





IPC News May 2022

# ACIPC President Kristie Popkiss

Welcome to the May issue of Infection Prevention and Control (IPC) News.

Earlier this month, the Board met in Sydney for the first face-to-face meeting since 2020. In addition to our formal board meeting, we had a planning session over 1 1/2 days. The Board discussed our immediate plans for the upcoming 12 months, as well as looking to

the longer-term future of the College. It was resolved to undertake a review of the strategic priorities and activities of the College and to engage a facilitator to assist the College with this process.

The Board sees this is a significant and necessary piece of work that will take place over the coming months. It will involve a significant investment of our input and time and will involve consultation with many of the College's stakeholders, including members. Directors agreed it was important to undertake a comprehensive review of the College's activities as we emerge from the pandemic to ensure we address the future needs of our members, stakeholders and the community.

This month, I joined the Perth event as part of the GAMA Healthcare & ACIPC IPC Tour. I can't tell you how much it pleased me to be able to speak with colleagues in person. The events were very successful and an important forum for discussing new IPC research and ideas. Thank you to GAMA Healthcare for co-branding these events with the College and to all of you who joined us in person or online. Recordings of the Melbourne and Perth events will be made available on the ACIPC website.

Our colleague Terry McAuley has represented ACIPC on the HE-023 Committee since 1999. Terry has recently stepped down from the committee and is replaced by Nicola Isles, Board Director and Chair of the Practice Guidance Committee. Terry is an expert in the field of medical device processing and during her time on the committee she has worked on early versions of the Standard and the updated edition of AS/NZS4187 that was published in 2014. Terry was heavily involved in the working party that revised AS2773-1 and AS2773-2 published as AS2773:2019 and the combined standards AS2514 and AS2774 into a new standard AS5330:2019. Terry also contributed to a program of reworking the business case to combine AS/NZS4815 and AS/NZS4187 and the work that resulted in the current draft

of AS5369. On behalf of the Board of Directors, we thank Terry for her significant input into this important area of work.

A full list of ACIPC Representation can be found on our website at: https://www.acipc.org.au/representation/.

Until next month, warm regards,

Kristie Popkiss



The ACIPC Board of Directors Sydney, May 2022

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## **ACIPC International Conference**



#### Invitation to sponsors and exhibitors

You are invited to participate as a sponsor and/or exhibitor in the 2022 ACIPC International Conference.

13 – 16 NOVEMBER, INTERNATIONAL CONVENTION CENTRE SYDNEY & ONLINE

The conference is the peak event for infection prevention and control professionals (ICPs) in the region and includes Australasia's largest trade exhibition dedicated to showcasing IPC industry suppliers.

To view the prospectus and to book visit: <a href="https://acipcconference.com.au/2022-sponsor-and-exhibitor-prospectus">https://acipcconference.com.au/2022-sponsor-and-exhibitor-prospectus</a>

ACIPC is excited to be delivering the 2022 conference as a hybrid event, with the in-person component of the conference (the first since 2019) expected to attract approximately 500 attendees.

Delegates include nurses, IPC managers and consultants, aged care workers, scientists, academics, educators, policy makers, medical practitioners, hospital managers, and those responsible for managing and delivering IPC programs in non-healthcare settings.

In an exciting first for ACIPC, this year's event will see the exhibition hall open to trade buyers who are not attending the scientific conference.

Trade buyers who work in a business associated with infection prevention and control, or a business looking to procure IPC products and/or services can access the exhibition hall for FREE on Tuesday 15 and Wednesday 16 November. Monday 14 November will be reserved exclusively for meeting and networking with ACIPC Conference delegates.

As a supporter of the conference, you will enjoy the opportunity to:

- Meet people who make and influence decisions on the purchase of IPC products and services.
- Demonstrate and launch new services, products, and programs.
- Network with delegates, industry leaders and healthcare experts.
- Gain industry insight and evaluate market trends to generate new business opportunities.



