



There are two Alberta Health IPC standards that set out detailed requirements for integration of IPC practices in healthcare settings – Alberta Health [Standards for Infection Prevention and Control – Accountability and Reporting \(2011\)](#) and Alberta Health [Reusable & Single-Use Medical Devices Standards \(2019\)](#). Monitoring compliance with these requirements are described with a focus on actions taken within AHS.

IPC accountability and reporting standard

The Alberta Health [Standards for Infection Prevention and Control – Accountability and Reporting \(2011\)](#) provides clarity in the roles and responsibilities of key positions in AHS for implementing IPC standards, monitoring compliance with these standards, and responding to incidents of noncompliance. These actions are essential for patient, healthcare provider, and public safety.

Managing IPC concerns

The Alberta Health [Standards for Infection Prevention and Control – Accountability and Reporting \(2011\)](#) set out requirements for the appointment and responsibilities of the named IPC Executive. The named IPC Executive is Dr. Oscar Larios, Interim Senior Medical Director, IPC, and one of the key responsibilities of this role is to manage and report IPC concerns. An IPC concern is defined in the standards as:

“A condition or circumstance involving IPC that is or might become injurious or dangerous to the public health or that might hinder in any manner the prevention or suppression of disease. In this regard an IPC concern may include, but is not restricted to, an instance where the conditions of a Healthcare Facility or Setting, a healthcare practice, an infectious disease or an inadequate infection control measure pose a risk to public health.”

Upon receiving report of an IPC concern, the IPC Executive or, in the case of an IPC concern requiring action under the [Province of Alberta \(RSA 2021\) Public Health Act](#), the Senior Medical Officer of Health (AHS), shall: fully investigate the report; conduct a risk assessment in a timely manner and in accordance with any protocol established by the Chief Medical Officer of Health (Alberta Health); promptly report the findings of the risk assessment to the Chief Medical Officer of Health, as required; and take all reasonable steps to address the incident and protect patients, healthcare providers, and the public.

In 2022/2023, there were 24 IPC concerns reported. These concerns excluded gastrointestinal and viral respiratory illness outbreaks which are reported through other mechanisms. Reports included other potential communicable disease exposures, medical device related adverse events, and facility infrastructure issues across all zones.

Risk assessment panel

The AHS and Covenant Health Risk Assessment Panel assesses public health and IPC concerns related to significant breaches in healthcare facilities or the community that have a potential impact on patient safety. Specifically, the panel assists in evaluating the risk of transmission of pathogens and provides recommendations regarding public notification or the need for a focused look-back. Findings and outcomes are communicated using the IPC concerns process. Dr. Alexander Doroshenko, Medical Officer of Health, and Dr. Uma Chandran, Physician, IPC, co-chair the panel, which reports to the Quality, Safety and Outcomes Improvement Executive Committee of the AHS Executive Leadership Team.

Decisions regarding disclosure are informed by the findings of the IPC risk assessment and are guided by the AHS [Disclosure of Harm Procedure \(2022\)](#).



Provincial and zone IPC committees

The Provincial Infection Prevention and Control Committee is responsible for leading activities to prevent and control infections in all AHS facilities and settings, including contracted agencies and services, and serves an important communication and accountability function. Information is shared with contracted agencies via established networks. The committee reports to the Quality, Safety and Outcomes Improvement Executive Committee of the AHS Executive Leadership Team. Membership includes senior leadership from several AHS departments and programs, and Covenant Health.

The Provincial Infection Prevention and Control Committee works in collaboration with each of the five zone IPC committees and the Covenant Health Infection Prevention and Control Committee. These committees are responsible for supporting strategies for prevention and control of healthcare-associated infections in their area. These committees meet regularly to receive, review, and disseminate IPC reports on provincial-level surveillance activities and discuss actions and trends. These zone committees also analyze outbreaks, consider actions taken, and suggest improvements to limit transmission of infections. The Provincial Infection Prevention and Control Committee also works in collaboration with the Infection Prevention and Control Surveillance Committee that is responsible for surveillance reporting and evaluation of healthcare-associated infections and antibiotic-resistant organisms in both AHS and Covenant Health. Chairs for AHS and Covenant Health IPC committees are listed in Table 1.

