

Infectious Diseases Infectious Diseases Protocol

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Overview of Presentation

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Purpose

- Provide boards of health with direction with respect to the prevention and management of infectious diseases of public health importance.
 - Provide direction regarding minimum, common operational roles and responsibilities for interpreting, communicating and acting upon surveillance information and findings to reduce the burden of infectious diseases of public health importance.

Infectious Diseases Protocol Cited in Standards

Standards:

- Foundational
- Food Safety
- Health Hazard Prevention and Management
- Infectious Diseases Prevention and Control
- Safe Water
- Vaccine Preventable Diseases

Operational Roles and Responsibilities

- Interpretation, Use and Communication of Infectious Disease Surveillance Data
 - Develop a strategy for reporting and communicating infectious disease surveillance data.
 - Monitor, analyze, interpret and communicate information pertaining to infectious diseases.
 - Review communication strategy annually.
 - Disseminate information in user friendly format using different types of media to diffuse information and key messages.
 - Collaborate with other public health stakeholders to disseminate information where appropriate.

Operational Roles and Responsibilities

- Reporting of Infectious Diseases
 - Provide instructions to persons required under HPPA to report information to Medical Officer of Health (MOH).
 - Forward reports to ministry concerning reportable diseases, other infectious diseases and reportable events through iPHIS or any other method specified by the Ministry.

Operational Roles and Responsibilities

- Interpretation & Application of Surveillance Data
 - Use infectious diseases data, immunization data and vector surveillance data to calculate baselines, trends, determine incidences and disease rates.
 - Create annual report and analyze and interpret infectious diseases data.
 - Annually review of infectious diseases surveillance activities.
 - Use information from disease surveillance systems and reports from other public health activities to plan for and evaluate public health policies, programs, services and interventions.

Operational Roles and Responsibilities

- Public Health On-Call System
 - Have a 24 hours per day, 7 days per week (24/7) public health on-call system in health unit to respond to reports.
 - Assess reports with respect to infectious diseases within 24 hours.
 - Document and review the on-call system at least annually.

Operational Roles and Responsibilities

- Management of Infectious Diseases - Sporadic Cases
 - Provide public health management of cases and contacts of diseases of public health importance.
 - Use iPHIS or any other method specified by the Ministry to report sporadic occurrences of diseases of public health importance.
- Management of Infectious Diseases - Outbreaks
 - Provide public health management of confirmed or suspected outbreaks of infectious diseases of public health importance.
 - Develop written outbreak protocol.
 - Comply with all active Enhanced Surveillance Directives (ESD) and other directives with respect to ongoing provincial or multi-jurisdictional outbreaks.
 - Use iPHIS or any other method specified by the Ministry to report outbreaks.

Operational Roles and Responsibilities

- Prevention and Management of Vector-Borne Diseases
 - Develop and implement a vector-borne diseases management strategy and review at least annually.
 - Conduct local West Nile Virus risk assessment on an annual basis.
 - Notify Canadian Blood Services (CBS) and Trillium Gift-of-Life of positive human cases of vector-borne diseases with a history of blood/organ donation.

Cross References

- Immunization Management Protocol, 2008
- Risk Assessment and Inspection of Facilities Protocol, 2008

Development of the Infectious Diseases Protocol

Phase One - Completed:

- Addressed all requirements in the Ontario Public Health Standards (OPHS) which make reference to the Infectious Diseases Protocol:
 - Analysis ensured scope of document appropriate and operational roles/responsibilities linked appropriately with other Protocols.
 - Content in Phase One document high-level and provided scope for Phase Two.

Phase Two - In Progress:

- Includes disease specific chapters for each reportable disease outlining epidemiology and procedures for case and contact management:
 - Disease specific chapters reviewed by Infectious Diseases Branch (IDB) - Oct. 14-24, 2008.
 - Feedback consolidated Oct. 27-Nov. 3, 2008.

Next Steps:

- Consultation with external stakeholders regarding disease specific chapters
 - e-Consultation: Nov. 7-21, 2008.
 - Release date: Jan. 1, 2009.

Content of Disease Specific Chapters

- Aetiologic Agents(s)
- Case Definitions
- Identification (clinical presentation and diagnosis)
- Epidemiology (Occurrence, Reservoir, Modes of Transmission, Incubation Period, Period of Communicability, Susceptibility and Resistance)
- Reporting Requirements
- Prevention and Control Measures
- Management of Cases/Contacts/Outbreaks

Questions & Answers

- **Q: How often will the Infectious Diseases Protocol be updated?**
A: Every two years at minimum or more frequently as required.
- **Q: When will case definitions be available?**
A: Case definitions are scheduled for release mid to end of November 2008.
- **Q: Will Clostridium Difficile Associated Disease (CDAD) be added to the disease specific chapters?**
A: Yes, CDAD will be added to the disease specific chapters.

Questions & Answers

- **Q: Will Best Practices/Guidance documents be released to support the Infectious Diseases Protocol?**

A: Yes, a number of Best Practices/Guidance documents will be developed in 2009 including:

- Best Practices for Mumps and Rubella;
 - Best Practice Guidance for Public Health Management of Measles;
 - Best Practices for Invasive Meningococcal C.
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- **Any additional questions?**

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