than double Phase 3a and 3b combined (728/17,716; 4%), but lower than before Phase 3a (609/2,908; 21%).

Almost three-quarters of all COVID-19 deaths in BC have been associated with care facility outbreaks (739/1,012; 73%). Of those 739 facility outbreak-associated deaths, more than three-quarters have occurred since the week 38 start of Phase 3b (580; 78%).

Table 4. COVID-19 care facility outbreaks^a and associated cases and deaths by phase of episode date, BC January 15, 2020 (week 3) – January 9, 2021 (week 1) (N=271)

	Outbreaks	Cases				Deaths			
		Residents	Staff/other	Unknown	Total	Residents	Staff/other	Unknown	Total
Total	271	2,917	1,872	7	4,796	739	0	0	739
Pre-/Phase One (17 weeks)	44	330	213	0	543	97	0	0	97
Phase 2 (5 weeks)	4	51	18	0	69	24	0	0	24
Phase 3a (11.5 weeks)	27	92	93	0	185	38	0	0	38
Phase 3b (8 weeks)	81	276	266	1	543	31	0	0	31
Phase 3c (8 weeks, excluding week 1)	111	1,960	1198	5	3,163	514	0	0	514
Week 1	4	208	84	1	293	35	0	0	35
Active outbreaks ^b	66	-	-	-	-	-	-	-	-
Outbreaks declared over ^b	205	-	-	-	-	-	-	-	-

Figure 13. COVID-19 care facility outbreaks^a by earliest case onset^c, facility type (A) and health authority (B), BC January 15, 2020 (week 3) – January 9, 2021 (week 1) (N=269)^d



- a. Long term care facilities include: group homes (community living), independent living, assisted living, and other residential facilities. Care facility (acute/long-term care/independent living) outbreaks have at least one lab-confirmed COVID-19 staff or resident.
- b. As of January 9, 2021.
- c. Earliest dates of onset of outbreak cases are subject to change as investigations and data are updated.
- d. Difference of 2 outbreaks as compared to table 4 due to missing information in source data.

H. Clinical indicators

HealthLinkBC calls ([Figure 14](#)) related to COVID-19 peaked in week 47 at ~15,000 calls per week and decreased in later weeks, reaching just over 7,000 calls in weeks 52 and 53. Calls have increased again to ~8,800 calls in week 1.

BC Medical Services Plan (MSP) general practitioner claims ([Figure 15](#)) related to COVID-19 (including telehealth billings) mirror HealthLinkBC calls. Claims peaked in week 48 and decreased thereafter to around 3,300 visits in weeks 52-53, coinciding with the holidays. Visits increased again reaching >5,000 visits in week 1.

Figure 14. HealthLink BC calls related to COVID-19, BC
March 1, 2020 (week 10) – January 9, 2021 (week 1)

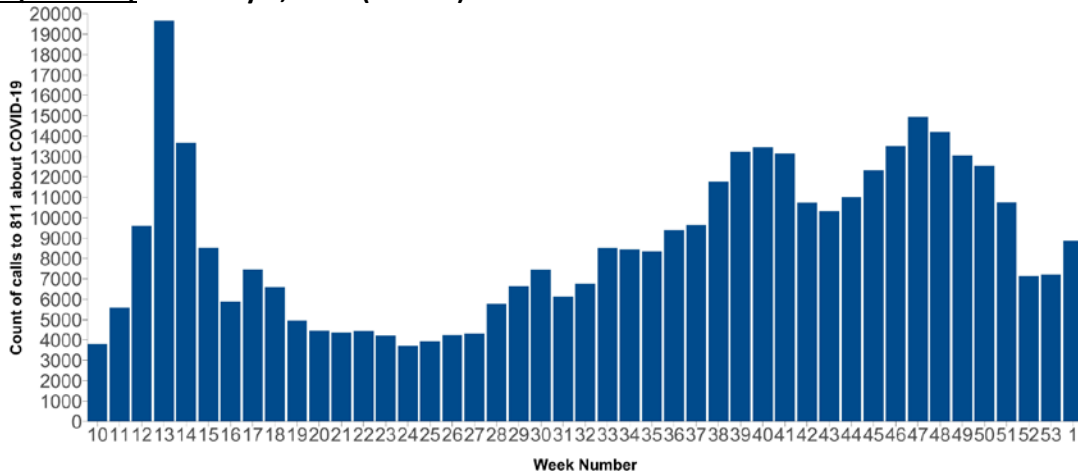
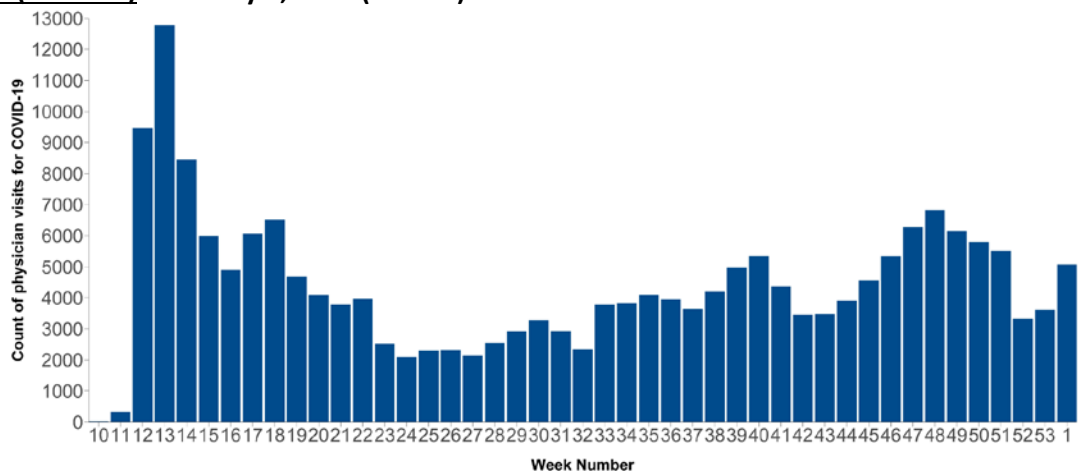


Figure 15. Medical Service Plan (MSP) claims (including telehealth billings) for COVID-19, BC
March 1, 2020 (week 10) – January 9, 2021 (week 1)



I. Emerging Respiratory Pathogens Update

Recent emerging COVID-19 variants of concern have been identified globally, including the United Kingdom (UK), South Africa, Nigeria, Malaysia, Argentina/Brazil, and most recently the United States variants. More than 50 countries have reported confirmed cases with the UK variant (B.1.17) and more than 15 countries reported cases with the South African variant (501Y.V2), both appearing to have a potential for increased transmissibility.

BC has identified four confirmed cases with the UK variant, two of which reported travel outside of Canada, while the remaining two cases were associated close contacts. BC has identified one case with the South African variant. The case reported no travel outside Canada or contact with anyone who travelled.