



Medical Officer of Health Report to the Board

Tuesday, January 30, 2024

Health Protection

Healthy Environments

Institutional Enteric Outbreak Management:

Enteric outbreaks involve bacteria or viruses that cause infections in the gastrointestinal system, usually including symptoms of nausea, vomiting, and/or diarrhea. These pathogens can be spread from person-to-person or from a contaminated water or food source. Enteric outbreaks are managed by public health inspectors (PHI) in the Healthy Environments team.

There have been two declared enteric outbreaks so far in 2024, both involving retirement homes with an unknown causative agent. Most commonly, the causative agent is norovirus, which can easily be spread person-to-person or through the environment. PHIs provide institutions with enteric outbreak management guidance during outbreak situations.

Food Recalls:

Under the Food Safety Protocol, Renfrew County and District Health Unit (RCDHU) inspectors support food recall notifications when requested by the Ministry of Health, the Canadian Food Inspection Agency, or the Chief Medical Officer of Health (MOH). This support, when requested, usually is in the form of verbal notifications to local long-term care homes (LTCH), retirement homes (RH), day cares, or grocery stores. Inspectors may also attend facilities to conduct physical checks for recalled food products.

In November 2023, the Chief MOH requested assistance from health units to notify LTCH, RH and childcare settings of the Malichita and Rudy brand cantaloupe recall. These cantaloupes have been linked as the likely source of a nation-wide Salmonella outbreak. As of the latest Federal update, there were 164 cases and 7 deaths linked to the outbreak. There have not been any local cases linked to this outbreak.

Salmonella Prevention and Case Management:

The number of Salmonella infections across RCDHU in 2023 was lower than the previous five-year average. Beyond assisting with food recalls as required, our key local

preventive measures are education and inspections. Public health inspectors offer food handler training courses and they conduct regular inspections of food premises to ensure regulatory compliance with the Food Premises Regulation. The inspected food premises also include home-based food operators that supply food to the public. These measures help not just in preventing Salmonella infections, but also many other enteric infections.

In 2023, inspectors took part in a food safety education workshop with the County of Renfrew and local farmers market vendors to explain the importance of food safety in preventing disease. This partnership is ongoing and the education workshop is planned once again for 2024.

In terms of case management, public health inspectors follow up with each individual who is infected with Salmonella to discuss the disease characteristics, treatment (if necessary), and methods to control spread to others, including exclusion from certain high-risk settings if required.

There have not been any Salmonella outbreaks in 2023.

Tick Surveillance:

In 2023, 60 ticks were collected through the passive surveillance program and submitted to the National Microbiological Laboratory for analysis. 55 ticks were tested for the bacteria that causes Lyme disease. Out of those 55 ticks, 17 were positive for the Lyme disease bacteria, 32 were negative, and we are still awaiting results for 6 specimens. This is a positivity rate of 35% for those ticks with results. This updated positivity rate will be communicated to local physicians, as it informs post-exposure prophylaxis against Lyme disease (the use of an antibiotic that is sometimes indicated after a tick exposure).

Immunization

COVID-19 and Influenza Vaccine:

RCDHU concluded its large-scale community COVID-19 and flu vaccine clinics for the general public in December. In an effort to keep the community informed, a media release was issued to announce the winding down of community mass clinics: [RCDHU COVID-19 and Flu Community Mass Clinics Winding Down](#). Despite the conclusion of these community clinics, it's important to note that COVID-19 and flu vaccines remain accessible through participating pharmacies and some primary care providers. Additionally, RCDHU continues to offer booked appointments for individuals at higher risk of severe respiratory illness and for children 11 years of age and younger, whom pharmacies cannot always vaccinate.

