

# INFECTION CONTROL WEEK

Let's Get to the Point on Mask Use

October 17-21, 2016

## WRHA Infection Prevention and Control Program Bulletin

Volume 1, Issue 1

September 2016

*Assisting in the provision of safe, efficient, effective patient care by minimizing and preventing the spread of communicable diseases*



### WELCOME!

To the first WRHA Infection Prevention and Control (IP&C) Bulletin.

The purpose of this seasonal bulletin is to provide information and updates on current IP&C issues relevant to your workplace. We are committed to improving clinical outcomes through preventing and reducing the risk of healthcare-associated infections (HAIs) by assisting staff to safely manage and care for patients, residents and clients.

#### Where We Are

Our multi-disciplinary team is located at 6 Acute Care Sites, 3 Hybrid Long Term Care Sites, in the Community, as well as the IP&C Corporate Office.

#### What We Do

We serve patients, families, and staff across the healthcare continuum to provide timely and accessible IP&C surveillance, consultation, and support for the purpose of reducing infection risk through the unique knowledge found in our IP&C program staff.

#### How We Do It

We use epidemiological and scientific principles, as well as evidence based guidelines. We develop dynamic partnerships to assist in provision of safe, efficient, and effective patient care by minimizing and preventing spread of communicable diseases.



### JUST THE FACTS!

Every year, lives are lost due to the spread of infections in healthcare. Health care workers can take steps to prevent the spread of infectious diseases.

Hand hygiene is the most effective way to prevent the spread of infection. When you receive healthcare, don't be afraid to remind healthcare workers, friends and family to clean their hands before caring for you.

Healthcare workers can also:

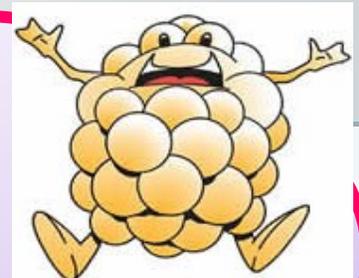
- ⇒ Cover their coughs and sneezes
- ⇒ Have up-to-date immunizations
- ⇒ Wear gloves, face protection, masks and gowns as required
- ⇒ Follow IP&C guidelines outlined in the IP&C Manuals

To learn more about [IP&C](#), visit our website

October 18, 2016

**BUG DAY**

**20<sup>th</sup> Anniversary**



#### We Want to Hear from You!

Send newsletter comments/suggestions to:

Dolores Sylvestre, Administrative Assistant, WRHA Infection Prevention & Control Program [dsylvestre2@wrha.mb.ca](mailto:dsylvestre2@wrha.mb.ca)

# For the Love of Hand Hygiene

Each site continues to work to improve hand hygiene. Do you know your unit's/area's hand hygiene audit results? Do you know where to find them?

## Resources to Promote Hand Hygiene:

The [LMS](#) is the online resource for learning and development, a program on hand hygiene is available. The program aims to provide HCWs with knowledge on who, what, when, why and how hand hygiene should be performed.

The IP&C Program also has [resources on hand hygiene](#) such as [posters](#), [videos](#) and information on the [Four Moments of Hand Hygiene](#).



## Role of your Site Hand Hygiene Auditor

The unit/site Hand Hygiene Auditor is very important in promoting hand hygiene in your unit/site. Auditors are leaders, champions and role models who keep the focus on good hand hygiene. They are a valuable (and convenient) resource for questions about the Four Moments. Hand Hygiene Auditors should be treated as the valuable team members they are.

Please remember to make them feel welcome & always treat them in accordance with the [Respectful Workplace Policy](#).

## Would You Like to Promote Hand Hygiene?

Why not complete the hand hygiene Auditor training session? This prepares you to audit hand hygiene in your work place.



## VRE/ESBL PRACTICE CHANGE

In February 2016, IP&C management of people with Vancomycin Resistant Enterococci (VRE) and/or Extended Spectrum Beta Lactamase (ESBL) changed.

### The Changes:

1. Isolation for these organisms is no longer required regardless of setting.
2. Admission screening for these organisms is no longer required regardless of setting.
3. Flagging of health records for these organisms is no longer required regardless of setting.

Preventing transmission of these organisms requires adherence to Routine Practices, with particular attention to hand hygiene.

**NOTE:** IP&C management of Methicillin Resistant *Staphylococcus aureus* (MRSA) remains unchanged.

**Routine Practices** are measures for routine care of ALL individuals at ALL times in ALL health care settings. Universal Precautions were replaced by Routine Practices in 1998. Routine Practices aim to prevent or minimize HAIs. Routine Practices information, policy, and resources are available at: [Routine Practices](#).

## INFLUENZA PREPAREDNESS - ITS THAT TIME !

Influenza season is fast approaching and preparation to prevent and control influenza is essential at all WRHA sites.

### Preventing the Spread of Influenza

Simple measures such as covering coughs and sneezes and attention to hand hygiene will assist in preventing the spread of influenza and other respiratory infections in all settings. Resources on [respiratory hygiene](#) and [hand hygiene](#) are available. The Seasonal Influenza Protocol can be found in the [IP&C manuals](#).

### As a Healthcare Worker, What Can You Do to Prevent Influenza?

It is recommended staff get vaccinated. Older people and at risk groups may not get vaccinated. You need to be vaccinated every year because the virus changes annually. Vaccination will protect you from getting influenza and prevents spread to vulnerable people. The influenza vaccine is available free to healthcare workers from WRHA Occupational and Environmental Safety & Health.

### Prevention, Detection & Control of Influenza

Key measures to prevent, detect and control influenza can be found in the [Seasonal Influenza Protocol](#). Outbreak control measures and the WRHA Pandemic Influenza Plan can be found in the [IP&C manuals](#).

### Common Myths about Influenza Vaccine:

**Myth number 1:** "The flu vaccine can give me the flu".

**Fact:** Influenza vaccine injections contain dead virus and cannot give you the flu.

**Myth number 2:** "The flu vaccine does not work".

**Fact:** For most influenza seasons the vaccine provides good protection for 70-90% of people who get it. For the remainder, it can reduce the severity of illness and make complications from influenza less likely.

**Myth number 3:** "Side effects from the vaccine are worse than getting the flu".

**Fact:** Most people do not experience any side effects from the vaccine. Side effects, when they do occur, are usually minor and only last for 1-2 days, unlike influenza where symptoms are often severe and lengthy.