

British Columbia (BC) COVID-19 Situation Report
Week 25: June 20- June 26, 2021

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

PRE-PHASE 1 Jan 15 (wk 3) - Mar 13 (wk 11) 2020	PHASE 1 Mar 14 (wk 11) - May 18 (wk 21) 2020	PHASE 2 May 19 (wk 21) - Jun 23 (wk 26) 2020	PHASE 3 Jun 24 2020 (wk 26) - Current wk, 2021 (DATES START FROM BEGINNING OF COMPLETE EPIWEEK)
From earliest symptom onset date	Initial restrictions	Re-opening of services	PHASE 3A: Jun 24 (wk 26)-Sept 12 (wk 37) 2020: Broader re-opening PHASE 3B: Sept 13 (wk 38)-Nov 7 (wk 45) 2020: Start of 2020-21 school year PHASE 3C: Nov 8 (wk 46)-Mar 27 (wk 12) 2021: Core bubble interaction only PHASE 3D: Mar 28 (wk 13)-May 22 (wk 20) 2021: Circuit breaker restrictions PHASE 3E: May 23 (wk 21)- Current wk, 2021: Step 1 BC Restart Plan (wk 21-23); Step 2 BC Restart Plan (wk 24-25)

Table of [vaccination phases](#) defined by vaccine eligibility of target populations in BC:

VACCINATION PHASE 1 Dec 2020 to Feb 2021	VACCINATION PHASE 2 Feb to April 2021	VACCINATION PHASE 3 April to May 2021	VACCINATION PHASE 4 May 2021- Present
Target populations include residents, staff and essential visitors to long-term care settings; individuals assessed and awaiting a long-term care placement; health care workers providing care for COVID-19 patients; and remote and isolated Indigenous communities.	Target populations include seniors, age ≥80; Indigenous peoples age ≥65 and Indigenous Elders; Indigenous communities; hospital staff, community general practitioners and medical specialists; vulnerable populations in select congregate settings; and staff in community home support and nursing services for seniors.	Target populations include people aged 60-79 years, Indigenous peoples aged 18-64 and people aged 16-74 who are clinically extremely vulnerable.	Target populations include everyone 12+ years.

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

- Episode dates are defined by dates of illness onset. When those dates are unavailable, earliest laboratory date is used (collection or result date); if also unavailable, then public health care report date is used. Analyses based on episode date (or illness onset date) may better represent the timing of epidemic evolution. Episode-based tallies for recent weeks are expected to increase as case data, in particular onset dates, are more complete.
- The weekly tally by surveillance date (result date, if unavailable then report date) includes cases with illness onset date in preceding weeks. Episode dates for hospital admission, ICU, and death are defined by admission and death dates. When unavailable, surveillance date is used.
- As of June 15, 2021, per capita rates/incidences for year 2020 are based on Population Estimates 2020 (n= 5,139,568 for BC overall) and for year 2021 are based on PEOPLE 2020 estimates (n= 5,197,224 for BC overall).
- Laboratory data include Medical Service Plan (MSP) funded (e.g. clinical diagnostic tests) and non-MSP funded (e.g. screening tests) specimens.
- Data sources include: health authority case line list data, laboratory PLOVER data, PHSA Provincial Immunization Registry (PIR), and hospital data (PHSA Provincial COVID19 Monitoring Solution (PCMS)).
- Case data were extracted on July 05, 2021, laboratory data on July 02, 2021, PIR vaccine coverage date on July 02, 2021, and PCMS hospitalization data on July 05, 2021.

A. COVID-19 case counts and epidemic curves

Provincially, up to week 25, 2021, there have been 147,594 cases, for a cumulative incidence of 2,836 per 100K (Table 1, Figure 1). As shown in Figure 1, following the peak of Wave 3 in week 14 at 150 per 100K, incidence has decreased by 96% to reach 6 per 100K in week 25. The incidence in week 25 is comparable to early August 2020 during Phase 3a. Rates may increase as data by episode date become more complete. Due to an update to the provincial population estimates used to calculate rates, there is a slight change in rates compared to reports in week 21 and earlier.

As shown in Figure 2, incidence decreased in all health authorities in the 10-12 weeks prior to week 25. In week 25, Interior Health (IH) and Fraser Health (FH) had the highest incidence rates at 9 and 8 per 100K, respectively; Vancouver Coastal Health (VCH) at 6 per 100K; Northern Health (NH) at 2 per 100K; and Island Health (VIHA) at 1 per 100K. Incidence has decreased in all health service delivery areas (HSDA), except in East Kootenay HSDA where it increased very slightly in week 25 from 1 to 3 per 100K. Rates may increase as data become more complete.

Table 1. Episode-based case tallies by health authority, BC, Jan 15, 2020 – June 26, 2021 (week 25) (N= 147,594)

Case tallies by episode date	Health Authority of Residence					Outside Canada	Total
	FH	IH	VIHA	NH	VCH		
Week 25, case counts	164	76	8	7	68	5	328
Cumulative case counts	85,796	13,141	5,159	7,800	35,488	210	147,594
Week 25, cases per 100K population	8	9	1	2	6	NA	6
Cumulative cases per 100K population	4,360	1,563	590	2,695	2,898	NA	2,836

Figure 1. Episode-based epidemic curve (bars), surveillance date (line) and health authority (HA), BC January 15, 2020 (week 3) – June 26, 2021 (week 25) (N= 147,594)

