

# PICNet

## PROVINCIAL INFECTION CONTROL NETWORK OF BRITISH COLUMBIA

A program of the Provincial Health Services Authority



## PICNet Annual Report April 2013–March 2014



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Provincial Infection Control Network of British Columbia (PICNet)

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## Message from the Co-Directors

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This has been a very busy and productive year for the Provincial Infection Control Network of BC. PICNet’s new Scientific Operations Advisory Committee, comprised of appointed Operational Leads and Scientific Experts working within British Columbia’s health authorities, has been convened. The committee provides advice on PICNet’s strategic directions and on provincial infection prevention and control projects.

PICNet’s strategic operation plan for 2014/15 to 2017/18 has been developed in collaboration with the health authorities and the Ministry of Health, and approved by the Integrated Primary Acute and Community Care Committee (IPACCC). The plan gives us a clear path of what our priorities will be in the coming years. Along with the plan, IPACCC approved PICNet’s priority projects and annual deliverables for 2014/2015. These deliverables are included as Appendix A of this annual report.

As we move forward into the coming year, we wish to sincerely thank all of our partners and the members of our Community of Practice for their valuable input and ongoing support. We continue to be excited by our development, and by all that is yet to be accomplished. Our new vision “Fewer Infections – Better Healthcare” truly reflects our ongoing commitment to work with our partners in the health authorities and the Ministry to protect the patients within our healthcare system from acquiring healthcare-associated infections.

Sincerely,

Dr. Elizabeth Bryce and Dr. Judith Isaac-Renton



Dr. Elizabeth Bryce



Dr. Judith Isaac-Renton

## Executive Summary

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The Provincial Infection Control Network of British Columbia (PICNet) is a program of the Provincial Health Services Authority (PHSA) that works to promote the prevention and control of healthcare-associated infections. Our three key areas of focus are surveillance, evidence-based practice guidelines, and education. PICNet works with partners from the British Columbia health authorities, other related agencies, and with support from the Ministry of Health (MoH).

This report provides feedback to our members and clients for the past fiscal year. The fiscal year 2013-2014 marked a new start for PICNet, with a new Scientific Operations Advisory Committee, and some exciting new ventures in education and communications.

### Scientific and Operations Advisory Committee

The replacement of PICNet's former Advisory Committee with a new Scientific Operations Advisory Committee (SOAC) was the result of a third party review of PICNet's governance structure. The new operations model serves to strengthen PICNet's relationships with its partners in the health authorities, professional organizations, and the MoH.

### Projects and Initiatives

PICNet worked on several projects during 2013-2014. Following the MoH policy communiqué in 2013, requiring that all health authorities make information about outbreaks in their healthcare facilities publicly available, PICNet has been working in partnership with the MoH and the BC health authorities to develop clear working definitions for outbreaks; public reporting structures; and patient transfer protocols.

Following the outbreaks definitions work, continued provincial work focused more specifically on carbapenemase producing organisms (CPO); in particular, a provincial surveillance protocol for identifying and monitoring the CPO cases in the province.

PICNet was also asked by the MoH to provide advice on potential provincial metrics for evaluating antimicrobial stewardship programs in acute care settings. A paper was submitted to the MoH in March 2014.

PICNet's surveillance data are also being used as part of indicators for evaluating performance and quality initiatives by some of the health authorities.

In addition, PICNet provided consultation to Perinatal Services BC on developing usage recommendations for some commonly used equipment specific to their discipline.

### Guidelines

PICNet undertook a revision of the Home and Community Care guidelines. In addition to within BC, these guidelines are used by several other provinces (i.e. Prince Edward Island, Yukon) as a reference to develop their own policies. PICNet continues to receive requests from other countries for permission to adopt our guidelines.

## Surveillance

Surveillance continues to be a crucial part of PICNet’s work, in particular with the development of a new surveillance program for CPO, as well as updates on the provincial surveillance protocol for *Clostridium difficile* infection (CDI) and Methicillin-resistant *Staphylococcus aureus* (MRSA). CDI, MRSA, and hand hygiene surveillance continued, with quarterly updates and annual surveillance reports produced for public release.

## Education

PICNet hosted two annual educational conferences (April 2013 and March 2014). Delegates attended from all BC health authorities, as well as from non-affiliated sites, and from across the continuum of care.

PICNet continues to fund members of the Community of Practice (CoP) to attend educational events. In 2013–2014, PICNet awarded grants to six people to attend conferences. PICNet staff also gave in-services and presentations to several groups, and PICNet continues to make the Webber Training series of infection control seminars freely available to the CoP.

## Communications

In October 2013, PICNet was involved in several activities for Infection Control Week: residential care in-services, a provincial video contest, and the creation of downloadable online resources. Following the success of PICNet’s 2012 educational game/workshop that was used as an in-service in residential care facilities, in 2013 PICNet created a “packaged” version of the game that could be ordered by any healthcare facility (acute and residential care) via the PICNet website. Other resources created included infection control quick-reference lanyard cards and the PICNet infection control calendar.

PICNet continued to expand its web communications. The website audience has increased greatly in the past two years, and PICNet’s resources are utilized by healthcare facilities provincially, nationally, and internationally.

## Partnerships

PICNet continued to play an important role in provincial and national organizations and committees, including Infection Prevention and Control-Canada (IPAC-Canada), the Provincial Hand Hygiene Working Group (PHHWG), and other expert working groups and advisory committees.

## Acknowledgements

PICNet would like to thank the members of our CoP who participate in both our standing committees and our working groups. Members volunteer their time to attend meetings and contribute to PICNet’s success. Without the hard work of these members, PICNet would not be able to produce the volume and quality of work that it does. In addition, PICNet’s surveillance program would not be possible without the participation of the each health authority. Many thanks to:

- PICNet Scientific and Operations Advisory Committee (SOAC)
- PICNet Surveillance Steering Committee
- PICNet Education Steering Committee
- PICNet Conference Planning Committee
- Fraser Health Authority
- Northern Health Authority
- Interior Health Authority
- Island Health Authority
- Vancouver Coastal Health Authority
- Providence Health Care
- Provincial Health Services Authority
- All the members of the IPC CoP across the continuum of care.

## About PICNet

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The Provincial Infection Control Network of British Columbia (PICNet) is a program of the Provincial Health Services Authority (PHSA) that works with partner organizations across the province to reduce healthcare-associated infections. We do this by enabling sound information, improving and sharing evidence-based practices, and influencing policy decisions.

Our work is reflected in our new vision statement: **Fewer infections – better healthcare.**

Within the context of the strategic goals of the Ministry of Health and the PHSA, the following strategic directions serve as the foundation for PICNet’s mission:

1. Coordinate provincial surveillance programs for healthcare-associated infection
2. Provide, facilitate, and communicate infection prevention and control activities provincially, nationally, and internationally
3. Provide and promote educational opportunities and resources for the community of practice, for both their own professional development and the education of other healthcare providers
4. Develop evidence-based practice guidelines, tools, and resources, and facilitate their implementation
5. Provide a forum where experts can work together to provide advice to the MoH and the HA on key infection prevention and control policies, initiatives, and emergencies

Our Community of Practice (CoP) includes infection prevention and control professionals (ICP), medical microbiologists, epidemiologists, as well as experts in patient safety and quality, public health, occupational health, and others.

