

# Respiratory Season Update

April 6, 2023



Stay Informed Via These Resources:

[gov.bc.ca/Covid-19](https://gov.bc.ca/Covid-19) | [bccdc.ca](https://bccdc.ca) | 1-888-COVID19

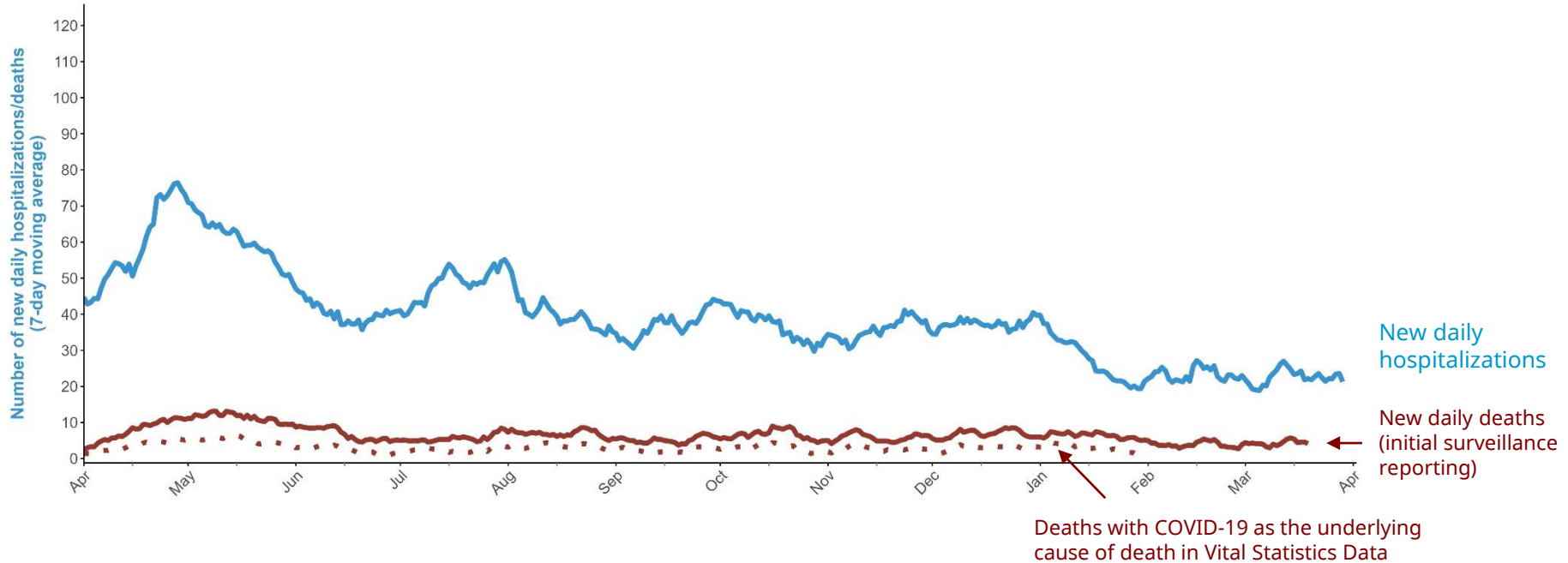
Symptom Self-Assessment:

[covid19.thrive.health](https://covid19.thrive.health)



