

TRIALS AND TRIBULATIONS OF CULTIVATING THE IPC PRESENCE IN REDEVELOPMENT

THE ABRIDGED VERSION



GAMA ACIPC
ROADSHOW
2026 HOBART

BACKGROUND TO A REDEVELOPMENT IPC ROLE

- A dedicated IPC project role – 2012
- Initially part time within the RHH IPC unit
- Formalised with K Block completion in 2019
- Now permanent for THS – S, inclusive of
 - Acute
 - Sub Acute & Community

IS IPC NECESSARY?

Questions

- Is it a big deal?
- Is infection control really needed?
- What about patients, staff, visitors?

Answer

- YES - construction poses a clinical risk that demands robust controls

IPC MATTERS DURING CONSTRUCTION

- Construction creates an infection risk to everyone
- Our central focus is patients
- The clinical environment must be protected
- Not just Facilities' work – it affects us all

IPC IS CRITICAL DURING CONSTRUCTION

- To manage airborne, waterborne risks at a minimum, but also necessary commencing at design
- Protect vulnerable populations:
 - ICU patients, newborns, oncology, transplant, elderly, those with chronic conditions.

BUILDING THE IPC PRESENCE

- Starts with clear communication
- Engage with stakeholders
- Secure a seat at decision - making tables
- Focus on long term inclusion and project outcomes/results

ENGAGEMENT CHALLENGES

- The hardest part – is being invited to the party
- Early involvement is key
- Push respectfully - don't give up
- Don't take resistance personally

TRIALS

Raising IPC's profile for redevelopment within healthcare

- Education both of contractors and staff
- AUSHFG
 - ERGs
 - Parts
 - Components

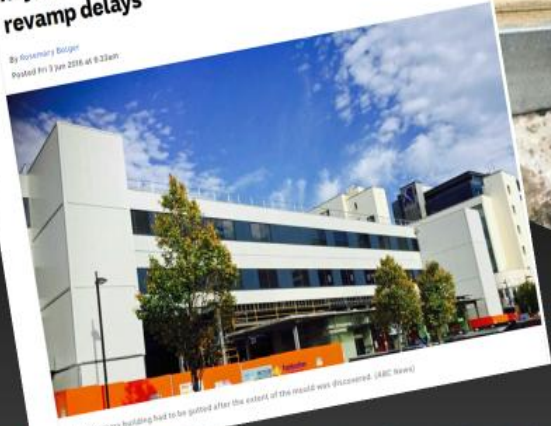
TRIBULATIONS

- Lack of early IPC inclusion
- Poor barriers and hoarding integrity
- Communication breakdowns
- Limited adherence with IPC Protocol

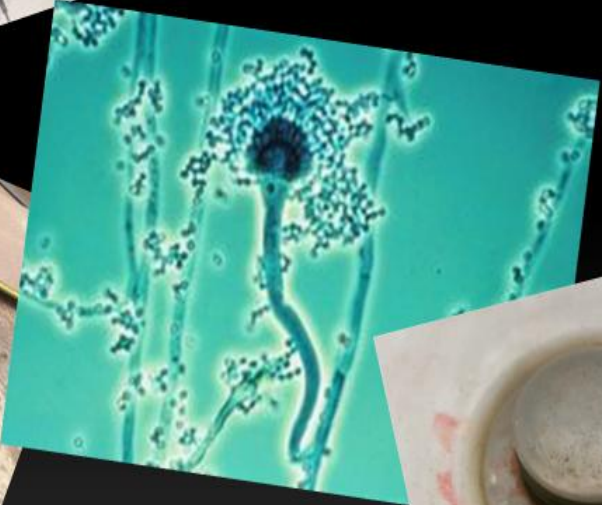
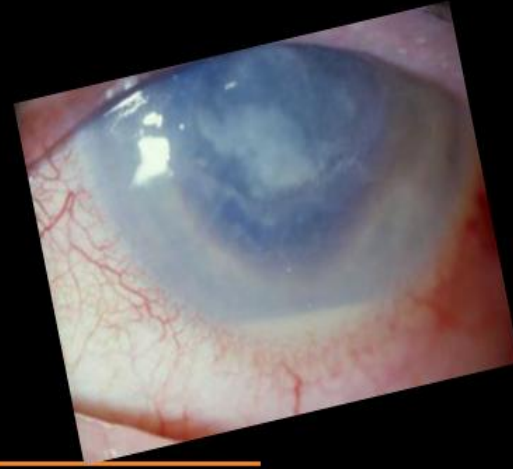
RISKS - OUTCOMES

**Royal Hobart Hospital mould adding to lengthy
revamp delays**

By Rosemary Butler
Posted Fri 3 Jan 2014 at 6:23am



The temporary building had to be gutted after the extent of the mould was discovered. (ABC News)

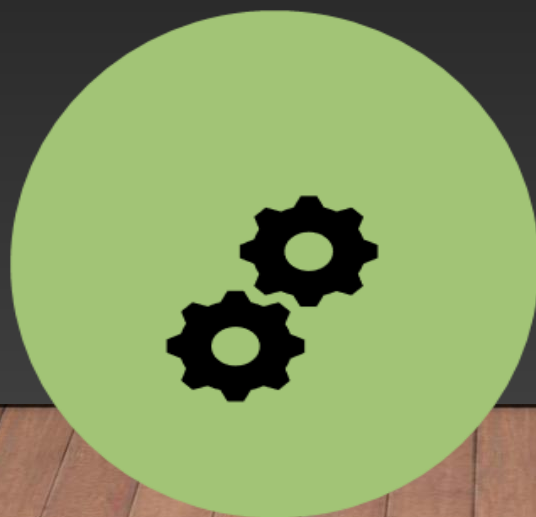


PRACTICAL TAKE HOMES

- Engage early and as often as you can
- Always have a structured risk assessment – know your at-risk pts, locations, adjacent Services
- Maintain continuous oversight – inspections, meetings
- Collaborate across disciplines, plan with the

Team

QUESTIONS



REFERENCES

- Australian Guidelines for the Prevention and Control of Infection in Healthcare 2023
- AUS HFG [Home](#) | [AUSHFG 2025](#)
- THS – S Protocols [Strategic Document Management System](#)
- http://www.njmoldinspection.com/human_aspergillosis.html
- [Severe and Progressive Cellulitis Caused by Serratia marcescens Following a Dog Scratch - Deeti J. Pithadia, Erena N. Weathers, Rhonda E. Colombo, Stephanie L. Baer, 2019 \(sagepub.com\)](#)
- Infection Control Principles for the Management of Construction, Renovation, Repairs and Maintenance within Healthcare Facilities (<http://www.ihea.org.au/files/InfectionControlManual.pdf>)