- Demonstrate your involvement, commitment, and support of ACIPC and the broader Infection Prevention & Control community.
- Start relationships with contacts who may not be part of your current market or marketing strategy.

We recommend securing your participation early to gain longer-term exposure and your preferred stand location in the exhibition area.

#### The 2022 ACIPC International Conference is proudly supported by

#### **Platinum Sponsor**



#### **Gold Sponsor**



#### Silver Sponsor









#### **Bronze Sponsors**





# **Tips on Submitting a Conference Abstract – ACIPC Zoom Class**



This month we <u>recorded a webinar</u> to assist members with abstract submission. If you are considering submitting an abstract for this year's conference, this is your chance to learn from the experts. The <u>call for abstracts</u> to present at the conference is currently open and the deadline for submission is **17**June. Thank you to Dr Holly Seale and Emily Larsen from the Scientific Conference Organising

Committee and Dr Peta-Anne Zimmerman from the Research Grants and Scholarship Committee for their time and expertise. If you have any questions for the panel, or need assistance submitting your abstract, please contact <u>office@acipc.org.au</u>.



Research shows that people learn more effectively from multimedia messages when they're stripped of extraneous words, graphics, animation, and sounds. Lots of extras actually take away meaning because they become a distraction, and overtax the audience's cognitive resources.

Nancy Duarte's blog series featured in the Harvard Business Review contains some great pointers on creating and delivering presentations.

https://hbr.org/2012/10/do-your-slides-pass-the-glance-test

# (Not Just) Dental Stock Photos





<u>Dental Stock Photos</u> is an image library set up by ACIPC member, Dr Roslyn Franklin. This is a great resource, not only for dentists but for anyone needing accurate IPC images. All images show correct use of tools and equipment, and the library is regularly updated with new photographic content.

# Membership Communications and Engagement Committee Update



Kylie Robb, MCEC Chair, ACIPC Board Director

#### Hello to all ACIPC Members

I am interested to know what drives people to spend their careers in a particular field of expertise and I often ask my colleagues and friends how, or more importantly why, they ended up in the profession of Infection Prevention and Control (IPC). A lot say they 'fell into it' like it was a chance event, and that certainly was the case for me, but years later they are still in the profession continuing to do good work that really does impact the quality of people's lives.

Dan Pink, a motivational expert, has written a lot about intrinsic motivation and purpose. He posits those who believe they're working toward something larger and more important than themselves are often the most hardworking, productive, and engaged. This is why I engage with ACIPC, the peak body for the profession of IPC, because my College aligns with the attributes and values that I hold myself.

I am looking forward to another term Chairing the ACIPC Membership Communication and Engagement Committee (MCEC) with the support of Co-Chair and fellow Board Director, Ann Whitfield. Our College membership is very diverse and this is reflected in those who volunteer on our MCEC. This diversity affords MCEC with insights to identify ways to effectively communicate and engage with anyone who has an interest in IPC and continue to strengthen the profile of the profession and the College as the peak body for IPC in the region. Our committee members are from industry, aged care, hospitals and allied health and we also have a consumer representative, a veterinarian as well as members based in New Zealand and the Pacific Islands.

The committee and I will be working behind the scenes to bring you relevant and timely content to feature across the College platforms including this newsletter. We do need your help though. Our virtual office doors are open and we'd love to hear your ideas and suggestions for any webinars, seminars, and IPC resources that your College can support you with. We're also keen on member news and updates so if you have something you'd like to share with your colleagues, please get in touch. This month we have a profile of Jacqueline Rambridge who has recently become credentialled. We also hear from long standing ACIPC member Lincoln Fowler.

We are motivated to connect, share ideas and engage with ACIPC members. Let us celebrate our successes together. Please contact me via the office team — <a href="mailto:office@acipc.org.au">office@acipc.org.au</a>. The Membership Communication and Engagement Committee are looking forward to hearing from you!







