

General Information

Introduction

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Purpose

One of the key roles of Public Health is the prevention and control of communicable diseases. To successfully protect Saskatchewan's public from the health consequences of communicable diseases, a collaborative approach based on evidence and research is necessary, as pathogens do not recognize boundaries or jurisdictions. This manual contains the information Saskatchewan health regions and First Nations health agencies require for communicable disease control. It is targeted to Saskatchewan Public Health users but also contains information that other key players may find useful.

Key players in Saskatchewan include, but are not limited to:

- Saskatchewan health regions;
- First Nations health agencies;
- Saskatchewan Disease Control Laboratory and other laboratories;
- hospital infection control personnel;
- physicians;
- other health care providers;
- Saskatchewan Ministry of Health;
- Canadian Food Inspection Agency;
- Canadian Blood Services;
- Public Health Agency of Canada;
- Health Canada;
- other government and non-government organizations.

Control of Communicable Disease in Saskatchewan

The Public Health Act, 1994 and its regulations are the statutory basis for the reporting, investigation and control of communicable diseases in Saskatchewan. The Act and Regulations outline the roles and responsibilities of individuals and agencies as they relate to communicable disease control. See [Appendix C – Major Legislation](#) for a list of relevant legislation.



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Reporting Requirements

Under *The Public Health Act, 1994* and Disease Control Regulations, health care providers (physicians and nurses), school personnel, managers of eating establishments and laboratories are required to report Category I and II diseases and outbreaks to designated Medical Health Officers (MHOs). Please refer to [Appendix A](#) for reporting and follow-up timelines.

- Following the investigation of the case, detailed information shall be documented in the electronic public health case management and surveillance system called Integrated Public Health Information System (iPHIS) within 14 days. For certain diseases, MHOs have agreed to notify Saskatchewan Ministry of Health prior to the 14 day reporting regulation. See [Appendix A](#).
- In the instance of outbreaks, summary reports should be completed and submitted to the Ministry of Health no later than 30 days following outbreak resolution.

MHOs are required to submit case reports of notifiable and unusual communicable diseases to the Saskatchewan Ministry of Health. From time to time, additional information is requested from the Coordinator of Communicable Diseases (Deputy Chief Medical Health Officer) at the Ministry of Health for enhanced surveillance purposes. This information may be collected through the use of a specialized form or it may be documented on the electronic public health case management and surveillance system. The Ministry of Health compiles the information into a statistical report that is provided to the communicable disease contacts in Saskatchewan Health Regions and First Nations health agencies. De-identified case information is sent to the Centre for Infectious Disease Prevention and Control, Public Health Agency of Canada for “National Notifiable Diseases”.

This manual is divided into sections according to the organisms’ primary mode of transmission. Each section contains an introduction that provides some background information and general considerations pertaining to the particular mode of transmission, followed by information specific to each disease. The purpose of this section is to provide general information regarding risks of acquiring infections, primary prevention measures and population-based health promotion activities as they pertain to the delivery of a comprehensive communicable disease control program.



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