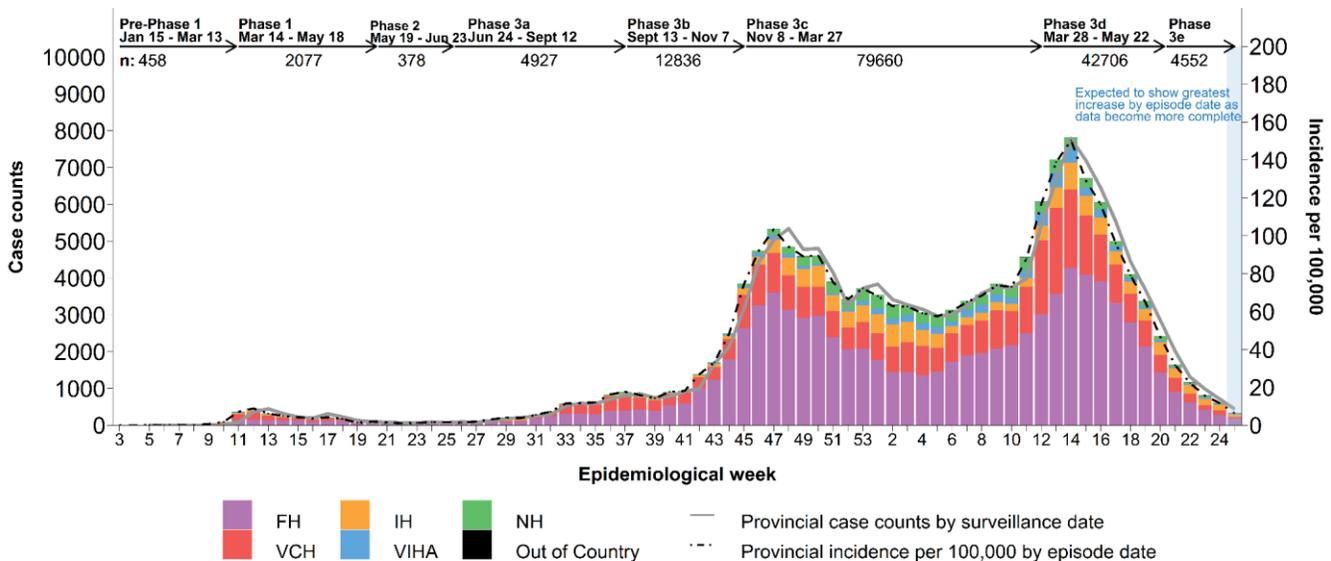
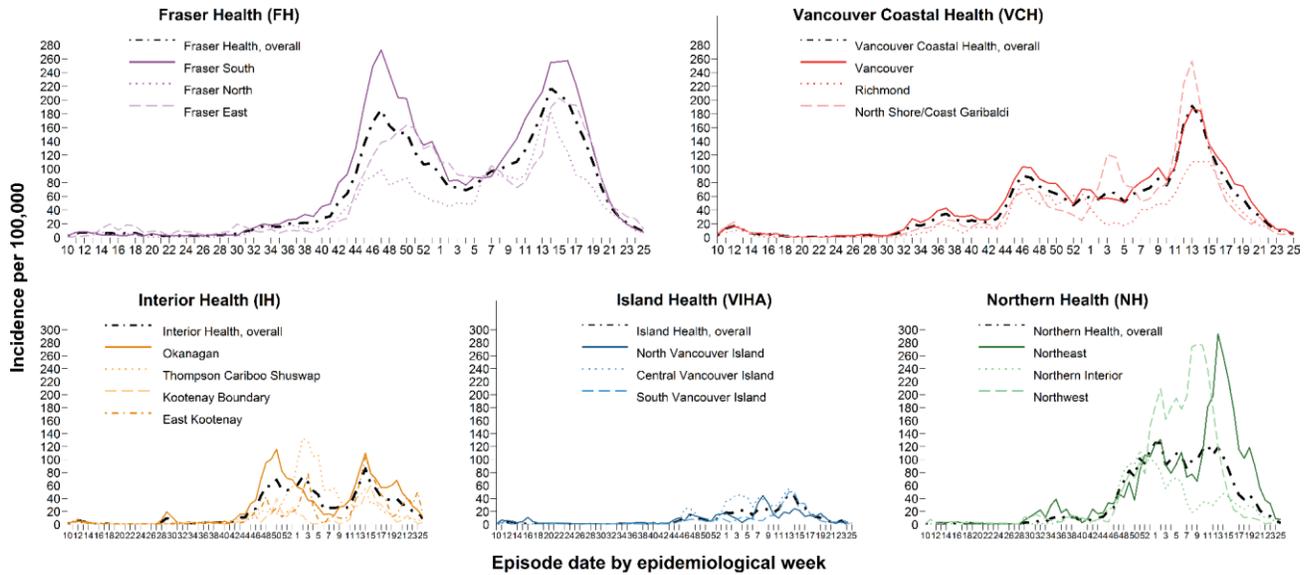


Figure 2. Weekly episode-based incidence rates by HA and health service delivery area (HSDA), BC March 01, 2020 (week 10) – June 26, 2021 (week 25) (N= 147,594)



