



| P C News

APRIL 2023

ACIPC President Kristie Popkiss

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

This year I thought it would be beneficial to undertake a short course, which also had some assessments involved. It was well before COVID since I'd undertaken any form of study, let alone one with an assignment and exam. It was a push to even entertain the thought of doing anything on top of my already busy workload but knew it was time.

If you're anything like me, the pressure you feel on top of work and a busy life makes it seem somewhat overwhelming. I also get that feeling when doing anything other than work, that I should be studying making it a lot worse. I thought being organised would help so I would set dedicated time, either for the evenings or on the weekend, and my aim was to not leave the assessments until the last minute.

Life kept creeping in, other priorities, work etc and before I knew it I had very limited time to submit my assignment and take my exam. To say that it had its impact on me is an understatement. Everything but doing these tasks was appealing - the housework, work, emails, paying bills, anything at all really. Yet when I completed and submitted my last assessment the feeling of accomplishment was amazing, and it made it all worth it. Am I glad it is over - yes! But am I glad I pushed myself absolutely! The course was one of the best I'd ever undertaken, and the learnings have been applicable to not only my day-to-day work but with the Boards I sit on as well. I have changed the way I think about many components, and I hope to be able to add value in a new way. If you are considering it - take the plunge. If you are one of those studious people who are always furthering their education - I salute you.



On Friday I was speaking with Belinda Henderson, one of our past presidents. I mentioned I had completed my course (which she had also completed a while ago) and that my next undertaking was my re-credentialing. To be honest life had been so busy I'd delayed doing it. That, coupled with my almost paralysis about thinking about my peers reviewing me and my internal dialogue about how much better they all are than me, had meant I haven't long to complete it. It's interesting as Belinda shared her own thoughts on this too and was very encouraging (thanks Bin). We have all worked hard to get to where we are and no matter what our journey has been to get there, we are good enough and should be proud. If you have put off getting your credentialing or being re-credentialed, I encourage you complete it. The college and the Credentialing Committee are very supportive - take the time and be proud of your achievements and reflect on your journey and learnings.

If you are thinking about furthering your learnings either through tertiary studies or another course I encourage you to take the step. If you've delayed your credentialling or your re-credentialing is due – take the time to be recognised for your great efforts. The growth both gives you is so valuable. And if now isn't the right time for you, plan for 2024.

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Kristie Popkiss



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DR JOAN FAOAGALI AWARD

Foundations of Infection Prevention and Control Course Scholarship

Applications are now open for the Dr Joan Faoagali Award.

ACIPC invites members to apply for the honourable Dr Joan Faoagali Award, which was set up by the College to honour Joan in celebrating her life and ongoing commitment to the IPC profession. The Dr Joan Faoagali Award allows an infection prevention and control practitioner to engage in ongoing learning through participation in the Foundations of Infection Prevention and Control course. One scholarship is awarded to a member of the College each year.

AWARD GUIDELINES

- The Award is open to individual financial members of the College
- The Award is open to members working in an IPC role for at least 12 months
- The Award is only open to members who are self-funded students
- The Award is not open to students whose workplace is paying the FIPC course fee
- All applications are self-nominated to be completed by the applicant
- The successful applicant will be enrolled in a course starting in the given year
- Applications are reviewed by the Education Committee
- The decision of the Education Committee is final

APPLICATION PROCESS

Your application will include the following:

- Critical reflection on your role over the last 12 months and a professional development plan for the next 3 years
 – 250 words
- Explain how the completion of the ACIPC Foundations course will contribute to your practice – 250 words
- A current brief curriculum vitae highlighting your infection prevention and control involvement

CLICK HERE TO SUBMIT YOUR APPLICATION



FOR MORE INFORMATION ABOUT DR JOAN FAOAGALI CLICK HERE

ABOUT DR JOAN FAOAGALI

Dr Joan Faoagali made a significant contribution to the education of members of the College over many years with her involvement in both State and National Infection Prevention and Control activities. Joan showed great resilience, tremendous vision, and was a true leader inspiring all those whose lives she touched – working towards achieving something greater than themselves.

