

British Columbia COVID-19 Disclaimer and Data Notes

Data notes, terms of use, disclaimer and limitation of liability

The following data notes define the indicators presented on the public dashboard and describe the data sources involved. Data changes as new cases are identified, characteristics of reported cases change or are updated, and data corrections are made. Specific values may therefore fluctuate in response to underlying system changes. As such, case, hospitalization, deaths, testing and vaccination counts and rates may not be directly comparable to previously published reports. For the latest caveats about the data, please refer to the please refer to the most recent BCCDC Surveillance Report.

Dashboard updates:

The B.C. COVID-19 Dashboard will be updated weekly, on Thursdays. Data are updated up to the previous Saturday. Weekly metrics reflect the latest full week, Sunday to Saturday. The "Currently Hospitalized" and "Currently in Critical Care" reflect daily volumes on the Thursday.

Dashboard Usage Tips:

- The dashboard is viewable on mobile and most browsers including Edge, Firefox, Safari or Chrome 64-bit
- Hover over charts to see additional information.
- Click the top right corner of any chart/window to make it full screen. Click again to return to the dashboard view.

Data Sources

- Laboratory data are supplied by the B.C. Centre for Disease Control (BCCDC) Public Health Laboratory; tests performed for other provinces have been excluded. See "Data Over Time" for more information on changes to the case definition.
- Total COVID-19 cases include lab-confirmed, lab-probable and epi-linked cases. Case definitions can be found at: http://www.bccdc.ca/health-professionals/clinical-resources/case-definitions/covid-19-(novelcoronavirus). "Currently hospitalized" and "critical care hospitalizations" data are received from Provincial COVID-19 Monitoring Solution, Provincial Health Services Authority. See "Data Over Time" for more information on previous data sources.
- Vaccine data are received from the B.C. Ministry of Health.

Mortality data are received from Vital Statistics, B.C. Ministry of Health. See "Data Over Time" for more information on previous data sources.

- BCCDC/ Case Data (Spatial)
- Case Details (CSV) (Spatial)
- Laboratory Testing Information (<u>CSV</u>) (<u>Spatial</u>)
- Regional Summary Data (CSV) (Spatial)



Data over Time

- The number of laboratory tests performed and positivity rate over time are reported by the date of test result. See "Laboratory Indicators" section for more details.
- Laboratory confirmed cases are reported based on the client's first positive lab result.
- As of April 2, 2022, cases include laboratory-diagnosed cases (confirmed and probable) funded under Medical Services Plan.
- From January 7, 2021 to April 1, 2022, cases included those reported by the health authorities for the first time and those with first positive laboratory results reported to the BCCDC. The number of cases over time is reported by the result date of the client's first positive lab result where available; otherwise by the date they are reported to public health.
- Prior to June 4, 2020, the total number of cases included only laboratory-diagnosed cases.
- As of January 14, 2022, the data source for "Currently Hospitalized" has changed to better reflect hospital capacity. Comparisons to numbers before this date should not be made.
- As of April 2, 2022, death is defined as an individual who has died, from any cause, within 30 days of a first COVID-19 positive lab result date. Prior to April 2, 2022 death information was collected by Regional Health Authorities and defined as any death related to COVID-19. Comparisons between these time periods are not advised.

Epidemiologic Indicators

- Hospital data include admissions for people who test positive for COVID-19 through hospital screening practices, regardless of the reason for admission. Therefore, reported hospitalizations overestimate the true number of people who are hospitalized specifically due to COVID-19 infection.
- "Currently Hospitalized" is the number of people who test positive for COVID-19 through hospital screening practices, regardless of the reason for admission, as recorded in PCMS on the day the dashboard is refreshed. It is reported by the hospital in which the patient is hospitalized, rather than the patient's health authority of residence. Critical care values (intensive care units, high acuity units, and other critical care surge beds) include individuals who test positive for COVID-19 and are in critical care, as recorded in PCMS.
- The 7-day moving average is an average daily value over the 7 days up to and including the selected date. The 7-day window moves - or changes - with each new day of data. It is used to smooth new daily case and death counts or rates to mitigate the impact of short-term fluctuations and to more clearly identify the most recent trend over time.
- The following epidemiological indicators are included in the provincial public use file:
 - o Date: date of the client's first positive lab result.
 - o HA: health authority assigned to the case.
 - Sex: the sex of the client.
 - o Age Group: the age group of the client.
 - Classification Reported: whether the case has been lab-diagnosed or is epidemiologically linked to another case.
- The following epidemiological indicators are included in the regional summary data file:



- Cases_Reported: the number of cases for the health authority (HA) and health service delivery area (HSDA).
- o Cases_Reported_Smoothed: Seven-day moving average for reported cases.