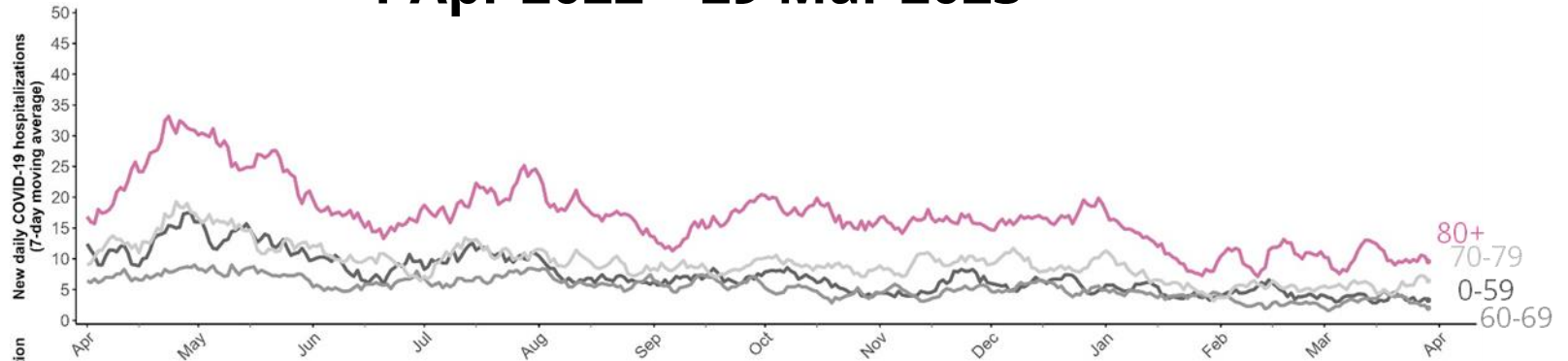
**BRITISH  
COLUMBIA**

# COVID-19 hospitalizations (1 Apr 2022 – 29 Mar 2023) and deaths (1 Apr 2022 – 19 Mar 2023), BC

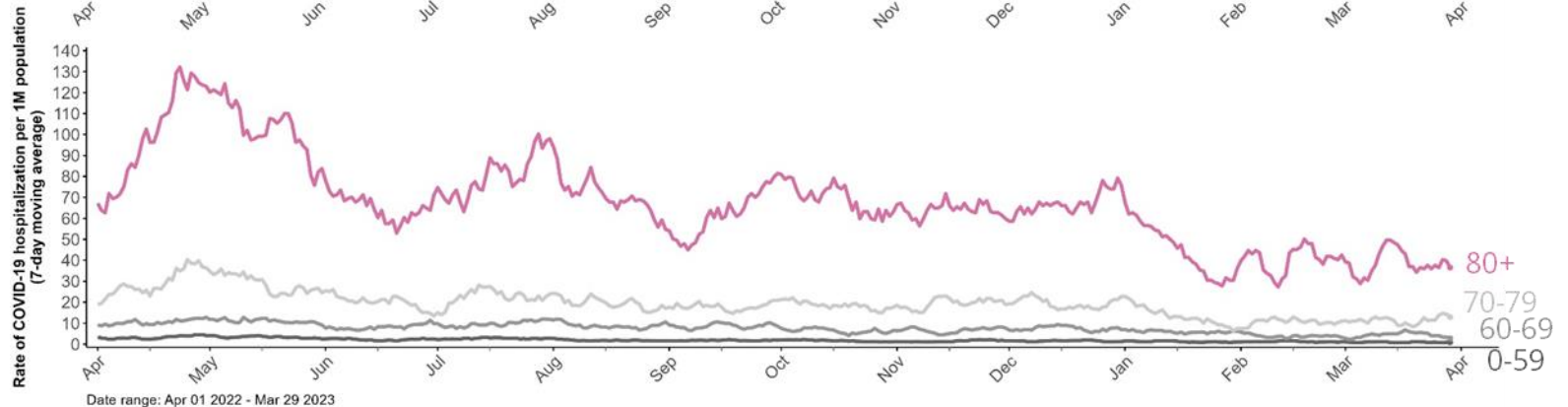


# COVID-19 hospitalization counts and rates per 1M by age, BC, 1 Apr 2022 – 29 Mar 2023

COUNTS

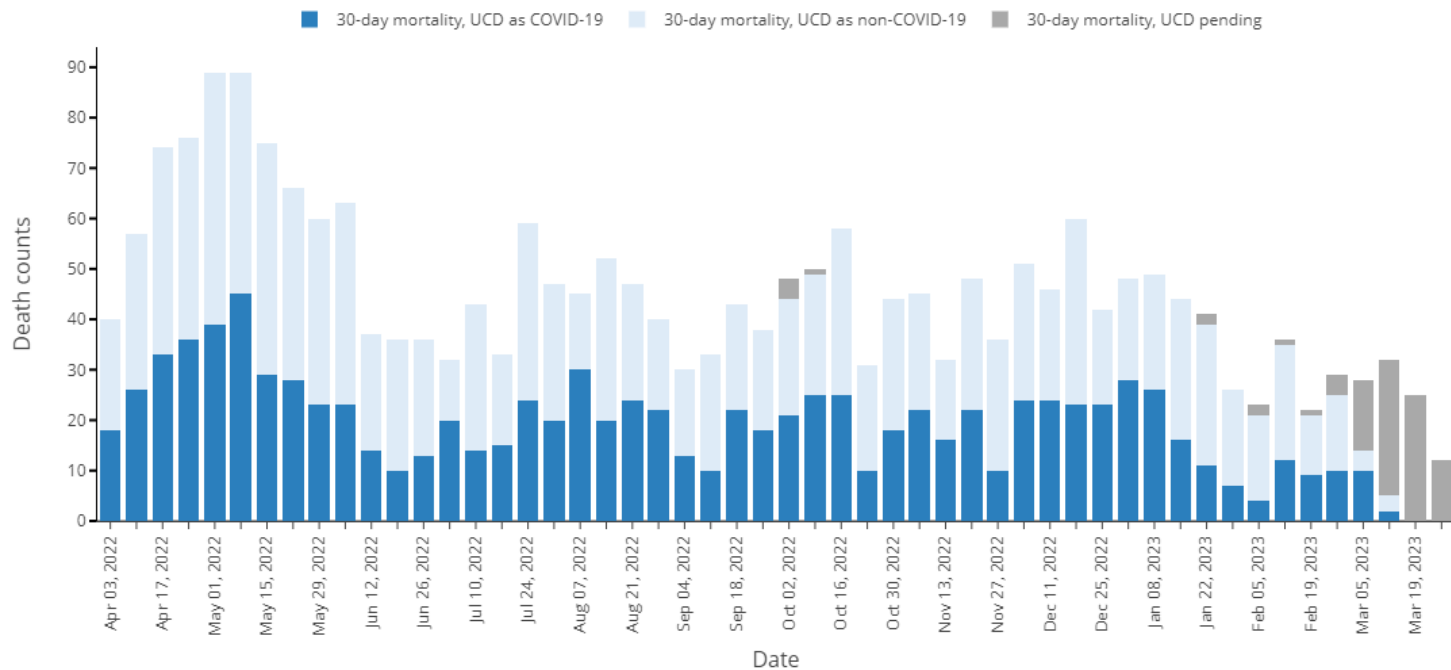


RATES



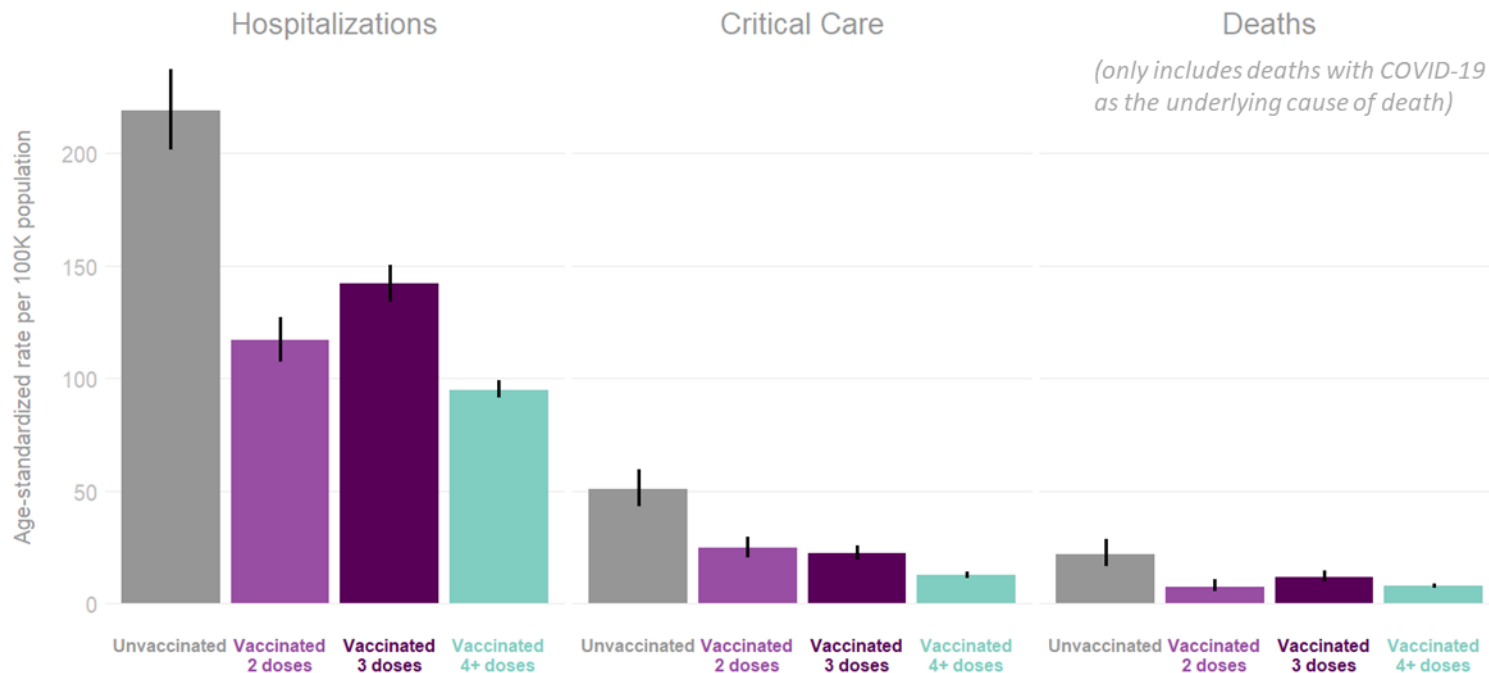