Joan's passion and influence was key to the development of the ACIPC Foundations of Infection Prevention and Control Course. Joan, whilst battling her cancer made time to write and develop modules for the initial ACIPC Foundations of Infection Prevention and Control course. Joan was well known in the Australian infection prevention and control community. Joan was particularly interested in the education of clinicians, the prudent use of antibiotics, infection control and the intelligent use of pathology services. Joan was a passionate teacher and service development advocate in both high-level referral centres in Australia and New Zealand and in developing countries including our pacific neighbours.

After initially qualifying in Microbiology in Dunedin, Joan was Director of Microbiology at Christchurch Hospital in New Zealand and then the Royal Brisbane and Princess Alexandra Hospitals in Queensland. She held multiple adjunct academic appointments, including Griffith University, University of Queensland and Queensland University of Technology. She will be remembered as a warm generous leader and mentor of students and senior colleagues alike.

MEET THE BOARD

Nicola Isles

Board Director, Chair of the Practice Guidance Committee, and Member of the Research Grants and Scholarships Committee

Nicola is a Credentialled Member of ACIPC, was a founding member of ACIPC in 2012 and a current Board Director, the Chair of the Practice Guidance Committee, and a committee member of the Research and Grants Committee. She is also a current Board member of the Australian Vascular Access Society (AVAS) and an accredited assessor for the NSQHS Standards.

Having been involved in infection prevention and control (IPC) for many years, working in both the public and private healthcare sectors, she has seen how IPC has grown into the profession and into the specialty we now believe that it is and should be recognised for. She was keen to join the board to ensure all IPC professionals are well supported and receive the training and resources they need to be able to effectively implement IPC programs in their workplace.



In her current position as Healthscope National IPC and Radiation Safety Manager she provides a governance framework and a strategic direction at a national level for all 39 hospitals IPC professionals are in every state and territory

She has a keen interest in quality, governance, and patient safety, with a strong focus on consumer engagement, and improving patient experience and outcomes and is passionate about implementing research and evidencebased best practice to implement effective change infection prevention and control.







IPC Tour Australia

ACIPC and GAMA Healthcare invite you to the Infection Prevention & Control Tour.

National and international insights include:

- New IPC developments
- Shifting and new paradigms in IPC
- Material compatibility
- Expert panel discussion

An opportunity to discuss local challenges is provided while networking with peers.

Register now!

Keynote speakers:







Prof. David Weber P



David Weber is attending Brisbane, Melbourne and Sydney only. Brett is attending Sydney and Perth only.



Brisbane: Monday 12 June 2023 eventbrite.com.au/e/485971181887

Click here

Sydney: Wednesday 14 June 2023 eventbrite.com.au/e/485817662707

Click here

Melbourne: Friday 16 June 2023 eventbrite.com.au/e/486372923507

Click here

Perth: Monday 19 June 2023 eventbrite.com.au/e/486354006927

Click here

ACIPC WEBINAR

Topic: UVGI and Infection Control

Date: Wednesday 10 May 2023 10:30am AEST

Presenter: Dr Wladyslaw Kowalski received his BS degree in Mechanical Engineering from the Illinois Institute of Technology in 1977, and his MS and PhD in Architectural Engineering from Penn State in 2001.

From 1978 to 1995 Dr Kowalski worked for various nuclear power utilities in the USA performing contamination control for HVAC and cooling water systems. He was involved in the shutdown of the Three Mile Island nuclear utility after the meltdown.

CLICK HERE TO REGISTER FOR THIS **WEBINAR**

After returning to graduate school he wrote a Master's Thesis on, Technologies for controlling respiratory disease transmission in indoor environments: Theoretical Performance and Economics. He wrote his doctorate on, Design and optimization of UVGI air disinfection systems. After graduating, he consulted with various ultraviolet disinfection companies and hospitals and wrote numerous articles and several books including Aerobiological Engineering (2001), the Ultraviolet Germicidal Irradiation Handbook (2009) and Hospital Airborne Infection Control (2006). He contributed to the ASHRAE Handbook Chapter on Ultraviolet Disinfection and assisted NASA in the design of the microbiological glovebox, which employs UV LEDs. He was actively involved with the US Army, the CIA, the Pentagon, and the New York Police Department after the post-911 anthrax attacks.

Dr Kowalski worked from 2017 to 2021 for Purple Sun of New York, where he was the Chief Scientist, developing and patenting UV systems employing multivector light, and conducting numerous laboratory and field studies on the efficacy of UV systems. He joined Sanuvox in 2022 as Chief Scientist and has since been involved in research and development of new UV systems as well as being involved in ASHRAE committees and IUVA.

