

# Your Local Public Health Unit in a Foodborne Disease Investigation

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# Board of Health versus Public Health Unit

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- Board of Health:
  - Governs a public health unit
  - Autonomous corporation
  - Administration via a Medical Officer of Health
- Public Health Unit:
  - Official health agency
  - Administers health promotion and disease prevention programs
  - 36 across the province of Ontario

# Local Boards of Health / Public Health Units' Mandate

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## ■ Mandate:

- To provide for the organization and delivery of public health programs and services, the prevention of the spread of disease and the promotion and protection of the health of the people of Ontario

## ■ Goal of the Food Safety Program:

- To prevent or reduce the burden of food-borne illness

## ■ Goal of the Infectious Diseases Program:

- To prevent or reduce the burden of infectious diseases of public health importance

# Legislation

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- Health Protection and Promotion Act
- Regulations:
  - O. Reg. 562 (Food Premises)
  - O. Reg. 568 (Recreational Camps)
  - O. Reg. 554 (Camps in Unorganized Territories)
  - O. Reg. 558 (Specification of Communicable Diseases)
  - O. Reg. 559 (Specification of Reportable Diseases)
- Ontario Public Health Standards
- FIORP and MOU

# Sporadic Enteric Cases

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- Reports received by the local MOH
- Reports investigated by PHI / PHN
  - Case interviews
  - Identification of source
  - Possible control measures
  - Site inspections
  - Sample collections where possible
- Appropriate follow-up actions
  - Section 19 of HPPA
  - Enforcement and education

# Communication of Sporadic Cases

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## Internal Communication:

- Communication with management and staff
- Monthly surveillance by local boards of health
- Communication to MOHLTC / iPHIS

## External Communication:

- Communication to other BOHs
- Communication to the general public
- Communication to other agencies / BOHs

# Other Agencies as Lead

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- Local BOH receives the complaint first
- Information gathered:
  - Complainant's contact information
  - Description and details of the suspect food item
  - Where the item was consumed or purchased
  - Details regarding symptoms
  - Referral to family physician for stool sample
  - Direct complainant to hold onto to food product
- Local PHI contacts the authoritative agency and a joint investigation may ensue

# Joint Investigation in Plant Settings

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- Local BOH notifies the agency responsible for inspection
  - Joint inspection may ensue
- Cases and contacts are investigated
  - Stool sample and control measures implemented
- Enforcement activities if necessary
  - HPPA Section 13 order
  - Seizure, examination and / destruction of food
  - Provincial Offences Notices of summons

# Communication with Agencies

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## Internal Communication:

- Communication between management and staff
- Communication with Director of Food Safety and Medical Officer of Health
- Communication to lead agency
- Communication to other BOHs via CIOSC
- Communication to MOHLTC

## External Communication:

- Communication to public

# Implementation of a Food Recall

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- CFIA requests assistance of the MOHLTC
- MOHLTC requests assistance of BOHs
- BOHs respond to request by:
  - Site visits made
  - Products seized or destroyed
  - Recall Effectiveness Checks completed
  - Recall Summary completed and sent to the ARC

# Communication (MOHLTC / CFIA)

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## Internal Communication:

- Communication sent to MOHs, Directors of Food Safety and PHIs designated for recalls
- Strategies implemented to enforce the MOHLTC request
- Communication to CFIA's ARC

## External Communication:

- Communication to public



# QUESTIONS?