The College is running Foundations of IPC on demand. Visit the ACIPC website for more information. The dates of the upcoming courses are listed below:

- 6 July 2022
- 20 July 2022
- 10 August 2022
- 24 August 2022
- 7 September 2022

Visit: https://www.acipc.org.au/education/

# **ACIPC Graduate Pins**













Limited to the Graduates of Foundations of Infection Prevention and Control





The course has been designed for healthcare practitioners involved in undertaking testing in all healthcare settings including midwifery, acute care, community health, women's health, correctional health, rural and remote health, refugee health, sexual health, and infection prevention and control practitioners.

#### During the course you will learn about:

- Epidemiology, transmission, management options and prevention of HIV, hepatitis B and hepatitis C
- Different tests available to correctly diagnose, testing intervals post exposure and window periods for testing
- Post incident pre- and post-test discussion for both the recipient and the source following the incident
- The personal impact and medical consequences of HIV, hepatitis B and hepatitis C
- Conducting a risk assessment for HIV, hepatitis B and hepatitis C
- Strategies and resources for effective health promotion and prevention education
- Basic counselling skills including listening, questioning, reflecting and summarising

#### Course fee - \$350

We currently have availability in our course commencing 1 July 2022. More information can be found here: <a href="https://www.acipc.org.au/education/blood-borne-virus-testing-course/">https://www.acipc.org.au/education/blood-borne-virus-testing-course/</a>



# **Short Course for IPC in Aged Care**



This course is designed to provide staff with the fundamental principles and concepts of infection prevention and control practice as they apply to various Aged Care settings in particular Residential and Community Aged Care settings.

This course is ideal for staff supporting IPC Clinical Leads and Facility/Clinical managers.

The modules can be undertaken over a six-to-eight-week period and a certificate of completion will be issued to students who complete the course. There is no exam and the course cost is \$500 per staff member.

We currently have availability in a course commencing on 21 June 2022.

#### Modules include:

- Principles of Infection Prevention and Control
- Management of the environment, resident and staff health
- Management of invasive devices, hygiene and aseptic techniques
- Management of outbreaks
- Organisms of significant AMS
- Governance and leadership

To book in staff visit the ACIPC website: <a href="https://www.acipc.org.au/education/short-course/">https://www.acipc.org.au/education/short-course/</a>



# Member Profile - Lincoln Fowler, ACT

You currently work for the Ambulance Service what can you tell us about your role there?

Early during the pandemic, the ACT Ambulance Service recognised that an opportunity existed to implement a long-held dream of promoting the importance of infection prevention and control by employing an officer specifically dedicated to that role.

I was approached by my manager to consider taking this position temporarily in late 2020. Once I commenced, my immediate task was to learn the culture of the organisation so that implementation strategies could be devised.

At the same time, I was tasked with updating the infection prevention and control manual which was introduced from a local hospital in 2013. To make it contextual I sought approval to move away from the booklet format and into a format more adaptable to electronic communication.

At present I try to be the voice of reason to a workforce that is often stressed and in need of reassurance.

# How has your job changed during the pandemic?

Answering the question "Are we doing the right thing?" has become normal. Previously I had to fight a lot harder to make my voice heard.

# How did you develop an interest in Infection Prevention and Control?

My interest in infectious disease developed early. At 13 years of age when I read *I Can Jump Puddles* by Alan Marshall where the author describes his experience of becoming ill with polio.

At university I studied microbiology and learned about the interaction of microbes and the immune system. I moved into nursing and saw the first infection control nurses in action. This encouraged me to follow that course in my career development.

# What motivated you to join the College as a member?

I have been a member since the inception of the College in 2012. I was motivated to join as I recognised that for AICA to make an impact nationally and professionally, it had merge the state branches.

# What support has the College provided you with over the years?

The College has encouraged my involvement in various committees and supported my attendance at ACIPC conferences. Through the communication community *Infexion*Connexion, I have been able to ask questions of colleagues and seek and offer clarification to questions as problems have arisen.

# What do you think is the best membership benefit we offer?

The chance to attend the annual ACIPC Conference which provides sustenance for a hungry IPC professional.