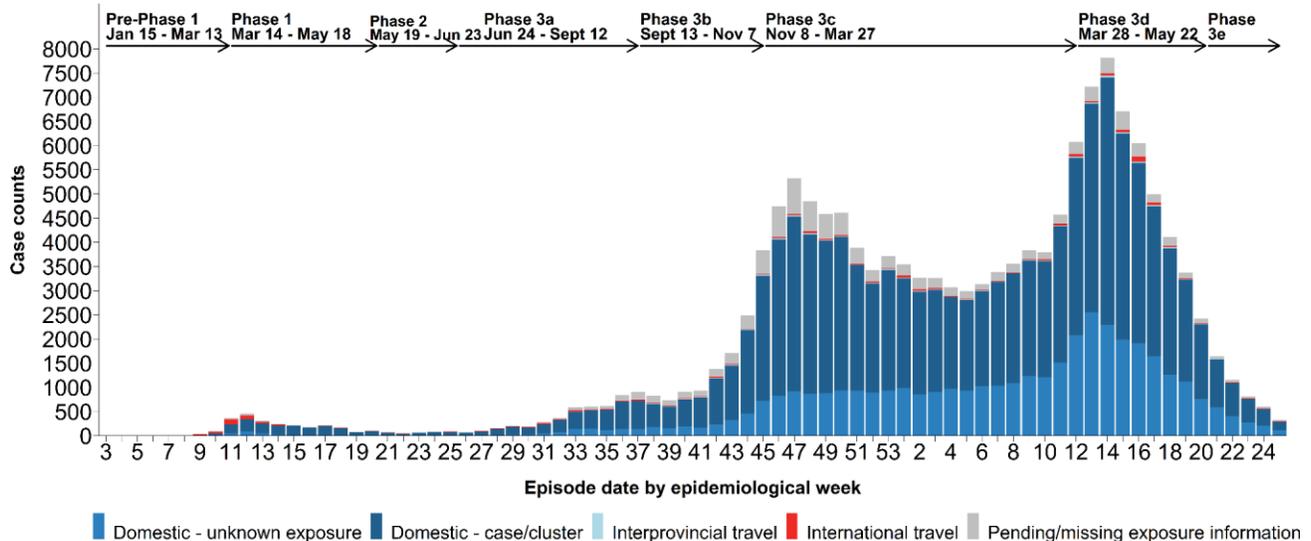
B. Likely sources of infection

As shown in [Table 2](#) and [Figure 3](#), domestic contact with a known case or cluster has been the most commonly reported source of infection across the pandemic to date. There were no cases reporting interprovincial travel for week 25.

Table 2. Likely source of COVID-19 infection by episode date, BC January 15, 2020 (week 3) – June 26, 2021 (week 25) (N= 147,594)

Likely exposure (row %)	International travel	Interprovincial travel	Domestic – case/cluster	Domestic – unknown	Pending/missing
Week 25 , Exposures	12 (4)	0 (0)	173 (53)	116 (35)	27 (8)
Cumulative Exposures	1,536 (1)	612 (<1)	95,009 (64)	39,853 (27)	10,584 (7)

Figure 3. Likely source of COVID-19 infection by episode date, BC January 15, 2020 (week 3) – June 26, 2021 (week 25) (N= 147,594)



C. Test rates and percent positive

As shown by the darker-colored bars in [Figure 4](#), testing of MSP-funded specimens decreased by 69% from ~67,500 specimens in week 14 to ~21,000 in week 25. Positivity of MSP-funded specimens has been decreasing rapidly since week 14 (12.1%) reaching 2.4% in week 25; this is comparable to positivity in end of August 2020.

As shown in [Panel A of Figure 5](#), the per capita testing rates for MSP-only specimens have been declining in all HAs since weeks 14-15. As shown in [Panel B](#), percent positivity for MSP-funded tests has also been decreasing since weeks 13-14. For week 25, positivity was highest in IH at 3.3% followed by VCH, FH, and NHA at 2.4%, and lowest in VIHA at 0.8%.

Figure 4. Number of specimens tested and percent SARS-CoV-2 positive, by collection week, BC March 15, 2020 (week 12) – June 26, 2021 (week 25)

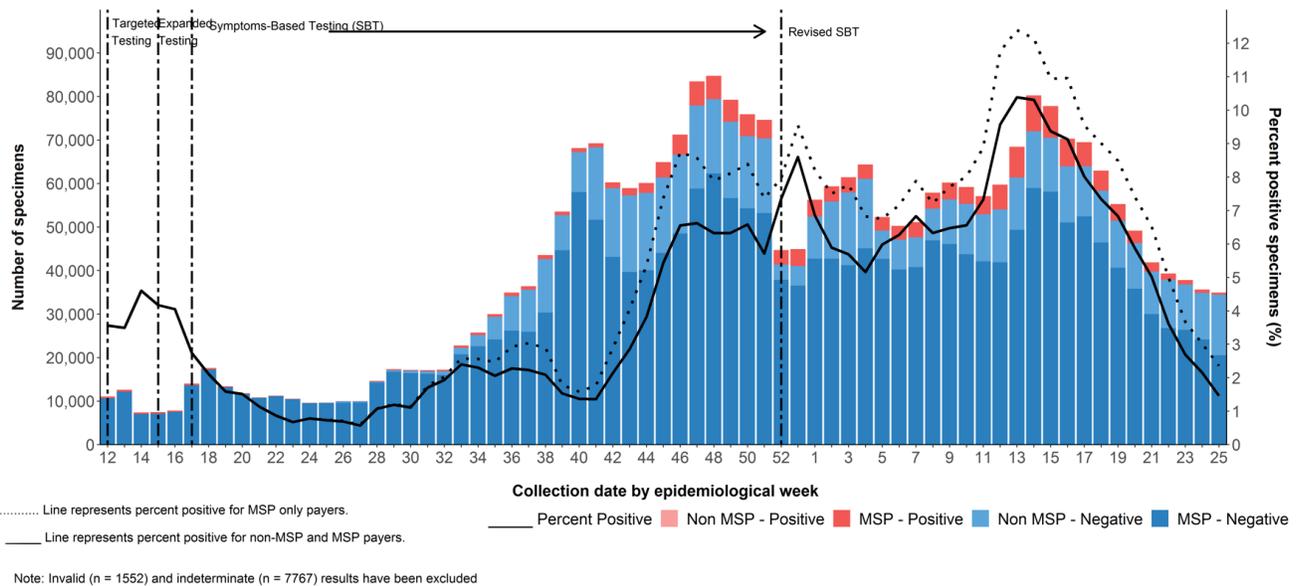
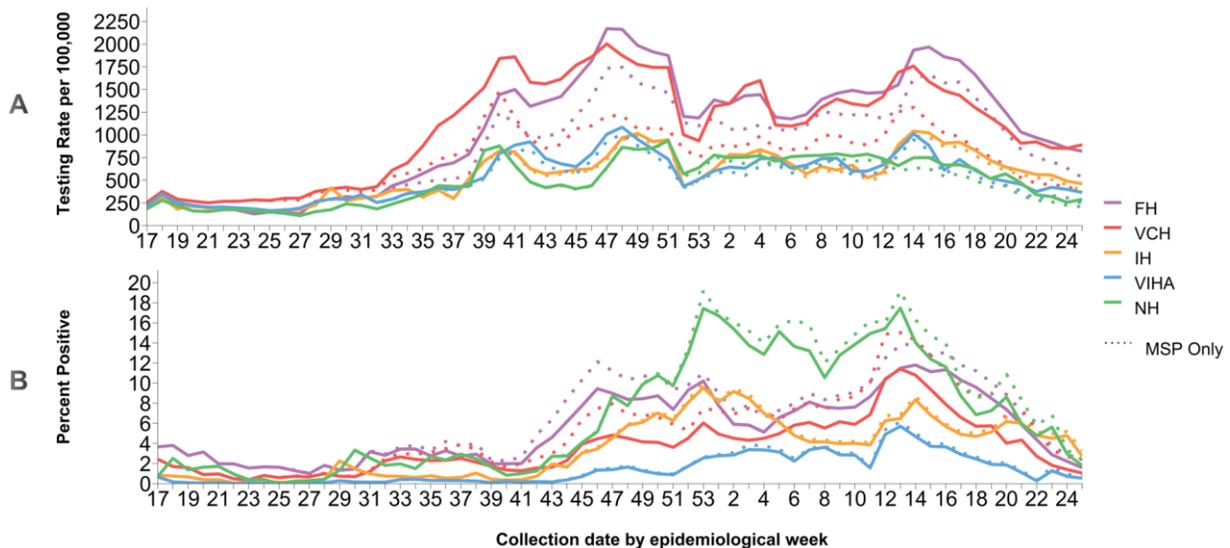


