

SPRING 2010

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STOP! Clean Your Hands

The first ever *STOP! Clean Your Hands Day* will take place on Wednesday, May 5, 2010. The Canadian Patient Safety Institute, Accreditation Canada and the Community and Hospital Infection Control Association—Canada (CHICA-Canada) invite you to participate in this cross-country initiative, which coincides with the World Health Organization *Save Lives—Clean Your Hands Day*.

When you register, your facility will be added to the list of participating organizations and you will receive a package of useful tools and innovative resources that will assist you in planning your day and promoting optimal hand hygiene practices in your organization.

To register, go to the [STOP! Clean Your Hands Day](#) official web-site.

Please send us your pictures, stories or plans for this celebration so that we can highlight them in our next newsletter. Email them to: askcsicn@hhsc.ca.

COMING SOON!

Environmental Cleaning Best Practices Training Tools

In January 2010, the Provincial Infectious Diseases Advisory Committee (PIDAC) released a Best Practice document on *Environmental Cleaning* for Prevention and Control of Infections. In anticipation of its release the Regional Infection Control Network developed a partnership with two environmental services organizations, Canadian Association of Environmental Management (CAEM) and the Ontario Healthcare Housekeepers Association (OHHA). This project team's goal was to develop a training toolkit for environmental services in health care facilities based on this *new Environmental Cleaning* document.



The Environmental Cleaning Best Practices Project Team consists of:

- Nora Boyd, Network Coordinator Erie-St. Clair Infection Control Network
- Brenda Smith, Network Coordinator Central West Infection Control Network
- Grace Volkening, Network Coordinator Central Region Infection Control Network
- Keith Sopha, President, (CAEM)
- Glenda Kaufmann, President, (OHHA)
- Liz Van Horne, Ontario Agency for Health Protection and Promotion (OAHPP)
- Sarah Cox, Ministry of Health and Long-Term Care (MOHLTC)



Dr. David Sheridan, Facilitator
Shercon Associates Inc.

Environmental service representatives from healthcare facilities across the province have assisted with the development of the curriculum and content for the training materials.

The toolkit will allow the trainer to educate their staff as a group, through self directed learning or using one on one coaching. The toolkit is under construction with estimated delivery date of summer 2010. Train the trainer sessions will be supported by the RICN. Progress updates are posted on the RICN website at www.ricn.on.ca.

Ask the Expert: Dr. Abdul Chagla



Acanthamoeba keratitis due to contaminated contact lens solution

Background:

Increased use of contact lenses has also increased the risk of corneal infections. While contact lens wear is generally very safe, lenses that are not properly cleaned and disinfected can raise the risk of severe eye infection. Lenses removed from the eye should be cleaned and disinfected before being reinserted.

Recent scientific publications have reported contamination of contact lens care systems with acanthamoebae resulting in severe eye infection.

What are some of the symptoms?

Common symptoms include: eye pain; red eyes; blurred vision; sensitivity to light & feeling that something is in the eye.

How is the infection diagnosed?

The infection is usually diagnosed by an eye specialist based on symptoms, growth of the amoebae from a scraping of the eye, and/or seeing the amoebae by a process called confocal microscopy.

Have there been outbreaks?

In 2007 Centre for Disease Control (CDC) reported an outbreak of acanthamoeba keratitis with a possible link to a brand of contact lens cleaning solution. Though no direct evidence was found, the company voluntarily recalled the product. There have also been reports on the presence of Acanthamoeba in water that was used for storage of contact lens.

What is the disinfection criterion for contact lens solution?

ISO Standard 14729 requires that contact lens disinfecting solutions reduce the load of certain strains of microbes in the solution by specific amounts (for example, a 1 log reduction for *Fusarium* and *Candida* or a 3 log reduction for *Pseudomonas aeruginosa*, *Serratia marcescens* and *Staphylococcus aureus*).

Are there any current disinfection criteria for Acanthamoeba in contact lens solutions?

No, these are being developed and need verification.

What is the best way to avoid microbial contamination of contact lens solution?

- Wash your hands - before applying, removing, cleaning or handling your contacts
- Use recommended products and follow manufacturer's recommendation on use and storage
- Maintain a daily cleaning regimen
- Replace your lens case frequently - every three to six months. Care of contact lenses includes cleaning the storage case since it is a potential source of infection

Audits – A Foundation for Change!

Though the word 'audit' strikes fear in the hearts of many, it can provide us with valuable information. Audits are an important part of change management and vital in providing evidence of program effectiveness, improvement and compliance with best practices.