Date range: Apr 01 2022 - Mar 29 2023

# COVID-19 30-day all-cause mortality, BC, 1 Apr 2022 – 1 Apr 2023



\*Each bar shows data for a single week, and the labels represent the start of that week  
UCD: Underlying Cause of Death

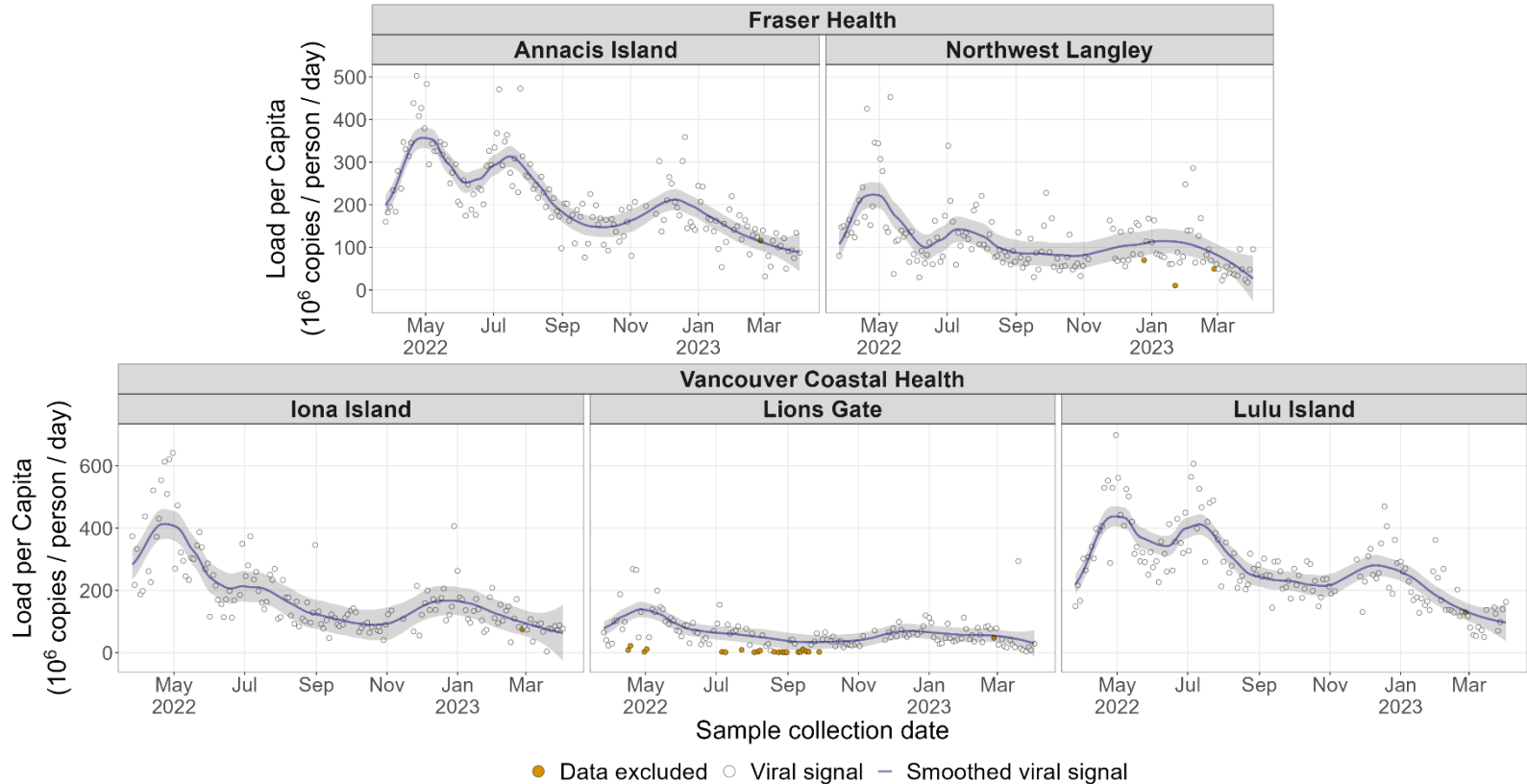
# Age-standardized rates of COVID-19 hospitalizations, critical care admissions and deaths by vaccination status, BC, 30 Sep 2022 – 29 Mar 2023