Past Lunch and Learn Webinars can be found in the member's area: https://www.acipc.org.au/members/lunch-and-learn-webinars/

IHEA National Conference 2023

29 - 31 MAY 2023 | ADELAIDE CONVENTION CENTRE

www.lheaconference.com.au

See you in Adelaide!



HAND HYGIENE DAY 5 MAY 2023

Infection Prevention and Control teams at the Sydney Children's Hospital Network worked with local partners and patients to develop campaign materials tailored to the paediatric setting. These posters from previous years were provided by Infection Prevention and Control Clinical Nurse Consultant at the Children's Hospital at Westmead, Claire Nayda.

WORLD HAND HYGIENE DAY

TUESDAY 5 MAY



SAVE LIVES CLEAN YOUR HANDS





World Hand Hygiene Day









Accelerate action together



SAVE LIVES – Clean Your Hands World Hand Hygiene Day, 5 May 2023



WHO's WORLD HAND HYGIENE DAY

Each year the SAVE LIVES: Clean Your Hands campaign aims to progress the goal of maintaining a global profile on the importance of hand hygiene in health care and to 'bring people together' in support of hand hygiene improvement globally.

WHO calls on everyone to be inspired by the global movement to achieve universal health coverage (UHC), i.e. achieving better health and well-being for all people at all ages, including financial risk protection, access to quality essential health care services and access to safe, effective, quality and affordable essential medicines and vaccines for all. Infection Prevention and Control, including hand hygiene, is critical to achieve UHC as it is a practical and evidencebased approach with demonstrated impact on quality of care and patient safety across all levels of the health system.

CALL TO ACTION:

- Health and care workers: Love the 5 moments.
- IPC practitioners: Lead the way for clean hands.
- Policy makers: Invest for health and dignity.
- Those who access care: Join the movement

Get involved and support World Hand Hygiene Day - 5 May 2023!

> CLICK HERE FOR MORE INFO



NEW COURSES ON OPEN**WHO** THIS MONTH

New channel for Health Emergency Preparedness, Response and Resilience (HEPR) course series

This new **learning channel** brings together resources for WHO, national counterparts and partners to outline the process of developing national investment plans to apply for additional resources, including Pandemic Fund resources.

A new course, resulting from a webinar series held by WHO in late March, has been made available to further support eligible countries, regional entities and implementing entities to develop full proposals for potential projects to be supported in this Pandemic Fund funding opportunity window, which is open until 19 May 2023. The recordings are available with subtitles in Arabic, Chinese, English, French, Portuguese, Russian and Spanish.

You can access the course here.

New courses on OpenWHO this month

We are pleased to announce the following courses that were recently made available:

WHO's New Policy and Strategy on Preventing and Addressing

Sexual Misconduct: This course is an introductory learning package introducing the new WHO policy on preventing and addressing sexual misconduct. This an interim course; a more comprehensive training will be published later this year. The course is available in English and the presentations are available in French for download, with subtitles available soon. Foresight Approaches in Global Public

Health: This course provides an overview of various methods and tools that can be used to understand emerging trends and changes with a futuristic lens and to explore their potential impacts on global public health.

Inequality monitoring in sexual, reproductive, maternal, newborn, child and adolescent health (SRMNCAH):

This course introduces the general steps of inequality monitoring in the context of SRMNCAH. The target audience is primarily people involved in national SRMNCAH monitoring and evaluation efforts, including officers, plus programme managers who have basic knowledge and experience working with SRMNCAH data.

Health Equity Assessment Toolkit (HEAT and HEAT Plus): This course provides a practical guide on how to use both HEAT and HEAT Plus to assess inequalities. The target audience is monitoring and evaluation officers, data analysts and other technical officers with an interest in data analysis and reporting.

We are pleased to announce that OpenWHO now has a total of **203 courses spread across 68 languages.** Three new languages were launched in the last month: **Bulgarian, Luo** and **Nigerian Pidgin.** All courses can be accessed **here.** You can use the toolbar to filter courses by language and topic.

