



Inpatient and Day Hospitals

FEBRUARY 2023 | SUMMER NEWSLETTER



Message from the Director

Megan Reilly

Dear colleagues, I am hoping this new year is off to a good start for you, your family and your workplace, and that over the festive season you took time to reflect on an amazing if not challenging 2022!

Our team is off to a flying start, renewing client agreements and scheduling client activities including the administration of the 2023 influenza vaccination program to our healthcare, corporate and industry clients. It is wonderful to be able to return to business as normal albeit with some COVID-19 wariness.

We are enjoying the onsite face-to-face engagement with management, IPC leads and staff at the coalface during risk assessments, education, training and competency activities, vaccination clinics, single case and outbreak management. This is giving everyone an opportunity to concentrate on the fundamentals, strengthening IPC through a focus on essential practices.

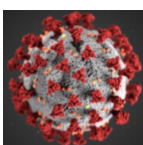
This Summer issue of the newsletter is less COVID-19 focussed (although not forgotten) while keeping you up-to-date on other important key IPC issues, relevant publications and resources to support your programs. Until next issue, maintain that work-life balance.

Stay safe and well.

Kind regards,

Megan

In this issue



Coronavirus (COVID-19)



Australian CDC



Borescopes

Guideline Updates



Study - Hand hygiene compliance



Sharps Safety



Study - Toilet flush dispersal



Conferences

COVID-19

ATAGI Advice on Booster Vaccination for 2023

The Australian Technical Advisory Group on Immunisation (ATAGI) has recently released new advice on booster vaccinations for 2023. Currently, ATAGI recommend a 2023 COVID-19 vaccine booster dose for all adults aged 65+ years, and adults aged 18-64 years who have medical comorbidities that increase their risk of severe COVID-19, or disability with significant or complex health needs. They also recommend that all adults aged 18-64, and children aged 5-17 with medical comorbidities or complex health needs should consider a 2023 booster dose if their last COVID-19 vaccine dose or confirmed infection (whichever is the most recent) was 6 months ago or longer. [Find out more here.](#)

National COVID-19 Clinical Evidence Taskforce

The National COVID-19 Clinical Evidence Taskforce is a collaboration of peak health professional bodies across Australia whose members are providing clinical care to people with COVID-19. The taskforce is undertaking continuous evidence surveillance to identify and rapidly synthesise emerging research in order to provide national, evidence-based guidelines and clinical flowcharts for the clinical care of people with COVID-19. The 'living' guidelines address questions that are specific to managing COVID-19 and cover the full disease course across mild, moderate, severe and critical illness. [Find out more here.](#)

COVID-19 Critical Intelligence Unit

The Agency for Clinical Innovation (ACI) in New South Wales has developed a page summarising rapid, evidence-based advice during the COVID-19 pandemic. Its operations focus on systems intelligence, clinical intelligence and evidence integration. The content includes a daily evidence digest, a COVID status monitor, a risk monitoring dashboard and evidence checks on a discrete topic or question relating to the current COVID-19 pandemic. There is also a 'Living evidence' section summarising key studies and emerging evidence on COVID-19 vaccines and SARS-CoV-2 variants. [Find out more here.](#)

The impact of SARS-Co-V2 on the detection of hospital pathogens

A study by Dapper, et al. (2022) in *Antimicrobial Resistance & Infection Control* examined if the COVID-19 pandemic and associated public health measures had a significant impact on infectious diseases and the detection of pathogens at the Marburg University Hospital. The authors note that the first detection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in Germany was reported in early February 2020 and extensive control measures have been placed in Germany since March 2020. They found that significant changes were observed for community transmissible infections, while no such effects on pathogens primarily associated with nosocomial transmission could be detected.

[Read more](#)

[In the literature](#)

Study: N95 Respirators vs Surgical Masks for Clinician Protection

An [editorial by Chou \(2022\)](#) and [a recent study by Loeb et al. \(2022\)](#) in the *Annals of Internal Medicine* examine the comparative effectiveness of medical N95 masks versus surgical masks in preventing COVID-19 infection for 1009 healthcare workers in Canada, Israel, Pakistan, and Egypt who had not been vaccinated against SARS-CoV-2 and had not previously been infected by the virus over a 10 week period. PCR testing during/at the end of the period confirmed that COVID occurred in 52 (10.46%) of 497 participants in the surgical mask group vs 47 (9.27%) of 507 in the N95 respirator group.

Overall, in discussing the Loeb et al. (2022) study Dr Chou has stated that “the results indicate that medical masks may be similar to N95 respirators in Omicron-era settings with high COVID-19”. It is important to note that there were many limitations to the study, including unknown vaccination status, high heterogeneity between populations, small sample size in some populations, and no record of potential non-workplace exposure. Importantly, the researchers set a low bar for establishing whether one mask is more effective than the other. For those interested, Medscape has provided a more comprehensive overview and consideration of the clinical implications of the study.

