

Media Kit

The Provincial Infection Control Network of BC (PICNet)

www.picnetbc.ca

Who we are

Established in 2005 by the British Columbia Ministry of Health, PICNet is a provincially supported infection control knowledge collaborative, providing guidance and advice on healthcare associated infection prevention and control in BC. Focused primarily on surveillance, evidence-based practice, and education and training, PICNet encourages and facilitates multidisciplinary collaboration, creating opportunities for healthcare professionals involved in infection control to work together to identify priorities and solutions.

Definition of Healthcare Associated Infections

Healthcare associated infections are defined as any disease or pathology related to the presence of an infectious agent or its products as a result of exposure to healthcare facilities or healthcare procedures. Healthcare facilities or healthcare procedures include all settings across the continuum of care such as hospitals, residential care, mental health, public health, home care and community care.

“HAI” is sometimes used as a short form for “healthcare associated infections” and shouldn’t be confused with the same acronym for “hospital-acquired infections”.

More about PICNet

Reporting to the Ministry of Health PICNet brings together healthcare professionals involved in infection control from across the continuum of care across BC, including:

- Epidemiologists
- Infection Control Professionals
- Infectious Disease Physicians
- Medical Microbiologists
- Medical Health Officers
- Public Health Nurses
- Environmental Health Officers
- Occupational Health Nurses
- Occupational Health Physicians
- A range of other infection control specialists

Providing Leadership and Guidance

Through its province-wide network of healthcare professionals, PICNet is able to tap into existing knowledge and expertise from across disciplines and healthcare settings, and to bring this knowledge together in a way that provides leadership and guidance to the wider community of practice in infection prevention and control. PICNet does this by:

- Providing advice on relevant policy and issues
- Providing knowledge to guide investigation and/or practice
- Supporting and coordinating initiatives that pull common interests together
- Sharing information
- Advocating on behalf of the community of practice for appropriate and sustainable resources
- Assisting and participating in surveillance activities

A Network Model

PICNet's network model emphasizes participation, collegiality, and trust. The model fosters and strengthens professional relationships and enables the infection control community of practice to benefit from the knowledge and expertise of others across healthcare settings in BC. As a result, PICNet's initiatives and best practice guidelines are developed and owned by healthcare professionals in the province, combining rigorous evidence-based standards with a hands-on knowledge of what is needed within healthcare settings to achieve the best possible results for infection prevention and control.

PICNet's Mission

To maximize coordination and integration of activities related to healthcare associated infection, prevention, surveillance and control for the province of British Columbia, using an evidence-based approach.

Healthcare associated infections are defined as those infections that occur as a result of exposure to health care facilities or procedures across all healthcare settings.

Reports and Recent Developments from PICNet

Please see the home page of www.picnetbc.ca for links to full reports and guidelines.

Using an evidence-based approach, PICNet's committees and working groups have identified some of the more common and potentially severe healthcare associated infections in the province as priorities for developing or updating best practices guidelines, and recommended programs. These infections are also common in other health regions across Canada and beyond.

- **Outbreaks of respiratory illness** caused by pathogens such as Influenza virus, Parainfluenza virus, Respiratory Syncytial virus (RSV), Coronavirus, Rhinovirus and Adenovirus, and a number of bacterial pathogens. They occur every year in healthcare facilities and the community. In Canada, as many as 4000 to 8000 annual deaths are attributed to these infections. The majority of these deaths occur in vulnerable populations such as the elderly and those with chronic health conditions.
- **Surgical site infections (SSI)** develop in 2 to 5 percent of Canadian patients following surgery and add an average additional cost of \$3700 per SSI to the healthcare system. Patients with SSI have a five times greater chance of re-admission and are twice as likely to die as a result of this potentially avoidable complication.
- ***Clostridium difficile* associated disease (CDAD).** *C. difficile* is a bacterium that creates toxins and swelling in the intestines and can result in severe diarrhea and dehydration. *C. difficile* is the most

frequent cause of hospital acquired diarrhea in industrialized countries and has been responsible for a number of large outbreaks in hospitals, including several Canadian hospitals outside of BC.

- **Antibiotic resistant organisms** such as MRSA (Methicillin resistant *Staphylococcus aureus*) and VRE (Vancomycin Resistant Enterococci) are a serious and increasing problem. They affect everyone by making common infections more difficult to treat, extending hospitalization and costing the Canadian health system hundreds of millions of dollars per year. One study done in BC in 2000 reported costs of \$10,845 per MRSA and \$20,045 per VRE case.

Respiratory Illness Working Group

In June 2005, stakeholders recommended that PICNet set a priority focus on establishing guidelines for the prevention and control of respiratory infections (RI) in all health settings. Stakeholders wanted to avoid duplication, maximize the use of infection control resources, and minimize inconsistencies in the recommendations made by regional guidelines. The goal was therefore to develop collaborative, standardized, research-based guidelines that exemplify best practices in British Columbia.

The Respiratory Illness Working Group has completed the final edits and formatting for PICNet's new Respiratory Outbreak Prevention and Control Guidelines. In order to obtain feedback from expert groups such as WorkSafe BC and the Provincial Communicable Disease Policy Committee, as well as from the PICNet community of practice across British Columbia, the guidelines are now posted on PICNet's Web site.