RECENTLY CREDENTIALLED & RE-CREDENTIALLED MEMBERS

The Board of Directors would like to congratulate the following members who have received credentialling this month:

Primary Credentialling:

• Stephanie Wilcox

Advanced Credentialling:

- Rebecca Newton-McLean
- Susan Oliver
- Kate Ryan

Advanced Re-credentialling:

- Katherine McKay
- Sarah Thomas

Expert Re-credentialling:

- Marija Juraja
- Kim Comensoli
- Belinda Henderson

For information on how you can become credentialled, visit the ACIPC website: https://www.acipc.org.au/credentialling/

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INFECTION CONTROL MATTERS WEBSITE

The Infection Control Matters podcast is celebrating 100 episodes with the launch of a website. Visit the **website and subscribe now** so you don't miss a podcast.

Why a website and why subscribe?

- You can search for podcasts by topic e.g. education, contact precautions
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- Provide ideas for future podcasts
- You can search for podcasts using keywords

INFECTION CONTROL MATTERS



- 110+ guests that have been part of the podcast so far (thank you)
- Listeners from over 130 countries
- 100 podcasts on a range of topics and growing
- Special edition podcasts from international conferences to hear the latest. More planned for 2023
- Podcast is free, not sponsored and no ads

ACIPC MEMBER PROFILES & PROJECTS



We are inviting members to tell us about their role, an IPC project that they have been involved in (big or small) and share their learnings with the ACIPC community. This month we would like to introduce Dr Deborough Macbeth and Dr Peta-Anne Zimmerman from Gold Coast Health in Queensland to talk about the Gold Coast Health Infection Control Traineeship which aims to increase the capacity of **Registered Nurses to provide** IPC expertise across the service.

An introduction to your roles

Dr Deborough Macbeth is the Assistant Director of Nursing, Infection Control, Gold Coast Health. Dr Peta-Anne Zimmerman is a Senior Lecturer in the Graduate Infection Prevention and Control Program at the School of Nursing and Midwifery, Griffith University, and a Visiting Research Fellow at Gold Coast Health. Peta-Anne is also a Director of ACIPC

An overview of the project

The Gold Coast Health (GCH) response to the COVID-19 pandemic demonstrated both the pivotal role of the Infection Control Department and, the limited resources available when required. Clearly the dayto-day staffing resources of the department are insufficient to meet the demands associated with a pandemic. Consequently, the Gold Coast Health Infection Control Traineeship (ICT) program has been developed to address the identified deficits.

The ICT has two main aims:

- To provide training and experience in a range of infection control portfolios to prepare additional Registered Nurses (RN) with the skills and experience required to be called into the team and/or used on the wards when the demand on infection control resources exceeds capacity; and
- 2. To prepare these same RNs to act as a resource in their substantive position at all other times.



"The Gold Coast Health (GCH) response to the COVID-19 pandemic demonstrated both the pivotal role of the Infection Control Department and, the limited resources available"

Two RNs at a time undertake a traineeship with the Infection Control Department. The traineeship runs for six months with each RN working 0.5 in their substantive role and 0.5 in the Infection Control Department. The traineeship is at Clinical Nurse level to offset the fact that penalty rates will not be available within the traineeship program. The program runs on a recurring basis with the sixth group about to commence.

The traineeship requires the trainees to complete the "Foundations of Infection Prevention and Control" course run by the Australasian College of Infection Prevention and Control (ACIPC). The program start date aligns with the course commencement date.

The trainees are also required to complete additional online coursework: Australian Commission on Safety and Quality in Health Care (ACSQHC) infection control online modules and, if not already a hand hygiene auditor, hand hygiene auditor training. The course work is undertaken while working in the Infection Control Department where the trainees are provided with a range of experiences associated with the GCH infection control program, and supported through critical reflection, and the mentoring program already established within the department.

The trainees undertake a quality improvement project while completing the traineeship. The nature of the project is determined in consultation with the trainee, the Infection Control Department Assistant Director of Nursing (ADON), the Visiting Research Fellow, and the Nurse Unit Manager (NUM) of the home department where the trainee holds a substantive position.

ACIPC MEMBER PROFILES & PROJECTS CONTINUED

"To date, four cohorts of trainees have evaluated the program with findings indicating benefits both professionally (home based resource and networking) and personally (confidence, capability, and a new IPC lens) for the trainees."