Figure 5. Testing rates and percent SARS-CoV-2 positive by health authority and collection week, BC March 15, 2020 (week 12) – June 26, 2021 (week 25)



Data source: laboratory PLOVER data

D. Age profile – Testing and cases

Testing rates and percent positivity by age group

As shown by the bars in [Figure 6](#), testing rates in week 25 have decreased in all age groups since at least week 20, with the exception of the 80+ year-olds where there was a slight increase from week 24. The 80+ year-olds also had the highest testing rate for week 25 at 738 per 100K.

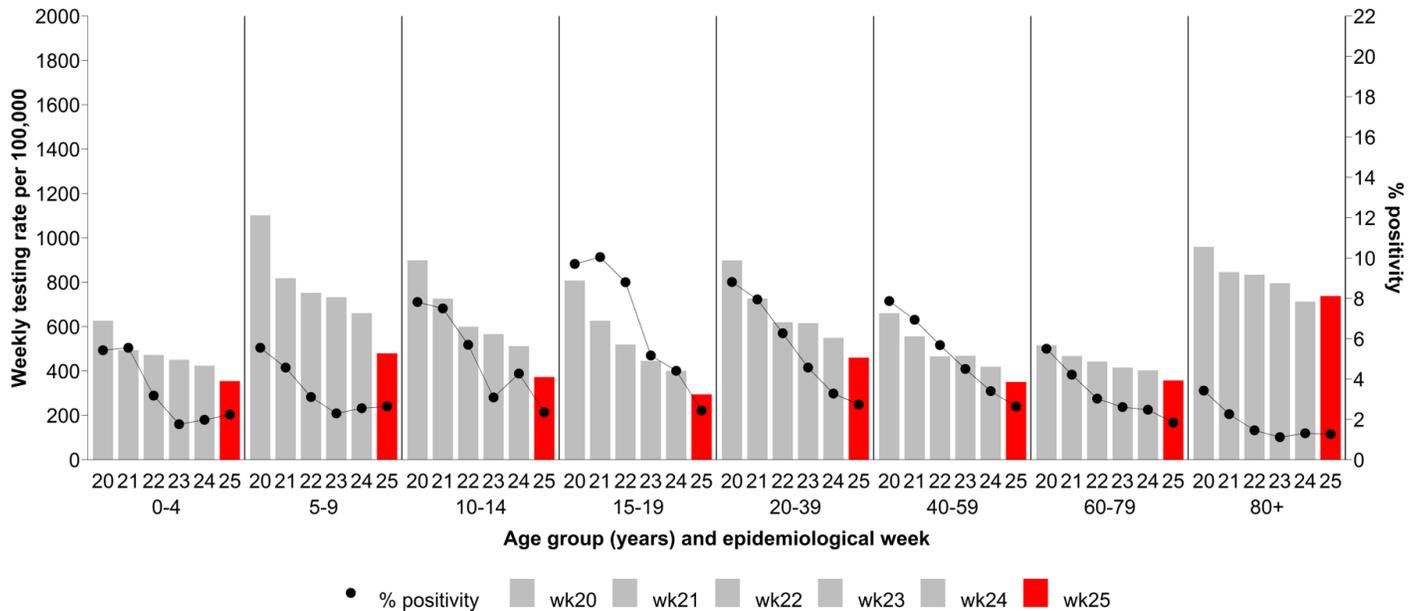
As shown by the black dots in [Figure 6](#), the percent positivity has decreased in all age groups since week 20, but has stabilized or increased slightly in ages 0-14 and 80+ years since week 23. The percent positivity in all age groups between 10 and 59 years have experienced a similar sharp decline since week 20 of ~5%. In week 25, the percent positivity was comparable among all age groups less than 60+ ranging from 2.2% to 2.7%. Percent positivity was lower in the 60-79 and 80+ year-olds at 1.8% and 1.3%, respectively.

Case distribution and weekly incidence by age group

As shown in [Figure 7](#), recent fluctuations in proportions reflect small case counts which is more pronounced starting week 22. Generally, younger adults between 20 and 49 years of age comprise half of the cases.

As shown in [Figure 8](#), age specific incidences decreased from weeks 13-14 to week 25 in all age groups, with relative decreases ranging from 95% to 98%. The highest incidences in week 25 were in the 30-39 and 15-19-year-olds at 9 per 100K and the lowest was in the 70-79-year-olds at 1 per 100K. Week 25 age-specific incidences are likely to increase as data become more complete.