Table 1: AHS and Covenant Health IPC committee chairs in 2021/22

Zone	Chairs
Provincial	Dr. Oscar Larios, Interim Senior Medical Director, IPC Lori Anderson, Chief Zone Officer, Calgary Zone
Provincial-Surveillance	Dr. Bonita Lee, Physician, IPC Kathryn Bush, Director, IPC
North	Dr. Kathryn Koliaska, Medical Officer of Health, North Zone Jordanna Lambert, Senior Operating Officer, Area 10, North Zone
Edmonton	Dr. Christopher Sikora, Medical Officer of Health, Edmonton Zone Dr. Klaus Buttenschoen, General Surgeon
Central	Dr. Digby Horne, Medical Officer of Health, Central Zone Alison Devine, Director, IPC
Calgary	Dr. Karla Gustafson, Medical Officer of Health, Calgary Zone Dr. Elizabeth McKay, Facility Medical Director, Peter Lougheed Centre
South	Dr. Vivien Suttorp, Medical Officer of Health, South Zone /Dr. Maria Todor, Medical Officer of Health, South Zone Colin Zieber, Senior Operating Officer, South Zone
Covenant Health	Dr. Jennine Wismark, Associate Chief Medical Officer Jon Popowich, Chief Privacy and Quality Officer

IPC stakeholder engagement sessions

The *AHS IPC Strategic Plan* includes four focus areas: Partnerships, Surveillance and Reporting, Learning Research and Innovation, and Our People. Partnerships include building new relationships with key partners and sustaining established relationships with key partners. In 2022/2023, as part of this, IPC conducted stakeholder engagement sessions with zone executive leadership. Sessions focused on a series of questions about what was and was not working well and the future focus. From these sessions four main themes emerged on the positive aspects of the AHS IPC response to the COVID-19 pandemic:

- Communication and visibility,
- Collaboration,
- Impact on operations, and
- Service focused.

The sessions also highlighted potential future improvements to enhance AHS IPC's effectiveness while meeting operational needs. Finally, there was consensus to restore IPC work to its full scope of practice during the readiness and recovery phase of the COVID-19 pandemic.

IPC reusable and single-use medical devices standard

The Alberta Health [Reusable & Single-Use Medical Devices Standards \(2019\)](#) reflect the CAN/CSA Z314-18 *Canadian Medical Device Reprocessing* standards and establish minimum requirements for the use of single-use medical devices and the cleaning, disinfection, and sterilization of reusable medical devices between client uses. The goals of the standard are to: control and prevent the transmission of microorganisms to clients, personnel, the public, and the environment; minimize the risk of harm to clients and personnel; promote the safe use of single-use medical devices; and support health professional regulatory colleges, healthcare professionals, and other personnel who use or reprocess medical devices.

The AHS [Critical and Semi-critical Single-Use Medical Device Policy \(2022\)](#) and the AHS [Management of Loaned and Reusable Critical or Semi-Critical Medical Devices Policy \(2022\)](#) align and comply with the Alberta Health standards. Covenant Health IPC is in the process of updating its policies to align and comply with the Alberta Health standards and the AHS policies.

Reusable medical devices

Medical device reprocessing accountability structures

The Provincial Medical Device Reprocessing Quality Committee oversees and supports standardized quality medical device reprocessing practices across AHS and its contracted service providers. Margaret Fullerton, Senior Operating Officer, Alberta Children's Hospital, and Karin Fluett, Senior Provincial Director, IPC, co-chair this committee, which reports to the Quality, Safety and Outcomes Improvement Executive Committee. Membership includes representatives from: Alberta Health; AHS provincially managed programs such as Accreditation, Capital Management, Contracting, Procurement and Supply Management, IPC, and Patient Safety; AHS zone operations; Covenant Health; and a public member representative of patients and families.

