Nursing Now Challenge webinar

INFECTION PREVENTION AND CONTROL

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Infection prevention and control (IPC)

is an evidence-based approach and practical solution designed to prevent harm to patients and health workers at every single health care encounter across the whole health system by stopping the spread of infection and antimicrobial resistance (AMR)

http://www.who.int/infection-prevention/en/
Protecting patient and health worker lives across the world through excellence in infection prevention and control

http://www.who.int/infection-prevention/en/

https://www.who.int/campaigns/world-hand-hygiene-day/2020
IPC interventions can:

- minimise the spread of pathogens, including R ones
- decrease the likelihood of infection in health-care settings
- reduce the overall need for antimicrobials
The guideline recommendations for effective IPC programmes include:

- Zingg W et al. TLID 2015
- Storr J et al. ARIC 2017
- Price L et al. TLID 2017
Nurses have strong participation in all core components, however, their participation is even more critical in some of them.

https://www.who.int/campaigns/world-hand-hygiene-day/2020
https://www.who.int/publications/i/item/WHO-UHL-HIS-2020.6
What is the role of nurses?

Core component 1 – AN IPC PROGRAMME
A dedicated, trained team should be in place for the purpose of preventing HAI and combating AMR.
- IPC programmes are integral to improving quality of health care and ensuring prompt response to outbreaks; in many cases, these are simple, low-cost life-saving measures.
- For many IPC programmes, nurses are most often the health professional designated as the IPC leadership.
- As the vast majority of health care is nurse-driven, nursing staff must be engaged to form a central part of the IPC programme.
- Nurse leadership is essential in promoting IPC programmes across the organization, including disseminating and implementing IPC measures.

Core component 3 – IPC EDUCATION & TRAINING
At the facility level, IPC education should be in place for all health workers.
- Nurses represent the majority of the health sector workforce; all nurses should receive basic IPC education and training and periodical refresher and updates.
- Nurses are often responsible for overseeing and delivering IPC training programmes to many health professionals.
- In many countries, most IPC professionals are nurses; IPC curricula for postgraduate training, as well as clear career pathways for IPC professionals, should be in place in all nations.
- Given their special proximity to the woman, her companion and the family, midwives are also best placed to advise them on good hand hygiene and IPC practices at the time of birth.

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What is the role of nurses?

Core component 5 – MULTIMODAL STRATEGIES
Critical for implementation, at the point of care, critical role in IPC at the point of care

- Successful multimodal strategies include the involvement of champions – a role often played by nurses and midwives as they are individuals who actively promote the CC and their associated evidence-based practices within an institution.
- Nurses and midwives serve as role models for other staff by educating and mentoring at the point of care and influence behaviour towards adherence to IPC practices.
- Successful multimodal interventions are associated with an overall organizational culture change – as the health workforce is largely comprised of nurses and midwives, no culture change can be achieved without their engagement and leadership.

Core component 7 – STAFFING & WORKLOAD
In order to reduce the risk of HAI and the spread of AMR, the following should be addressed: 1) bed occupancy should not exceed the standard capacity of the facility; 2) health care worker staffing levels should be adequately assigned according to patient workload.

- The world needs 9 million more nurses and midwives to achieve health for all by 2030.
- Low nurse-to-patient ratio is associated with the spread of pathogens, leading to increased HAI rates and outbreaks.
- Increased nurse staffing levels and education in skill-mix teams correlate with reduced adverse events to hospitalized patients, including catheter-associated urinary infections, bloodstream infections, and ventilator-associated pneumonia.
- Burnout among nurses due to high workload, long hours, and ineffective social relationships has been associated with worsening patient safety.
- Nurses can contribute to improved quality of care and patient safety through the prevention of adverse events, but this requires that they work at their optimal capacity.

https://www.who.int/publications/i/item/WHO-UHL-HIS-2020.6
Translating guidelines to action
Implementation manuals and resources
IPC & maternal, newborn, child adolescent health care

- IPC training package for maternal & neonatal care
- Interprofessional Midwifery Education Toolkit
- WHO IPC recommendations for small and sick newborns

https://www.who.int/teams/sexual-and-reproductive-health-and-research-(srh)/overview
https://www.who.int/teams/integrated-health-services/infection-prevention-control
Surgical site infection (SSI) prevention
Integration of SSI prevention in the surgical patient journey

https://www.who.int/teams/integrated-health-services/infection-prevention-control/surgical-site-infection
World Hand Hygiene Day, 5 May 2022

Thank you for your attention

https://www.who.int/campaigns/world-hand-hygiene-day/2022