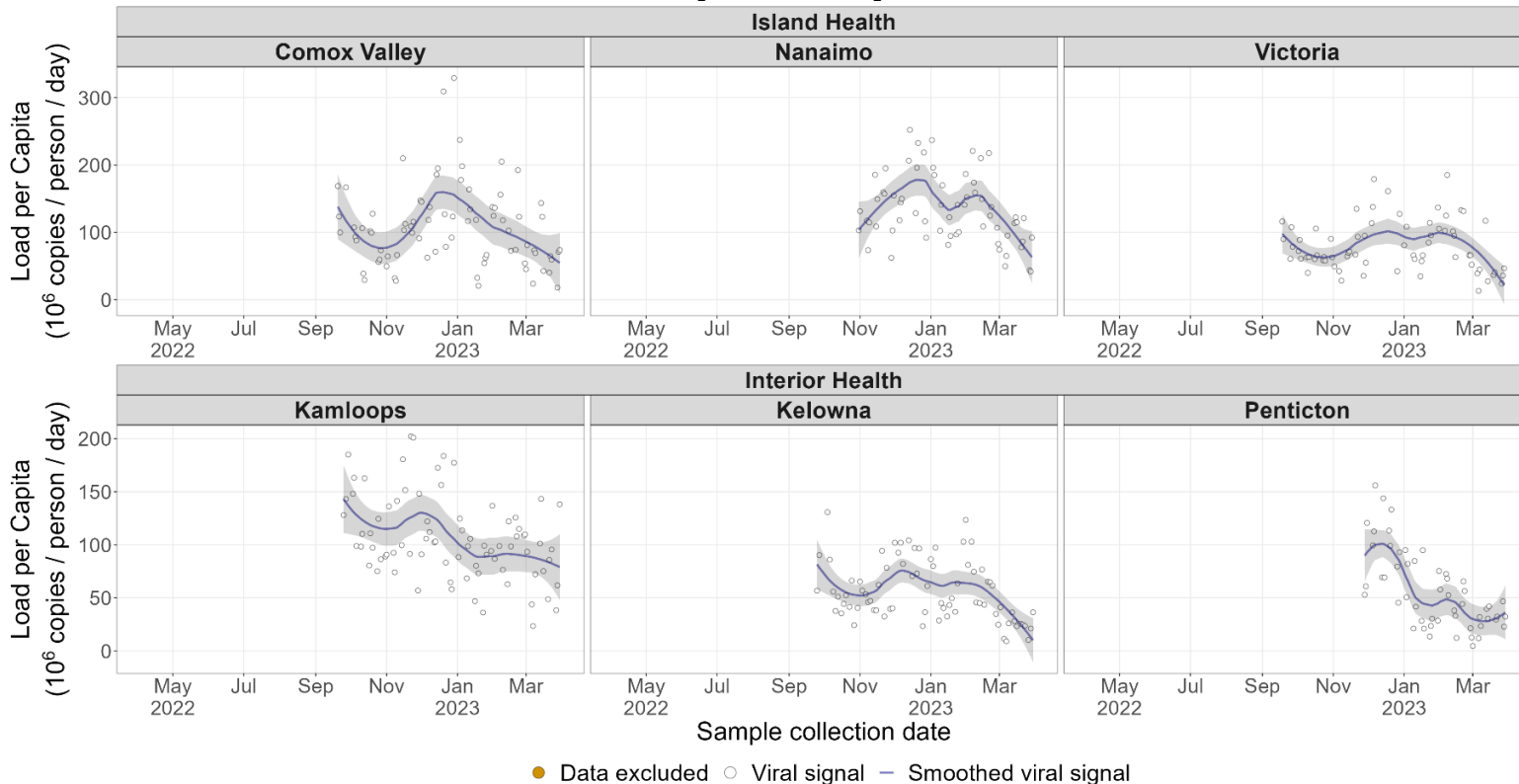
# BC is using a new test for SARS-CoV-2 in wastewater