# Tell us something about yourself that people may not know?

I'm a voracious reader of science fiction and

history but have read The Lord of the Rings more than 20 times and the Bible more than that. As with infection control, repetition is not always a bad thing.





# Apply for

# **Primary Credentialling**

Have you recently completed the Foundations of Infection Prevention and Control course?

Why don't you consider becoming a credentialled ICP?

# Why?

Credentialling provides a clear pathway to demonstrate the necessary knowledge, skills and attributes in the field of infection prevention and control.

## What

If you meet the requirements and want to give credentialling a go, the Credentialing and Professional Standards (CAPS) committee is looking forward to reviewing your application to become a Primary Credentialled Infection Control Professional (CICP-P).

## How?

Did you know that to apply for credentialling at a primary level you need:

- To be a current member of ACIPC
- Work greater then 12 months part time in infection prevention and control where an aspect of infection control was an explicit focus
- Complete the ACIPC Foundations of Infection Prevention and Control course, or equivalent as approved by ACIPC
- Complete ACSQHC Infection Control modules
- Complete one of the Hand Hygiene Australia modules
- Meet the attitudinal requirements outlined in the credentialing package
- Meet the practice requirements outlined in the credentialing package

# **More Information**

www.acipc.org.au/credentialling/

## Recently Credentialled Member, Jacqueline Rambridge

#### What's your role in IPC?

Currently I work as an Infection Prevention Nurse within a small infection prevention team at a large acute private hospital in metropolitan Melbourne.

# What motivated you to become credentialled?

I am passionate about promoting awareness about the importance of infection prevention and control within my current healthcare facility and am a strong advocate for improvement of patient outcomes. Becoming credentialed was especially important to me at a personal level as it provides recognition of my hard work and academic achievements and allows me to feel more confident and autonomous in my profession. In addition to this, I feel that being credentialed ensures that the individuals I provide guidance to are able to have confidence in my recommendations and sharing of knowledge.

You have recently completed your Graduate Certificate in Infection Prevention and Control at Griffith University. What can you tell us about how you are working to consolidate the learnings from your studies into your workplace?

Following the recent completion of my Graduate Certificate in Infection Prevention and Control at Griffith University, I feel more confident in my understanding of the importance of my role within the healthcare organisation and how integral the role of an IPC is in ensuring safe and positive outcomes for both the healthcare workers delivering care within the organisation and for the patient receiving care. I am more strategic in my

thought processes and am able to recognise and understand the impact of infection risks more efficiently. In my current role I am ensuring that I work more closely with my manager and other clinical departments to expose myself to new experiences and opportunities that enable the consolidation of my learnings. My main focus is to engage with frontline nursing staff to develop policies and procedures to ensure that their care and management of invasive devices is reflective of evidence-based practice. I feel it is essential that the frontline healthcare workers are actively involved and hope that with my support they will be empowered to seek opportunities to upskill.

"I feel that being credentialled ensures that the individuals I provide guidance to are able to have confidence in my recommendations and sharing of knowledge"

Jacqueline Rambridge CICP-A

# What advice would you give to other members considering becoming credentialled?

Go for it! Feeling confident in the knowledge you have, and receiving the recognition from peers within the industry is incredibly rewarding.





## **Credentialled Members**

This month we celebrate the following members for becoming credentialled or recredentialled through the College.

- Jacqueline Rambridge
- Kate Amos
- Jeanette Garland

# **Nursing Scholarship Opportunity**



<u>The Bonnie Boezeman AO Leadership in Nursing Scholarship</u> is now open for applications.

The scholarship supports women nurses to develop leadership skills, both to advance their own careers and to invest in leadership in the sector as a whole

This is an incredible opportunity to study the Master in Healthcare at Southern Cross University.

Chief Executive Women works to remove the barriers to women's progression and ensure equal opportunity for prosperity.

Applications close 24 June 2022. More information on the Chief Executive Women website - <a href="https://cew.org.au/scholarships-programs/bonnie-boezeman-ao-leadership-in-nursing-scholarship/">https://cew.org.au/scholarships-programs/bonnie-boezeman-ao-leadership-in-nursing-scholarship/</a>

I see so many young, eager nurses who are willing to move towards leadership positions, and this scholarship will help me foster that environment for them.

