

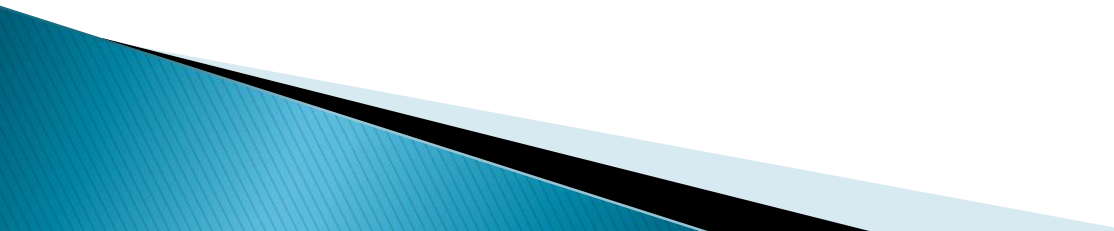
Preventing Infections in Healthcare Workers: Strategies and Challenges

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Disclosures

- ▶ I have no disclosures
- ▶ I have a French name, but I don't speak French 😊

Outline

- ▶ Why don't healthcare workers follow infection control protocols?
 - ▶ What hasn't worked?
 - ▶ What strategies have promise?
 - ▶ Let's talk about Ebola...
 - ▶ Lessons learned
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Why don't healthcare workers
follow infection control protocols?

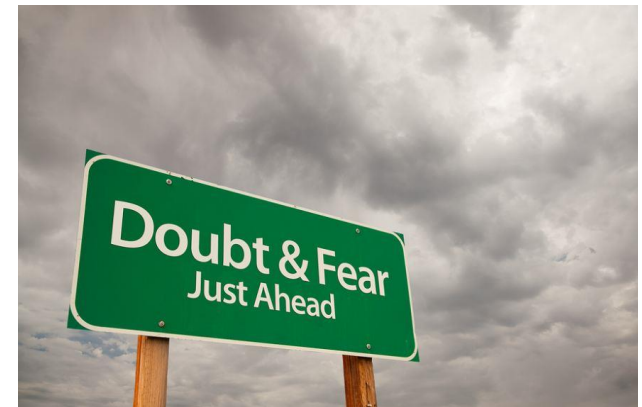
Human nature

- ▶ People don't do what they don't have to
- ▶ For the most part there are no consequences
- ▶ There are no immediate impacts
- ▶ No one is watching...



People follow IC when...

- ▶ There is fear
- ▶ There is media attention
- ▶ E.g. SARS, H1N1, Ebola
 - Leads to over-reaction
 - We saw very high vaccine rates during H1N1
 - HCW demanded highest level protection during SARS and Ebola outbreaks



What doesn't work?

Education

- ▶ We assume that if we provide healthcare workers with education they will follow the protocols
- ▶ Time and time again this hasn't worked
 - Influenza shots
 - Hand Hygiene compliance

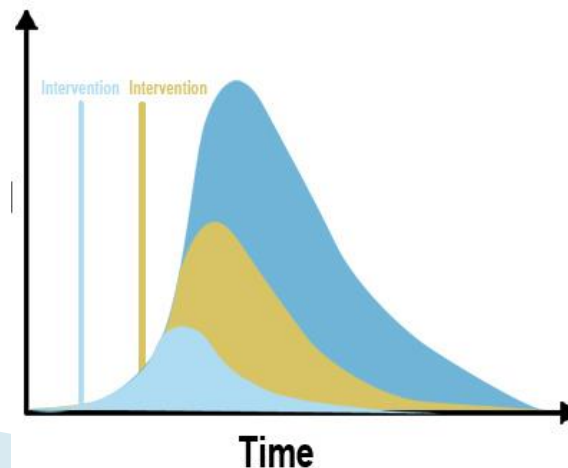


Promotions

- ▶ Posters
- ▶ Campaigns
- ▶ Incentives



- ▶ All have short term effects, but compliance always returns to baseline after short term improvements



How do we get healthcare workers
to change their behavior?

Fear/Media hype

- ▶ Healthcare workers do change their behavior based on fear and media – but this is not sustainable
- ▶ Need people to understand that there is always threats to their lives...
- ▶ Media campaigns can work
 - Seatbelts
 - Drunk driving
 - Cigarettes
 - Safe Sex
- ▶ Resulted in cultural shift – but takes a long time



Punishment/Financial Penalty

- ▶ Loss of admitting privileges
- ▶ Loss of job

- ▶ Has worked in some US hospitals – influenza vaccine rates of 99.9%



Big Brother is Watching...

