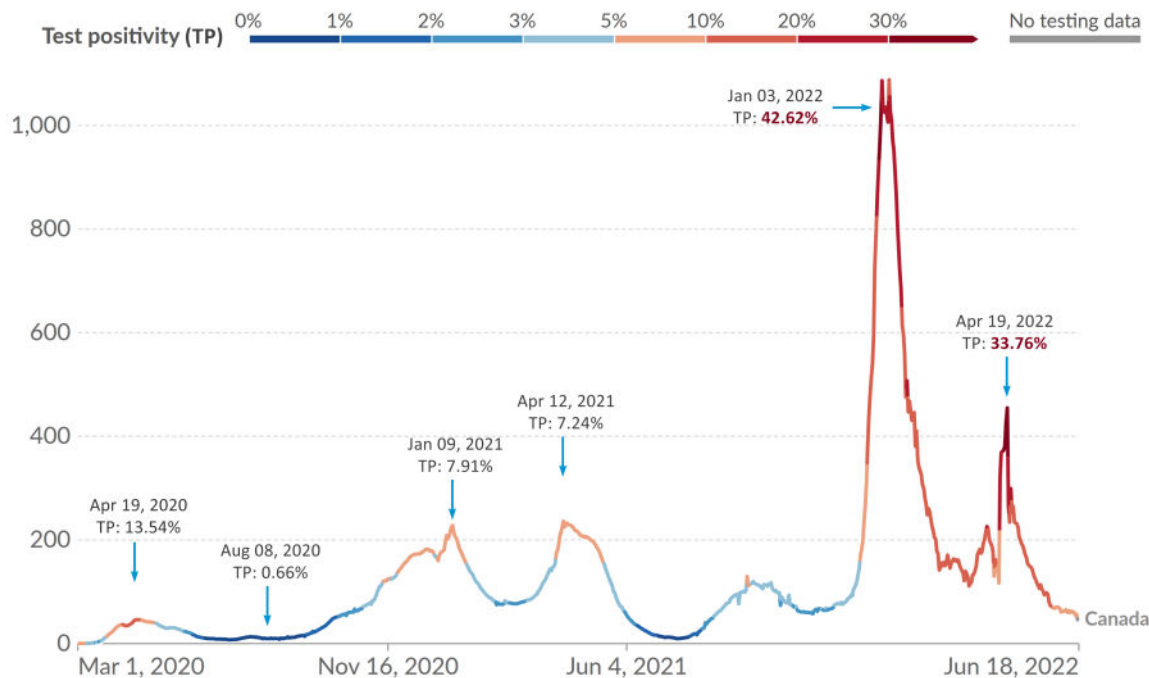


## Test Positivity and daily new confirmed COVID-19 cases per million people in Canada from March 2020 to June 2022

7-day rolling average. Due to limited testing, the number of confirmed cases is lower than the true number of infections.



Adapted from: <https://ourworldindata.org>

### WHAT IS TEST POSITIVITY AND WHY DOES IT MATTER?

Test positivity or “percent positivity” is exactly what it sounds like, which is the percentage of all tests done that are actually positive. It is calculated by dividing the number of positive tests by total number of tests performed x 100. Percent positivity is one of the critical COVID-19 metrics for infectious diseases specialists and public health officials to estimate the current level of SARS-CoV-2 transmission in the community, and if the levels of testing are keeping up with the levels of disease transmission.

The percent positivity will be high if the number of positive tests is too high, or if the number of total tests done is too low. A high percent positivity indicates high level of community transmission and thus, a higher risk of getting COVID-19. Below are some key points about this metric:

- How high is too high? One threshold that is generally used for the percent positivity being “too high” is 5% or above.
- When the percent positivity in your area is high, use available control measures like wearing a well-fitting, high quality mask in indoor settings, physical distancing, improve ventilation and avoid large gatherings to reduce the risk of getting infected.
- Results from rapid antigen testing are usually not included in the calculation of percent positivity.
- The percent positivity for COVID-19 in Ontario was **6.9%** as of June 14, 2022 and weekly numbers can be accessed via the [COVID-19 data tool](#) of Public Health Ontario (PHO).