#### LE TROUNG

2021 Bonnie Boezeman AO CEW Nursing Scholar





## **Senior Infection Control Clinical Nurse Consultant**



The Senior Infection Control Clinical Nurse Consultant works closely with the Manager of Infection Prevention and Control to oversee the Infection Control Program at Peninsula Health.

A core aspect of the role will be to work with the current Senior CNC in the implementation and oversight of the Infection Prevention and Control Program for Rehabilitation, Ageing, Pain and palliative Care Services (RAPPS) and Carinya Residential Aged care facility, and Community Care services including providing expert infection control support to Private Residential aged care services if required. The position will also involve oversight of the infection surveillance activities across all sites and support for the current Clinical Nurse Consultants.

More information on the role can be found here - <a href="https://www.acipc.org.au/job-opportunity-peninsula-health/">https://www.acipc.org.au/job-opportunity-peninsula-health/</a>

# Clinical Nurse Educator – Infection Prevention and Control



Role based in North West Tasmania:

- Develop, implement and evaluate infection control education programs.
- Promote and facilitate infection control workforce planning.
- Build capacity in conjunction with the IPC team, for quality improvement activities, to address unwarranted clinical variation.
- Liaise and consult with members of health care teams, in line with IPC policies, practices and legal requirements, to provide safe quality patient care

More information about the role can be found here <a href="https://www.acipc.org.au/clinical-nurse-educator-infection-prevention-and-control-525003-2/">https://www.acipc.org.au/clinical-nurse-educator-infection-prevention-and-control-525003-2/</a>



# Keep Your Mob Healthy this Winter with Flu Vax

The Lung Foundation of Australia are conducting a campaign from mid-May to June to encourage Aboriginal and Torres Strait Islander people to be vaccinated against respiratory diseases this flu season. Aboriginal and Torres Strait Islander people aged over six months are eligible for a free flue vaccination. You can access the Lung Foundation Australia website for more information https://lungfoundation.com.au/protect-your-mob/



## **IPC Podcasts**



#### **Infection Control Matters**

This series discusses new research and issues on the topic of infection prevention and control. Latest episodes feature interviews with Dr Gonzalo Bearman, Chief of Infectious Diseases at VCU Health, Editor in Chief of Antimicrobial Stewardship Healthcare Epidemiology and ACIPC President-Elect A/Professor Stéphane Bouchoucha.

https://podcasts.apple.com/au/podcast/infection-control-matters/id1560741724



#### The Swab

The Swab is a podcast by comedian and nurse Georgie Carroll. It's made for the hardest workers in the medical industry... nurses. Always there, always supporting, and always mopping up the icky bits with a smile on their face (well, mostly).

https://open.spotify.com/show/2CAFI8Wne5IEyFdeLG6oZM

# Launch of the Risk Communication and Community Engagement (RCCE) Collective Service Helpdesk



The **Collective Helpdesk** is an interactive system powered by international specialists aiming to support anyone seeking **rapid or in-depth** technical support and resources that cannot be found at the country or regional levels, in critical areas for the COVID-19 response such as:

- Community engagement /Behaviour and social change in emergencies
- Community feedback & Accountability
- Risk Communication and Community Engagement (RCCE)
- Social Science/BI Research

Since the beginning of the pandemic, it was identified that there is a need to strengthen the capacity of national and local staff to collectively engage with affected communities.

The **Collective Helpdesk** seeks to collaborate with the regional RCCE mechanisms and partners and amplify their capacities by offering:

Rapid, remote technical assistance to access RCCE, SBC and related resources

Referrals to regional or global RCCE experts for in-depth request

Track and measure RCCE demand from country, regional, and global levels

If you want to access a wide range of resources that cannot be found at the country or regional levels and amplify your ability to support your colleagues, counterparts, and partners, we encourage you to use and promote the Collective Helpdesk by sharing your questions through the **website** or sending an email to: helpdesk@rcce-collective.net.