Theories of behaviour change will emphasize the importance of feedback as a key part of sustaining change over time. Audits can provide tools and evidence to make that happen. Bryce (*AJIC, May 2007*) describes the infection control audit as an ideal vehicle to assess consistency of approach to infection prevention and to gauge compliance with best practices. Audits provide some of the hard data that is often used to measure progress—both internally and externally.

Malik et al (*AJIC, May 2003*) notes that audits should highlight good performance, facilitate positive feedback, identify areas for improvement and provide a quality indicator measure. These components allow us to assess the current level of compliance with infection control best practices, measure compliance against benchmarks, provide feedback to participating staff and stakeholders, and identify where improvements can be made.

So don't be afraid of the audit! It is an organized examination of where you are now that will help guide you to where you want to be.



RICN Maternal Newborn Project Dissemination of IPAC Recommendations

A 2007 review of Level III NICUs led to the creation of an Infection Prevention and Control (IPAC) Work Group

(under the leadership of the Provincial Council for Maternal and Child Health (PCMCH)) to recommend standardized recommendations that provide consistency when dealing with infection prevention and control (IPAC) within and between maternal and newborn units.



Consensus-based policies were developed by this group and are now available and are in alignment with current maternal newborn recommendations and various best practice documents developed by the Provincial Infectious Disease Advisory Committee (PIDAC). They can be accessed electronically at <http://www.pcmch.on.ca/infectionprevention.htm>.

At the initial stages of this project, the RICN identified existing Programs, potential Champions and current needs (through surveys) in order to develop a comprehensive education plan aimed at increasing IPAC knowledge within this sector.

Three interactive training sessions were developed and offered to the Champions, ICPs and all those wishing to increase their IPAC knowledge within this sector. A total of six hours of training included the following topics:

- Day one: Routine Practices, defining the environment and syndromic surveillance
- Day two: EBM and Group B Streptococcus

Day three: HIV, HBV, HCV, and Varicella Zoster/Herpes Zoster

These training sessions were provided by Clare Barry and Dr. Vearncombe by videoconference and Live Webcast. A review of the recommendations were also offered specifically to physicians involved within a Maternal Newborn Program by Dr. Lemyre and Dr. Vearncombe.

To maintain open discussion within this sector, a community of practice was encouraged. Weekly sessions were offered and well-attended. Questions were asked and answered in accordance with the recommendations. Sessions are ongoing with one planned for end of April and another in June.

A training package is currently being developed that will include items previously discussed along with tools and materials felt to be important as Maternal Newborn staff work towards improved IPAC practices within their Program.

An evaluation of this project will be done in May 2010 through survey questions. Survey results will be forwarded to the MOHLTC and PCMCH along with a recommendation that of the initiative be maintained support be provided to this sector on an ongoing basis. The RICN is very proud to have been a part of this meaningful project and look forward to its continued support.

Infection Prevention & Control **Pocket Guide:** *for Health Care Providers in Non Acute Care Settings*



The pocket guides developed by one of our regional networks are in! CSICN will be able to provide our non acute care sites with some of these tools to help assist non regulated staff working in these settings.

Contents of the guide include understanding the need to do a Risk Assessment before every task or duty.

Ask Yourself: - **WHAT?**

What is the task or job I am about to do?
How will the resident/client respond?
Am I capable of performing the task?
Tools/PPE I need to take with me to do the task/job?

Symptom Based Precautions, Precautions at a Glance, Infectious Diseases and Specimen Collection are just some of the additional contents of the guide.



THOUGHT FOR THE DAY...

When we do the best that we can, we never know what miracle is wrought in our life, or in the life of another.

Helen Keller



Just Clean Your Hands (JCYH) - Hand Care Program

Health Care Providers (HCP) will likely clean their hands at least 30 times per shift and one-quarter of them will report symptoms of dermatitis—usually worse in winter months due to decreased humidity. Frequent and repeated use of hand hygiene products, especially soaps/detergents is the primary cause of chronic irritant contact dermatitis. Inflammation of the skin can be either allergic in nature (such as latex allergy) or irritant (wet work). Skin is very susceptible to changes with prolonged moisture contact. Underlying skin problems such as eczema and psoriasis can be exacerbated by frequent hand hygiene.

Intact skin is the best protection against infection for the HCP as well as the best protection to prevent hands from becoming a reservoir for organisms that can be transmitted to patients/residents/clients.