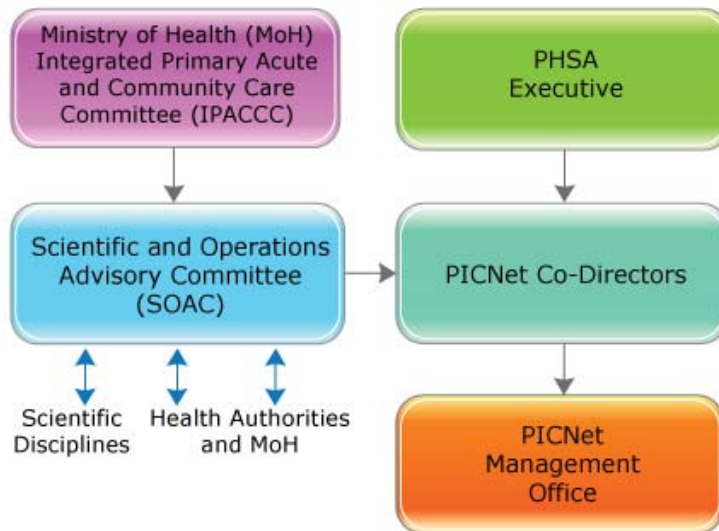
PICNet’s strength is built on its strong professional relationships within the infection prevention and control CoP and other partners. These relationships allow PICNet to lead initiatives, in the spirit of collaboration, that work towards minimizing healthcare-associated infections in BC and across Canada.



## New Scientific and Operating Advisory Committee

In 2011-2012, PHSA commissioned a third party review of PICNet’s governance structure. The purpose of the review was to improve clarity around PICNet’s role and advisory structure within the healthcare system. Key stakeholders from the health authorities were consulted for advice on how to accomplish this. Based on subsequent recommendations, PICNet’s Terms of Reference were revised, and received approval from the Integrated Primary Acute and Community Care Committee (IPACCC). This document outlines the plan for communicating this news.

In 2013, a new Scientific Operations Advisory Committee (SOAC) was created to replace PICNet’s former Advisory Committee. The SOAC is comprised of appointed **Operational Leads** (appointed by the health authorities) and **Scientific Experts** (appointed by PICNet). The SOAC assists and supports the implementation of evidence-based practices and provincial surveillance program within the health authorities, and the completion of projects undertaken by PICNet. The SOAC also advises on PICNet’s annual workplan and three-year strategic operational plan. These plans are submitted annually to the MoH and IPACCC for review and endorsement. The new operations model serves to strengthen PICNet’s relationships with its partners in the health authorities, professional organizations, and the MoH.



## PICNet Co-Directors and Staff

**Dr. Elizabeth Bryce**  
Co-Director

**Dr. Judith Isaac-Renton**  
Co-Director

**Bruce Gamage**  
Network Manager

**Joanne Archer**  
Education and Practice Coordinator

**Dr. Guanghong Han**  
Surveillance Epidemiologist

**Helen Evans**  
Communications Coordinator

**Susan Brauer**  
Administrative Assistant



PICNet Co-Directors and Staff

The PICNet organizational chart can be found on the PICNet website at [picnet.ca/about-picnet](http://picnet.ca/about-picnet).

## Projects and Initiatives

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PICNet takes on projects requested by the MoH, as well as ones that are requested by our CoP and partners. In 2013–2014, PICNet worked on three projects for the MoH, and two requested by partner organizations.

### Outbreaks Definitions

Healthcare facilities across BC experience outbreaks of healthcare-associated infections. CDI has become a common cause of these outbreaks in recent years, and great strides have been made within healthcare facilities to address this. In March 2013, the MoH issued a policy communiqué requiring all health authorities to make information about outbreaks in their healthcare facilities publicly available.

PICNet has been working with the MoH to develop working definitions for outbreaks of CDI and other emerging organisms (such as CPO) that threaten our healthcare facilities, in order to promote consistent reporting. PICNet has been working with partners and each HA to promote consistent identification of patients who are infected with CDI and CPO, and to delineate clear lines of communications regarding reporting and transfer of patients between facilities.

In January and March 2014, representatives from all health authorities, British Columbia Centre for Disease Control (BCCDC), PICNet, and the MoH met to discuss provincial definitions and processes for CDI and CPO outbreaks. This discussion was necessary as the current absence of clear outbreak definitions, and/or clear roles and responsibilities for declaring and ending outbreaks, impacts the compliance of public reporting. The main objectives of the meeting were to:

1. Develop provincial definitions for outbreaks of CDI and CPO infections
2. Clarify minimum expectations of administrative actions to be taken for CDI and CPO outbreaks, including roles and responsibilities
3. Develop a process and minimum expectations for inter-organizational communication for patients with CDI and CPO infections.

The group recognized the usefulness of PICNet's CDI Toolkit, came to consensus on principles for a standard response, and defined next steps and finalized working definitions for outbreaks and administrative outbreak requirements that addresses roles, responsibilities, and communication requirements for both hospitals and their public health counterparts. Finally, the group agreed to work with the Patient Transfer Network to develop and implement a patient transfer protocol. This will ensure that effective communication occurs between facilities when patients with CPO colonization or infections are transferred. PICNet organized the two meetings and provided the background material for the discussion.

## Carbapenemase Producing Organisms (CPO) Project

CPOs are highly antibiotic resistant bacteria that have been identified recently in several BC hospitals. Following an outbreak in February 2013, PICNet, BC Public Health Microbiology and Reference Laboratory (BCPHMRL), and the MoH drafted a surveillance protocol for CPO in BC. In March 2014, PICNet convened a meeting of representatives from each health authorities and related organizations across the province to address these important issues. The group finalized a provincial CPO surveillance protocol that addresses standardized case definitions, laboratory testing protocols, risk screening criteria, monitoring, reporting, and management of CPO outbreaks. PICNet submitted all of the products of the working group to the MoH in April 2014. A policy communiqué will be issued by the MoH requiring that the recommendations of the CPO Working Group be implemented by the health authorities.

## Antimicrobial Stewardship Metrics Paper

The over-use of antimicrobial medications has led to the global problem of drug-resistant pathogens such as CDI and MRSA, and antimicrobial stewardship has become increasingly necessary to ensure that antimicrobials are used appropriately and judiciously. Currently, there is no standardized approach to evaluate the impact of antimicrobial stewardship programming in BC. In September 2013, the MoH requested that PICNet provide advice on potential provincial metrics (e.g., process measures, outcome measures, targets) for evaluating antimicrobial stewardship programs in acute care settings. The development and implementation of quality indicators for antimicrobial stewardship programs will support improvements in patient safety and outcomes, decreases in antimicrobial toxicity and adverse events, and will help to curb the inappropriate use of antibiotics in acute care settings. Reporting of these data to a provincial body is currently voluntary. In instituting standardized collection and reporting of AMS data on a provincial level, BC would be leading Canada.

