



**Summary of Findings from the  
Needs Assessment Consultation informing the  
Revision of the Public Health Agency of Canada's 2002  
*Prevention and Control of Occupational Infections in Health Care*  
Guideline**

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## Introduction

The Public Health Agency of Canada (PHAC) develops evidence-based infection prevention and control (IPC) guidelines. These guidelines support relevant organizations and health professionals in developing, implementing and evaluating IPC policies, procedures and programs that improve the quality and safety of health care and patient outcomes. Recommendations provided in these guidelines complement provincial and territorial public health efforts in monitoring, preventing, and controlling healthcare-associated infections.

PHAC has initiated the process to review and revise the guideline *Prevention and Control of Occupational Infections in Health Care* originally published in 2002. A working group of experts in the fields of IPC and occupational health has been established to provide PHAC with expert advice and guidance throughout the revision process. As part of the revision process, and in consultation with the Prevention and Control of Occupational Infections in Health Care (PCOIHC) Guideline Revision Working Group, PHAC conducted a needs assessment to gather input primarily from practitioners in the fields of IPC and Occupational Health on emerging needs and gaps in IPC guidance specific to the prevention and control of occupational infections in Canadian healthcare settings.

## Overview of Engagement Process

The purpose of the needs assessment was to assess the usefulness of the 2002 guideline, gain a better understanding of key resources currently being used to inform evidence-based practices and gather input to inform the scope and content of a revised guideline from practitioners working in relevant fields of practice across Canada.

The invitation to participate in the needs assessment was disseminated electronically to the [Communicable and Infectious Disease Steering Committee](#) (CIDSC) as well as national and provincial/territorial groups and associations involved in the prevention and control of occupational infections in healthcare, primarily in the fields of Infection Prevention and Control, Occupational Medicine and Occupational Health Nursing. The invitation to participate included a request for organizations to share the needs assessment questionnaire within their membership and/or networks.

The first phase of the needs assessment was conducted from June 23 to July 27, 2017 and 108 completed questionnaires was received. Preliminary analysis of the feedback received indicated the majority of respondents worked in the field of IPC and far fewer from Occupational Health. The majority of participants also identified Ontario as the province in which they currently worked thus there was limited representation from other areas across the country.

Upon discussion of the preliminary results with the PCOIHC Guideline Revision Working Group it was decided to re-open the needs assessment. The objectives of the second phase were to increase responses from practitioners in the field of occupational health; to obtain input from practitioners in other areas of the country; and expand the consultation to include national dental professional and home care associations based on the preliminary results and subsequent discussion with the PCOIHC Guideline Revision Working Group.

The second phase of the needs assessment was conducted from November 23, 2017 to January 12, 2018. An additional 57 completed questionnaires were received from across the country with the majority identifying occupational health nurse as current occupation.

Over phases I and II combined, 165 completed questionnaires was received.

## Summary of Feedback Received

The main feedback indicated:

- The 2002 guideline was used by 45% of participants within the last two years, with most who did not use it indicating the information was outdated or they had difficulty finding it on the website.
- Other resources used were mainly grey literature from a Canadian or American context. The main gaps in other existing resources utilized indicated the information was:
  - outdated or unclear;
  - lacked Canadian context;
  - was specifically targeted to hospital settings; or
  - provided limited information on occupational health considerations relating to IPC.
- A majority of participants indicated they agree with the inclusion of all IPC components presented, the inclusion of pathogen-specific guidance, and pathogen-specific infection prevention and control components for all options proposed in the questionnaire.
- A need was identified for guidance on the prevention and control of occupational infections in healthcare outside of hospital settings (e.g. home care, dental offices). It is anticipated that any setting where healthcare is provided by healthcare workers will be included in the scope of the revised guideline in alignment with other PHAC IPC guidance.
- A need was also identified for role clarification between Occupational Health and IPC. Participants indicated a lack of clarity regarding the roles of Occupational Health and IPC for components where there is an overlap in services, such as training on the use of personal protective equipment and outbreak management. It was suggested that a section of the guideline could be developed to help clarify roles and responsibilities of each respective area of practice to encourage collaboration between Occupational Health and IPC programs.
- Novel and emerging respiratory and non-respiratory infectious diseases (i.e. novel influenza viruses, Middle East Respiratory Syndrome - Corona Virus and Viral Hemorrhagic Fevers such as Ebola) were also mentioned frequently in written feedback. While PHAC acknowledges its role in preparedness and response activities for novel and emerging pathogens (respiratory and non-respiratory), IPC guidance relating to novel pathogens is typically addressed through the production of timely interim guidance and for that reason will be outside of the scope of this guideline.
- Written feedback also noted the need for guidance in relation to the prevention and control of antibiotic resistant organisms, such as carbapenem resistant gram negative bacilli. PHAC is currently in the process of revising its 2010 IPC guideline [Infection Prevention and Control](#)

[Measures for Healthcare Workers in All Healthcare Settings-Carbapenem-resistant Gram-negative Bacilli](#). Occupational health considerations of antibiotic resistant organisms, such as carbapenem resistant gram negative bacilli, will be included in that revision and thus will be outside of the scope of this guideline.

## Next Steps

Feedback from stakeholders across the country re-iterated the need for an updated national, evidence-based guideline with clear infection control recommendations to support the prevention and control of occupational infections in Canadian healthcare settings.

The next step will be to initiate the revision of an overview section outlining the core infection control components of an occupational health program followed by pathogen specific updates. Several factors will help guide the order of pathogen review which include consideration of feedback received from the needs assessment, areas where there have been significant changes in practice or new evidence since 2002 and also where there may be opportunity to collaborate with other areas of PHAC working on pathogen specific public health guidance (e.g. within the Centre for Immunization and Respiratory Infectious Diseases for vaccine preventable diseases of occupational significance).

We would like to take this opportunity to thank you and your organization for contributions made as part of this needs assessment. The revised draft guideline will be shared with stakeholders, including those who were invited to participate in the needs assessment, for review and feedback at a later stage in the guideline revision process. Feedback received as part of that review process will be taken into consideration by the PCOIHG Guideline Revision Working Group and revisions made, where appropriate and applicable, prior to the release of a final revised guideline.

Should you be interested in learning more about this work, please email the Infection Prevention and Control Expert Working Group Secretariat at [phac.ipc.secretariat-pci.aspc@canada.ca](mailto:phac.ipc.secretariat-pci.aspc@canada.ca) and your inquiry will be directed to a member of PHAC's Healthcare Associated Infections and Infection Prevention and Control Section.