



Developing Infection Prevention and Control Guidance for Maternal/Child Programs

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Objectives:

- To increase knowledge and awareness of the current issues and recommendations related to infection prevention and control in perinatal care
- To learn about the process used to develop the infection prevention and control recommendations and to develop a greater understanding of the role of the participant in adapting their current practices to enhance infection prevention and control in perinatal care

Outline:

- Background of project
- Development of consensus recommendations
- Scope of project
- Next steps – PIDAC best practice

Background of initiative:

- Need for more capacity in Ontario NICUs
 - High occupancy; no surge capacity
 - Reduce transfers out of region/province/country
- Need to create NICU beds without compromising IP&C standards, e.g. crowding
- Need to preserve existing NICU capacity by avoiding closures due to outbreaks
 - Reduce transfers out of region/province/country
- Need for consistent IP&C guidance for maternal-newborn units in Ontario
 - Reduce confusion for families/staff who transition between units

Development of recommendations:

- Urgency to provide support to sites with limited internal access to IP&C expertise through “best practices” document
 - Concern that increasing occupancy could increase infection rates
 - Aggressive time-line set (May-Dec 2008)
- Multidisciplinary expert working group assembled by and reporting to PCCH
 - Decision to develop a consensus-based guideline
 - Existing policies collected, reviewed, updated
 - Current authoritative references reviewed; limited literature search
- Commitment to full “best practice” development process through PIDAC-IPC
 - 2 year life-span for consensus document

Development of recommendations:

Working group members:

- IP&C:
 - Dr. Mary Vearncombe (Chair), SHSC
 - Dr. Kevin Katz, NYGH
 - Dr. Kathy Suh, TOH
 - Laurie Streitenberger, HSC
 - Yasmine Chagla, LHSC
 - Isabelle Langman, NEOICN
- Neonatology:
 - Dr. Michael Dunn, SHSC
 - Dr. Brigitte Lemyre, TOH
- Kathryn Hayward-Murray, Director, Credit Valley

Development of recommendations:

- Major content focus on prevention through use of Routine Practices for all care
- Disease specific precautions table
- Template policies on:
 - Expressed breast milk: handling, storage, administration, errors, withholding
 - Prevention of early-onset GBS disease
 - Herpes simplex
 - Hepatitis B
 - Hepatitis C
 - HIV

Scope of Project

- Regional Infection Control Networks (RICN) involvement
- Awareness and access to the recommendations
 - Creation of web-link through PCMCH at <http://www.pcmch.on.ca/InfectionPrevention.aspx>
 - Link from RICN web site to PCMCH
 - Communication process

Scope of Project

- Identification of Programs and Selection of Champions
 - Identified all Level I, II and III programs in Ontario
 - Identified CEO, VP/Directors, Medical Directors, Managers and ICPs for all programs
 - Selected Champions
 - Designated Champions lead and advised others of education plans, etc...

Scope of Project

- Pre-Project Evaluation
 - Survey developed to ascertain current and up-coming needs
 - Three surveys were developed:
 - Level I programs
 - Level II & III programs
 - Infection Prevention and Control Professionals
 - Survey results guided the next steps – education.



Scope of Project

- Education
 - Developed three 2-hour videoconference (Live Webcast and OTN archive) sessions based on needs
 - Offered to Champions, ICPs and those wishing to increase their knowledge at the front-line
 - Moderated by Dr. Mary Vearncombe and Clare Barry
 - Offered one session to physicians, moderated by Dr. Brigitte Lemyre

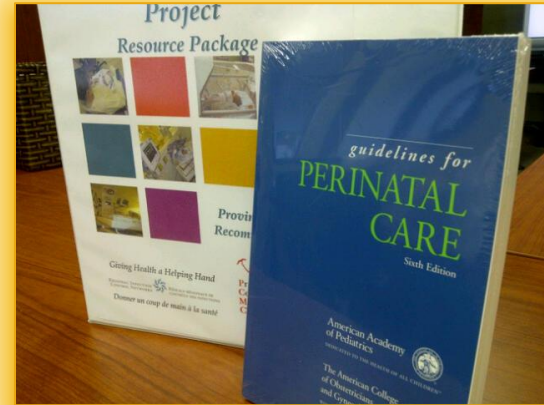
Scope of Project

- Community of Practice
 - Initiated open discussion on current issues
 - Determined schedule of sessions
 - Offered by teleconference then videoconference
 - continued sessions after funding availability



Scope of Project

- Ongoing Support
 - Developed a resource kit
 - CD - recommendations
 - Copies of the slide presentations
 - Tools and training materials
 - Reference list and list of contacts from other programs
 - Purchased the Guidelines for Perinatal Care
 - Provided contact number for all related questions
 - support maintained to this day.

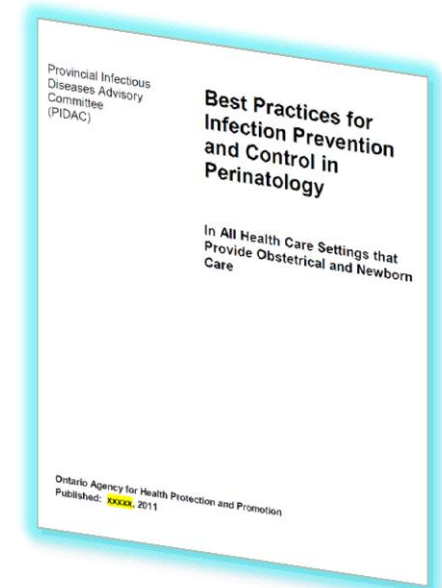


Scope of Project

- Post-Project evaluation (3 months after initiation of project)
 - 85.7% of the 106 participating programs reported improvements in IPAC practices
 - 36.7% updated their Gr. B Strep policy
 - 38.8% updated their Hep B policy
 - 18% updated their HIV, Herpes simplex and Hep C policies
 - 75% now have a QA program to verify infants receive the right feed
 - 60% audit and provide timely feedback on RPAP
 - 93.8% audit and provide timely feedback on Hand Hygiene compliance
 - Those who indicated that the project “did not make a difference” related it to lack of resources, time, funding and physician involvement

Next Steps

- Development of Best Practices
 - PIDAC-IPC started review/update June 2011
 - Neonatologists continue to support development
 - Draft sent for stakeholder consultation December 1, 2011; comments back January 6, 2012
 - Comments collated and reviewed by PIDAC-IPC February 2012; finalize document
 - Roll-out in Spring 2012



Questions?