Figure 6. Average weekly SARS-CoV-2 MSP testing rates and MSP percent positive by known age group, BC January 20, 2020 (week 4) – June 26, 2021 (week 25)



Data source: laboratory PLOVER data

Figure 7. COVID-19 case distribution by known age group (years) and episode date, BC March 15, 2020 (week 12) – June 26, 2021 (week 25) (N= 147,058)

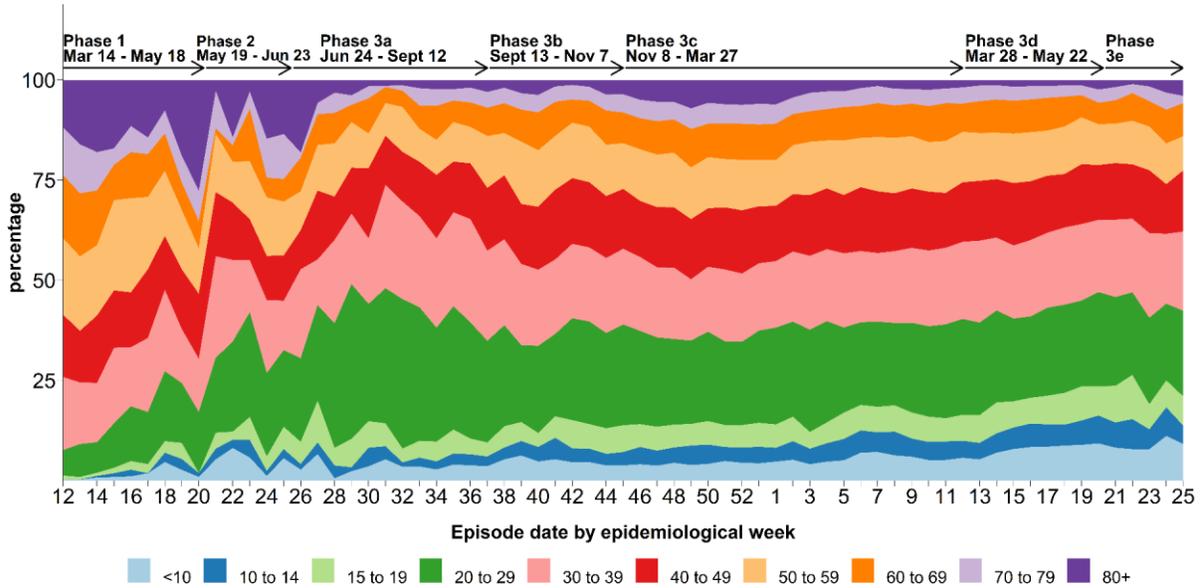
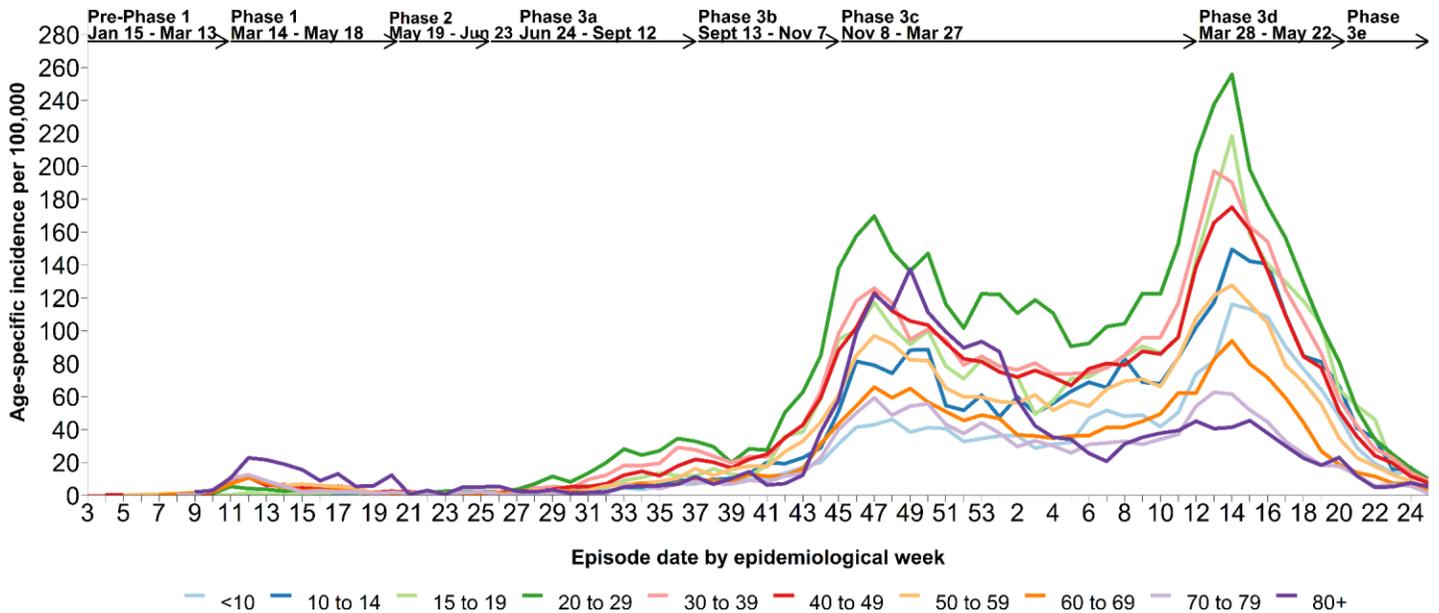


Figure 8. Weekly age-specific COVID-19 incidence per 100K population by epidemiological week, BC January 15, 2020 (week 3) – June 26, 2021 (week 25) (N= 147,571)