PICNet conducted a literature review of existing metrics and indicators used for the surveillance of antimicrobial stewardship programs around the world, and — in consultation with the newly established Provincial Antimicrobial Stewardship Clinical Expert Group (PACE), pharmacy, infectious diseases, infection control, and other subject matter experts — created a document of recommendations. This advice is required for the development of BC's provincial approach to antimicrobial stewardship as part of the MoH's Clinical Care Management (CCM) initiative. The proposed project will have significant benefit for the planning and assessment of antimicrobial stewardship programs in all health authorities.

## Performance Indicators

In 2013/2014, the Ministry of Health requested that all health authorities submit several indicators for the purpose of evaluating their performance. Vancouver Coastal and Fraser Health chose to submit CDI rates as one of their indicators, while Northern Health chose hand cleaning compliance. Working within our data sharing agreement, PICNet collaborated with the Ministry's Planning and Innovations Division, Patient Safety Division, and the health authorities

to ensure that the data submitted were of high quality, and that the PICNet data submission protocol developed over the last several years had been followed.

### **Breast Pump Kit Recommendation Document**

The release of the guidance document *Information to be Provided by Manufacturers for the Reprocessing and Sterilization of Reusable Medical Devices* by Health Canada in 2011 prompted a change in the labelling of breast pump kits by manufacturers, from multi-patient kits to single-use kits. Perinatal Services BC sought the advice of the PICNet and Health Canada to clarify the intent of the guidance document as well as the semi-critical classification of the breast pump kits, and single-use designation.

In partnership with Perinatal Services BC, PICNet researched the issue, critically analysed the evidence and developed recommendations for kits that are reused by the same mother. As these kits are single-use, they cannot be reprocessed for re-use by a different mother. Perinatal Services BC released this document in October 2013.

## Evidence-Based Practice Guidelines

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Under the leadership of the Education and Practices Coordinator, Joanne Archer, PICNet develops evidence-based practice guidelines at the request of the CoP and the MoH. Guidelines are developed by a group of experts with representation from each health authority, using a rigorous development process. All PICNet guidelines undergo a review cycle every three to four years to ensure that they contain the most up-to-date, evidence-based recommendations. While PICNet guidelines are developed for use in BC, they are also recognized and used nationally and internationally.

### Revision of Home and Community Care Guidelines

PICNet's guidelines are reviewed every three years via a formal review process. In 2013, a review of the Home and Community Care Guidelines commenced. The first phase involved health librarians from the College of Registered Nurse of BC conducting a literature search for new information, ensuring that revisions are evidence-based. The next step was for PICNet to review the literature findings and begin editing the current guidelines. The process involves infection prevention and control professionals from around BC, and is overseen by the Guidelines Steering Committee. The target date for release to the public is June 30, 2014.

## Surveillance

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In 2013–2014, under the leadership of surveillance epidemiologist Dr. Guanghong Han, PICNet continued to lead the data collection, analysis, and reporting of CDI, MRSA, and hand hygiene compliance data in BC.

In 2014, the Surveillance Steering Committee completed annual review of the provincial surveillance protocol for CDI and MRSA with recommendations for improvement taken forward to our Scientific Operations Advisory Committee for review.

### CPO Surveillance

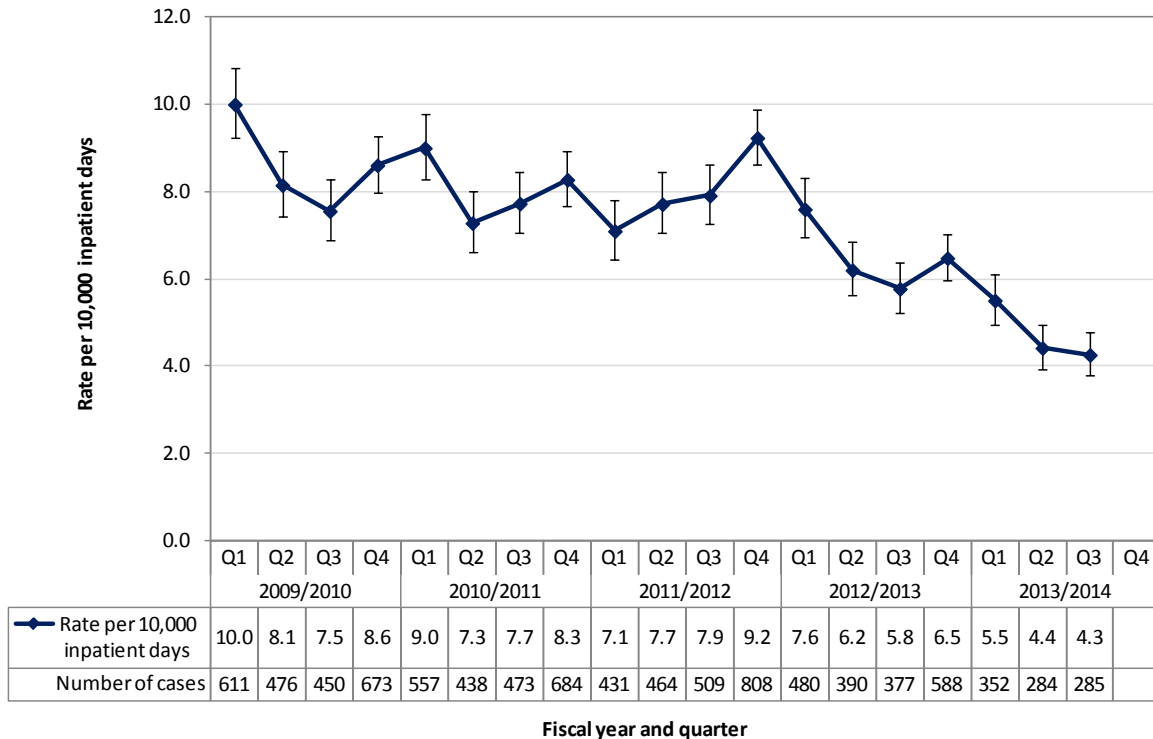
The emergence of CPOs is an infectious disease concern of which the epidemiology and control is little known in BC. PICNet worked with a multidisciplinary group of representatives from each health authority and related agencies in the province to develop a provincial surveillance protocol for CPO. The best available evidence and knowledge was utilized, along with expert opinion, to develop this protocol. Data submission to PICNet is expected to begin in September 2014.

PICNet strongly recommends that the CPO surveillance protocol be reviewed after one year of implementation to ensure that it reflects any new knowledge gained and advances in evidence-based practice.

