

ENVIRONMENTAL PUBLIC HEALTH REPORTING REQUIREMENTS FOR ENVIRONMENTAL PUBLIC HEALTH OFFICERS AND COMMUNITY-BASED DRINKING WATER MONITORS

DCI Number/Fiscal Year: HC-P036 (2020-2021)

NOTE: This document is a representation of the reporting requirements for DCI HC-P036. It is not a reporting template or a data collection tool. Where applicable, reporting templates, guides and data collection tools that will assist you to complete your reporting requirements will be provided by your Regional Office and are identified in bold lettering or italics throughout this document. Please contact your [ISC-FNIHB Regional Office](#) if you have not received a copy of the documents, if you have questions, or require assistance.

Program Reporting Requirements:

Drinking Water results are to be reported to the respective regional office weekly or as determined by the region (up to once a week for the entire year). Sampling and testing should follow the detailed sampling procedures developed in collaboration with the Environmental Public Health Officer (EPHO) and representative(s) from community leadership and should meet the requirements of the Guidelines for Canadian Drinking Water Quality (GCDWQ).

Test results should immediately be provided to the appropriate community representative(s) under the following circumstances: if microbiological water tests results, such as E. coli or total coliforms, exceed their MACs; or if chlorine residuals are inadequate to maintain disinfection in the distribution system, as outlined in the Guidelines for Canadian Drinking Water Quality (GCDWQ).

All Drinking Water Advisories (DWA) issued on a system must be reported to the regional office within 24 hours. Notify the regional office within 24 hours of any non-DWA event that may have immediate or short term impact on public health. These events include but are not limited to: tornados, chemical spills, possible food borne illness outbreaks, (enteric illnesses-foodborne and water borne outbreaks), and flooding. The notification should include the name of the First Nation/community impacted, the nature of the event, the scope of the impact, the actions being taken to assist; and identification of support needed from the government.

Where a Medical Health Officer requests an assessment/investigation on reported public health issues, such as cases of possible food or waterborne illness, provide a report on the follow-up assessment/investigation completed within 5 working days.

On an annual basis, share a summary report generated from the environmental health database (EHIS or Hedgerow) of the total number of (routine and requested) public health inspections, and the potential or existing health hazards identified during the inspections. The information requested is already collected by Environmental Public Health Officers as part of routine and request inspections of public facilities (food, community care, solid waste disposal, wastewater, general) and homes, and as part of on-going monitoring and surveillance activities.

For recipients receiving funding for Community Based Water Monitors (CBWM):

Record all microbiological and chlorine residual testing results on water quality data sheets each week, and report all results to the EPHO weekly (at a minimum), or as otherwise determined together with the regional office.

Input all water quality test results into the designated database after results are determined, where access to a drinking water database is available. If results are inputted to a water quality database, the provision of monthly reports to the EPHO is not required.

Upon determining that *E. coli* and (or) total coliforms exceed health limits or Maximum Acceptable Concentrations (MACs) set by the latest GCDWQ, notify the EPHO and request interpretation of results and whether or not further action is immediately required. Such action must also be taken when unusual fluctuations in chlorine residuals are noted (e.g., residuals drop below the recommended minimum).

During a potential waterborne disease event, the CBWM has the responsibility to provide information to the EPHO and the Regional Office as needed.