Learnings and recommendations arising from the project

Critical to the success of the program is the support of the NUM in the unit where the trainee holds a substantive position. For this reason, nomination of the trainee by the NUM in the form of a letter of support is required. To assist with rostering and reduce the administrative burden, the trainee is assigned to the Infection Control Department for two weeks each roster and their substantive position for the other two weeks of the roster. In other words, two weeks on and two weeks off in each area. To date, four cohorts of trainees have evaluated the program with findings indicating benefits both professionally (home based resource and networking) and personally (confidence, capability, and a new IPC lens) for the trainees.

Statistically significant improvement was demonstrated in confidence of their knowledge of the following domains: microbiology and immunology; prevention and management of healthcare-associated infections; surveillance and epidemiology; cleaning, decontamination, and sterilization; multiresistant organisms; international and Australian oversight of IPC strategies; employee health; and practice specific settings.



Infecti

Infection Control Traineeship Mentoring Team



The Infection Control Department and the home departments of the trainees also report positive impacts. The home departments reported having a knowledge base within their unit adds value to patient and healthcare worker safety as well as clinical governance. The Infection Control Department, staff reported a boost in their confidence through the reinforcement of their knowledge and skills as well as professional development as peer mentors for the trainees. The traineeship provides an opportunity to complete a course in work time, where the course costs are covered by the GCH and the course itself has an established articulation with post-graduate infection prevention and control courses at Griffith University. It is likely that the course could be credited as an elective subject for other post-graduate nursing courses. It is expected that competition to participate in the traineeship will continue to be strong and therefore it is imperative that the opportunity is awarded to applicants most likely to capitalise on the opportunity for themselves and their home department.

INTERNATIONAL DAY OF STERILISATION SCIENCES

Monday 10 April was the World Federation for Hospital Sterilisation Sciences (WFHSS) International Day of Sterilisation Sciences. The purpose of this day is to raise awareness of the important work and service that our members provide to ensure the science of reprocessing medical devices is at the highest possible level.

Reprocessing Medical Devices

Reprocessing reusable medical devices (RMDs) is an important element of any infection prevention and control program. Often referred to as the heart of the hospital or the 'engine room', the reprocessing environment [also known as the] Central Sterilising Services Department (CSSD), are busily keeping our Operating Theatres and surgical procedures rooms running as well as looking after many other areas in healthcare that use RMDs.

International Day of Sterilisation Sciences, a concept introduced by the World Federation for Hospital Sterilisation Sciences is a day dedicated to recognising and raising awareness of the importance of reprocessing RMDs. The day is all about celebrating the hard working CSSD teams that are highly trained and ensure RMDs are processed to a high quality standard.

Where is your Reprocessing Environment located?

Reprocessing of RMDs is often centralised and adjoining the operating theatre and surgical procedure rooms. There may also be satellite reprocessing areas within your health service organisation for processing specific medical devices such as ultrasound probes at the point of use. Do you know where reprocessing of RMDs occurs in your facility?

NSQHS Standard 3 Action 3.17

There has been reports globally that show contaminated RMDs have been linked to surgical site infections and the aim of every CSSD or reprocessing environment is to safely and effectively reprocess RMDs to eliminate the risk of cross contamination during surgical and invasive procedures.

NSQHS Standard 3, Action 3.17 Reprocessing of reusable equipment and devices ensures health service organisations have the appropriate resources and processes in place for reprocessing RMDs that meets national and international standards, has a traceability process for critical and semi-critical RMDs, and has processes to manage all of the reprocessing requirements.

Australian Standard for reprocessing Medical Devices

Did you know that AS4187 is currently under review and will soon be known as AS5369? The first draft of the latest edition was released in 2022 for public comment with the second draft due to be released soon. The idea of the new AS5369 is to replace both AS4187 and AS4815. Keep an eye out for the release of next draft.

Show your appreciation!

Do you know someone that works in CSSD or is involved in reprocessing RMDs? If you do, give them a shout out and show your appreciation for the important work they do each day in preventing infections, contributing to the safe use of RMDs and ensuring we achieve the best possible outcome for our patients.



IT'S FLU VAC TIME!

2022 saw a resurgence of influenza arising from the reopening of international borders. In 2023, seasonal influenza activity has already started and is expected to continue. As IPC professionals we encourage you to emphasise the importance of influenza vaccination with your staff, colleagues, patients and friends.

Annual vaccination is the most important measure to prevent influenza and its complications. It is recommended for all people 6 months of age and older.