- BC began using a more sensitive test for SARS-CoV-2 in wastewater in March. For a given sample of wastewater, more viral particles are detected with this new test.
- Comparing results from the new and old tests can be misleading – with the new test, it may have appeared that virus concentration was increasing.
- The BCCDC Public Health Lab used the new test to re-test archived wastewater samples from the past year and future surveillance reports will use these results.
- This provides a consistent level of sensitivity for results from fall of 2021 onwards.
- **Using the new test, SARS-CoV-2 levels in wastewater in March were stable or decreasing at all sites.**

# SARS-CoV-2 in wastewater in Metro Vancouver (data up to 2 Apr 2023)

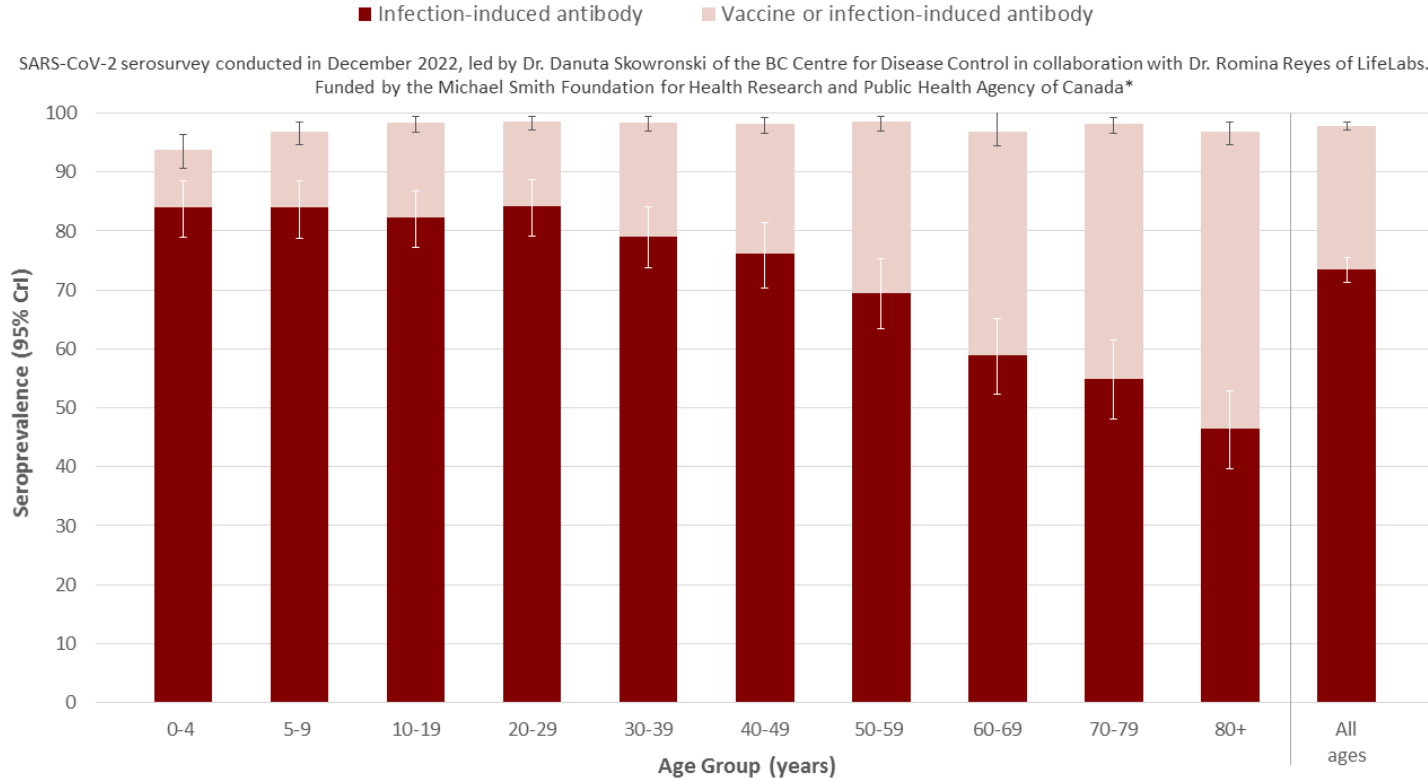