It is important to have an organizational Hand Care Program. Ideally, this will be done through the occupational health service, although where resources are limited there may need to be some creativity in implementing it. There is a useful [Hand Care Self-Assessment Tool](#) in the [JCYH](#) package on the MOHLTC Website that can be used at the time of hire. Correct technique for hand hygiene, appropriate glove selection, appropriate cleaning products and easy access to moisturizers are all key components of a successful hand care program. Early identification of symptoms of cracking, peeling, dryness, itching or blisters and appropriate treatment can reduce the severity of dermatitis and hasten return to intact skin. Remember that hand care protection is a 24/7 commitment. Please feel free to use the attached link to Dr. Cividino's [Hand Care Program power-point presentation](#).

Dr. Maureen Cividino, CSICN Medical Coordinator

What's Happening...

EDUCATIONAL EVENTS

May 29-Jun 3, 2010

CHICA-Canada's 2010 National Education Conference:
"Golden Opportunities-Soaring to New Heights"
Vancouver, BC [Information](#)

June 17, 2010

CHICA-HANDIC Annual Infection Control Education Day
All in the Family - Infection Control Through the Lifespan
See next page for registration form or visit <http://www.chica.org/handic/education.html>

UPCOMING

LONG TERM CARE MEETINGS

Niagara Long Term Care Infection Control Group
Next meeting June 15:

Location: Meadows of Dorchester
6623 Kalar Road
Niagara Falls
8:00 am - 9:30 am

Hamilton (and area) Long Term Care Infection Control Group
Next meeting June 24:

Location: St. Joseph's Villa
56 Governor's Road
Dundas
8:00 am - 10:00 am

Hope to see you there!

This newsletter was prepared by a collaborative effort of the RICNs and this Network.

Central South Infection Control Network

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REGIONAL INFECTION
CONTROL NETWORKS

Central South

*Giving Health
a Helping Hand*

In Celebration of 2010 – The Year of the Family – CHICA-HANDIC Presents:

All In The Family

Infection Control Through the Lifespan

INFECTION CONTROL ANNUAL EDUCATION DAY

For Health Care Providers in Acute Care, Long Term Care, Public Health & Community

Thursday, June 17, 2010

8:00 AM – 4:00 PM

\$ 75.00

Includes Refreshments, Lunch & Door Prizes

Michelangelo Banquet Centre

1555 Upper Ottawa Street, Hamilton

Directions at: Michelangelo Banquet Centre

www.michelangelos.com

0800	"Get Your Birth Certificate" Registration	1130	"Different Stroke for Different Folks" Challenges and Strategies for dealing with Cognitive Impairment, Non-Compliance and Mental Health Risks - Linda Fletcher
0830	"Rules of the House" Opening Remarks and Welcome - CHICA Mom - Anne Bialachowski & HANDIC Mom - Risa Cashmore	1200	Mid Life Crisis Break - Lunch Provided. Visit Vendors
0845	"Food For Thought & Something is Wrong With My Gut!" IPAC Challenges in Day Care Centres Eva Hatzis (Hamilton Public Health)	1300	"Making It or Breaking It" Using Positive Deviance to Bring About Successful Change in Your Organization - Liz Rykert
0915	"IPAC Horrors in the Home: Skeletons in the Closet and Lizards in the Living Room" All Those Things Your Mother Told You - Risa Cashmore	1430	Retirement Break
0945	"Blood-Letting and other Miraculous Fads" Living With a Wild Child - Piercings, Punctures, Fangs and Fantasy - Dr. Martha Fulford	1445	"Words of the Wise - IPAC Tips, Tools and Take-Aways" Words to live by from those who have walked the road. - Virginia Tirilis & Stephanie Ralph
1015	Recess Break - Visit Vendors	1515	"Epitaph" Closing Remarks, door prizes and evaluations HANDIC Dad - Mark Jefferson
1045	"Bed Bugs - That's Not Your Pillow You Are Cuddling" Bed Bugs Across the Continuum of Care - Dr. Martha Fulford	1530	"Farewell" Time to drive off into the sunset - DRIVE SAFELY!

REGISTRATION FORM - Registration Deadline June 10, 2010 - **NO** Registrations at the door

Please provide e-mail address for registration confirmation. Cheque payable to CHICA-HANDIC

Last Name: _____ First Name: _____ Position: _____

Facility: _____ Address: _____

City: _____ Postal Code: _____ Phone: _____

E-Mail: _____

Institution Type: Acute Care: ___ Long Term Care: ___ Community: ___ Public Health: ___ Other: _____

Menu Allergies: Please list if applicable _____

Send completed form and cheque to Stephanie Vigliotta, Infection Control, Room T1359, St. Joseph's Healthcare, 50 Charlton Ave, Hamilton, ON L8N 4A6. For inquiries only- 905-522-1155 Ext. 33385 or E-mail: svigliot@stjoes.ca

Handouts available on-line one week prior to event at: <http://www.chica.org/handic/index.html>