Ongoing committee work included supporting the Accreditation Canada reviews and responding to the foundational standard on Reprocessing of Reusable Medical Devices as well as reviewing results from Cycle 4 medical device reprocessing reviews. Work also included partnering with Capital Management on the review of medical device reprocessing area infrastructure priorities related to the Alberta Surgical Initiative. The Provincial Medical Device Reprocessing Working Group, engages zone- and site-level medical device reprocessing department leaders to improve consistency and quality of services across the province.

Raquel Nogueira, Medical Device Reprocessing Senior Project Manager, IPC, and Peter Brown, Manager, Central Zone, Medical Device Reprocessing, co-chair this working group, which reports to the Provincial Medical Device Reprocessing Quality Committee. The working group includes frontline medical device reprocessing managers from AHS and Covenant Health and representatives from AHS: Accreditation; Contracting, Procurement and Supply Management; Diagnostic Imaging; Human Factors; and IPC.

Within the working group there are subgroups that undertake specific tasks. One subgroup is the Provincial Standard Operating Procedures Working Group. In 2022/2023, this group completed the [Exposed Pipes and Fixtures Standard Operating Procedure](#) to provide guidance on routine cleaning practices of exposed pipes and fixtures to minimize cross-contamination. Another subgroup is the Medical Device Reprocessing Debris Reduction Group. Throughout 2022/2023, this group reviewed medical device-related reporting and learning system reports and used the information to identify and respond to systemic issues.

This working group also continued to discuss reprocessing-related product recalls and safety notices as well as resolving inconsistencies found in reprocessing processes and practices.

Medical device reprocessing reviews in AHS and Covenant Health

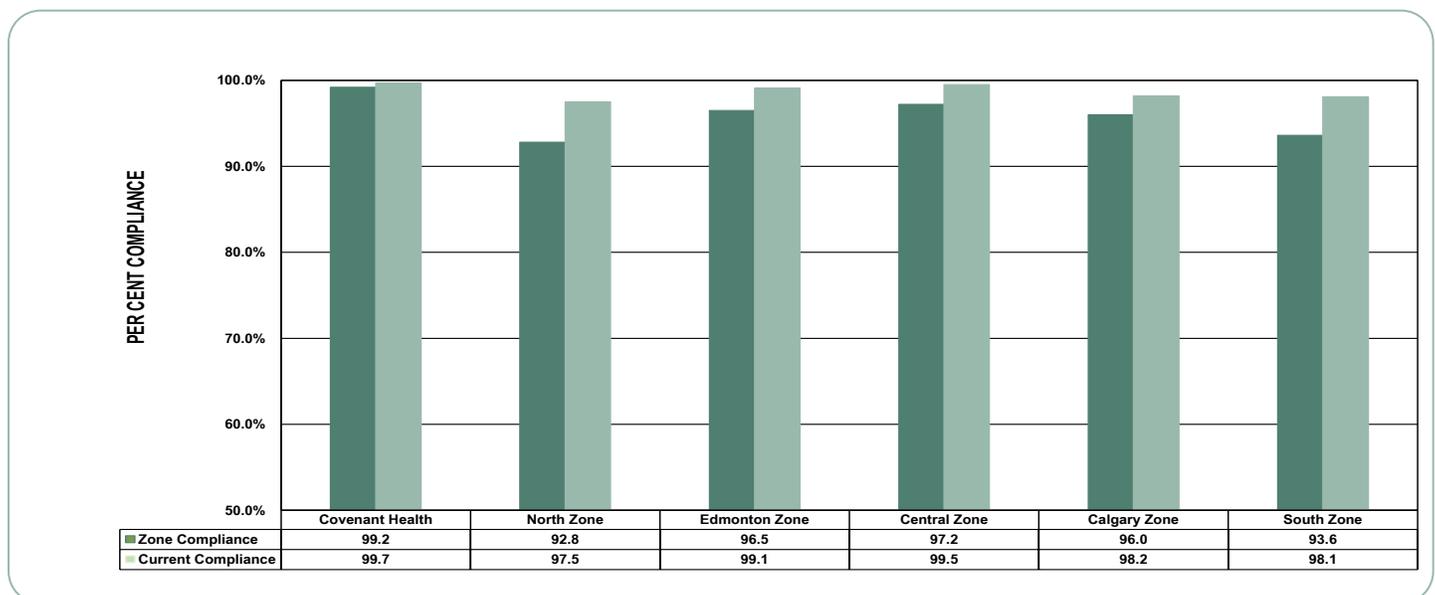
Medical device reprocessing reviews are a type of process surveillance that focus on continuous quality improvement. These reviews increase staff learning, improve IPC-related medical device reprocessing practices, and monitor compliance with standards. All areas reprocessing reusable critical and semi-critical medical devices in AHS and Covenant Health are reviewed on a scheduled cycle. To date, there have been four review cycles: Cycle 1 (June 2010 to March 2013); Cycle 2 (June 2013 to April 2015); Cycle 3 (November 2016 to June 2017); and Cycle 4 (July 2020 to August 2022).