The Surgical Site Infection Surveillance (SSI) Working Group

This working group was formed in the winter of 2005-06, with funding in part by the Patient Safety Task Force. The mandate of the SSI working group has been to provide a framework for a standard method of surgical site infection surveillance and reporting that can be applied according to the needs of acute care hospitals in BC.

The SSI Working Group has completed a Strategic Plan and Options Paper Report that includes a proposal for a Surveillance of Healthcare Associated Infection Program for BC (SHAIP-BC). The proposed program would address standards for surveillance for surgical site infections and could later be applied to all healthcare associated infections. PICNet has forwarded the report to the Ministry of Health for review.

C. difficile Surveillance Working Group

This working group was established to maintain and update the *Clostridium difficile* associated disease (CDAD) surveillance protocol developed by the previous Ad Hoc CDAD working group and to coordinate discussion and consensus on its implementation among the health authorities. This working group will also develop a process and data sharing agreements for provincial collection of summary data and reporting of trends over time.

Antibiotic Resistant Organisms Working Group

PICNet has formed a new working group to revise the current BC Centre for Disease Control Antibiotic Resistant Organisms (ARO) Guidelines. This working group will update the current guidelines and also enhance them to include sections on hemodialysis, occupational health issues and any other areas the working group members deem necessary.

Needs Assessment Working Group

PICNet's 2006 "Assessment of Infection Control Activities Across the Province of British Columbia" identified three key priority areas for intervention: surveillance/best practices; staffing; and education and training.

Building on the work of a Needs Assessment Working Group meeting in November 2006, PICNet has been developing a follow-up document. The document outlines the requirements for a successful infection prevention and control program, including core elements of the program, core competencies for designated infection control program staff and all healthcare workers, roles and responsibilities for personnel involved in infection prevention and control, staffing ratios and staffing recommendations.

Other PICNet Initiatives:

- **PICNet's Stakeholder Summits and Conferences:** As a networking collaborative, it is imperative that members of PICNet's community of practice be able to come together from across the province to learn from each other the full scope of PICNet's many projects and activities, and also to help set direction for future endeavours. In its formative stages, PICNet held three Stakeholder Summits, and preparations are currently underway for PICNet's 2007 Educational Conference, May 3-4 2007, which will include interactive educational workshops on surveillance and construction.
- **Webber Training Teleclasses:** Since February 2006, PICNet has been hosting educational classes offered by Webber Training. These classes address topics of interest to infection control professionals and other healthcare professionals worldwide, and allow for ongoing professional development and training within the infection prevention and control community of practice in BC.
- **Education and Training:** Once a year, PICNet Working Groups members elect two peers within each Working Group, whom they recognize as making a significant contribution towards PICNet activities in that year. With an aim of enhancing expertise in the province, the elected peers receive a stipend to attend an infection prevention and control educational conference or to purchase educational and training material for their own facilities or practices.
- **Research Initiatives:** PICNet actively pursues research opportunities on an ongoing basis, supporting and participating in research initiatives where relevant. Currently, PICNet is involved with proposals with provincial, national and international partners.

Overview of PICNet Committees

PICNet creates opportunities for infection control specialists to work together to identify priorities and solutions. The health authorities enable these professionals to share their time and expertise to participate in PICNet Working Groups and Committees.

Together these professionals provide recommendations to support a consistent, effective approach to healthcare associated infection prevention, control and surveillance. Provincially focused, PICNet also contributes to national and international initiatives aimed at improving health outcomes.

Steering Committee

The Provincial Infection Control Network's Steering Committee members represent areas of expertise and experience, rather than specific institutions or geographic areas. This includes professional expertise as well as knowledge and experience in the varied physical and institutional environments across British Columbia.

The purpose of the PICNet Steering Committee is to provide input and feedback to the PICNet Management Office with regards to priorities for establishing a sustainable province-wide network for healthcare associated infection prevention, surveillance and control.

The current Steering Committee is co-chaired by representatives from the Provincial Health Services Authority and the Vancouver Coastal Health Authority. Steering Committee Members are appointed for three year terms. Membership includes representatives from the following areas:

- Health Authority Infection Control Officers/Medical Microbiologists
- Public Health

- Infectious Disease Specialists
- Infection Control Practitioners/Managers
- British Columbia Centre for Disease Control Epidemiology
- Occupational Health and Safety
- British Columbia Ministry of Health
- Public Health Agency of Canada
- PICNet Coordinator

Project Priority and Planning Committee

The purpose of the Project Priority and Planning Committee is to “triage” all project requests on behalf of the PICNet Steering Committee and oversee the operations of the approved Working Groups. This includes ensuring that all Working Groups are formed/operated and/or disbanded in accordance with PICNet’s policies and procedures.

Communications Leadership Group

The purpose of the Communications Leadership Group is to advise and oversee communications strategies to enhance infection prevention, surveillance and control in British Columbia. With emphasis on surveillance, education/training and practice across the continuum of care, the Communications Leadership Group works with the PICNet Management Office to provide leadership and guide communications policy development.

Contact

Shalyma Cambridge, Office and Communications Coordinator
Provincial Infection Control Network of BC
604-707-2667
picnet@phsa.ca
www.picnetbc.ca