Influenza vaccination is particularly important for those considered most at risk. Under the National Immunisation Program free influenza vaccines are provided to the following high risk groups:

- children aged 6 months to less than 5 years
- all Aboriginal and Torres Strait Islander people aged 6 months and over
- people aged 6 months and over with certain medical conditions that increase their chance of severe influenza and its complications
- pregnant women (at any stage during pregnancy)
- people aged 65 years and over.

Uptake of influenza vaccination in children under 5, First Nations people and pregnant women is low, and there is a need to continue to improve vaccination rates in these cohorts.

It is important to consider coadministration of both influenza and COVID-19 vaccine's on the same day – think ahead give patients the opportunity to consider both vaccines if appropriate. Resources to be familiar with include:

- ATAGI statement ATAGI advice on seasonal influenza vaccines in 2023
- NIP fact sheet 2023 Influenza vaccination

 Program advice for vaccination providers
- National Immunisation Program schedule – we have updated the schedule to incorporate influenza vaccination to ensure you can easily identify eligible patients
- Sharing Knowledge About Immunisation (SKAI)

 resources to support providers in conversations with parents of young children and pregnant women around influenza vaccination.

'BE A WINTER CHAMPION'

GAMA Healthcare, supported by the Australasian College for Infection Prevention and Control (ACIPC), proudly announces the launch of the 'Be a Winter Champion' campaign.

The campaign aims to help Australian healthcare facilities prepare for the winter season and minimise the spread of Healthcare-associated Infections (HAIs) and runs from April to June 2023.

Suzanne Hammouche, CEO of GAMA Healthcare Australia said, "Winter is a challenging season for healthcare facilities, as infectious diseases increase causing a surge in patient admissions and putting a strain on healthcare resources. To help healthcare facilities fight against infections, GAMA Healthcare, a leader in Infection Prevention and Control (IPC) solutions have developed the IPC Winter Toolkit with the support of ACIPC."

The IPC Winter Toolkit includes a Winter Infections Booklet, awareness posters, interactive IPC Winter Champion activity, respiratory virus factsheet and the opportunity for healthcare facilities to nominate their staff for the IPC Winter Champion Award.

Winter Infections Booklet: Help staff prepare and respond to winter challenges, it includes key winter pathogens of concern (Influenza, RSV, Covid, Adenovirus and Norovirus), measures to prevent and reduce infections and outbreak management guide. Respiratory Virus Factsheet: Differentiate between common signs & symptoms of COVID-19, Influenza, RSV and Allergies.

IPC Awareness Posters: Designed to serve as a visual reminder to staff, patients, and visitors on the benefits of good IPC practices in maintaining a safe environment for all.

IPC Winter Champion Award: Recognise IPC excellence by nominating staff to celebrate

their IPC achievements. The Award includes social recognition and a certificate to appreciate staff efforts and encourage continued good IPC practices for a safer healthcare environment.

Download and share the IPC Winter Toolkit to help make all your healthcare staff Winter Champions and get prepared to fight against infections this winter here.

> DOWNLOAD THE IPC WINTER TOOLKIT **HERE**

BEA WINTER CHAMPION!

Join the fight against winter infections with ACIPC and GAMA Healthcare.



Download the resources to help prepare your facility to become winter ready. The winter campaign runs from 10th April - 30th June 2023

This includes:

- Best IPC practice booklet
- Respiratory symptom factsheet (~)
- Winter champion engagement posters
- Staff recognition activity

Download now!

Scan the QR Code to download the Winter Champion Campaign resources



Supported by:







AGED CARE INFECTION PREVENTION AND CONTROL TRAINING GRANTS

Residential aged care providers can apply for funding to support registered and enrolled nurses to complete specialist Infection Prevention and Control (IPC) Leadership training.

Support is available for up to 2 registered or enrolled nurses in each eligible residential aged care service, for costs relating to:

- fees for suitable IPC training courses
- wages for study leave
- wages for backfilling for nurses undertaking study.

This funding provides support for more nurses in residential aged care to access IPC leadership training. Highly skilled staff will ensure residential aged care services are well prepared to prevent or manage future infectious disease outbreaks including influenza and COVID-19. Further information on the IPC grant can be found at the following resources;

- Aged Care Infection Prevention and Control Training (GO5867) at GrantConnect
- Fact sheet on Infection Prevention and Control Leads (agedcarequality. gov.au)
- Infection prevention and control leads | Australian Government Department of Health and Aged Care





IPC 2023: Local Solutions for Global Challenges



24 Hour Virtual Conference 6 July 2023

The International Federation of Infection Control

Registration now open!

