

INFORMATION REPORT

TO: Mayor and Members

Board of Health

WARD(S) AFFECTED: CITY WIDE

COMMITTEE DATE: May 24, 2011

SUBJECT/REPORT NO:

Communicable Disease and Health Hazard Investigations Quarterly Report (Q1 January 1 to March 31, 2011) BOH11019 (City Wide)

SUBMITTED BY:

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SIGNATURE:

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Council Direction:

This report is provided in keeping with the Board of Health policy on communication between the Medical Officer of Health and the Board of Health, as outlined in Report PH06038.

Information:

This is a summary report covering the period from January 1 to March 31, 2011, summarizing investigations for the first quarter of 2011 (3 months).

Public Health Services (PHS) has been providing this report in this form since 2006. In order to improve this report to ensure that it continues to align with Board members' needs, PHS will solicit feedback from Board members in May and recommendations will be incorporated into subsequent reporting.

Reportable Communicable Diseases

SUMMARY

- During the first quarter of 2011, 1271 confirmed or probable reports of communicable disease were received by the PHS. These are summarized in Appendix A.
- 434 reports of Chlamydia were received in this quarter. Chlamydia is a sexually transmitted infection and has been steadily increasing over time in Hamilton. PHS is collaborating as a partner in a study to determine the most effective ways to prevent and control this disease in Canadian communities.

- 58 outbreaks were investigated between January 1 and March 31, 2011.
- 65% (38) of the outbreaks occurred in Long Term Care Homes and Residential Care Facilities; and 21% (12) occurred in Hospitals. There were no outbreaks caused by *Clostridium difficile* during this quarter. The institutional outbreak results are summarized in Table 1.
- 14% (8) of the outbreaks occurred in community settings and are listed in Table 2.

Under the *Health Protection and Promotion Act*, laboratories and physicians are required to report the occurrence of 55 specified communicable diseases to the local public health unit. Due to the presence of a provincial public health laboratory and tertiary care hospitals in Hamilton, PHS receives many reports for persons tested or hospitalized in Hamilton who reside in other health unit jurisdictions. These reports are forwarded to the health unit where the tested person resides for investigation and follow-up by the relevant health unit and are not included with the numbers presented here.

Table 1: Institutional Outbreaks Declared Between January 1 to March 31, 2011

Outbreak Type	Outbreak Count
Enteric/Foodborne/Waterborne	14
Influenza	27
Other Respiratory/Direct Contact	6
Other	3
Clostridium difficile	0
Total	50

Table 2: Community Outbreaks Declared Between January 1 to March 31, 2011

Event	Description
CHILDCARE CENTRE OUTBREAKS	Two enteric outbreaks occurred in childcare centres. No causative agent was identified in either of these outbreaks but based on symptoms; they were both classified to be caused by viral gastroenteritis.
	Four respiratory outbreaks occurred in childcare centres. Parainfluenza was identified as the causative organism in one outbreak and the cause of the remaining three were undetermined.
SCHOOL OUTBREAK	An enteric outbreak occurred in an elementary school involving 49 out of 396 students. No causative organism was identified and based on symptoms; the outbreak was identified as being caused by viral gastroenteritis.
DETENTION CENTRE	A respiratory outbreak was investigated at the centre. Four laboratory confirmed cases of Influenza A were identified among individuals in custody in the centre.

Health Hazard Investigations

The Health Protection and Promotion Act defines a health hazard as;

- (a) a condition of a premises,
- (b) a substance, thing, plant or animal other than man, or
- (c) a solid, liquid, gas or combination of any of them,

that has or that is likely to have an adverse effect on the health of any person.

PHS initiates investigations based on information received from the public, other Provincial Agencies or City Departments that relate to existing properties or facilities that, through the nature of the business or the site conditions, could fall under the definition of a health hazard.

To determine if a health hazard exists, PHS responds to complaints and enquiries from the public, by conducting on site inspections or providing advice through phone contact, email or letters.

Most of the investigations arise from complaints received from individual members of the public. In addition, PHS staffs are often involved in investigations led by other agencies (e.g. Ministry of Environment) or the Infectious Disease team within PHS.

The following is a summary of the number and types of complaints and enquiries investigated in the first quarter of 2011 and grouped together based on the Mandatory Program area each would fall into.

	2010 (Q1)		2011 (Q1)	
HEALTH HAZARD	Complaints/	Telephone/	Complaints/	Telephone/
ABATEMENT	Investigations	e-mail Inquiries	Investigations	e-mail Inquiries
	requiring a site	not requiring a	requiring a site	not requiring a
	visit	site visit	visit	site visit
Asbestos	5	2	2	3
Bed bugs	50	18	78	73
Cockroaches	19	1	20	1
Other Insects	1	0	5	3
Diogenes (recluse response)	5	0	0	2
General sanitation	1	1	0	1
Housing	4	1	5	6
Marijuana Grow Operations	1	11	3	11
Mice	29	2	25	5
Mould	63	2	18	3
Odour	12	1	10	5
Other	28	11	21	10
Rats	7	1	5	1
Sewage	2	0	4	2
Sharps	2	1	13	1
Total	229	52	209	127

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	2010 (Q1)		2011 (Q1)	
HEALTH HAZARD	Complaints/	Telephone/	Complaints/	Telephone/
ABATEMENT	Investigations	e-mail Inquiries	Investigations	e-mail Inquiries
, (5, (1 = (1)= (1)	requiring a site	not requiring a	requiring a site	not requiring a
	visit	site visit	visit	site visit
FOOD CAFETY	VISIL	Site visit	VISIL	Site visit
FOOD SAFETY				
Adulteration	26	0	27	3
Education	0	3	1	6
Emergency Fire/Flood	0	0	2	0
Garbage	3	0	2	0
General Food Inquiry	4	12	1	20
Other	25	11	23	21
Request For Inspection	0	19	3	13
Sanitation	11	0	14	1
Suspect Illness	6	3	11	1
Total	75	48	74	65
WNV				
Standing Water Complaints	0	0	0	0
Total	0	0	0	0
TOBACCO CONTROL				
under Smoke Free Ontario				
Act				
Sales Related	6	0	3	2
Smoking Related	57	22	56	15
Total	63	22	59	17
WATER QUALITY				
General Inquiries	2	35	4	50
Adverse Water Quality Events ¹	16	0	9	0
Boil/Drinking Water Advisories	2	0	0	0
Recreational Water Postings	0	0	0	0
Total	20	35	13	50
INFECTION				
CONTROL/INJURY				
PREVENTION				
Potential Human Exposure To				
Rabies ²	192	52	178	48
Rabies Vaccine Deliveries	8	0	10	0
Compliance With Childcare,		<u> </u>	10	<u> </u>
Public Pool, Personal Service	7	0	6	0
Setting Regulation/Guidelines	'			
Total	207	52	194	48
¹ The adverse drinking water incidents pertain			_	

The adverse drinking water incidents pertain to lab reports that indicate the drinking quality did not meet the prescribed drinking water standards for the Province of Ontario for samples collected from regulated drinking water systems and did not warrant a B/DWA. These adverse events did not warrant a B/DWA because subsequent Corrective Action and confirmation samples met the Ontario drinking water standards; and the initial risk assessment and public health protocols did not indicate a need to issue a BWA without first taking Corrective Action and follow-up samples to confirm the adverse drinking water condition. All affected users are notified directly in writing about the existence of a Boil Water Advisory and about precautions they need to take and/or keep in place until the BWA is lifted. BWA Notices are also posted in public locations at the affected locations.

Complaint and inquiry data for rabies exposures were combined in 2009