As of January 11th, RCDHU has administered 7,761 doses of COVID-19 vaccine, and 3,724 doses of influenza vaccine throughout the fall campaign. RCDHU delivered vaccines through a combination of mass community-based clinics, in-home vaccination services, and mobile vaccination services, which targeted retirement homes and congregate care settings. RCDHU has also dispensed a total of 20,605 doses of influenza vaccine to health care partners across Renfrew County and District (RCD). Pharmacies continue to play an active role in the administration of COVID-19 and Influenza vaccines. As of January 11th, pharmacies in RCD have administered 11,374 doses of COVID-19 vaccine and 13,921 doses of influenza vaccine.

Thanks to the efforts of RCDHU's immunization team, our health system partners, and residents of RCD we achieved a higher COVID-19 immunization rate with the new XBB vaccine than Ontario both for all ages and for those older than 65.

Respiratory Syncytial Virus (RSV) Vaccine:

The Ministry of Health launched a publicly funded high-risk RSV vaccination program targeting individuals 60 years and older living in long-term care homes (LTCH), including Elder Care Lodges and residents of licensed retirement homes providing dementia care. Initially, RCDHU dispensed doses to long-term care homes and directly administered 49 doses of the RSV vaccine to eligible retirement home residents. Effective December 7th, 2023, the eligibility criteria expanded to include individuals aged 60 and older in the following populations:

- Patients in hospital receiving alternate level of care (ALC)
- Patients receiving hemodialysis or peritoneal dialysis
- Recipients of solid organ or hematopoietic stem cell transplants
- Individuals experiencing homelessness
- Individuals who identify as First Nations, Inuit, or Metis

RCDHU is currently reaching out to several community partners to support with the administration of RSV vaccine to our eligible populations. RCDHU will also be offering booked appointments to offer RSV vaccine to clients that are eligible.

Immunization of School Pupils Act (ISPA):

ISPA surveillance will continue into 2024, involving the distribution of immunization notices to all students in RCD who are overdue for the required ISPA vaccines, or missing immunization information. Currently, approximately 2,445 (15.7%) students in RCD are overdue for at least one ISPA vaccine. Notably, the active surveillance efforts in December have reduced the number of students with no immunization records from approximately 738 (4.7%), to approximately 541 (3.4%) as of January 11, 2024.

Throughout the winter months, RCDHU will host ISPA school clinics in all high schools across RCD, along with community-based clinics for students. Students also have the

option to receive vaccinations through their health care providers and report their immunizations to RCDHU, preferably using the online [Immunization Connect Ontario tool \(ICON\)](#).

Respiratory Illness

As seen on RCDHU's [Respiratory Illness Data Summary](#), overall respiratory illness activity across RCD remains high, with the majority of indicators showing "very high" levels. In recent weeks, there have been early signs of decreasing activity.

Outbreaks:

Throughout December 2023 and the first few weeks of January 2024, outbreak activity was relatively consistent, with an average of 2 new respiratory outbreaks declared each week. Roughly half of the respiratory outbreaks declared during this time were COVID-19 related, while the other half were due to pathogens such as influenza, RSV, or rhinovirus. In recent weeks, the number of outbreaks has slowed down somewhat. There are currently 3 active respiratory outbreaks in RCD (as of January 24th).

Respiratory Disease Outcomes:

On average, there have been 6-7 new hospitalizations for COVID-19 each week over the past six weeks. This is similar to the weekly number of new admissions in November 2023, but higher compared to September-October 2023. Additionally, hospitalizations for influenza and RSV have been reported by local hospitals.

There were 6 COVID-19 related deaths reported in the past 6 weeks. While weekly death rates have been relatively high in RCD compared to Ontario during this time, overall COVID-19 death rates for 2023 are very similar (10.9 per 100,00 in RCD vs. 12.4 per 100,000 in Ontario).

Test Percent Positivity and Cases:

The first influenza case of the 2023-24 season was reported to RCDHU in early December 2023. Weekly case numbers increased over the first two weeks of January, with a total of 23 influenza cases (22 influenza A + 1 influenza B) reported as of January 17th. Correspondingly, percent positivity for influenza has increased during this time, reaching ~12-13%. Provincially, influenza percent positivity may have peaked and has decreased recently.

