



NATIONAL INFECTION CONTROL WEEK

OCTOBER 14-18, 2024



Poster concept by:
Erica Yip RN BScN, Alberta
Health Services
Royal Alexandra Hospital,
Edmonton, Alberta
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HIGHLIGHTING THE SIGNIFICANCE OF INFECTION PREVENTION

The National Infection Control Week (NICW) was celebrated this month from October 14th-18th all over Canada, and in various other countries to highlight the efforts of infection prevention and control (IPAC) professionals across health care settings. NICW takes place every year in the third week of October. Initially established in United States by President Ronald Reagan in 1986 and spearheaded by the Association for Professionals in Infection Control and Epidemiology (APIC), the week of recognition has vastly expanded around the globe since then, and is also observed as the International Infection Prevention Week or IIPW.

The national theme for this year was *Prevent with Intent*, which emphasizes on taking a more proactive and intentional approach to prevent infections, and use the valuable lessons learnt from the COVID-19 pandemic to keep patients/residents/clients (P/R/C), as well as staff and visitors safe. To celebrate the NICW, we are highlighting some of the guiding principles of infection prevention, the fundamentals, the “superheroes” of IPAC if you will. These are proven methods for preventing illness that we should champion in our professional roles, as well as our personal lives when applicable.

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HAND HYGIENE is to IPAC practices what Batman is to Detective Comics or DC. Hand hygiene can significantly reduce the spread of harmful germs that can cause infections, especially in health care and congregate living settings (CLS). Hand hygiene should be practiced frequently either using soap and water or an alcohol-based hand rub (ABHR) with 70-90% alcohol for at least 15-20 sec. It is the single most effective way to mitigate risk of transmission. ABHR kills germs on hands,



while soap and water washes them away. Staff should follow the 4 moments of hand hygiene at minimum, which includes before contact with P/R/C or their environment, before a clean or an aseptic procedure (e.g., inserting a catheter), after exposure to any body fluids, and after contact with P/C/R or their environment. Use a clean towel or air dryer to dry hands after washing as damp hands can transfer germs more easily than dry hands. Keep nails short and clean and avoid artificial nails and jewelry as it can harbour bacteria and interfere with practicing hand hygiene effectively. Use skin moisturizers or hand creams to prevent skin irritation that can occur due to frequent hand hygiene.



- Recommended personal protective equipment (**PPE**) should be worn correctly by all staff when indicated by Additional Precautions and/or their point-of-care risk assessment (PCRA). PPE should be used whenever there is an expectation of possible exposure to infectious material. PPE in a health care setting includes fluid-resistant, long-sleeved isolation gowns, gloves, eye protection (goggles or face shields), fit-tested N95 respirators, and well-fitting medical masks. Hand hygiene should always be performed using ABHR, or with soap and water if hands are visibly soiled, before donning clean PPE and after removing soiled PPE. Remember that gloves are not a substitute for hand hygiene, just as cleaning is not a substitute for disinfection. *Or I Can't Believe It's Not Butter* a substitute for butter.



- Use **BEST MASKING PRACTICES**, especially during the respiratory illness season, as recommended or required at your workplace, and when in closed, crowded, or poorly ventilated areas. All staff should be fit-tested for an N95 respirator, preferably the 3M 1870+ model, once every two years. Medical masks should fit snugly over the nose and the mouth. Avoid hanging the mask under your chin or on your ears. Your chin does not need protection, and unless you have a medical mask made of a sound-proof material by a jumping tech billionaire, you don't need to take off your mask when answering a phone call. Double masking is not recommended, and always practice hand hygiene before donning a well-fitting mask.



- **CLEANING & DISINFECTION** of surfaces, items, and equipment is crucial in reducing the bioburden and cross-contamination, and keep everyone safe in a health care environment. EVS staff should follow the contact time of a disinfectant as listed on the label and use appropriate PPE as stated by the manufacturer. Review the label for instructions and safety *prior* to using any cleaners or disinfectants. Always clean first (from top to bottom, from clean to dirty) to remove visible dirt and organic material off soiled surfaces before disinfecting. High-touch surfaces and common items should be cleaned frequently. When using disinfectant wipes, ensure they are moist and the lid is closed after use so the wipes do not dry out. Check expiration dates before using a product and avoid the use of spray bottles to apply these products as they can be a health hazard to staff and residents.



- **VACCINATION** is a highly effective and safe way of preventing communicable diseases, and could be considered the Iron Man of IPAC. Yes, this newsletter is both DC and Marvel friendly.



Vaccines have been essential in controlling and eradicating many infectious diseases, such as polio and smallpox. Vaccines protect people who receive them and also those around them. While infection may still occur after vaccination, the primary goal of any vaccine is to prevent severe illness, hospitalization, and death. Vaccination is a safe and effective way to build immunity against preventable diseases, and everyone who is eligible should get their recommended seasonal vaccines this year for COVID-19, influenza, and RSV.



