

SUMMER 2010

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CIC Success Story!

Congratulations to Diana Gowanlock for achieving her CIC certification. Diana works at the Thunder Bay Regional Health Sciences Centre in the Infection Prevention & Control Department.

**Maternal Newborn Project -
A Great Success!**

- Hospital Champions will receive a **resource package**, that includes Provincial Recommendations.
- A baseline survey established the current state of implementation for the Provincial Recommendations.
- Regular "Community of Practice" sessions were held from March to June.
- These discussions have resulted in enhanced relationships between Maternal Newborn staff and ICPs.

To review a summary of the project, go to <http://www.ricn.on.ca/photos/custom/RICN%20Maternal%20Newborn%20Project%20SummaryREVISED.pdf>

To review a copy of the resource package, contact your local RICN.

CHICA-Canada Conference

May 29 – June 3, 2010

Staff from the Regional Infection Control Networks were proud to highlight the work of Infection Control Professionals across Ontario at the recent CHICA-Canada Conference held in Vancouver in June 2010. In fact, seven of the oral presentations were made by RICN staff, and RICNs were involved in presenting or supporting numerous posters on Infection Control initiatives and findings. Well done, Ontario!



The next CHICA-Canada conference is being held in Toronto from May 29 to June 3, 2011. We will once again have a great opportunity to showcase our works. Think about your local experiences and consider submitting an abstract to help inform others of your good work! Have you successfully averted an outbreak, tried a new way to educate staff, standardized a process in your facility for surveillance, brought in a new policy that has made a difference to patient care, developed an audit, created a tool to help staff practice more safely, dealt with an unusual situation..... the possibilities are endless! If you have thoughts about an issue or project you would like to share, and you need coaching or assistance in putting your thoughts together and writing up an abstract, talk to the folks in your RICN office. It is not as overwhelming a process as it might appear and it gives a great sense of accomplishment and professional pride to see your work highlighted in this way.



One exciting opportunity we are particularly excited about for next year's conference is the first ever Designates Day (Monday May 31, 2011). Targeted at individuals who are involved in infection prevention and control activities but are not specifically assigned the role of Infection Control Professional at their organization, this full-day session will support and expand understanding with a view to expanding their IPAC role. For more information, please visit www.chica.org

Planning Your IPAC Activities in LTC

The goals of any Infection Prevention and Control program are to protect residents from health care associated infections and to prevent the spread of infections between residents, staff, visitors and others in the health care environment. Below are some activities that Infection Control Professionals (ICPs) engage in to meet these goals over the course of a year, by season.



Summer is a great time to take stock of the IPAC program. Assess areas of strength and identify areas where improvements are needed. Additionally, use the summer months to look ahead and plan your influenza vaccine campaign roll out and Infection Control Week celebrations (Infection Control Week 2010 is October 18 – 22). Resources are available for your use! To access them, contact your local RICN.

Autumn is an opportunity to reach out to the front-lines! Provide education to staff regarding influenza vaccination, healthy workplace policy, proper hygiene, and control of infections. Remind residents and visitors to report signs and symptoms of illness and avoid contact with others while symptoms persist.

Winter can be a challenging time for ICPs – enhanced surveillance to detect possible outbreaks and emphasis on hand hygiene will go a long way in preventing and minimizing the duration of disease outbreaks.

Spring is the perfect opportunity to take a deep breath and look back at the events of the winter. It's a great time to review outbreaks that occurred over the winter in detail to determine how such outbreaks might be effectively prevented in the future. Share 'lessons learned' with staff and administration and work on incorporating them into current policies and procedures where appropriate.

For great tools to help you plan your IPAC activities visit our website at: www.ricn.on.ca and click on the Education and Training tab.

Remember that everyone has a role in Infection Control. Work together and have fun with it!



Doing it Right!

Don't miss the CAEM/RICN Conference at the Blue Mountain Resort in Collingwood on September 19-21st. One of the highlights of this year's conference will be the launch of the much anticipated Environmental Cleaning Educational Toolkit, a collaboration between RICN, CAEM and OHHA with support from the OAHPP and the MOHLTC and based on the PIDAC best practice document.

For registration information, visit the CAEM website: www.caenvironmentalmanagement.com

Infection Prevention and Control Core Competency Program – Update

On April 1, 2010 the Infection Prevention and Control (IPC) Core Competencies were transitioned from the Ministry of Health and Long-Term Care to the Ontario Agency for Health Protection and Promotion (OAHP). OAHP, with support from the Regional Infection Control Networks (RICNs), is now asking you to help us reach our goal of providing a comprehensive education program that will enhance the safety of health-care providers and patients in Ontario.



Work on the revitalization of the Infection Prevention and Control Core Competency Education program has begun. The first step in this process is an evaluation that is being carried out by Research Strategy Group (RSG) on behalf of Ontario Agency for Health Protection and Promotion.

RSG will be sending out a survey to many of the RICN stakeholders starting the week of July 26th. The survey, which will be distributed by mail and electronically, will focus on how the Core Competencies were used within healthcare settings and what changes are needed. When you receive the survey please take some time and respond to it. The feedback you provide will be very important in moving forward with this important initiative.