Single-dose vaccine coverage and weekly cases by age group

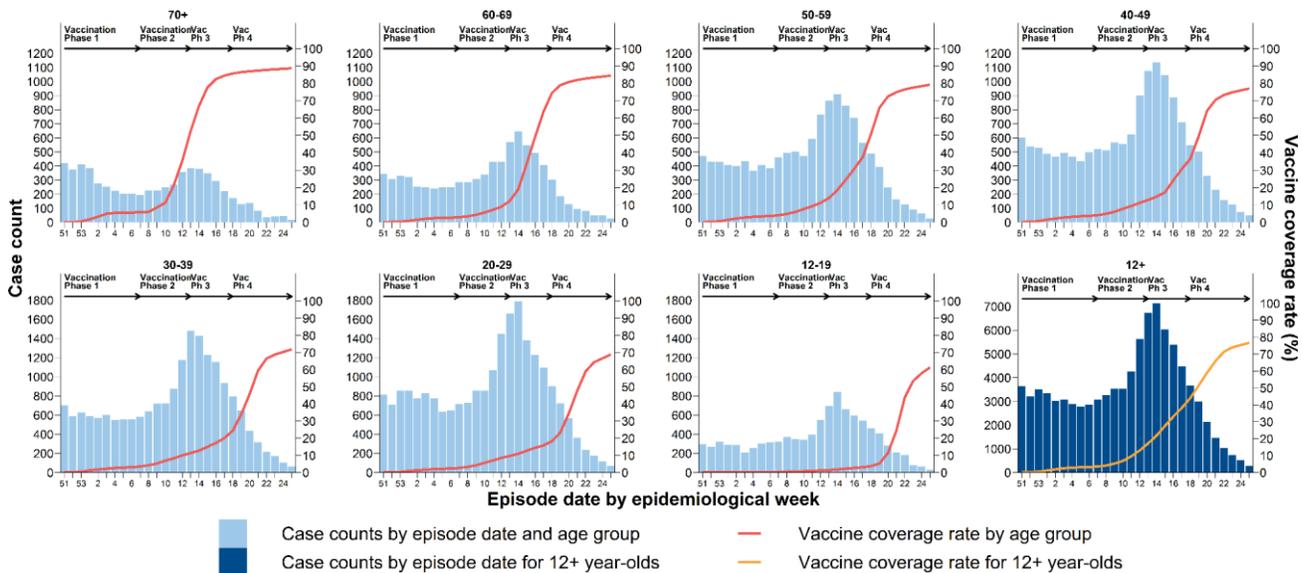
As vaccination coverage increases, case counts are expected to decrease a few weeks later. The vaccination of community-based older adults 70+ years of age started between weeks 10 and 14. As shown in **Figure 9**, compared to the very steep increase in vaccination coverage from week 10 (11%) to week 16 (83%), rates have increased at a slower rate since week 17 reaching 89% in week 25 when there were only 19 cases reported for that age group.

The vaccination of community-based (not residing in healthcare facilities, not healthcare workers and not clinically extremely vulnerable) adults 40 to 69 years of age started in weeks 15-19; by week 25, coverage reached 85%, 80%, and 77% reflecting case counts of 27, 28, and 50 for the 60-69, 50-59, and 40-49 year-olds, respectively.

The vaccination of community-based adults 20 to 39 year of age started in weeks 19-20; by week 25, coverage was 72% and 69% with 65 and 70 cases for the 30-39 and 20-29 year-old groups, respectively.

The lowest coverage was in children 12-19 years of age at 61% coverage in week 25. Overall, single-dose vaccine coverage for all age groups 12+ years reached 77% by week 25, a 1% increase since week 24.

Figure 9. Weekly age-specific single-dose COVID-19 vaccine coverage and case counts by epidemiological week, BC December 13, 2020 (week 51) – June 26, 2021 (week 25)



Data sources: health authority case line list data and PHSA Provincial Immunization Registry

E. Severe outcome counts and epi-curve

The number of weekly hospital admissions peaked in week 15 (384) and has declined by 87% since then, reaching 50 admissions in week 24, followed by an increase in week 25 with 65 hospitalizations reported (Table 3, Figure 9). Intensive care unit (ICU) admissions decreased by 90% since week 15 (107 admissions), reaching 11 admissions in week 25. The number of deaths decreased by 81% since week 19 (31 deaths) with 6 deaths reported in week 24, followed by a slight increase in week 25 with 10 deaths reported. These numbers may increase in future reports as more data become available.

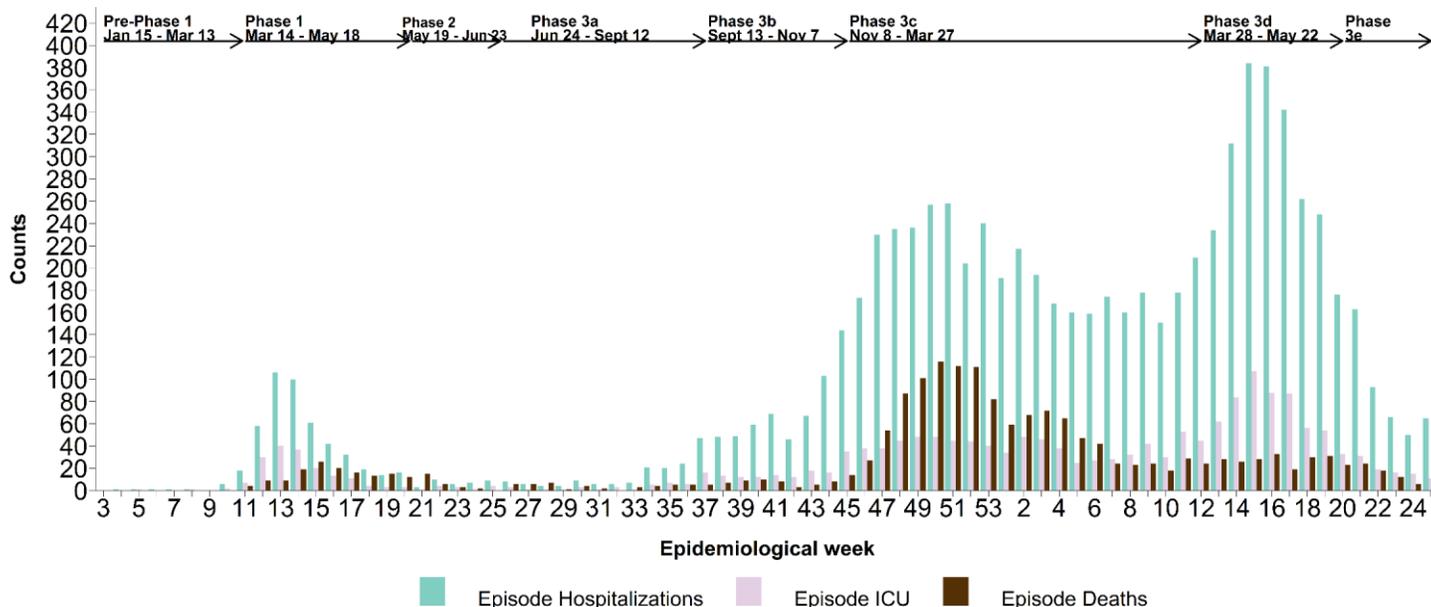
Cumulatively, there have been 16 confirmed cases of [Multi-system Inflammatory Syndrome in children and adolescents \(MIS-C\)](#) in BC from January 1, 2020 to week 25. The median age of these cases is 7 (range 1-15) years.