Results from these reviews are reported at the site, zone, and provincial levels. A site-level report is sent to the area within three weeks. Corrective actions for deficiencies are followed up using standardized processes. After all sites in the zone are reviewed a zone-level report is distributed to Alberta Health as well as the Provincial Medical Device Reprocessing Quality Committee, Provincial Medical Device Reprocessing Working Group, zone medical device reprocessing lead, and zone IPC executive director or director. A provincial-level report is distributed at the end of the cycle to Alberta Health as well as the

Provincial Medical Device Reprocessing Quality Committee and Provincial Medical Device Reprocessing Working Group.

In total, for Cycle 4, 100 areas in 68 facilities were reviewed. The numbers in this year's annual report may differ from those reported in past annual reports, due to changes in areas continuing or discontinuing medical device reprocessing or management of these areas overtime. The overall compliance as shown on the day of the review for each area was 95.8 per cent (16,825/17,556) (Figure 1). A trend observed over the review cycles was the centralization of medical device reprocessing, this trend continued during Cycle 4. After the follow-up process for corrective actions the overall compliance increased to 99.0 per cent (17,382/17,556) as of the end of the fiscal year. The remaining one per cent of items are primarily related to documentation and infrastructure. New to Cycle 4 were additional follow-up corrective actions in partnership with AHS Capital Management, where remaining infrastructure deficiencies were reviewed and followed up with the medical device reprocessing areas. This additional follow-up is completed to confirm corrective actions plans are submitted properly and progressing appropriately.

Figure 1: Medical device reprocessing reviews compliance for AHS and Covenant Health



Zone Compliance = The overall compliance of zone medical device reprocessing areas as on the day of the review (baseline)

Current Compliance = Compliance based on the corrective actions that have been completed by the zones medical device reprocessing areas at the time of reporting