The International Federation of Infection control is hosting their 24 hour virtual conference "Local Solutions for Global Challenges" on 6 July 2023. This 8-hour conference will include more than 20 speakers and will be repeated in three different time zones (AEST, CET, and EDT).

Programme Highlights

- Building the IPC team of the future
- Critical Care infections
- Surveillance of HAIs
- Decontamination of surfaces in healthcare environments
- Safer surgeries for prevention of SSI
- Role of ventilation in providing a safe environment for patients and staff
- Global strategies for improving IPC programs

Full Event Details

Featured Article: Infection, Disease & Health

Investigation of the selection and use of "other" personal protective equipment to prevent mucous membrane exposure in nurses: A cross-sectional study

Peta-Anne Zimmerman, Jacqueline H. Byrne, Brigid M. Gillespie, Deborough Macbeth

Abstract

Background

Selection and use of personal protective equipment (PPE) to prevent non-percutaneous body fluid exposure (NP BFE) is determined by a clinical assessment of risk. The aim of this study was to explore the selection and use of PPE, particularly masks and eye protection to prevent NP BFE, by nurses.

Methods

This quantitative single-site two-phased study was guided by the Health Belief Model (HBM). Phase 1 was a retrospective electronic database audit of body fluid exposure surveillance data. Phase 2 included a crosssectional survey.

Results

The highest incidence of reported NP BFE to non-intact skin and mucous membranes during the study period were identified in the emergency department (ED) at 51.3% (20/39), intensive care unit (ICU) at 30.8% (12/39), operating theatre (OT) with 12.9% (5/39), and inpatient renal ward with 5.1% (2/39). Reported PPE use during NP BFE was: 0% face shields or masks, 10% gown/apron, and 15% goggles.

Survey results related to Prevention of mucocutaneous exposures were similar across all high-risk units, though ED nurses reported poorer compliance with the use of PPE to prevent exposure. Risk assessment for prevention of NP BFE was reported, yet there was a lack of compliance. The ICU results indicated a positive safety culture in contrast to the ED.

Conclusion

The findings are consistent with research identifying inadequate prevention of NP BFE, although nurses are aware of the importance of risk assessment. The HBM has the potential to increase understanding of the differences in nurses' perceptions of risk in safety culture.

Access the full article here:

https://www.idhjournal.com.au/article/S2468-0451(23)00016-0/fulltext



Latest Articles from Infection, Disease & Health

Have gloves and gowns had their day? An Australian and New Zealand practice and attitudes survey about contact precaustins for MRSA and VRE colonization Sarah Browning, Joshua S. Davis, Brett G. Mitchell

Healthcare workers experiences of caring for patients colonized with Carbapenemase-Producing Enterobacterale (CPE) in an acute hospital setting - A qualitative descriptive study Majella O'Connor, Claire McNamara, Owen Doody

An educational program on antimicrobial resistance and stewardship for staff nurses in a public tertiary care hospital in India Niti Mittal, Himani Deswal, Rakesh Mittal, Sumit Sharma, Pankaj Kaushik

CALL FOR PAPERS

INFECTION, DISEASE & HEALTH



Editor-in-Chief

Professor Brett Mitchell brett.mitchell@avondale.edu.au

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Infection, Disease & Health

(formerly Healthcare Infection)

Official journal of the Australian College for Infection Prevention and Control (ACIPC)

The journal is a global platform for the publication of original knowledge that fundamentally advances the prevention and control of infection in human populations. Priority is given to original infection prevention research relevant to, or conducted in, healthcare settings (including hospitals, community-based healthcare and private healthcare), aged and residential care, education settings, child care, dentistry, correctional services, mental health and indigenous health and industry with implications for healthcare e.g. tattoo parlours. We are also interested in articles on the surveillance and epidemiology, outcomes and risk factors for infections acquired in settings just described, cost-effectiveness of infection prevention strategies and sociological aspects of infection prevention and control. We may consider public health-based research that focuses on infection prevention in human populations, including low and middle income contexts.

All submissions must contribute new knowledge or advance debate on a relevant topic. The journal is quarterly and publishes research, reviews, concise communications, case reports, commentary, opinion pieces and other articles concerned with infection and disease affecting the health of an individual, organisation or population.