Laboratory Indicators

- Tests represent the number of all COVID-19 tests reported to the BCCDC Public Health Laboratory since testing began mid-January 2020. Only tests for residents of B.C. are included.
- COVID-19 positivity rate is calculated for each day as the ratio of 7-day rolling average of number of positive specimens to 7-day rolling average of the total number of specimens tested (positive, negative, indeterminate and invalid). A 7-day rolling average applied to all testing data corrects for uneven data release patterns while accurately representing the provincial positivity trends. It avoids misleading daily peaks and valleys due to varying capacities and reporting cadences.
- Turn-around time is calculated as the daily average time (in hours) between specimen collection and report of a test result. Turn-around time includes the time to ship specimens to the lab; patients who live farther away are expected to have slightly longer average turn around times.
- The rate of COVID-19 testing per million population is defined as the cumulative number of people tested for COVID-19/B.C. population x 1,000,000. B.C. Please note: the same person may be tested multiple times, thus it is not possible to derive this rate directly from the number of cumulative tests reported on the B.C. COVID-19 Dashboard.
- Testing context: COVID-19 diagnostic testing and laboratory test guidelines have changed in British Columbia over time. B.C.'s testing strategy has been characterized by four phases: 1) Exposure-based testing (start of pandemic), 2) Targeted testing (March 16, 2020), 3) Expanded testing (April 9, 2020), 4) Symptom-based testing (April 21, 2020), and 5) Symptom-based testing for targeted populations (a-are at risk of more severe disease and/or b-live or work in high-risk settings such as healthcare workers) and Rapid Antigen Tests deployment (January 18, 2022).
- Due to changes in testing strategies in BC in 2022, focusing on targeted higher risk populations, current case counts are an underestimate of the true number of COVID-19 cases in BC and may not be representative of the situation in the community.
- The following laboratory indicators are included in the provincial laboratory data file:
 - o New_Tests: the number of new COVID-19 tests.
 - o Positivity: the positivity rate for COVID-19 tests.
 - o Turn Around: the turnaround time for COVID-19 tests.
 - BC Testing Rate: Total PCR + POC tests per day (excluding POC that were confirmed by PCR within 7 days) / Population using BC Stats PEOPLE2021 population projections for the year 2022 * 100,000

Health Authority Assignment:

- Cases are reported by health authority of residence.
- As of April 2, 2022 cases are reported based on the address provided at the time of testing; when not available, by location of the provider ordering the lab test.
- As of April 2, 2022, Cases who reported having an address outside of B.C. are not included.



- Prior to April 2, 2022, when health authority of residence was not available, cases were assigned to the health authority reporting the case or the health authority of the provider ordering the lab test. Cases whose primary residence were outside of Canada were reported as "Out of Canada".
- Please note that the health authority of residence and the health authority reporting the case do not necessarily indicate the location of exposure or transmission.

Vaccine Indicators

- Vaccine dose information for the current day will be based on results up to midnight of the day before. There may be some delays between doses being reported to public health and then reported provincially.
- Doses administered are based on the location of the administered dose, and not on Health Authority of residence. First Nations Health Authority (FNHA) data is now included as of January 25th, 2021, and as a result, Regional Health Authority (RHA) totals have been restated. RHA and FNHA vaccine supplies are being used in First Nations communities.
- Doses distributed include doses that are received in British Columbia and the allocation of those doses to the health authorities. Figures for total doses distributed are dynamic as doses are allocated between health authorities as needed.
- Negative values represent reallocation to another health authority.
- Reporting the allocation of vaccinations between dose one and dose two reflects instances when an individual is administered two different types of vaccines.

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Please direct questions and feedback to the BCCDC: Admininfo@bccdc.ca



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