**Public Health Alerts – Guidance for PHAC-OMD**

**Overview**

Public Health Alerts is an application on CNPHI that allows for the timely notification and/or dissemination of information between local/regional, provincial/territorial and national public health stakeholders. Users can select the target audience (single P/T, multiple P/Ts, national) to whom an email notification will be sent to advise that a new PHA has been posted. PHAs are used for case finding and to provide situational awareness on current national, provincial/territorial and local investigations.

**History**

The Enteric Public Health Alerts System (EPHAS) was developed by a local, provincial and federal working group and was launched in August 2001 on CEOSC (Canadian Enteric Outbreak Surveillance Centre) and then moved to CIOSC (Canadian Integrated Outbreak Surveillance Centre), housed on CNPHI (Canadian Network for Public Health Intelligence), in 2003. Many people still refer to PHAs as “CEOSC postings” or “CEOSC alerts”.

**General content**

* **Audience**
	+ Automatically populated based on author affiliation. OMD is able to post nationally only.
* **Author and contact information**
	+ Sections auto-populate.
* **Posting information**
	+ Completion of drop-down fields.
	+ Some fields may be entered as “unknown” as PHAs are often posted in advance of all information being available.
	+ There are two types of PHAs posted by OMD:
		- An outbreak investigation coordinating committee (OICC) specific alert, which is posted by the Response Team and used for both case finding and information sharing. Example 1 in this document provides a template for an outbreak-specific post.
		- An information sharing alert, which is usually posted by the Assessment and Detection team, and is used to provide general information to public health professionals in Canada on a specific topic . Example 2 in this document provides a template for an information sharing alert.
* **Priority levels** (assigned when posted)
* Non-critical (Green) 🡪 minimal to non-existent threat to public health. Should be read within 7 days.
* Important (Yellow) 🡪 possible threat to public health. May require immediate attention or action depending on relevancy. Should be read within 72 hours.
* Urgent (Orange) 🡪 significant threat to public health. Warrants immediate attention, may require action. Should be read within 24 hours.
* Emergency (Red) 🡪 Extraordinary threat to public health. Warrants immediate action or attention. Should be read within 60 minutes.
* The priority level of most PHAs posted by OMD is yellow; however, assessment of priority level is situation dependent.
* **Distribution Group and Notification Methods (selected when posted)**
	+ **PHAC:** Standard
	+ **FPT Reviewers:** Standard
	+ **All Remaining F/P/T Public Health Users:** Standard
* **Sensitivity Settings**
	+ Select “Sensitive Information”

**Other points**

* Public Health Alerts can NOT be updated once posted. If updates are warranted, a new posting must be created. However, previously posted alerts can be linked under “Associated Alerts”.
* Documents can be attached (e.g., spreadsheets, maps, questionnaires, other relevant information).
* Links to websites can be included (e.g., Public Health Notices, US investigation summaries).
* Depending on your access level you will post directly (Reviewer) or submit to a Reviewer for approval and posting (Writer). A Reviewer is a senior staff member in OMD.

**Template/Examples**

**Example 1 – Outbreak**

The Public Health Agency of Canada is collaborating with [insert other agency names] to investigate a cluster of [pathogen] cases in [affected PTs] linked to / associated with [identify exposure, if applicable].

**SUMMARY**

Summary of the cases, event and/or key actions date. Information included will be event specific and will vary depending on the stage of the investigation; however, examples of relevant information that may be included include:

* A national Outbreak Investigation Coordinating Committee (OICC) was established on [date] to facilitate coordination and information exchange among investigative partners.
* There are currently X cases under investigation in X provinces [province=n]. X of these cases are confirmed by [MLVA or WGS].
* There are X food isolates that match the clinical isolates by WGS.
* Onset or isolation dates range from [date (isolation or onset)] to [date (isolation or onset)]. The majority of cases (x%) are [female or male], and the median age is X [range: x-x]. X% of cases with available information have been hospitalized (n/N), and X deaths have been reported.
* This outbreak is linked by [MLVA or WGS] to [previous or concurrent outbreak] associated with X.
* Based on investigation findings to date, exposure to X has been identified as the likely source of the outbreak.
* This cluster is genetically linked to an ongoing investigation in [insert international jurisdiction (e.g., US), as well as relevant information on the international investigation, either high level or what is publicly available].
* In collaboration with provincial and laboratory partners, epidemiological information for the cases is currently being reviewed. Investigations are ongoing to determine the source and scope of the issue.
* A Public Health Notice [link] was posted on [date].