Medical device reprocessing reviews in chartered surgical facilities

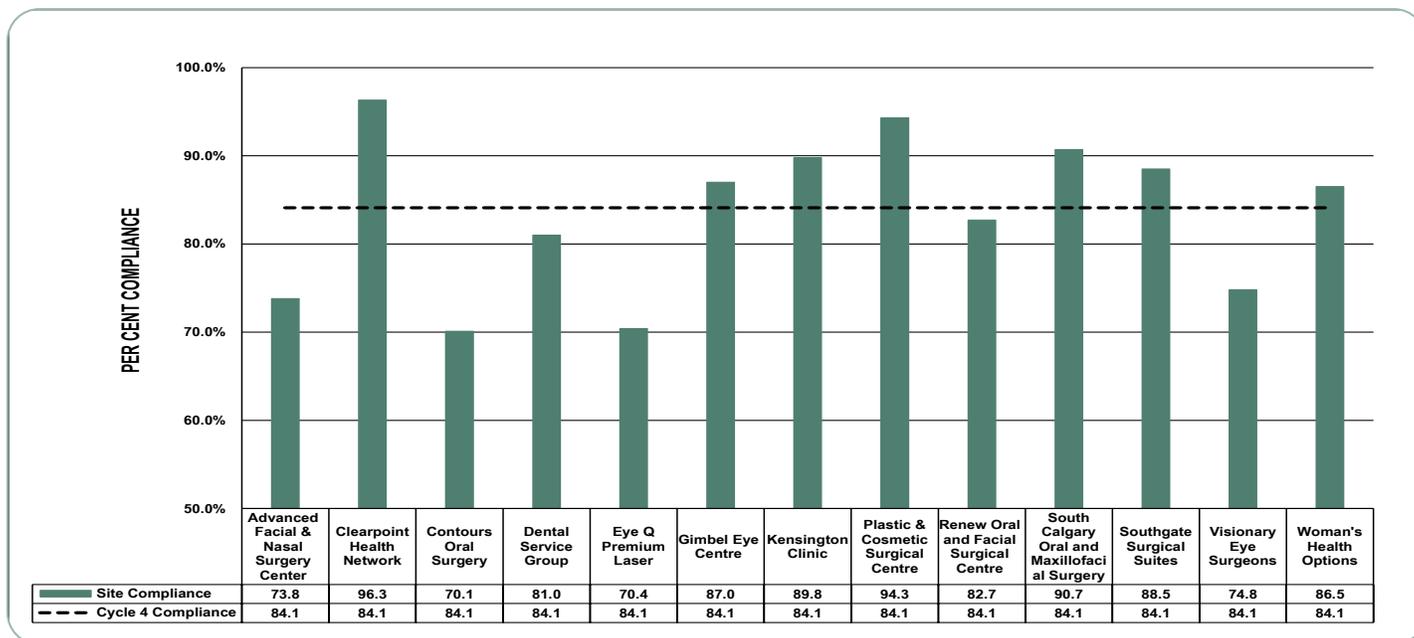
AHS performs joint reviews with the College of Dental Surgeons of Alberta and the College of Physicians and Surgeons of Alberta. AHS reviews the medical device reprocessing area, while the respective college performs a broader operational review. Successful collaboration of all three organizations has led to an increase in efficiencies and stronger working relationships during the review process. Currently there are 39 chartered surgical facilities that have contracts with AHS and in a typical fiscal year seven to 12 reviews are completed. In 2022/2023, 10 joint reviews were completed. The College of Physicians and Surgeons of Alberta schedules reviews according to their four-year schedule.

Chartered surgical facilities are largely independent of each other, though mergers have occurred to form larger corporations with several facilities. Reporting aggregate results from these facilities is beneficial as it provides an overall sense of how well medical device reprocessing practices are followed and may identify commonalities or trends in identified deficiencies, providing direction for a more focused facilitation of appropriate corrective actions.

As of 2022/2023, the Review of Medical Device Reprocessing for Reusable Critical and Semi-Critical Medical Devices Annual Report: Chartered Surgical Facilities is generated utilizing the calendar year to align with College of Physicians and Surgeons of Alberta reporting schedule. The annual report for 2021 was distributed mid-2022. Similar to medical device reprocessing reviews in AHS and Covenant Health, corrective actions for any deficiencies identified in chartered surgical facilities are followed up using standardized processes. The annual report is sent to Alberta Health, Provincial Medical Device Reprocessing Quality Committee, Provincial Medical Device Reprocessing Working Group, Contracting, Procurement and Supply Management, and the College of Physicians and Surgeons of Alberta.

In total, for 2021, 13 facilities were reviewed. The overall compliance as shown on the day of the review for each site was 84.1 per cent (1,701/2,023) (Figure 2). Following the corrective actions follow-up process the overall compliance increased to 96.2 per cent (1,946/2,023) as of the release date for the annual report. Similar to medical device reprocessing reviews in AHS and Covenant Health, the remaining four per cent of items are primarily related to documentation and infrastructure.

Figure 2: Medical device reprocessing reviews compliance for chartered surgical facilities



Single-use medical devices

As allowed by Ministerial Directive, exceptions that permit the reuse of specified single-use medical devices may be granted by the Senior Medical Officer of Health and the IPC Executive. The approved exceptions to the standards are breast pump kits, pessary devices used for size fitting purposes, and cleaning and reuse by the same client of urinary drainage bags and urinary catheters used for intermittent catheterization. These are listed in the [Single-use Medical Device List of Approved Exceptions](#) on the external [AHS IPC](#) website. No new exceptions were added in 2022/2023.