Source: <https://publichealth.jhu.edu> | Source: <https://www.publichealthontario.ca>

## REMOVAL OF PROVINCIAL MASKING MANDATE IN CONGREGATE LIVING SETTINGS



The remaining masking requirements for the province were lifted on June 11, 2022 by the Chief Medical Officer of Health (CMOH) of Ontario, *except* in long-term care and retirement homes where masks are still required as an additional layer of protection for the most vulnerable. Masking is recommended for all other higher-risk congregate living settings, such as shelters and group homes.

In addition, Directives #1, #2.1, #3, #4 and #5, issued by the CMOH, were also revoked effective June 11, 2022. The practices that were developed since the beginning of the pandemic to limit the transmission of COVID-19 will continue to be supported through the Ministry of Health guidance and recommendations.

For all settings where masking is not mandated, organizations may implement their own policies regarding universal masking and refer to Ministry of Health’s guidance for health care workers and organizations.



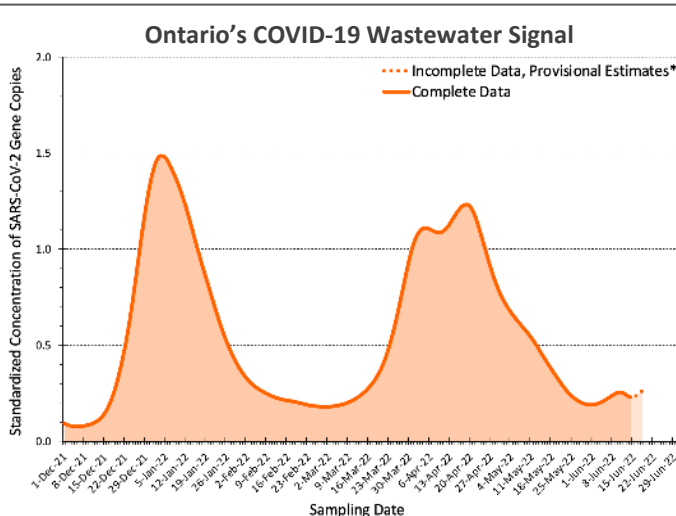
Source: <https://news.ontario.ca> | Source: <https://www.health.gov.on.ca>

## ASYMPTOMATIC SURVEILLANCE TESTING

Apart from changes in masking mandate in congregate living settings, requirements for asymptomatic screen testing for staff and visitors using rapid antigen tests (RATs) have also changed. As of June 11, 2022, asymptomatic surveillance testing is only required in long-term care homes (LTCHs) and is *recommended* in all other congregate living settings, including retirement homes, group homes and shelters.

- All staff, caregivers, students and volunteers visiting a LTCH must be tested at least **two times per week** using a RAT, on separate days, if they are up-to-date with all recommended COVID-19 vaccine doses. And three times per week if they are not up-to-date with the recommended COVID-19 vaccine doses.
- All general visitors and support workers entering a LTCH must have a negative RAT at the home on the day of visit, or proof of a negative test from a RAT or PCR taken on the same day of entry or day before.
- If an individual had a prior confirmed COVID-19 infection in the past 90 days, they do not need to be tested for asymptomatic surveillance, but must immediately resume testing after the **90 days** from the date of their confirmed COVID-19 infection.

Source: <https://www.health.gov.on.ca>



**Wastewater signal** is another metric or indicator used to estimate the level of community transmission of COVID-19, especially when testing in population is limited. It is the concentration of SARS-CoV-2 gene copies across wastewater treatment plants, pumping stations and sewersheds.

In Ontario, samples are typically taken 3 times per week at each location and there is a 5 to 7 day lag between the detection of SARS-CoV-2 gene copies in the wastewater, and the diagnosis and reporting of COVID-19 cases.

Source: <https://covid19-sciencetable.ca>