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Assignment Editor

Why Are So Few Ontarians Being Tested and Tracked? Health Coalition Raises Questions About COVID-19 Numbers

Toronto – Around the world, stories are emerging from jurisdictions that have done thorough testing and tracking of COVID-19 cases. There is a deep consensus that more testing and tracking can be a key component of reducing the transmission of the virus. Indeed, on February 24, the World Health Organization recommended countries outside China “prioritize active, exhaustive case finding and immediate testing and isolation, painstaking contact tracing and rigorous quarantine of close contacts.” Yet Ontario lags behind all other provinces and many other jurisdictions in ramping up testing, notes the Ontario Health Coalition. Today the Coalition is querying why this is and what is being done about it.

Yesterday, Global News released their [analysis](#) of the provincial/territorial numbers of tests and calculated them per capita as follows:

Province/territory	COVID-19 TESTS Rate per 100,000
Northwest Territories	1819
Yukon	1468
Alberta	1020
Saskatchewan	769
British Columbia	717
Quebec	611
Manitoba	519
Nova Scotia	496
Newfoundland and Labrador	404
Prince Edward Island	393
New Brunswick	376
Ontario	334

The Ford government has said that the reason is a lack of reagents needed for testing. But Ontario not only lags in the number of tests per capita (which one might expect given the size of the population) but our province has done fewer tests *in total* than our nearest large province and is very close in total numbers to other large provinces that have much smaller populations, the Coalition reports, which raises the question – if other provinces have enough reagents to do more tests than why does Ontario not?

The Coalition found that as of this morning Ontario is reporting that it has done 51,629 tests. [Quebec](#) had done more than 65,900 as of Saturday. [British Columbia](#) reports 42,028 tests “completed” as of today. [Alberta](#) has tested 46,057 people as of today. Further, an entire category of person is not being tested in Ontario, reports the Coalition. On March 26 the [Lindsay Advocate](#) revealed that Public Health Units are only testing “three to four” long-term care residents when there is an outbreak at a long-term care home and then they are not testing the rest, skewing our numbers and reducing the ability for Public Health staff to track and isolate those who may have been in contact with

the infected residents. (In other long-term care homes, Health Units appear to have declared an outbreak when two residents are infected.)

“Is Ontario still planning to follow the World Health Organization’s advice that underlines the importance of testing and tracking, or has it simply abandoned it?” queried Natalie Mehra, executive director of the health coalition. “We have held back from raising questions as the government was ramping up capacity and testing but it has been several weeks now and our province is still far behind where we should be. At this point, we are questioning whether there is a plan to test and track, and if so, when will testing criteria be loosened so that more people can access testing? Who will be prioritized? What is our province’s goal? How quickly can our province catch up to the goal?”

In order to get tested at all, Ontarians need to jump through a lot of hoops, reports the Coalition. Two weeks ago, once the opening of assessment centres was announced, the Health Coalition began looking for a list it could share with Ontarians. There is no list on the Ministry of Health special COVID-19 website. The Coalition has undertaken to make a list and update it regularly on its website (an update is coming out today) but the Coalition was disturbed that there was no attempt to make the centres more accessible to Ontarians.

In fact, in some areas, the Coalition reports, hospitals did not want assessment centres publicized even though it was well known that residents could not get through on blocked Telehealth Ontario and Public Health Unit phone lines. In some areas, testing is by appointment and only after pre-screening and only for those who are able to reach pre-screeners at health units and Telehealth on the phone or through their primary care provider. There is some variation across the province in terms of who can be tested, according to what the Coalition has found. In some cases, walk-ins to dedicated assessment facilities are described on the assessment centre and hospital websites as “strictly prohibited”. In other places, assessment centres welcomed all residents and allowed walk-ins. Some assessment centres do testing. Others just triage sites.

“This underlines the extent to which the province has left the management of the crisis up to individual health providers with their different cultures – some of openness and accessibility, some much more closed and opaque,” said Ms. Mehra. “It also underlines how dampening access to assessment centres has limited testing and there appears not to have been a plan to date to do thorough testing and tracking.”