Accreditation Canada

AHS and Covenant Health participate in the accreditation of health services to help the organization guarantee the delivery of quality healthcare. Accreditation compares AHS health services with established national standards of excellence to identify areas for improvement. Using an updated process for the 2019-2023 accreditation cycle, criteria are validated using foundational standards that are integrated with clinical standards and attestation in combination with unannounced site visits.

Accreditation compares our health services with national standards of excellence to help us identify what we're doing well and how we can further improve. It is part of our quality and safety mandate to provide the best healthcare possible to Albertans, and to help us continually improve... – Mauro Chies, AHS President & CEO

There are five foundational standards and two of these are particularly relevant to IPC: the *Infection Prevention and Control* standard and the *Reprocessing of Reusable Medical Devices* standard. Accreditation Canada identifies several criteria within various standards as required organizational practices, which are essential practices that organizations must have in place to enhance patient safety and minimize risk.

Structures to support the 2019-2023 accreditation cycle

The IPC Accreditation Service Excellence Team and the IPC Accreditation All Standards Working Group support IPC staff throughout the accreditation process. This working group developed a compendium of IPC resources that cross-references to the relevant Accreditation Canada criteria. Recordings of pertinent information were made available for AHS IPC staff to review on demand. AHS IPC also continued to participate in the AHS Medical Device Reprocessing Accreditation Service Excellence Team. Similarly, Covenant Health IPC supports the Covenant Health Accreditation Service Excellence Team.

Results from the 2019-2023 accreditation cycle

The spring survey took place April 25, 2022, to May 06, 2022. Accreditation Canada surveyors assessed 17 rural hospitals in both Central and North zones for all clinical standards as well as the Infection Prevention and Control standard and the Reprocessing of Reusable Medical Devices standard. Several AHS operated long-term care sites, including CapitalCare, and Carewest, were also included in the spring survey.

The fall survey took place September 18, 2022, to September 23, 2022. The fall surveys were mainly program-based including Cancer Care Alberta, Cardiovascular Health, Continuing Care, Critical Care, Maternal-Child, and Urban Programs. Three rural hospitals in the North Zone were visited as Accreditation Canada was unable to survey these sites as part of the spring survey.

...the Accreditation Surveyors identified IPC as a strength to, and within, AHS and commended IPC several times for being well organized, supportive to frontline operations, and providing direction during the unprecedented number of outbreaks during the pandemic. – Dr. Oscar Larios, Interim Senior Medical Director, IPC & Karin Fluet, Senior Provincial Director, IPC

All sites and programs from the spring and fall surveys had a compliance of 94.4 per cent or higher for the *Infection Prevention and Control* Standard. Most sites and programs surveyed met the required organizational practices for the Infection Prevention and Control standard. For those that had outstanding required organizational practices a theme related to hand hygiene emerged, specifically around hand hygiene compliance and hand hygiene education. Hand hygiene compliance was rated as unmet at one North Zone and four Central Zone sites as part of the spring survey and at three Central Zone sites in the Continuing Care program as part of the fall survey. Hand hygiene education was rated as unmet at one Central Zone site in the Cancer Care Alberta program as part of the fall survey.

All sites and programs had a compliance of 86.7 per cent or higher for the *Reprocessing of Reusable Medical Devices* standard. All sites surveyed met the required organizational practices for the Reprocessing of Reusable Medical Devices standard.

When required organizational practices are rated as unmet, the site or program develops an action plan to address the unmet items. AHS Accreditation supports the site or program in this process. AHS IPC also supports the site or program in this process when it relates to the *Infection Prevention and Control* standard and the *Reprocessing of Reusable Medical Devices* standard. For more information on the status of these refer to the [Alberta Health Services Accreditation Status and Activities for Health Facilities and Programs: Submission to Alberta Health](#). Evidence submissions demonstrating compliance with unmet ratings from the spring survey and fall survey will be submitted to Accreditation Canada in June 2023 and October 2023, respectively.