- **INJECTION SAFETY** is necessary to prevent transmission of bloodborne pathogens such as HIV, Hep B, and Hep C virus. In a health care setting, transmission is most likely to occur through an accidental puncture by a sharp object, such as a needle, broken glass, or other sharps that are contaminated with a pathogen. Injection devices, like insulin pens, should be dedicated to only one person and glucometers should be cleaned and disinfected with every use. Always use aseptic technique when preparing and administering injections. Use a new sterile syringe and needle for each person. Once used, the syringe and needle are both contaminated and must be discarded. Dispose all sharps in an appropriate puncture-resistant sharps container and never in a waste bin or plastic bag to avoid needlestick injuries.



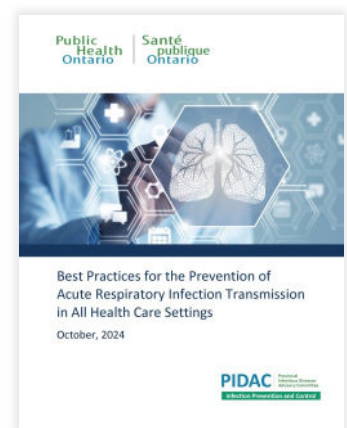
- **RESPIRATORY ETIQUETTE** helps to minimize the spread of respiratory infections, especially those that are caused by viruses, like influenza, COVID-19, RSV and whooping cough. Covering your mouth with a tissue or your elbow when coughing or sneezing limits the spread of resp. droplets and aerosols dispersed in the air that can be inhaled by a susceptible host. It also protects people around you from experiencing a sudden monsoon weather. Hands should be washed with soap and water or sanitized with ABHR, especially after coughing or sneezing. Avoiding close contact with others when feeling sick, and wearing a mask in situations where it's difficult to maintain distance can significantly limit the spread of germs. And finally, usage of handkerchiefs (even if monogrammed) should be avoided and tissues should be disposed properly.

Sources: www.publichealthontario.ca¹ | www.publichealthontario.ca² | ipac-canada.org | infectionpreventionandyou.org

NEW PIDAC BEST PRACTICES RESOURCE – OCTOBER 2024

The Provincial Infectious Diseases Advisory Committee on Infection Prevention and Control (PIDAC-IPC) has released a best practices document on prevention of acute respiratory infection (ARI) transmission in all health care settings that focuses on the surveillance, reporting and specific interventions that should be used to prevent and control acute resp. infections in health care settings.

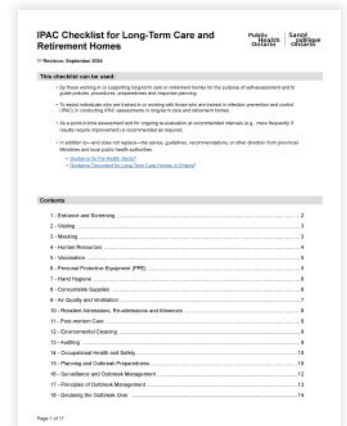
This updated document is an extension of the previously published guidance document on routine practices and additional precautions, and integrates recent evidence-based recommendations and legislative requirements. The PDF can be accessed by clicking on the thumbnail or on [PHO's website](#).





NEW PHO IPAC CHECKLIST FOR LTCH AND RH – SEPTEMBER 2024

A new IPAC checklist for long-term care (LTC) and retirement homes (RH) is available from Public Health Ontario (PHO) that was published in September 2024. The checklist can be used by IPAC leads to conduct IPAC assessment and to guide policies, procedures, preparedness and response planning in LTCHs and RHs. The checklist can also be used as a point-in-time assessment and for ongoing re-evaluation at recommended intervals. This resource should be used as an additional resource and **does not** replace guidelines and recommendations from the Ministries or from the local public health authorities. The PDF can be downloaded by clicking on the thumbnail or on [PHO's website](#).



SMDHU WEEKLY RESPIRATORY VIRUS SURVEILLANCE DASHBOARD

A new weekly respiratory virus update (WRVU) dashboard is now available on SMDHU's website for the 2024-2025 respiratory season. The new interactive surveillance dashboard replaces the previous WKVU update PDF and the Community Risk Level tool from last season. It provides an overall activity level and week-over-week comparison for COVID-19, influenza and RSV, where data is available. Indicators include percent positivity, institutional outbreaks, cases, hospitalizations and ED visits in the Simcoe Muskoka region. The tool is updated every Wednesday and can be accessed at <https://smdhu.org/wrvu>.

2024-25 SEASON
Weekly Respiratory Virus Update

Overview	Seasonal Comparison	Percent Positivity	Cases	Outbreaks	Hospital Visits & Admissions	Vaccine	Technical Notes
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Last Updated: October 29, 2024

Viral Activity

CLICK HERE

Most Recent Week (Week 43 - October 20, 2024 - October 26, 2024):

<p style="text-align: center; color: #003366; font-weight: bold;">COVID-19</p> <p>COVID-19 activity is MODERATE and stable compared to the previous week.</p> <p>Take appropriate precautions.</p>	<p style="text-align: center; color: #003366; font-weight: bold;">Influenza</p> <p>Influenza activity is LOW and stable compared to the previous week.</p>	<p style="text-align: center; color: #003366; font-weight: bold;">RSV</p> <p>RSV activity is LOW and stable compared to the previous week.</p>
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