# SARS-CoV-2 in wastewater in Island Health and Interior Health (data up to 2 Apr 2023)



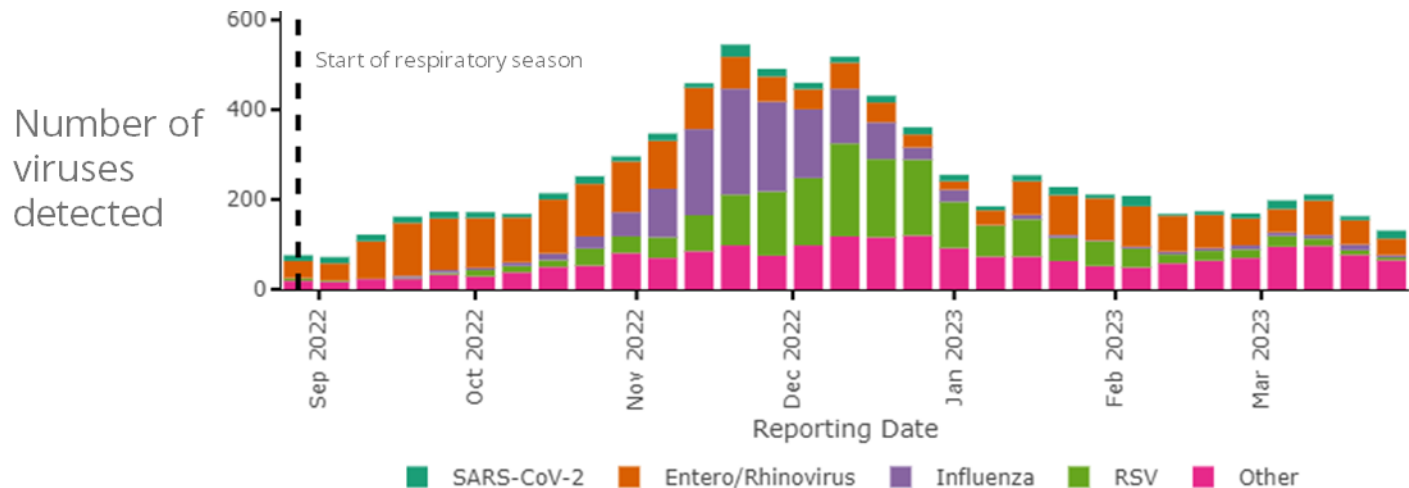


# Seroprevalence results, BC Lower Mainland, up to Dec 2022



\*Views do not necessarily represent the views of the Public Health Agency of Canada.

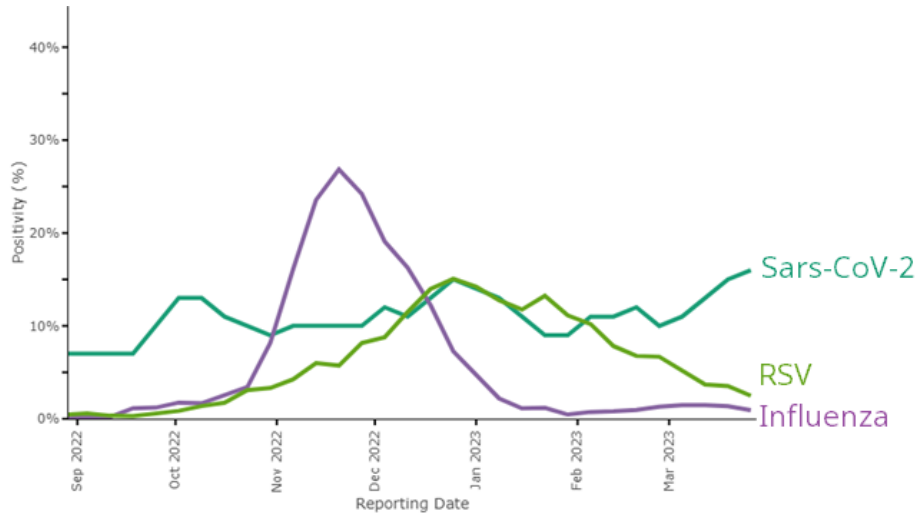
# Respiratory viruses detected in pediatric population, 2022/23 respiratory season (28 Aug 2022 – 1 Apr 2023)



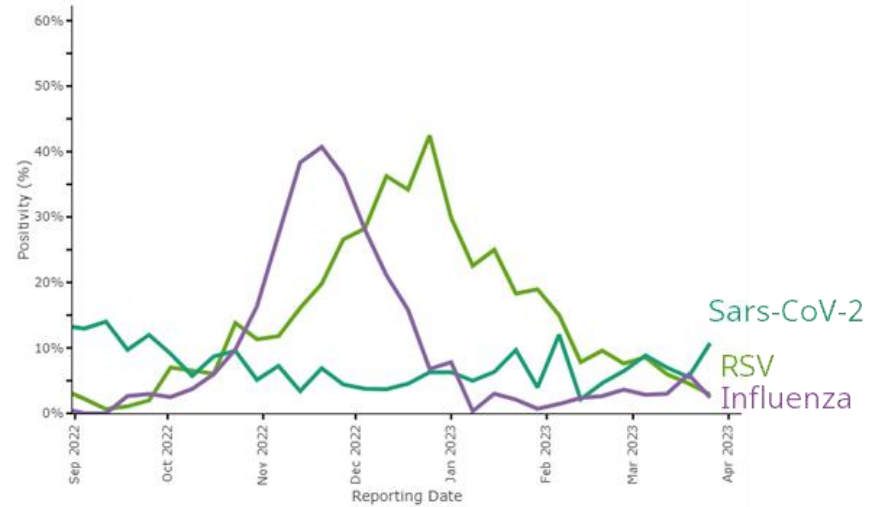
*Histogram represents positive samples detected per epi-week; Influenza A excludes specimen submitted for subtyping  
 "Other" includes parainfluenza, adenovirus, human metapneumovirus (HMPV), and seasonal coronaviruses  
 Vancouver-Richmond-North Shore only*