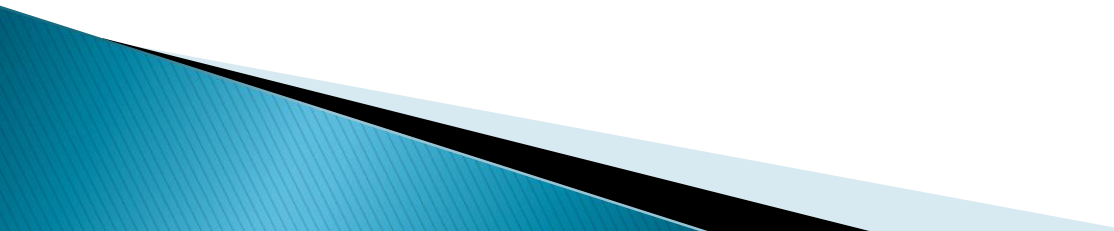
- ▶ Direct observation of healthcare workers has worked to increase hand hygiene compliance
- ▶ Public reporting of infection rates/hand hygiene compliance rates
- ▶ Competition between units
- ▶ But there is the Hawthorne effect



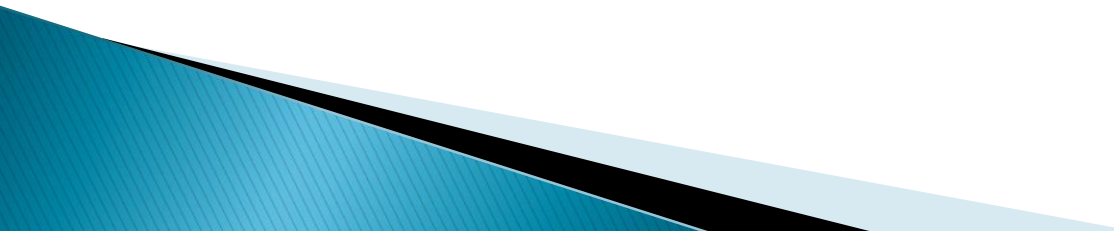
Fundamental to getting healthcare workers to change their behavior is addressing culture...

Culture eats Strategy for Lunch

Positive Deviance

- ▶ Has had some success in getting improved compliance
 - ▶ PD doesn't come up with new IC interventions
 - All interventions are already proven effective in literature
 - Individuals need to come up with interventions that work within their micro-culture
 - ▶ PD is best applied to complex problems that are deeply rooted in culture
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Leading Questions...

- ▶ How do you know when someone has an infection?
 - ▶ What do you do to protect yourself and others from this infection?
 - ▶ What keeps you from doing this every time?
 - ▶ Who do you know who seems to do a better job?
 - ▶ Does anyone have any ideas about what we should do next?
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Let's talk about Ebola...

840 healthcare workers have been
infected during the recent Ebola
outbreak in West Africa...
491 have died...

What's the best approach?

- ▶ Evidence or fear based approach?
- ▶ We know that Ebola is spread by droplet and contact transmission (not airborne)
- ▶ But patients who are acutely ill are having projectile vomiting and explosive diarrhea..



Attention to detail



Then along came Dallas

- ▶ Patient travelled from Liberia
- ▶ Sent home initially
- ▶ returned with advanced symptoms and died
- ▶ 2 nurses infected
- ▶ None of his close contacts in the community became ill



IPAC changes



- ▶ Fear and overreaction
- ▶ ‘No skin in the game’
- ▶ Differentiation between low transmission risk (‘dry’) and high transmission risk (‘wet’) patients
- ▶ Recognition that the greatest danger is in late stage disease with copious body fluids, particularly vomitus and bloody diarrhea
- ▶ Importance of fluid impermeable PPE

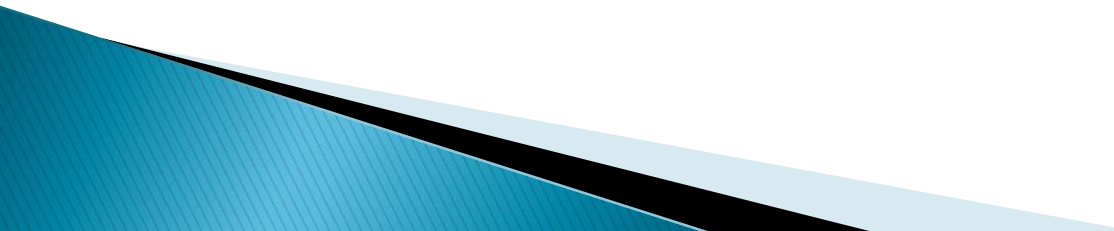
Controversies

- ▶ Can it be 'airborne'?
- ▶ Need for respirators
- ▶ Can we be ready everywhere?
- ▶ Centralized care versus regional model
- ▶ We will need to be prepared...



What have we learned?

Lessons Learned

- ▶ Educating healthcare workers doesn't get them to change behavior
 - ▶ Campaigns work but are short-lived
 - ▶ Negative consequences seem to be the strongest motivator
 - ▶ Healthcare workers are most likely to follow protocols when they are afraid for their own safety
 - ▶ We need to effect change at a cultural level
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Questions