Educating Staff, Clients and Visitors about Infection Prevention and Control (IPAC)

A culture of IPAC safety in a congregate living setting is the shared commitment and demonstrated values, attitudes and actions of an organization's leaders and staff that support the belief that the congregate living environment is to be safe from infection acquisition and transmission.

One way to support that culture is to invest in education for all staff, clients and visitors with respect to IPAC and their specific role and accountabilities in creating a safe environment.

THE SCOPE OF AN IPAC EDUCATION PROGRAM FOR STAFF

As a minimum, it is recommended that an IPAC education program for staff include the following:

- a) IPAC assessment skills / point of care risk assessment
- b) IPAC program basic standards of practice ("core competencies"):
 - a. hand-hygiene for staff, service providers, and volunteers
 - b. concepts of Routine Practices
 - c. concepts of Additional Precautions
 - d. appropriate use of Personal Protective Equipment (PPE)
 - e. safe management of sharps
 - f. worker immunization
 - g. work restrictions due to infectious diseases
 - h. equipment cleaning and disinfection
 - i. environmental cleaning
 - j. basic microbiology and transmission of microorganisms
 - k. how and when to report IPAC-related incidents, injuries, and issues of concern
 - I. information on common Infectious Diseases affecting the organization (e.g., COVID-19, Seasonal Influenza, Tuberculosis)
 - m. additional IPAC resources available, both within and outside the organization.

In addition, staff should be made aware of:

- their specific IPAC responsibilities, legislation, jurisdictional best practices and organizational protocols and procedures.
- relevant new scientific innovations in the IPAC field
- educational resources such as peer reviewed IPAC journals and linkages with professional IPAC associations (e.g., IPAC Canada).

IPAC EDUCATION FOR CLIENTS AND VISITORS

Prevention of Infectious Disease spread in Congregate living settings requires that clients and visitors have education on the following important topics:

- a) correct hand hygiene technique and basic hygiene practices that prevent the spread of infectious diseases
- b) respiratory etiquette
- c) up-to-date, accurate information about common infectious diseases

RECOMMENDED TIMING

IPAC education is an ongoing activity in congregate-living settings and can be supported by the use of passive awareness tools such as posters, pamphlets, orientation handbooks and standing agenda items for team meetings etc. However, there are also some key times where formal education is of critical importance:

- 1. When a new staff member joins the organization and completes their orientation. This training can include:
 - introduction to the organization's IPAC program
 - information regarding an individual's IPAC responsibilities in relation to client/visitor safety and the individual's personal safety
 - information on the organization's expectations regarding hand hygiene; and
 - information on Routine Practices and Additional Precautions, including location of PPE and recognition of IPAC signage used in the organization.
 - Additional instruction may be given to new staff with specific skill sets. For example, staff in environmental services receive information regarding the organization's expectations for cleaning, particularly turning over client rooms and common spaces.
 Staff with responsibility for equipment disinfection and decontamination (e.g., toys) may receive specialized training.
- 2. When a new client completes intake into the organization's congregate living setting.
- 3. Annual staff training to refresh knowledge, maintain currency and support quality improvement and organizational alignment with leading practices
- 4. Ad-hoc education sessions as needed for clients and staff when specific situations arise (e.g., during outbreaks, to provide information on new emerging infections, or when required based on the results of IPAC audits)

THE IMPORTANCE OF FEEDBACK

Continuous quality improvement is a key feature of an effective IPAC educational program. Organizations are encouraged to set up operational processes so that:

- There is regular, consistent generation and sharing of learning from the organization's own IPAC-related experiences, including good practice and adverse events. Feedback serves as an educational tool to stimulate change in practices and to refine IPAC education program content.
- Feedback is actively sought (e.g., surveys, post-education testing, education evaluations, suggestion boxes, process audits) and/or is based on reviews of organizational procedures and reports. For example, results of process audits of practices and monitoring of care practices are incorporated into education and may be used to assess the effectiveness of educational interventions.
- The organization is able to monitor compliance with IPAC program protocols and procedures and can then make improvements to the education program based on these results.
- IPAC-related incident investigations may be used to inform IPAC education

Reference: Infection Prevention and Control (IPAC) Canada. Infection Prevention and Control (IPAC) Program Standard. Can J Infect Control. 2016 December;30(Suppl):1-97. Retrieved from: https://ipaccanada.org/photos/custom/CJIC/Vol31No4supplement.pdf