# Test positivity of select viruses since the start of 2022/23 respiratory season (28 Aug 2022 – 1 Apr 2023)

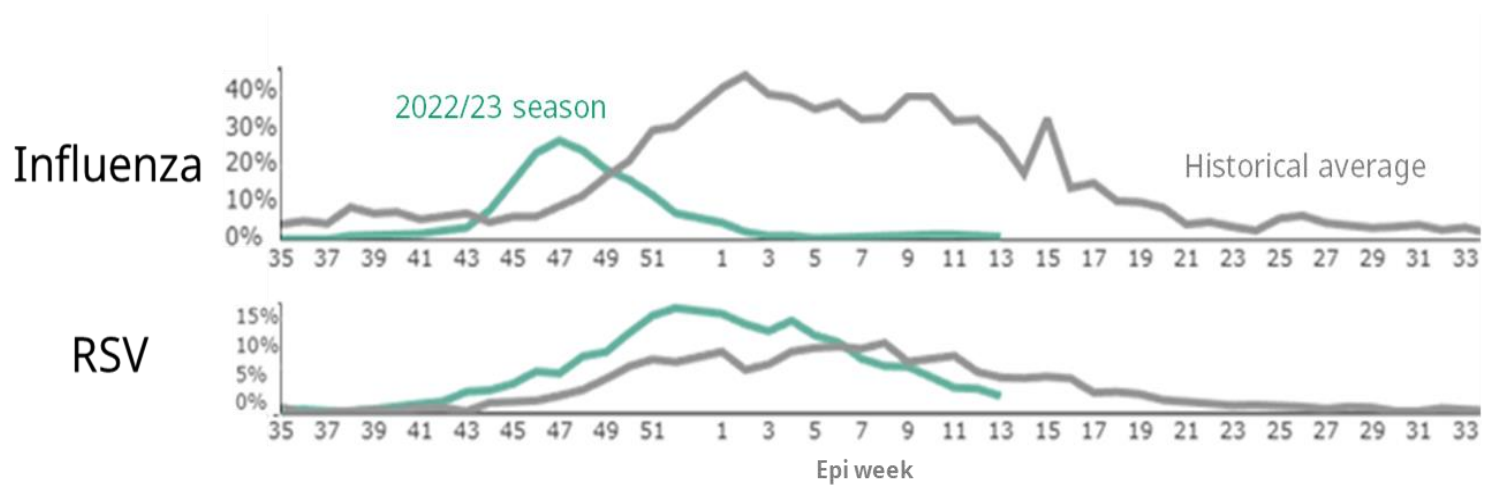
## Overall BC population



## Children (Vancouver-Richmond-North Shore only)



# Test positivity of influenza and RSV viruses in 2022/23 respiratory season compared with historical patterns



# Key reporting dates going forward

## 6 April 2023

- Last *weekly* respiratory disease reports released on the BCCDC [Respiratory Data](#) webpage
  - Next respiratory disease reports will be released *biweekly*, on 20 April and 4 May

## 20 April 2023

- Last update of [BC COVID-19 Dashboard](#) and BCCDC COVID-19 [Epidemiology App](#)
  - Only archived versions will available after May 4

## 4 May 2023

### **COVID-19**

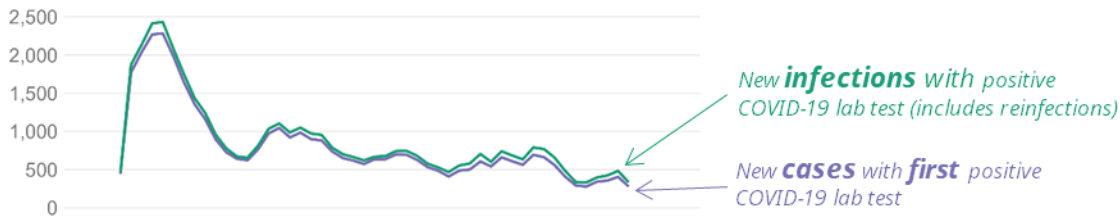
- COVID-19 information simplified and consolidated
- Incorporation of reinfections into epidemiological metrics
- Frequency of updates will continue monthly after 4 May

### ***Other Respiratory Diseases***

- Last update for the 2022/23 respiratory season, then will resume again in September 2023
- End of respiratory season report released

# COVID-19 surveillance system transition to infection episodes

New weekly **infections**



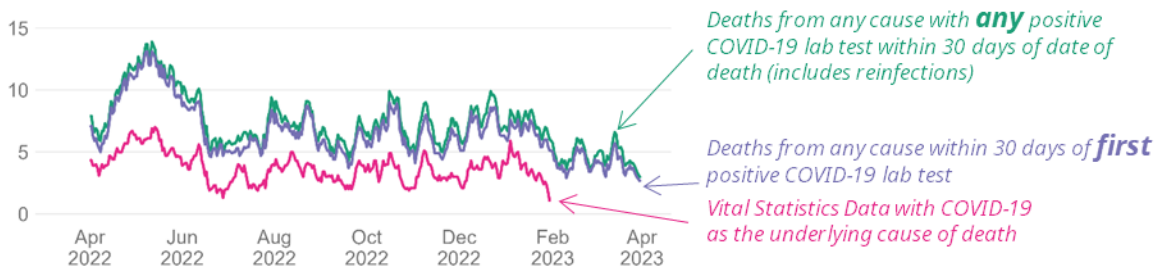
Future indicator

Current indicator

New daily **hospitalizations**  
(7-day moving average)



New daily **deaths**  
(7-day moving average)



Timely but less accurate

More accurate but lagged

# Changes to restrictions in healthcare settings

## Changes to visitor restrictions

- **Lifting visitor proof of vaccine and rapid antigen test requirements** to enter long term care, assisted living and other health care facilities