## CDI Surveillance

The latest CDI update was published in February 2014 (Quarter 3 of FY 2013/2014). The graph below shows steadily decreasing in the number of new cases and rate of CDI associated with the reporting facility since the surveillance began (The full report can be accessed at <http://s.picnet.ca/cdireports>). This decrease is statistically significant. The annual surveillance report for CDI is expected to be posted in September 2014.

### New CDI cases in BC Acute Care Hospitals



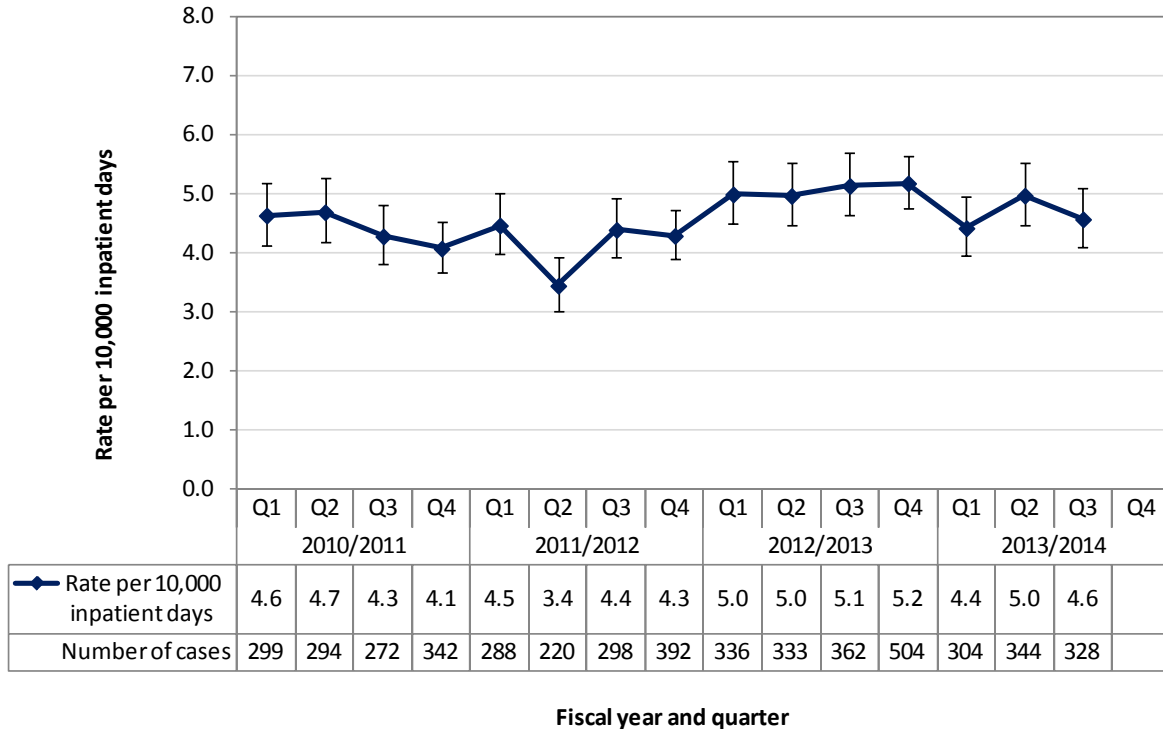
Fiscal year and quarter



## MRSA Surveillance

The latest MRSA update was published in February 2014 (Quarter 3 of FY 2013/2014). The graph below shows the number of new cases and rate of MRSA associated with the reporting facility by fiscal year and quarter in BC. (The full report can be accessed at <http://s.picnet.ca/mrsareports>.) As shown in the graph, the number of MRSA cases has remained relatively stable over the reporting period. The annual surveillance report for MRSA is expected to be posted in September 2014.

### New MRSA cases in BC Acute Care Hospitals



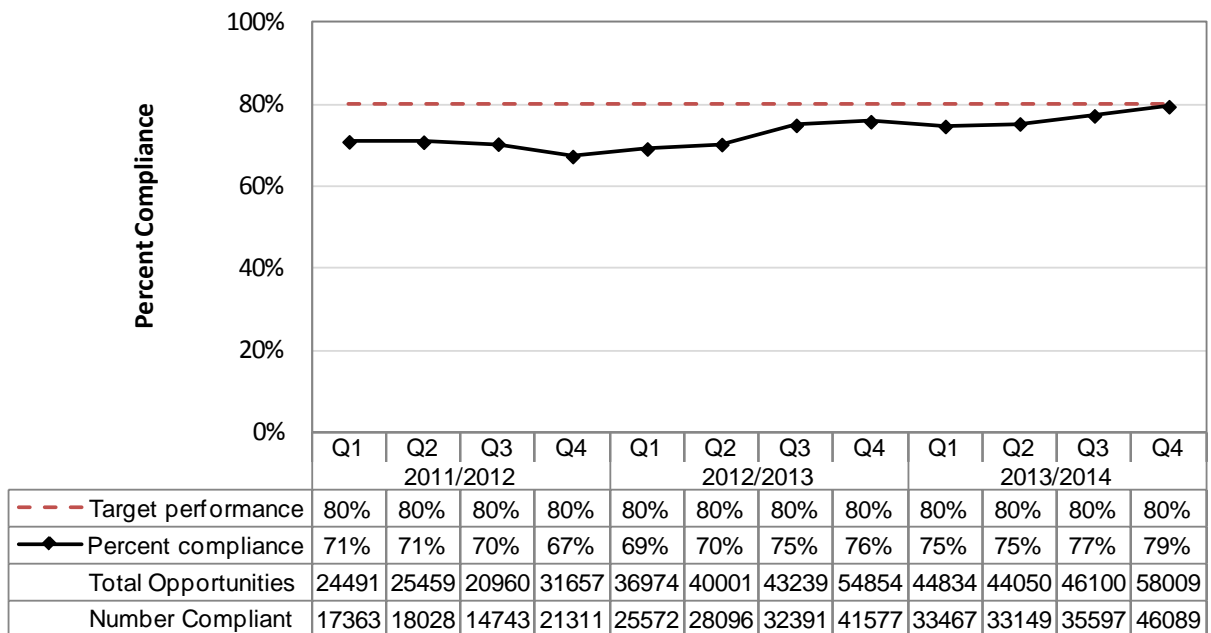
## Hand Hygiene Compliance

Frequent and proper hand hygiene is the cornerstone for preventing the transmission of healthcare-associated infections. Since September of 2010, PICNet has been working with the PHHWG to develop and implement a provincial program for the promotion of hand hygiene in all healthcare settings. Standardized auditing of hand hygiene compliance rates among healthcare providers in acute care facilities began in 2011.

In collaboration with PHHWG, PICNet collects audit data on behalf of the province, conducts the analyses, and prepares the consolidated provincial reports. These data have been publicly reported since 2012.