**CASE DEFINITION**

[Insert case definitions for confirmed, probable, and suspect cases, if available]

**ACTIONS:**

The requested action will depend on the event and the P/Ts involved. In some instances, no actions will be required. Potential actions could include:

* Please report any cases of [pathogen] with [i.e. WGS pending, exposure to X] with symptom onset on or after [date] to your Provincial/Territorial representatives. Provincial/Territorial Health representatives, in turn, are asked to notify the Outbreak Management Division (OMD) at phac.enteric.outbreak-eclosion.enterique.aspc@canada.ca.
* For public health partners in [specific P/Ts], please report any case of [pathogen] pending WGS with symptom onset on or after [date] to your Provincial/Territorial representatives. Provincial/Territorial Health representatives, in turn, are asked to notify the Outbreak Management Division (OMD) at phac.enteric.outbreak-eclosion.enterique.aspc@canada.ca.
* For **all public health partners**, please ensure questions regarding X are asked of all [pathogen] cases during routine case follow-up while the investigation is ongoing.
* For public health partners in provinces/territories outside of [affected P/Ts], please report the following to your Provincial/Territorial representatives:
* Any increases in [pathogen] in your jurisdictions
* Any local investigations of [pathogen]
* Any cases of [pathogen] that report travel to [affected P/Ts] during their exposure period
* Please ensure that clinical specimens from [date] onwards are sent to the National Microbiology Laboratory (NML) for genotyping and sequencing.
* The [insert questionnaire name] is attached – please consider using this questionnaire at first interview for cases reported in your jurisdiction.
* In [affected P/T]: Please collect oyster tags from food establishments where cases reported exposures. Tags should be collected for the oysters consumed by the case where possible or served on the day the case(s) were exposed. This may require coordination with local CFIA. Tags should be forwarded to the CFIA Shellfish desk as per current practices.

**Example 2 – Information Sharing**

**PURPOSE**

Explain that the purpose of the PHA is for awareness, for example:

* This Alert is being posted for information sharing purposes only regarding an increase in reported cases of [pathogen] nationally.
* This alert is being posted for awareness purposes only, not for case finding.

**BACKGROUND**

Explain the situation and why it is of relevance for public health professionals in Canada. Examples of past information-sharing PHAs OMD has issued reported on an increase in the incidence of a specific pathogen and an international outbreak associated with a novel exposure. Examples of content that could be included in this section include:

Increase in pathogen:

* Data from [agency] indicate that annual numbers of [pathogen] cases in Canada range from X to X cases (average of X cases per year [year] to [year]).
* The Outbreak Management Division of the Public Health Agency of Canada (PHAC-OMD) has learned that X confirmed [pathogen] cases have been reported nationally between [month] and [month, year] ([province=n]), above what would be expected for the first X months of [year]. No commonalities among cases have been identified based on available exposure information.
* [International public health agency] is also reporting a greater than expected number of [pathogen] cases for [date] to [date].

Novel exposure:

* [International public health agency] is investigating a [pathogen] outbreak associated with [novel exposure].
* As of [date], a total of X cases from X [provinces, states, countries] have been reported. Illness onset dates range from [date] to [date].
* X% of x cases interviewed reporting consuming [novel exposure]. Those who reporting consuming [novel exposure] purchased it from [details on purchase locations].

**STATUS**

Explain what steps have been taken to assess the situation. Information included will be situation specific; however, examples of relevant information that may be included include:

* On [date], an information sharing call was held with representatives from [organizations, agencies] to discuss the recent increase in reported cases in Canada. Partners agreed that the available information does not suggest the need for national coordination or further investigation of the Canadian cases.
* Throughout the [international jurisdiction] investigation, PulseNet Canada has been on the lookout for genetically related cases in Canada. To date, there have been no reported Canadian cases genetically related to the international investigation.
* There are no plans for any public messaging from the national perspective. PHAC-OMD will provide additional information to public health partners if warranted.

**EXAMPLES**

* EA-003827: Multistate Outbreak of Salmonella infections linked to Kratom in the US – Canadian update
	+ <https://www.cnphi-rcrsp.ca/cir/alert/3827>
* EA-003826: National Increase in Reported Infant Botulism Cases
	+ [https://www.cnphi-rcrsp.ca/cir/alert/3826](https://www.cnphi-rcrsp.ca/cir/alert/3826%C2%A0)
* Refer to the Hepatitis A Protocol to Support PEP Decision Making in MJ HAV Illness Outbreak and Food Contamination Situations for specific examples related to Hepatitis A.
	+ N:\Outbreak Section\PH Protection & Promotion\Procedures\Protocols\Hepatitis A