Table 3. COVID-19 severe outcomes by episode date, health authority of residence, BC January 15, 2020 (week 3) – June 26, 2021 (week 25)

Severe outcomes by episode date	Health authority of residence					Residing outside of Canada	Total n/N ^a (%)
	FH	IH	VIHA	NH	VCH		
Week 25, hospitalizations	37	13	3	4	8	0	65
Cumulative hospitalizations^b	4,427	738	254	660	1,914	14	8,007/147,594 (5)
Week 25, ICU admissions	2	1	3	3	2	0	11
Cumulative ICU admissions^b	869	191	71	169	520	2	1,822/147,594 (1)
Week 25, deaths	6	2	0	1	1	0	10
Cumulative deaths	921	157	41	156	479	0	1,754/147,594 (1)

- a. Cases with unknown outcome are included in the denominators (i.e. assumed not to have the specified severe outcome).
- b. Data source: health authority case line lists only. Data may be incomplete and subject to change

Figure 10. COVID-19 hospital admissions and deaths by episode date, BC January 15, 2020 (week 3) – June 26, 2021 (week 25)



Data sources: health authority case line list data and PHSA Provincial Immunization Registry

F. Age profile, severe outcomes

Table 4 displays the distribution of cases and severe outcomes. In week 25, median age of hospital admissions, ICU admissions and deaths was 61 years, 69 years and 65 years, respectively based on health authority case line lists only (data not shown).

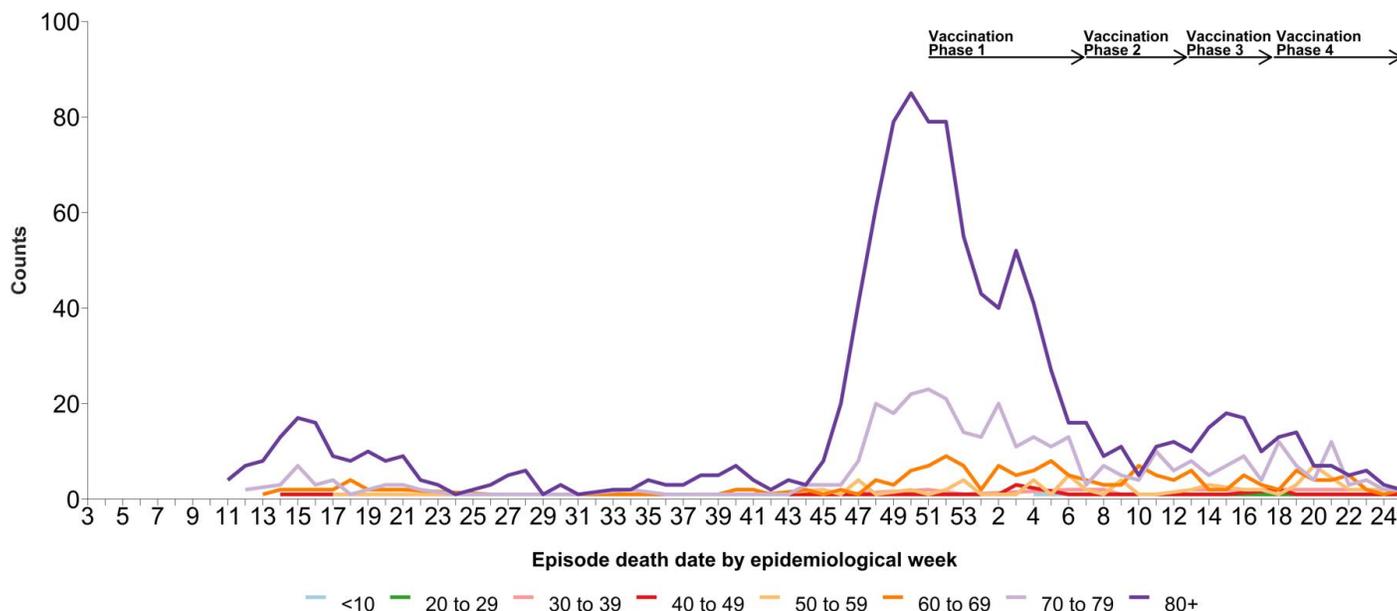
As shown in **Figure 11**, since week 6, death counts have been low and stable in elderly adults with an average of 10 deaths per week in the 80+ year-olds, 6 in the 70-79-year-olds, 4 in the 60-69-year-olds, and 2 in the 50-59-year-olds.