The provincial hand cleaning compliance rate increased gradually in each quarterly audit cycle during the past two fiscal years, and reached at 79% in Q4 of FY 2013/2014, which is very close to the target performance of 80% compliance set by PHHWG to be achieved by the end of FY 2014/2015. (The full report can be accessed at <http://s.picnet.ca/hhreports>.)

### Provincial hand cleaning compliance by healthcare workers in acute care facilities



## Education

Healthcare professionals are required to undertake continuing education every year. PICNet provides education resources and opportunities, such as the PICNet conference, education day, online modules, and the Webber Teleclass lecture series, that can be used by healthcare providers to fulfill their continuing professional development requirements. PICNet’s education resources are accessible by healthcare providers from across the continuum of care: acute care, long-term care, public health, and occupational health. PICNet also provides in-services to specific healthcare provider groups and education institutes upon request. PICNet continues to receive requests from across Canada as well as other countries to use our education resources.

### PICNet Educational Conference

In the fiscal year 2013-2014, PICNet hosted its sixth and seventh annual educational conferences.

The 2013 conference took place in April, in downtown Vancouver. There were 139 delegates in attendance, 15 speakers, and 25 different exhibitors. For the 2014 conference, PICNet moved the date and conference location for budgetary reasons. The seventh annual conference took place in February, in Richmond, BC, with 122 delegates, 15 speakers, and 27 exhibitors.

Feedback for both conferences was overall positive.

*“Great conference. Thank you to all the dedicated, knowledgeable PICNET staff for all that they do on a daily basis.”*

*(from 2013 conference evaluation)*

*“I truly appreciate the ability to attend these conferences. This is a very valuable source of information and guidance.”*

*(from 2013 conference evaluation)*

*“A couple of great presenters! My first PICNET conference and I found it to be overall interesting and well done..”*

*(from 2014 conference evaluation)*

*“Great job in organizing this year's conference everyone! I think it was one of my favourite PICNET conferences so far.”*

*(from 2014 conference evaluation)*

## Education Resource Fund

Consistent with its role in supporting infection prevention and control education and training, PICNet continues to administer an Education Resource Fund. This fund provides educational grants to members of the CoP, which consists of all healthcare professionals in BC involved in infection prevention and control. Members of the CoP may apply to receive up to \$1,000 annually to support their attendance at a conference, meeting, or other educational activity of their choice. Based on specific criteria, a panel of three members of PICNet’s Advisory Committee scored the applications and decided upon the minimum score for funding. In 2013-2014, PICNet was able to provide funding for six members of the CoP to attend conferences.

## In-Services and Presentations

PICNet staff gave several presentations and in-services during 2013–2014:

German Hospital Hygiene Society (Berlin) March 2014 (IPAC Practices in Canada)	Network Manager
PICNet Conferences March 2013 and March 2014	
UBC School of Population and Public Health January 2014 (SPPH 520 – Study of Infectious Diseases in Man)	
Delta Hospice Society (Irene Thomas Hospice Residence) December 2013 – Applying Basic Infection Control Principles in the Hospice Setting	
UBC School of Population and Public Health October 2013 (SPPH 520 – Study of Infectious Diseases in Man)	
Township of Langley October 2013 – Biohazard Awareness for City Workers	
The International Federation of Infection Control (IFIC) (Buenos Aires) October 2013 – Competency Models for IPAC Professionals	
Infection Prevention and Control Canada conference, Ottawa in June 2013	Education and Practices Coordinator
College of New Caledonia Nursing students – January 2014	
First Nations Health Authority Community Health Nurses – Feb. 2014	
BC Dental Hygienists Association – April, 2014	
BC Medical Laboratory Assistants Association – April, 2014	
Chief Nursing Officers – May 2014	
2015 Canada Winter Games Society (add role)	
Infection Control Week workshops (13 residential care facilities) – Oct-Nov 2013	Communications Coordinator
North American Occupational Safety and Health Week (NAOSH) event – May 2013	

## Webber Training

Webber Teleclass Education is an international series of lectures on infection prevention and control topics. Its objective is to bring the best possible infection prevention and control information to the widest possible audience, with the fewest barriers to access.

The Webber Training service is purchased annually by PICNet, and made available to CoP members who have registered for this professional development and educational service. In 2013–2014, a total of 34 teleclasses were broadcast. . All teleclasses are also made available as archived recordings on the PICNet website, following their broadcast. This allows CoP members who missed any teleclasses to listen to them at a later date. Webber Training has also made available to PICNet the recordings of teleclasses that were not broadcast in Canada.



## Communications

Under the leadership of Communications Coordinator Helen Evans, PICNet has been working hard to create new communications and educational resources, promote these resources, and developing a “train the trainer” models so that Infection Control Practitioners have the resources to run their own workshops.

### Infection Control Week

In October and November 2013, PICNet visited thirteen residential care facilities with its infection control educational workshop. In 2012, PICNet had created an infection control educational game, which was a huge hit when it was taken to the Infection Control Week visits. In 2013, PICNet made some small changes to the game, and took the “new and improved” version to even more facilities.



*“I literally could not walk down the hallway for people stopping to tell me how fabulous the workshops were.”*



*“I wanted to tell you again just how great your infection control week sessions were. My staff are very vocal, and they’ve been telling me all day that those were the perfect kind of training sessions: easy, simple, fun, interactive, and they really did learn a lot.”*

The workshop was again extremely well received.

### “Let’s Go Viral!” Educational Game Kit

With success of the 2012 version of the game, PICNet’s next challenge was to figure out how to reach a wider audience with the workshop. The number of care facilities that could be visited was limited by staff time and geography; and although the Infection Control Week visits were spread out over two months in 2013, still only thirteen facilities across the Lower Mainland could be accommodated. In order to reach more healthcare facilities and make the workshop available to the whole province, PICNet staff decided to “package up” the game and make it available as a kit that could be ordered from PICNet or downloaded from the website.

PICNet staff coordinated the printing and cutting of all the game cards and instruction booklets, ordering other items from vendors, creating promotional materials that the facilities could use, and then boxing up all the items. An online order form was created, and the kit was announced to the Community of Practice. In addition, PICNet staff created an instructional video that could be viewed online. The first run of 50 kits sold out in one month, and PICNet had to undertake a second production run to meet the demand.



The “Let’s Go Viral” workshop in-a-box

### IC Week Video Contest

PICNet also hosted a video contest for Infection Control Week. Healthcare workers were invited to submit videos promoting infection control in any way. Several entries were received, and the grand prize was awarded to Heritage Village Residential Care/Assisted Living in Chilliwack for their music video “Hey Mickey”. All the entries can be viewed on the [PICNet website](#).



### PICNet Infection Control Calendar

In March 2014, PICNet published its fifth annual infection control educational calendar. Demand for the PICNet calendars has been steadily growing, and requests for this year’s calendar were received from Canada, the United States, Saudi Arabia, and India.



I love the calendar! I bought 10 for my Infection Prevention and Control Team to hand out as gifts. They are useful in getting specific messages across, and I am thrilled that they are now available in posters.