We ask that you assist us by completing the surveys and encouraging other colleagues to do the same. The surveys will allow us to review the changes that have occurred within our health-care setting since the inception of the IPC Core Competencies and will provide an evaluation of the existing modules.

OAHP has hired Research Strategy Group (RSG) to assist in conducting an evaluation of the existing modules. In August, RSG will also be doing further surveys with frontline healthcare providers to look at the usability of the modules and also hear what they liked and found challenging about using these. There will be an opportunity for some of you to be involved in this second round. Let us know if you're interested.

Once the information from the evaluation is complete, OAHP will work with the RICNs to hold engagement sessions in selected areas of the province to ensure that the findings have been understood and will collect ideas to incorporate into the revised education programs.

Thank you for your support, we look forward to hearing your feedback.

Acute Care ARO Point Prevalence Survey

Canadian acute care hospitals with more than 50 beds have been invited to participate in a survey to determine the prevalence of MRSA, VRE and *C. difficile*.



This project will provide important Canadian data about the burden of disease, risk factors associated with these organisms as well as inform effective control strategies.

CHICA-Canada supports and is a co-investigator in this initiative. RICNs also encourage your participation.

An infection control professional in your hospital should have received an e-mail invitation to participate in this point prevalence survey being held in November 2010.

Questions about this project can be addressed to either Dr. Allison McGeer (amcgeer@mtsinai.on.ca) or Dr. Andrew Simor (asimor@sunnybrook.ca).

More information about this project is available at:

<http://microbiology.mtsinai.on.ca/research/aro-prevalence-study/>

CBIC Certification Computerized Exam Changes

The Certification in Infection Control (CIC) exam is based on periodic Practice Analyses to identify the role of an Infection Control Practitioner. As a result, the content of the exam will change. The Computer Based Test (CBT) will change July 1, 2010 and the Self-Achievement Recertification Exam (SARE) will change January 1, 2011. The content outline and references have been updated. To view them click [here](#). To read more about the Practice Analysis and to see the updated Content Outline click [here](#). Updated references can be viewed [here](#).

Webber Teleclasses

- **August 12, 2010:** Positive Deviance: Unleashing Secret Change Agents in Your Hospital to Prevent MRSA Infections, Dr. Jon Lloyd, Plexus Institute
- **September 9, 2010 (Free Teleclass):** Planning for Infectious Disease Disasters in Ambulatory Care Centers, Terri Rebman
- **September 20, 2010:** Live Broadcast from IPA Conference TBA
- **September 21 2010:** Live Broadcast from IPA Conference TBA
- **September 29, 2010:** Voices of CHICA—part 2 Community and Hospital Infection Control Association of Canada Board Members and Guests
- **September 30, 2010:** Prevention of Mother to Child Transmission of HIV Dr. Kay Libbus, University of Missouri
- **October 13, 2010:** Infection Control in the Tropics Claire Boardman, VICNISS, Australia
- **October 21, 2010:** Methods of Monitoring Hand Hygiene Frequency and Compliance Dr. John Boyce, Hospital of St Raphael
- **October 21, 2010:** Implementing Mandatory Vaccination for Health care Workers Dr. Keith Woeltje, Washington University School of Medicine



Hand Hygiene Compliance

A recent study in Infection Control and Hospital Epidemiology found that overall rates of compliance with hand hygiene guidelines ranged from 4%-100% (median 40%). Non-compliance is most often associated with situations where there are high activity levels (i.e. ICU) and/or physician involvement. Higher compliance rates were associated with the performance of dirty tasks, the introduction of ABHR, performance feedback, and accessibility of necessary materials. (Erasmus, V, et al. Systemic review of studies on compliance with hand hygiene guidelines in hospital care. ICHE, Vol. 31, No. 3; March 2010)



TB: What we know...and what lies below conference

Monday and Tuesday, November 15 & 16, 2010, Toronto, Ontario. For registration information email: registration@eventives.ca. For more information on Travel Grants contact Menn Biagtan, by email biagtan@bc.lung.ca.



NWOICN Lunch & Learns

September 23, 2010	Environmental Issues
October 21, 2010	UTIs & ESBL
November 18, 2010	Norovirus
December 16, 2010	Foot Care
January 20, 2011	Infection Control in OR
February 17, 2011	Micro Session-Gram Positives & Negatives
March 17, 2011	Legionnaire's
April 21, 2011	Construction
May 19, 2011	Nursing Week and Infection Control
June 16, 2011	Using Glow Germ for Auditing
September 15, 2011	IPAC Auditing
October 20, 2011	Group A Strep
November 17, 2011	Ministry of Labour IPAC Consultant role
December 15, 2011	Hepatitis B and HIV

For more information on these lunch and learns and to register your site contact Brandy Ponka ponkab@tbh.net.

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This newsletter was prepared by a collaborative



Northwestern Ontario

*Giving Health
 a Helping Hand*