For further information, please contact the College GOARN representative Dr Peta-Anne Zimmerman <a href="mailto:goarn@acipc.org.au">goarn@acipc.org.au</a>.

www.acipc.org.au





One in 150 Australians have retinal scars caused by the Toxoplasma parasite, according to new Flinders University analysis.

With the condition putting people at risk of further attacks of toxoplasmosis that can progressively damage the retina and lead to vision loss, experts are calling for increased awareness of the risks of eating raw and undercooked meat.

Closely associated with cats, Toxoplasma is a parasite that causes the infectious disease known as toxoplasmosis. Many animals around the world are infected, generally contracting the disease in environments soiled by infected cats or by consuming other infected animals.

For humans, while domestic cat faeces can be a carrier, the most common route of infection is by eating undercooked or raw meat sourced from infected livestock.

"Considering Australia's substantial population of feral cats that are known to be infected, alongside high levels of farming and diets rich in meat, it's imperative we understand the prevalence of the disease across the country," says study senior author Professor Justine Smith, Strategic Professor in Eye & Vision Health at Flinders University.

"While there is no cure or vaccine, the symptoms of toxoplasmosis vary depending on the age, health and genetics of the infected individual. Many people are asymptomatic, but the most common disease that we see in the clinic is retinal inflammation and scarring known as ocular toxoplasmosis.

"Studies around the world show that 30% to 50% of the global population is infected with Toxoplasma, but despite knowing that, what we didn't know was how common the related eye disease was."

In the study, published in the journal, *Ophthalmology Retina*, Professor Smith and her team analysed retina photographs of over 5000 people living in the Busselton area in Western Australia, previously collected to evaluate the prevalence of glaucoma and age-related macular degeneration for a long-term healthy ageing study.

Three specialised ophthalmologists, including Professor Smith, assessed the scans for toxoplasmic retinochoroiditis, with positive cases confirmed with antibody blood tests.

"Among the 5000 people, we found 8 participants with blood test-confirmed toxoplasmic retinal scars. Add to that that about three-quarters of the retinal lesions would be in a position not visible in these particular photographs, we were able to estimate the prevalence of ocular toxoplasmosis to be 1 per 149 persons," says Professor Smith.

The work represents the first effort to quantify the rate of ocular toxoplasmosis in Australia, with the findings indicating the condition can be considered common.

With previous research showing the infection can lead to reduced vision in more than 50% of eyes and even blindness, the authors say it is important for people understand the risk factors of toxoplasmosis and ways to avoid it.

"While people are often familiar with pregnant women needing to avoid cat litter trays, we also need everyone to know that preparation of meat is an important risk factor," says Professor Smith.



Research by Professor Smith in 2019 highlighted a high prevalence of Toxoplasma in Australian lamb sold in supermarkets.

"Add to that that it's now becoming more common to prepare meat in and out of restaurants to be purposefully undercooked or raw, then the likelihood of people becoming infected with Toxoplasma increases.

"We need people to be aware this disease exists, so they can make informed decisions about how they prepare and eat their meet. The parasite can be killed easily by cooking the meat to an internal temperature of 66°C (or medium) or by freezing it prior to cooking."

The research follows on from a series of papers recently published by Professor Smith and team on the condition, including one that uses new technology retinal imaging to show the changes that occur in ocular toxoplasmosis at the tissue-level, and another that highlights the best clinical practice for managing the disease.

'Prevalence of Toxoplasmic Retinochoroiditis in an Australian Adult Population: a Community-Based Study' by Lisia B. Ferreira, João M. Furtado, Jason Charng, Maria Franchina, Janet M. Matthews, Aus A.L. Molan, Michael Hunter, David A. Mackey and Justine R. Smith will be published in the journal *Ophthalmology Retina*.

Co-authors of the paper are from the University of São Paulo Brazil, University of Western Australia, Edith Cowan University, PathWest Laboratory Medicine WA and the Queensland Eye Institute.