They are great teaching tools and talking points. Keep up the great work!

I love the photos and themes throughout the year. It was a great learning experience to know what other groups are doing regarding infection control in BC. I also appreciate links and learning more of other people's success stories. I love your calendars. Thanks!

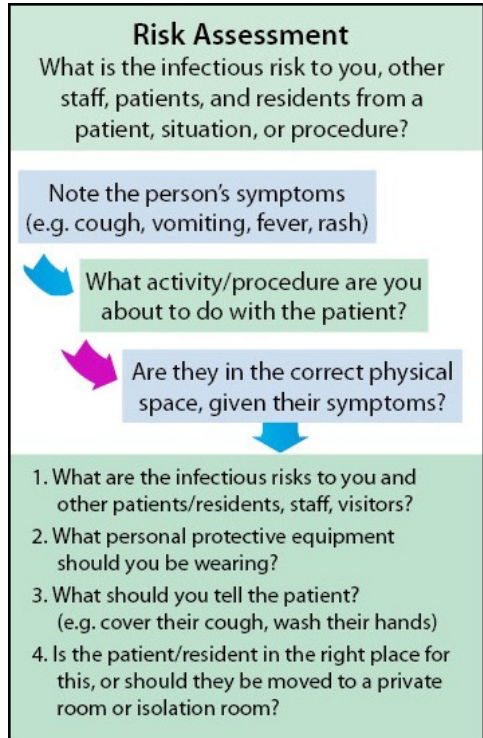
I think the calendar is super. I think the messages are cleverly put together and make good points with some humour, which captures our attention. Keep up the good work!



## Infection Control Lanyard Cards

In November 2013, PICNet produced infection control quick-reference cards that can be worn on lanyards. There were two versions of the card: one with Risk Assessment and Routine Practices, and one with Routine Practices and Additional Precautions. The cards provide information on how to perform a risk assessment, and on what personal protective equipment (PPE) and further actions to take depending on patients’ symptoms.

Members of the Community of Practice were able to order cards via the PICNet website.



Symptom(s)	PPE	Other	Routine Practices
<ul style="list-style-type: none"> <li>• Nausea/vomiting/diarrhea</li> </ul>	<ul style="list-style-type: none"> <li>• Gloves and gown</li> <li>• (Consider mask)</li> </ul>	<ul style="list-style-type: none"> <li>• Private toilet/commode</li> <li>• Patient hand hygiene</li> </ul>	
<ul style="list-style-type: none"> <li>• Itchy rash</li> <li>• Open wound or skin patches</li> </ul>	<ul style="list-style-type: none"> <li>• Gloves</li> <li>• Gown if close contact</li> </ul>	<ul style="list-style-type: none"> <li>• Patient hand hygiene</li> <li>• Keep separate from others</li> </ul>	
<ul style="list-style-type: none"> <li>• Coughing with or without fever</li> </ul>	<ul style="list-style-type: none"> <li>• Surgical mask</li> <li>• Gloves</li> </ul>	<ul style="list-style-type: none"> <li>• 2m separation from others</li> <li>• Private room (if possible)</li> <li>• Teach cough etiquette</li> </ul>	
<ul style="list-style-type: none"> <li>• Fever with rash</li> </ul>	<ul style="list-style-type: none"> <li>• N95 respirator</li> <li>• Gloves</li> <li>• Gown</li> </ul>	<ul style="list-style-type: none"> <li>• Private room</li> <li>• Negative pressure room if possible</li> </ul>	

Provincial Infection Control network of BC [www.picnet.ca](http://www.picnet.ca)

	Contact	Droplet	Airborne	Additional Precautions
<b>Precautions</b>	<ul style="list-style-type: none"> <li>• gloves</li> <li>• gown</li> </ul>	<ul style="list-style-type: none"> <li>• gloves</li> <li>• gown</li> <li>• surgical mask</li> <li>• eye protection</li> </ul>	<ul style="list-style-type: none"> <li>• N95 respirator</li> </ul>	
<b>Common Infections</b>	<ul style="list-style-type: none"> <li>• Gastro infections</li> <li>• C. difficile</li> <li>• MRSA</li> <li>• Scabies</li> </ul>	<ul style="list-style-type: none"> <li>• Influenza</li> <li>• Common cold</li> <li>• Whooping cough</li> <li>• Bacterial meningitis</li> </ul>	<ul style="list-style-type: none"> <li>• Tuberculosis</li> <li>• Measles</li> <li>• Chicken pox</li> <li>• Rubella</li> </ul>	
<b>Examples of symptoms</b>	<ul style="list-style-type: none"> <li>• Diarrhea or vomiting</li> <li>• Open wounds</li> <li>• Patches of open skin</li> </ul>	<ul style="list-style-type: none"> <li>• Coughing</li> <li>• Sneezing</li> </ul>	<ul style="list-style-type: none"> <li>• Chronic cough</li> <li>• Fever with unidentified rash</li> </ul>	

## PICNet Website

The PICNet website continues to be modified to keep up to date with current technologies, provincial legislation, and to best meet the needs of the CoP.

In September 2013, the PICNet website moved to a new web design and hosting company. In March 2014, the website was migrated to Canadian Migration to Canadian server and SSL security was added to the site. Further updates are planned for 2014/2015.



## Google Analytics Project

A not-for-profit collective called The Analysis Exchange pairs not-for-profit organizations with Google Analytics experts and students to create a learning/partnership environment where not-for-profits can propose an analytics project, and a mentor can work with a student on the project. Custom reporting was needed by PICNet, so the Communications Coordinator worked with a Google Analytics mentor and student to specify the reporting requirements, review the work undertaken, and provide feedback for the student's benefit. The project was a success, resulting in custom reporting and dashboards for PICNet, as well as work experience for the student.

Analytics allow website managers to find out more about our website users' behaviour, which in turn allows us to better tailor the website to meet their needs. Examples of some of the reporting metrics are shown below.

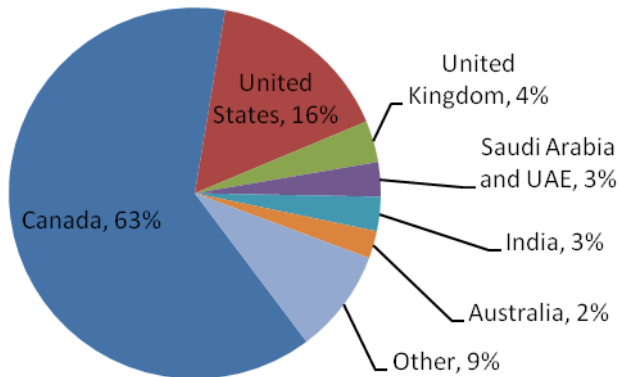
### Overview website statistics for the fiscal year 2013/2014



The above statistics show that in one year, the PICNet website received more than 96,000 page views. Further analysis tells us that in 2013-2014, the PICNet website attracted a great deal of new visitors: 60.4% were new visitors.