COVID-19 testing percent positivity remains high for both Ontario and Eastern Region PHUs but appears to be trending downward (currently sitting around 17%). Our local

positivity over the past 6 weeks has ranged between 15-25% and decreased to 16.7% in our most recent respiratory illness data summary update.

Wastewater:

Preliminary data for Eastern region health units shows that COVID-19 [wastewater signals](#) may be starting to decrease following sustained high levels. Local signals from both Pembroke and Petawawa sites increased throughout the month of December but appear to be decreasing in more recent weeks.

Health Promotion

Substance Use Harms

Drug-related deaths and harms remain a major focus for RCDHU. Preliminary reports indicate that there were 38 suspect drug poisoning deaths across RCD in 2023, which is approximately double the number of deaths in 2022 and three times the number of deaths that usually occurred from 2018-19. Over the first 8 months of 2023, preliminary reports have identified 16 deaths that were specifically related to opioids. In terms of opioid-related emergency department (ED) visits, there were approximately 70 ED visits to local hospitals in 2023, which is 1.5-2 times higher than the annual number of visits seen in 2018-19.

Our substance use and harm reduction team is planning the development of a community-wide drug strategy, that will require collaboration with numerous community partners. This strategy will systematically assess and plan work across the four pillars of prevention, treatment, harm reduction, and enforcement.

Alongside partners, we continue to work on enhanced outreach and mobile support models to better serve people who use drugs across RCD. This collaboration resulted in the submission of a funding application to Health Canada's Substance Use and Addictions Program in the fall. In the past two weeks we also submitted a separate application to the Public Health Agency of Canada for funding to support implementation planning of the Icelandic Prevention Model, an evidence-based and well-established means of preventing substance use among youth.

Alongside these new initiatives, we continue our work to provide harm reduction supplies and education supports in the community, to provide updated epidemiological information to support planning and advocacy, and to communicate with partners and the media about the situation. Recently, we have developed a regional analysis of the burden of opioid-related deaths across RCD, shown in Table 1.

Table 1. Number of opioid-related deaths and rate of opioid-related deaths per 100,000 people per year by geographical area in RCD, January 2018 to June 2023

Geographical Area	Population (Census 2021)	Number of opioid- related deaths	Rate of opioid- related deaths per 100,000 people per year
Arnprior and Area (including McNab/Braeside)	17,220	6	6.3
Barry's Bay and Area (including Algonquin Provincial Park; Brudenell, Lyndoch and Raglan; Killaloe, Haggarty, Richards; Madawaska Valley; North Algona Wilberforce; South Algonquin)	12,157	4	6.0
Deep River and Area (including Laurentian Hills; Head, Clara, Maria)	7,327	5	12.4
Renfrew and Area (including Admaston/Bromley, Horton, Greater Madawaska)	17,231	8	8.4
Pembroke and Area (including Bonnechere Valley, Laurentian Valley, Whitewater Region)	34,937	34	17.7
Petawawa	18,160	5	5.0

Data source: Office of the Chief Coroner for Ontario (2). Data is preliminary and subject to change.

Notes:

- Opioid-related deaths include both confirmed and probable cases as defined by the Office of the Chief Coroner.
- Deaths are primarily categorized according to the location where the death occurred.
- Table does not include deaths that occurred within the Algonquins of Pikwakanagan First Nation.

Enabling Aging in Place - Healthcare Excellence Canada

In November 2023, RCDHU contributed to the Ottawa Valley Ontario Health Team's (OVOHT) application for funding under the Enabling Aging in Place – Healthcare Excellence Canada initiative as part of a cross-sectoral team. Healthcare Excellence Canada has selected our group's "Falls Pathway" proposal for participation in Phase 1 Seed Funding (January to April 2024). The funding will support the development of implementation and evaluation plans for the pathway, designed to prevent and reduce harms from falls among older adults. RCDHU will contribute in-kind support by providing demographic data for older adults and current falls data. Additionally, RCDHU will continue to participate as a core member of the working group.

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