Table 4: Age distribution: COVID-19 cases, hospitalizations, ICU admissions, deaths, and BC population by age group January 15, 2020 (week 3) – June 26, 2021 (week 25) (N= 147,571)^a

Age group (years)	Cases n (%)	Hospitalizations n (%) ^b	ICU n (%) ^b	Deaths n (%)	General BC population n (%)
<10	8,436 (6)	94 (1)	7 (<1)	2 (<1)	470,017 (9)
10-19	15,898 (11)	67 (1)	14 (1)	0 (<1)	529,387 (10)
20-29	33,102 (22)	407 (5)	46 (3)	2 (<1)	699,476 (13)
30-39	27,205 (18)	796 (10)	152 (8)	16 (1)	750,054 (14)
40-49	21,742 (15)	894 (11)	189 (10)	26 (1)	648,377 (12)
50-59	18,381 (12)	1,242 (16)	346 (19)	69 (4)	711,930 (14)
60-69	11,862 (8)	1,509 (19)	453 (25)	168 (10)	686,889 (13)
70-79	6,105 (4)	1,514 (19)	439 (24)	374 (21)	454,855 (9)
80-89	3,338 (2)	1,111 (14)	164 (9)	620 (35)	193,351 (4)
90+	1,502 (1)	387 (5)	17 (1)	477 (27)	52,885 (1)
Total	147,571	8,021	1,827	1,754	5,197,221
Median age^c	35	63	63	84	41

- a. Among those with available age information only.
- b. Data sources: health authority case line lists and a subset of PHSA Provincial COVID19 Monitoring Solution (PCMS) data for children <20 years of age. PCMS data were included as of June 8 2021.
- c. Median ages calculated are based on health authority case line lists only.

Figure 11. Weekly age-specific COVID-19 deaths by episode date, BC January 15, 2020 (week 3) – June 26, 2021 (week 25) (N= 1,754)^a



G. Care facility outbreaks

As shown in [Table 5](#) and [Figure 12](#), 329 care facility (acute and long-term care setting) outbreaks were reported in total in BC to the end of week 25, with no new outbreaks in week 25. Outbreaks in long-term care settings (i.e. long-term care or assisted living facilities) have decreased since week 51 and outbreaks in acute care facilities have decreased since week 9.

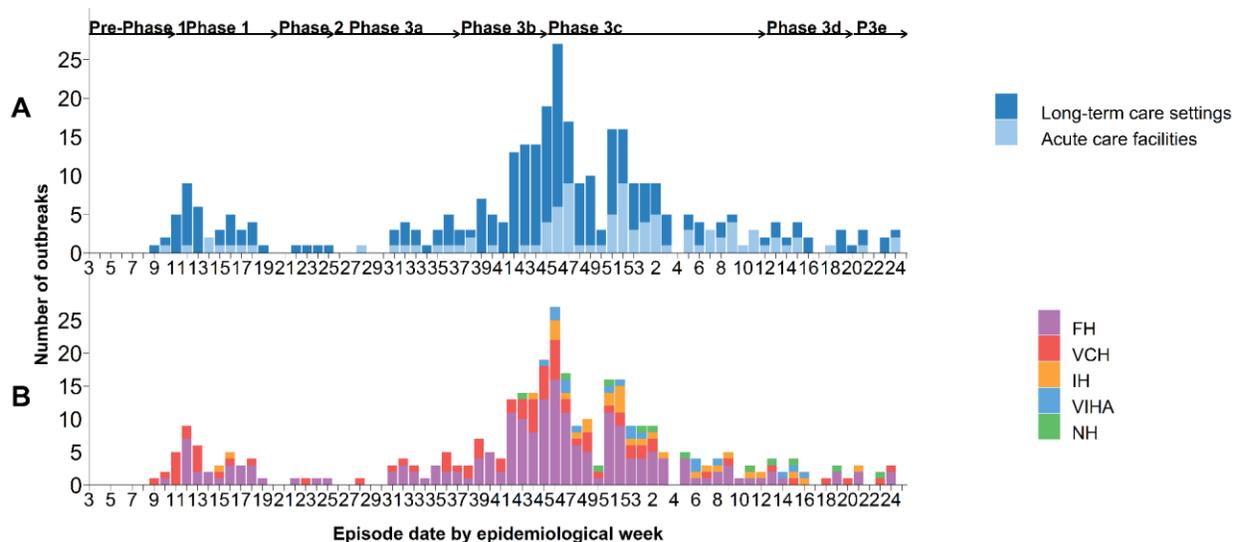
Two of the 10 (20%) deaths reported in week 25 were associated with an outbreak in a care facility setting.

Table 5. COVID-19 care facility^{a,b} outbreaks by earliest case onset^{a,c}, associated cases and deaths by episode date, BC^d January 15, 2020 (week 3) – June 26, 2021 (week 25) (N=329)

Care facility outbreaks and cases by episode date	Outbreaks	Cases				Deaths			
		Residents	Staff/other	Unknown	Total	Residents	Staff/other	Unknown	Total
Week 25, Care Facility Outbreaks	0	10	0	0	10	2	0	0	2
Cumulative, Care Facility Outbreaks	329	3,584	2,278	6	5,868	1,032	0	0	1,032

a. New outbreaks reported since the last report with an earliest case onset date prior to the current reporting week will be included in the cumulative care facility outbreak total.

Figure 12. COVID-19 care facility^b outbreaks by earliest case onset^c, facility type (A) and health authority (B), BC^d January 15, 2020 (week 3) – June 26, 2021 (week 25) (N=329)



- b. Care facility settings include acute care or long-term care settings (defined as long-term care facility or assisted living).
- c. Earliest dates of onset of outbreak cases are subject to change as investigations and data are updated.
- d. As of week 46, VCH and FH no longer declare outbreaks with single staff cases unless there is evidence of transmission within the facility.

H. Emerging respiratory pathogens update

Variant of concern (VOC) findings are available weekly here: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/data#variants>.