**PICNet website traffic by country and region**

Our international reach expanded, with more than 37% of traffic coming from outside Canada.



Analytics allow us to drill down by province and region. Within Canada, 71% of the web traffic is from BC.

We can compare user behaviour across different parameters: for example, the top **file downloads** from all users are PICNet’s posters and other printable resources. By comparison, within BC there was fairly equal demand for surveillance reports, toolkits, evidence based practice guidelines, and downloadable resources for Infection Control Week. If we analyze the number of **page views** by BC users, we then see that the demand for educational resources is the greatest:

**Number of page views by BC Users**

Web page	Number of views	% of views
Education Modules	5,228	26%
Practice Guidelines	2,559	13%
PICNet Educational Conference 2013	2,080	10%
Webber Training	1,967	10%
(search)	1,394	7%
Infection Control Posters	1,320	6%
PICNet Educational Conference 2014	1,158	6%
Toolkits and Resources	1,092	5%
Infection Control Resources and Activities	988	5%
IC Week Video Contest	942	5%
Education and Training	900	4%
Let's Go Viral game kit	764	4%

This information helps PICNet to set priorities in terms of providing web-based resources to the CoP.

## Partnerships and Participation in Provincial and National Groups

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### Provincial Hand Hygiene Working Group

PICNet staff continue to play important roles in the Provincial Hand Hygiene Working Group (PHHWG) and its sub-committees. PICNet supports the collection, analysis and public reporting of provincial hand cleaning compliance rates in acute care facilities. In 2014, data collection will begin for long-term care facilities, with public reporting commencing in the fiscal year 2015/16. PICNet has been supporting the development of mechanisms to collect this data.

During 2013/2014 the PHHWG completed the second phase of a WorkSafeBC-sponsored project to assess the impact of a mandated provincial hand hygiene program on healthcare worker compliance, health and perception of safety climate. This study was led by PICNet's Co-Director, Dr. Elizabeth Bryce, and several PICNet staff were actively involved in the data collection, analysis, and reporting. Part of the results from this study were published in the March 2014 issue of the American Journal of Infection Prevention and Control.

Finally, in 2013 PICNet partnered with a sub-committee of the PHHWG and member of the Patient Voices Network to begin developing a patient-focused hand hygiene program.

### Infection Prevention and Control-Canada

Bruce Gamage, Network Manager, completed the first year of his term as president of Infection Prevention and Control-Canada (IPAC-Canada, formerly known as the Community and Hospital Infection Control Association of Canada or CHICA-Canada), the national infection prevention and control association. In this role, Bruce chaired the IPAC-Canada board of directors and represented Canada at international conferences in Fort Lauderdale, Buenos Aires, and Malta. Bruce's terms as president continues until June 2015. Bruce also represents IPAC-Canada on the Certification Board of Infection Prevention and Control that provides international certification for infection prevention and control professionals.

Joanne Archer, PICNet Education and Practices Coordinator, is currently the scientific co-chair for the 2015 IPAC-Canada national conference, and will be the 2016 scientific chair for the IPAC-Canada national conference.

### First Nations Health Authority

The First Nations Health Authority (FNHA) was established in 2013. PICNet's Education and Practices Coordinator visited three communities to provide consultation to their health nurses and gave a presentation to the nurses in each community. She also provided formal mentorship to one of their nurse leaders in completing the UBC infection control certificate.

A member of FNHA now sits on PICNet's Scientific and Operations Advisory Committee.

## Committees, Working Groups, and Conferences

PICNet staff attended at several conferences throughout the year, and also have representation on many local, provincial, and national committees.

### Committees and Working Groups

Provincial Antibiotic Stewardship Clinical Expert Group (PICNet Rep)	Network Manager
Pandemic Stock Management Provincial Working Group (PICNet Rep)	
Provincial Hand Hygiene Working Group (PICNet Rep)	
IPAC-Canada Board of Directors (President 2013/2014)	
Certification Board of Infection Control (Canadian Representative on Board)	
Editorial Board for the Canadian Journal of Infection Control	
Standing member of the Northern Health Authority Regional Infection Control Committee	Education and Best Practices Coordinator
Mentor for student completing University of BC infection control course	
Member of BC Provincial Tuberculosis nurse advisory committee	
Member Provincial Pandemic Stockpile management working group	
Co-chair IPAC national conference scientific committee	
PICNet Surveillance Steering Committee (Co-Chair)	Surveillance Epidemiologist
PHHWG Evaluation Sub-Committee	
IPAC Surveillance and Epidemiology Interest Group	
PHHWG Communications Sub-Working Group	Communications Coordinator
Health Quality Network Communications Committee	

### Conferences Attended

CHICA 2013 (June 2013) – Ottawa	Education and Best Practices Coordinator
Association for Professionals in Infection Control and Epidemiology (APIC) 2013 (June 2013) – Ft. Lauderdale	Network Manager
International Federation of Infection Control (IFIC) (October 2013) – Buenos Aires	
International Federation of Infection Control (IFIC) (March 2013) – Malta	
WorkSafeBC Health Care Professional Conference – June 2013	Communications Coordinator

## Appendices

### Appendix A: PICNet Priority Projects – Annual Deliverables 2014/2015

Project Priority	Deliverable	Due Date
1. Develop provincial strategy for the surveillance of CPO	Case definition, outbreak definition, surveillance criteria and process, patient transfer communication protocol	April 30, 2014
2. Expand the provincial surveillance program to include CPO	Begin data submission for incidence of CPO in BC by the health authorities to PICNet	September 30 2014
3. Evaluation of the impact of Vancomycin Resistant Enterococci (VRE) Policy Changes in some health authorities	A report that evaluates the impact of VRE policy changes on VRE rates and specific patient outcomes	March 31, 2015
4. Expand current CDI Toolkit	Expand the current CDI Toolkit to include an outbreak definition for all facilities and specific recommendations for residential care settings.	March 31, 2015
5. Practices for reprocessing reusable foot care instruments	Practice recommendations for reprocessing of reusable foot care instruments	January 30, 2015
6. Home and community care guidelines	Updated guideline approved and posted to PICNet website	June 30, 2014
7. Enhanced surveillance reports for CDI and MRSA	Enhanced surveillance report for CDI and MRSA that include value-added trends of both infection and complication rates over time.	March 31, 2015
8. Expand provincial surveillance program to include central line associated bloodstream infections (CLABSI) in the intensive care unit	Protocol for provincial surveillance of CLABSI in the intensive care unit	March 31, 2015