## Removing mandatory universal mask wearing in healthcare settings

- Based on risk assessments and workplace safety plans, staff and visitors will be required to wear masks in designated areas or certain situations only
- While some situations will require masks, they will **no longer be universally mandatory**

# Have your say in the SPEAK population health survey

- The 3<sup>rd</sup> round of the Survey on Population Experiences, Action and Knowledge (SPEAK) launches **end of April**
- We want to hear from you about
  - Social, economic and community well-being
  - Physical and mental health
- Participate to build resiliency and well-being in our communities.
- Available online in 10 languages

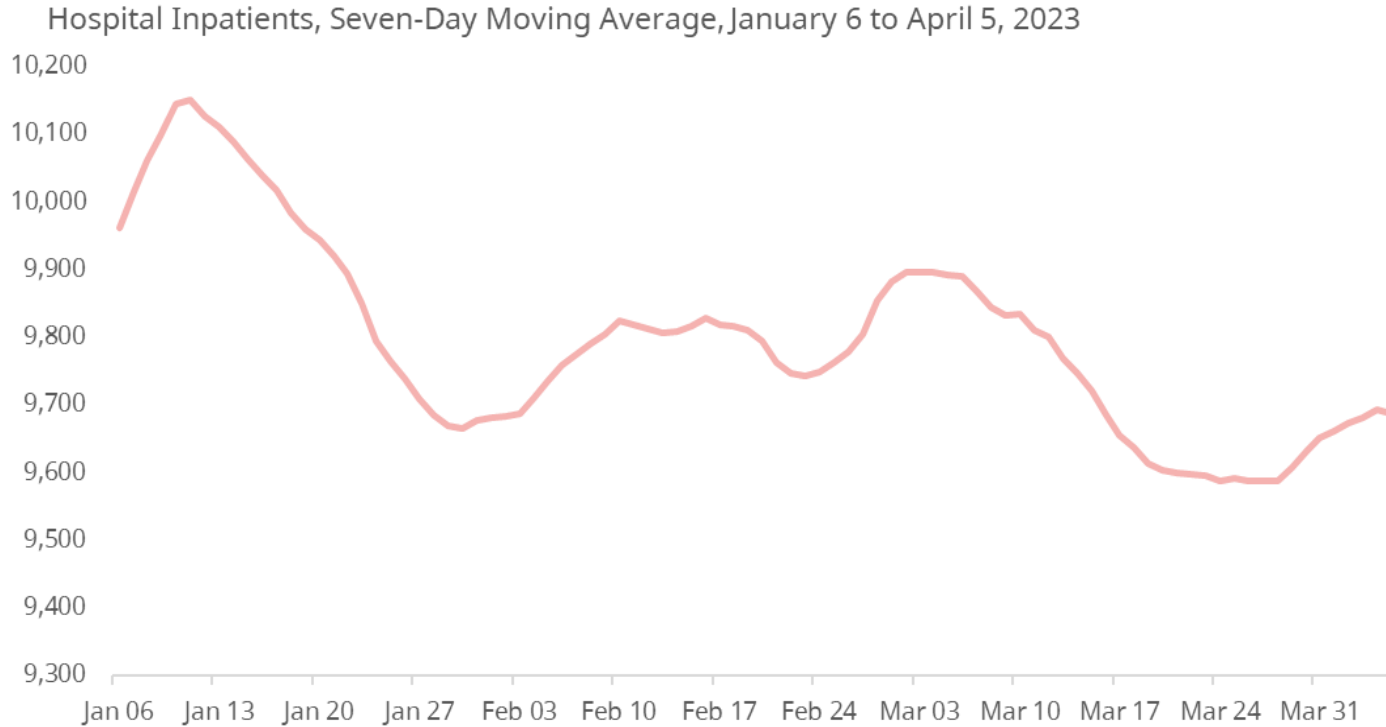


Register to participate at [bccdc.ca/SpeakSurvey](https://bccdc.ca/SpeakSurvey)





# Current hospitalization status



# Fall/Winter hospital capacity actions

January 2023 Emergency Operations Centres were stood up to prepare for and manage increased hospital occupancy. A range of actions were taken including:

- Adding 7-day-a-week supports, integration with UPCCs, implementing quick response teams, adding long-term care and other community beds, etc.

March 13, the Ministry and health authorities stood down the EOCs, with many of these strategies remaining in place. Health authorities are continuing to implement actions that are focussed on:

- Reducing ED admissions, improving efficiencies, reducing alternate level of care rates and acute length of stay, and ensuring patients are cared for in the right care setting.

# Going forward

The Ministry and health authorities will continue a sustained focus on hospital capacity.

Actions to be taken over the spring/summer:

- Adding hospital capacity to support current and future demand
- Ensuring standards are in place to increase patient flow efficiencies
- Reducing hospital demand through community-based strategies

Update on bed planning for fall/winter 2023 will take place late summer/early fall

# Going forward

As of March 31, 2021 there were:

- 1,521 FTE working in Long Term Care and Assisted Living
- 577 FTE Screeners in Acute Care
- As of March 2023, 5383 people have been hired into the Health Care Access Program
  - 4388 in Long Term Care and Assisted Living
  - 910 Home Support
  - 85 in Acute Care
- The funding for Screeners and the Health Careers Access Program remains in effect for 2023/24
- Over the summer months, screeners will be utilized to cover other needs in their respective facilities, and continue to be available for fall/winter 2023 respiratory illness season.