What to Include in a Public Health Alert

1st Revision: April 2024

Background

Public Health Alerts (PHAs), administered and distributed by the Canadian Network for Public Health Intelligence (CNPHI), are intended to “facilitate the timely exchange of information between local/regional, provincial/territorial and national public health officials regarding events of public health concern.”1 In Ontario, PHAs are an important tool used by the Ministry of Health, Public Health Ontario and public health units (PHUs) to disseminate information to a restricted audience about investigations at the provincial and local level.

Purpose

This document provides tips for Ontario’s PHUs on what to include in a PHA, as they are widely variable in content and format. It was compiled by examining recent PHAs across disease areas and is only intended to provide suggestions.

For official guidance, please click on the following links: Login page, how to Apply for a New Account, how to Contact CNPHI and Terms and Conditions.

What to Include

- **Situation description:** all PHAs begin with an overview of the information collected during the public health investigation to date. Consider including the pathogen and typing information or symptoms of interest if appropriate, the range of onset dates for cases, and essential demographic information (information about person, place or time) without personal information/personal health information. For some investigations, immunization status, and travel history may be relevant.

- **Exposure information:** when necessary (e.g., for measles investigations or common source enteric outbreaks), PHAs include specific exposure information such as a description of the locations, dates and times where transmission could have occurred. Period of communicability may be included if appropriate. For cases with travel during the period of communicability, include details about flight and airport exposures (See sample measles alert below). For enteric outbreaks involving a specific food product, the confirmed or suspect sources can be included if suspicion is reasonably strong.

- **Action to date to support the response:** some PHAs summarize key actions to date, including Ontario Outbreak Investigation Coordinating Committee (OICC) calls, immunization clinics, inspections, media releases, and health care provider memos.
• **Action for readers of the PHA:** some PHAs have specific instructions for Ontario readers including following an enhanced surveillance directive (ESD), or linking cases to an exposure or outbreak identification number (ID) in the Integrated Public Health Information System (iPHIS). Web links can be provided or supporting documents can be uploaded.

• **Contact information:** PHAs include who to contact for more information (email and telephone number).

• **Overall:** PHAs should be as concise and timely as possible.

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**When creating a new PHA:** Under the *Additional Alert Information* section located near the end of the PHA creation process, please select “Reviewer can update this alert”. Checking off this box will allow the reviewer at PHO to make edits to the alert directly in the CNPHI platform.

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**What to Exclude**

• **Do not include** personal information or personal health information within the PHA (i.e., identifying information about an individual that relates to the physical or mental health of the individual\(^2\)).

• Use the highest level demographic information that will serve the purpose of the alert. For example, use age ranges or age category (infant/child/adult) instead of specifying the exact age in years. Do not include sex of the case.

• Consider whether the current health status of cases (e.g., hospitalization, deaths) is needed, and if so, keep the information as high-level as possible.

• **Do not include** iPHIS case/encounter/episode identifications (IDs) or laboratory IDs. Outbreak or exposure IDs can be included when helpful.

**Examples**

**Enteric**

*E. coli* O157:H7 outbreak in Valley Town

On Saturday June 14, a large community barbeque was held in Valley Town. More than 100 people attended the event including individuals from surrounding public health units (Mountain Village, Tree Harbour and Forest Lawn). As of June 26, four attendees with laboratory-confirmed *E. coli* O157:H7 have been reported and an additional 15 attendees have reported illness with symptoms compatible with verotoxin-producing *E. coli*. Among laboratory-confirmed cases and those with clinically compatible symptoms who attended the barbeque who have been interviewed, onset of symptoms range from June 17 to 23. Three individuals have been hospitalized.

We are administering a questionnaire to determine the source of the illnesses. If you identify cases that may be linked to this event, please contact <name> at <email address> or <phone number>.
**Tuberculosis**

**Tuberculosis cluster**

Between March 21 and July 12, there were 5 confirmed cases of tuberculosis diagnosed with shared exposure locations identified in the Hill and Valley Health Unit. All of the cases had the same genotype identified, ON-GX345. Four of the cases are male, one is female. Cases range in age between 25 and 70 years. Four of the cases are homeless or underhoused.

In response to the increase in cases, Hill and Valley Health Unit has been conducting TB screening of individuals frequenting several homeless shelters in downtown Valley Town. In addition, Hill and Valley Health Unit has released a media alert detailing the cluster and provided information and resources to health care providers in the region.