# **Upcoming IPC Conferences**

#### **ASID ASM 2022**





More information: <a href="https://asid.eventsair.com/asid-annual-scientific-meeting-2022/">https://asid.eventsair.com/asid-annual-scientific-meeting-2022/</a>

#### The Australian Society for Microbiology Annual National Meeting



# 11-14 JULY 2022

ICC, Sydney & Virtual

More information: https://www.theasmmeeting.org.au/



IPAC Canada National Conference Vancouver BC | May 28-31, 2023

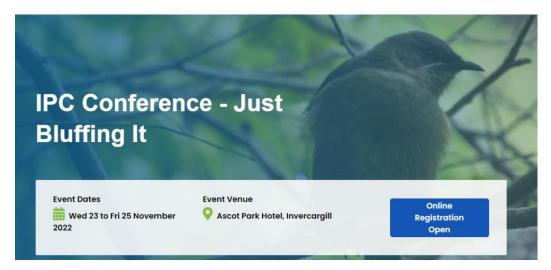
More information: <a href="https://ipac-canada.org/">https://ipac-canada.org/</a>





# **Upcoming IPC Conference**

#### **IPC Conference – Just Bluffing It**



More information: https://www.acipc.org.au/ipc-conference-just-bluffing-it/

#### 32nd International Congress of Antimicrobial Chemotherapy (ICC)



More information: <a href="https://www.32icc.org/">https://www.32icc.org/</a>





# EQUIP YOUR FACILITY WITH GOOD HAND HYGIENE THIS FLU SEASON





Nursing interventions that humanise care for patients affected by COVID-19 in isolation units: An integrative review

Júlio Belo Fernandes, Diana Alves Vareta, Sónia Fernandes, Aida Simões, Dina Peças, Ana Almeida

# Abstract Background

During the global pandemic, the increasing number of hospitalised patients affected by COVID-19 led to a shortage of nurses. This situation can cause nurses to focus their care on managing the acute aspects of the disease, neglecting interventions that can humanise their practices and improve quality of care. This review aims to identify nurses' interventions that can humanise care for patients affected by COVID-19 in isolation units.

#### **Methods**

Whittemore and Knafl's integrative review methodology was used to structure and conduct the review. The literature search was conducted using CINAHL, MEDLINE, Nursing & Allied Health, MedicLatina, Sciencedirect, LILACS, and PubMed databases. Researchers performed the final search in January 2021.

#### Results

A total of seven articles were included in this review. Interventions by nursing staff that may humanise care for patients affected by COVID-19 in isolation units fall within two themes: "expressive dimension interventions", related to the establishment of communication with patients and their families, providing psychological comfort, shared decision-making and patient education; and "instrumental dimension interventions", associated with providing patients physical comfort, and symptom management.

#### **Conclusion**

This review provides insight into both "expressive dimension" and "instrumental dimension" of nursing interventions that may humanise care to patients affected by COVID-19 in isolation units. This knowledge will allow nurses to improve their care practices, providing more holistic, humanised care for these patients.

Access the full article here: <a href="https://idhjournal.com/article/S2468-0451(22)00005-0/fulltext">https://idhjournal.com/article/S2468-0451(22)00005-0/fulltext</a>





SARS-CoV-2 seroprevalence in Healthcare Workers and risk factors.

Stéphanie Weber, Alice Didelot, Nelly Agrinier, Evelyne Schvoerer, Christian Rabaud, Hélène Jeulin

Factors associated with the mental health status of isolated COVID-19 patients in Korea

Jae Hyu Jung, Eun Young Bae,, Jin Young Ko

Environmental cleaning and infection prevention and control: The role of Patient Service Assistants

Stéphane L. Bouchoucha, Jennie Livia Sangojoyo, Mataya Kilpatrick, Ana Hutchinson

## **Head to Health**



Head to Health has a number of resources and 24/7 support if you, or someone you know is going through a difficult time.

https://www.headtohealth.gov.au/crisis-links





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