Infection, Disease & Health provides a platform for the publication and dissemination of original knowledge at the nexus of the areas infection, disease and health in a One Health context. One Health recognizes that the health of people is connected to the health of animals and the environment. The audience of the journal includes researchers, clinicians, nurses and midwives, health workers and public policy professionals concerned with infection, disease and health.









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Selected Publications of Interest

Using the COM-B model to identify barriers to and facilitators of evidence-based nurse urine-culture practices. Advani, S. D., Winters, A., Turner, N. A., Smith, B. A., Seidelman, J., Schmader, K., Anderson, D. J., & Reynolds, S. S. (2023). Antimicrob Steward Healthc Epidemiol, 3(1), e62. https://doi.org/10.1017/ash.2023.142

Assessment of best-selling respirators and masks: Do we have acceptable respiratory protection for the next pandemic? Chaaban, O., Balanay, J. A. G., & Sousan, S. (2023). Am J Infect Control, 51(4), 388-395. https://doi. org/10.1016/j.ajic.2022.06.024

Traditional definition of healthcare-associated influenza underestimates cases associated with other healthcare exposures in a population-based surveillance system. Gettler, E. B., Talbot, H. K., Zhu, Y., Ndi, D., Mitchel, E., Markus, T. M., Schaffner, W., Harris, B., & Talbot, T. R. (2023). Infect Control Hosp Epidemiol, 1-7. https://doi.org/10.1017/ice.2023.64

Clinical evaluation of an electronic hand hygiene monitoring system. Iversen, A. M., Hansen, M. B., Kristensen, B., & Ellermann-Eriksen, S. (2023). Am J Infect Control, 51(4), 376-379. https://doi.org/10.1016/j. ajic.2022.06.017

Patient and ward related risk factors in a multi-ward nosocomial outbreak of COVID-19: Outbreak investigation and matched

case-control study. Leal, J., O'Grady, H. M., Armstrong, L., Dixit, D., Khawaja, Z., Snedeker, K., Ellison, J., Erebor, J., Jamieson, P., Weiss, A., Salcedo, D., Roberts, K., Wiens, K., Croxen, M. A., Berenger, B. M., Pabbaraju, K., Lin, Y. C., Evans, D., & Conly, J. M. (2023). Antimicrob Resist Infect Control, 12(1), 21. https://doi.org/10.1186/ s13756-023-01215-1 Healthcare workers experiences of caring for patients colonized with Carbapenemase-Producing Enterobacterale (CPE) in an acute hospital setting - A qualitative descriptive study. O'Connor, M., Mc Namara, C., & Doody, O. (2023). Infect Dis Health. https://doi. org/10.1016/j.idh.2023.03.001

Canadian Nosocomial Infection Surveillance, P. (2023). Antimicrobial use among paediatric inpatients at hospital sites within the Canadian Nosocomial Infection Surveillance Program, 2017/2018. Rudnick, W., Conly, J., Thirion, D. J. G., Choi, K., Pelude, L., Cayen, J., Bautista, J., Beique, L., Comeau, J. L., Dalton, B., Delport, J., Dhami, R., Embree, J., Emond, Y., Evans, G., Frenette, C., Fryters, S., Happe, J., Katz, K., . .. Antimicrob Resist Infect Control, 12(1), 35. https://doi.org/10.1186/s13756-023-01219-x

Risk factors for in-hospital mortality and secondary bacterial pneumonia among hospitalized adult patients with communityacquired influenza: a large retrospective cohort study. Yi, G., de Kraker, M. E. A., Buetti, N., Zhong, X., Li, J., Yuan, Z., Zhu, W., Zhou, J., & Zhou, H. (2023). Antimicrob Resist Infect Control, 12(1), 25. https://doi.org/10.1186/ s13756-023-01234-y

Investigation of the selection and use of "other" personal protective equipment to prevent mucous membrane exposure in nurses: A cross-sectional study. Zimmerman, P. A., Byrne, J. H., Gillespie, B. M., & Macbeth, D. (2023). Infect Dis Health. https://doi. org/10.1016/j.idh.2023.03.004

Have you been involved with a recent publication that would be of interest to the wider ACIPC community?

If so, we'd love to hear from you. Please contact the office at office@acipc.org.au





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