An enhanced surveillance directive has been issued that contains directions for data collection and entry for Ontario public health unit staff for any cases of tuberculosis that may be linked to this cluster.

If you have any questions, or learn of any cases or contacts who may be related to this cluster of tuberculosis, please contact the Communicable Disease Team at Hill and Valley Health Unit at <email address> or <phone number>.

**Measles**

**Travel-related measles case in Hill and Valley Health Unit**

Hill and Valley Health Unit is investigating a PCR-confirmed case of measles in an unimmunized child who recently travelled to Europe and arrived in Canada on June 20. This is a household contact of a recently reported case (PHA number: 12345). Rash onset occurred on July 1, and the period of communicability spanned from June 27 to July 5. Individuals who were present at the following locations may have been exposed to measles:

- **Air Canada Flight 123**
  Departed London, UK on June 19 at 2:00pm (local time in UK) and landed in Toronto Pearson International Airport on June 20 at 10:30pm EST
- **Toronto Pearson International Airport, Terminal 3**
  June 20, 10:30pm to 12:00am
- **That Spot for Kids**
  1234 Main Street
  June 28, 8am to 12pm
- **Not Your Average Daycare**
  567 Park Avenue
  July 1, 2pm to 4pm
- **Family Health Doctor’s Office**
  89 Lakeview Drive
  July 2, 3:30 to 5:30 pm

A media advisory has been released. For any enquiries about this case, please contact <email address> or <phone number>.
Infection Prevention and Control (IPAC) Lapse

Community Clinic IPAC Lapse in Valley Town

An IPAC lapse investigation by Hill and Valley Health Unit identified patients who received services at a community clinic located at 123 North Street, Valley Town under the business name Your Neighbourhood Clinic. Patients seen at the clinic in the last five years may have been exposed to blood borne or bacterial pathogens.

On October 25, Hill and Valley Health Unit sent packages to 3,000 patients who had received treatment at the clinic during the exposure period. The packages include a patient letter, a letter to healthcare providers, and a partially completed laboratory requisition for blood tests. It is recommended that all impacted individuals be seen by their primary healthcare provider to discuss their potential risk of infection, to receive counseling about testing and, if appropriate, be tested for hepatitis B, hepatitis C and HIV. An iPHIS outbreak number has been created (outbreak ID: 1234-5678-001) with an exposure linked to the dental clinic (exposure ID: 123456). The regulatory college has been notified.

On October 28, an alert regarding this situation was provided to local health care providers and laboratories. On October 29, a media release on the investigation was sent. Please find attached the patient notification letter and the healthcare provider alert. If you have any questions, or learn of any cases or contacts who may be related to this investigation, please contact the Communicable Disease Team at Hill and Valley Health Unit at <email address> or <phone number>. 
References


2. Personal Health Information Protection Act, 2004, SO 2004, c 3, Sched. A. Available at: https://www.ontario.ca/laws/statute/04p03#BK5
## Summary of Revisions

Changes in this revision are summarized in the table below

<table>
<thead>
<tr>
<th>Revision Number</th>
<th>Date of Implementation</th>
<th>Description of Major Changes</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>April 5, 2024</td>
<td>Updated situation description to include without personal information/personal health information</td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>April 5, 2024</td>
<td>Updated exposure information to include period of communicability (POC) and travel. If travel during POC, add flight and airport exposures.</td>
<td>1</td>
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<tr>
<td>1</td>
<td>April 5, 2024</td>
<td>Added when creating a new PHA call outbox</td>
<td>2</td>
</tr>
<tr>
<td>1</td>
<td>April 5, 2024</td>
<td>Updated instruction for what to exclude to use the highest level demographic information (e.g., age ranges or age category (infant/child/adult)). Do not include sex of the case.</td>
<td>2</td>
</tr>
<tr>
<td>1</td>
<td>April 5, 2024</td>
<td>Updated example of measles PHA to include travel details (e.g., country, return date, airline details and exposures).</td>
<td>3</td>
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</tbody>
</table>
Citation
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For More Information
- For support writing a PHA related to an investigation in Ontario, contact Public Health Ontario at HealthProtection@oahpp.ca.
- For support accessing CNPHI or posting public health alerts, contact Public Health Agency of Canada at cnphi.admin-rcrsp@phac-aspc.gc.ca.

Public Health Ontario
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