## Appendix B: Glossary of Acronyms

APIC	Association for Professionals in Infection Control and Epidemiology
BC	British Columbia
BCCDC	British Columbia Centre for Disease Control
BCPHMRL	BC Public Health Microbiology and Reference Laboratory
CCM	Clinical Care Management
CDI	<i>Clostridium difficile</i> infection
CLABSI	central line-associated bloodstream infections
CoP	Community of Practice
CPO	Carbapenemase Producing Organisms
FNIH	First Nations and Inuit Health
HAI	healthcare-associated infection
ICP	infection control professional/practitioner
IFIC	International Federation of Infection Control
IPAC-Canada	Infection Prevention and Control Canada (formerly CHICA [Community and Hospital Infection Control Association–Canada])
IPACCC	Integrated Primary Acute and Community Care Committee
MoH	Ministry of Health
MRSA	Methicillin-resistant <i>Staphylococcus aureus</i>
PACE	Provincial Antimicrobial Stewardship Clinical Expert Group
PHHWG	Provincial Hand Hygiene Working Group
PHSA	Provincial Health Services Authority
PICNet	Provincial Infection Control Network of British Columbia
PPE	personal protective equipment
SOAC	Scientific Operations Advisory Committee
SSC	Surveillance Steering Committee

## Appendix C: PICNet Committee Membership

PICNet would like to acknowledge and thank each health authority, as well as the various professional organizations, for their support and contributions to the PICNet Advisory Committee. It is the collective expertise and commitment of our partners within these organizations that truly drives PICNet and it is with much appreciation that we recognize this.

### Scientific and Operations Advisory Committee

Capacity	Representative of	Member	Job Title
Operations	Interior Health	Janice DeHeer (Chair)	Corporate Director, Infection Prevention and Control
	Fraser Health	Sandra Daniels	Managing Consultant, Infection Prevention and Control
	Island Health	Valerie Wood	Director Infection Prevention and Control
	Ministry of Health	Brian Sagar	Director Patient Safety, MoH
	Northern Health	Deanna Hembroff	Regional Manager Infection Prevention and Control
	PHSA	Dr. Eva Thomas	Corporate Director Infection Prevention and Control
	Vancouver Coastal Health	Linda Dempster	Executive Director Quality, Patient Safety and Infection Control
Scientific	Hospital Epidemiologist	Dr. Elisa Lloyd-Smith	Surveillance Epidemiologist, Providence Healthcare
	Infection Preventionist	Robyn Hunter	Coordinator, Infection Prevention and Control, PHSA
	Infection Preventionist	Kelsey Breault	Infection Control Practitioner, NHA
	Infectious Diseases	Wayne Ghesquiere	Section Chief of Infectious Disease, VIHA
	Medical Microbiologist	Dr. Diane Roscoe	Division Head, Medical Microbiology and Infection Control, VCH
	Medical Microbiologist	Dr. Benjamin Mack	Medical Microbiologist, FHA
	Occupational Health and Safety	Dave Keen	Occupational Health Director, FHA
	Public Health	Dr. Bonnie Henry	Medical Director, Communicable Disease Prevention and Control Services, BCCDC



Capacity	Representative of	Member	Job Title
Non-Voting Members	PICNet	Dr. Judith Isaac-Renton	PICNet Co-Director; Public Health Laboratory Director, Laboratory Services, BCCDC
	PICNet	Dr. Elizabeth Bryce	PICNet Co-Director; Regional Medical Director of Infection Control and Medical Microbiology, Vancouver Coastal Health; Clinical Professor, Department of Pathology and Laboratory Medicine, University of British Columbia
	PICNet	Bruce Gamage	Network Manager
	PICNet	Joanne Archer	Education and Best Practices Coordinator

### Surveillance Steering Committee

The Surveillance Steering Committee (SSC) provides guidance to PICNet’s HAI surveillance programs, and assists PICNet in the implementation of standardized surveillance practices among participating parties. This Committee also assists PICNet in processes related to the provincial collection of summary data, and reporting of trends over time.

PICNet would like to thank the Surveillance Steering Committee for their hard work this past year.

Member	Affiliation
Dr. Guanghong Han (Co-Chair)	PICNet
Bruce Gamage (Co-Chair)	PICNet
Jun Chen Collet	Provincial Health Services Authority
Tara Donovan	Fraser Health Authority
Leslie Forrester	Vancouver Coastal Health Authority
Deanna Hembroff	Northern Health Authority
Dr. Bonnie Henry	Provincial Health Services Authority
Dr. Linda Hoang	Provincial Health Services Authority
Anthony Leamon	Vancouver Island Health Authority
Dr. Elisa Lloyd-Smith	Providence Health Care
Dr. Julie Mori	Interior Health Authority

## Guidelines Steering Committee

The Guidelines Steering Committee (GSC) ensures that PICNet’s guidelines are based on the most appropriate methodology and the best available research. The GSC provides direction and assistance to Guideline Working Groups by determining the most appropriate use of research.

Responsibilities of the GSC are to:

- review guideline proposals to identify priority guidelines for development
- review appraisals of existing guidelines created by PICNet
- define the scope and purpose of guidelines for development
- participate in the initial steps of literature review and refine key questions
- advise on membership selection for Guideline Working Groups
- review the progress of guidelines in development to ensure transparency and due diligence in use of evidence and the guideline development process
- review completed guidelines for appropriate use of evidence and the GWG responses to comments received from the Community of Practice during consultation.

<b>Member</b>	<b>Affiliation</b>
Joanne Archer (Chair)	PICNet
Brian Sagar	Ministry of Health
Linda Dempster	Vancouver Coastal Health
Dr. George Astrakianakis	University of British Columbia
Janice de Heer	Interior Health Authority
Felicia Laing	Vancouver Coastal Health

## Education Steering Committee

The PICNet Education Steering Committee (ESC) provides guidance to PICNet’s educational projects and programs, including advice on the development of tools and resources that support the education and professional development of members of our Community of Practice. The ESC also assists in selecting the content and scope of PICNet’s educational conferences, and in the evaluation of PICNet educational projects and programs.

<b>Member</b>	<b>Affiliation</b>
Joanne Archer (Chair)	PICNet
Carolyn Bouchard	Northern Health Authority
Ted Pincock	Providence Health Care
Isobel McDonald	BC First Nations Inuit Health
Kimberly Mallory	Provincial Health Services Agency
Hugo Monge	Vancouver Coastal Health
Samira Kermanchi	Fraser Health Authority

## Appendix D: 2013 Education Resource Fund Recipients

Name	Job Title	Organization	Health Authority	Activity
Adby Alberta	Resident Care Manager	Selkirk Place	VIHA	PICNet 2014
Roxanne Fitzsimmons	Infection Prevention Nurse	Prince Rupert Regional Hospital	NHA	PICNet 2014
Mary McNaughton	ICP	Providence Health Care	VCHA	IPAC-Canada 2014
Andrea Neil	ICP	Interior Health Infection Prevention and Control	IHA	IPAC-Canada 2014
Susan Sinclair	ICP	Campbell River Hospital	VIHA	PICNet 2014
Judy Tearoe	ICP	BC Cancer Agency (Kelowna)	PHSA	IPAC-Canada 2014

**PICNet**  
PROVINCIAL INFECTION CONTROL  
NETWORK OF BRITISH COLUMBIA  

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A program of the Provincial Health Services Authority