COVID-19 Links & Resources

COVID-19 Infection Prevention and Control in Western Australian Hospitals (v16.0 - Updated November 2022).

The COVID-19 CDNA National Guidelines for Public Health Units (v7.4 - Updated October 2022).

WA Health COVID-19 Resources

Communicable Disease Control Directorate (CDCD) Guideline - Use of Air Purifiers in WA Healthcare Facilities

University of Melbourne Guide to Air Cleaners

COVID-19 infection prevention and control risk management guidance

VICNISS Literature Reviews on COVID-19

NEW - PracticeUpdate COVID-19 resources & literature

NEW - Medscape Advances in Prevention and Management of COVID-19 Resource page

Endoscopy

Borescopes

The Multisociety Guideline calls for more research on the value of borescope examinations to demonstrate their utility during endoscope processing. [Ofstead et al.](#) (2022) found 100% of endoscopes had visible soil or damage at baseline requiring repair or refurbishment. Two months later, 100% of the same scopes had major visible defects again. This strengthens the evidence base for using borescopes and magnification to inspect **every endoscope, every time.**

Useful educational videos available on YouTube:

Ofstead Insights have developed a number of educational videos. In particular, endoscopy units may find the [borescopes video](#) very useful, particularly if you are experiencing positive microbiology results.

In the literature



Hand Hygiene

Overestimation of Hand Hygiene Compliance

In a study by Lamping, et al. (2022) in *Antimicrobial Resistance & Infection Control*, a significant barrier to hand hygiene compliance was found to be due to overestimation of one's own performance. This research shows that overestimation tends to be higher for difficult tasks, suggesting that the level of overestimation depends on the assessment method. The research examined if overestimation was stronger for hand hygiene indications with low compliance (i.e., high difficulty) and if self-reported overall compliance based on a single item was higher than based on "5 Moments of Hand Hygiene" (WHO-5) items, since the single item implies an aggregation across indications.

[Read the article](#)

Droplet dispersal

What Comes Up When the Toilet is Flushed?

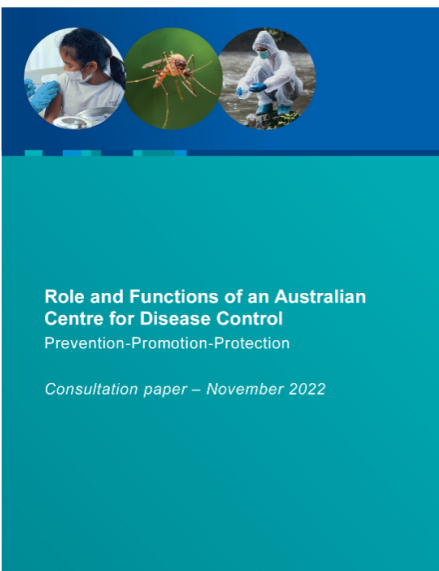
A team of CU Boulder engineers ran an experiment to examine what is dispersed when a lid-less public toilet is flushed. They revealed that tiny water droplets, which are invisible to the eye, are rapidly ejected into the air as an aerosol plume. Using laser and camera technology researchers were able to visualise and measure the plume, the speed, and spread of particles within it.



[Find out more](#)

In the news

Australian CDC



The Australian Government Department of Health and Aged Care has announced that it is establishing an Australian Centre for Disease Control (CDC) in order to improve Australia's ongoing response to current and emerging public health emergencies. Ideally, this will ensure pandemic preparedness, lead the response to future outbreaks, and improve prevention of non-communicable and communicable diseases. Initial consultation was planned for November-December 2022.

[Find out more](#)

Guideline Updates

New quality improvement tools for sepsis

The Commission has released two quality improvement tools to help healthcare services implement the *Sepsis Clinical Care Standard* launched in 2022. The [Sepsis Clinical Care Standard](#) aims to ensure that sepsis is recognized early so that all patients receive coordinated high-quality care.

- The [Sepsis Clinical Care Standard Self-Assessment Tool](#) allows services to assess their progress in implementing key elements of the standard. This tool also enables services to develop and monitor quality improvement plans.
- The [Sepsis Clinical Care Standard Indicator Monitoring Tool](#) is a data repository, analysis and reporting tool for the standard indicators. Services can use the tool to collect and audit individual patient data, examine results, and identify improvement targets. It is accompanied by a quick reference guide.

For more information, email the Clinical Care Standards team at ccs@safetyandquality.gov.au.

Optimising ventilation for infection prevention and control in healthcare settings

The Commission has released [guidance](#) to aid in the optimization of ventilation for infection prevention and control in healthcare settings. [This guidance resource](#) explains the importance of effective ventilation systems for preventing and controlling infections and how ventilation risks can be mitigated to improve patient and workforce safety.

New and updated resources

The timeframes for compliance have been extended for these NSQHS Standards advisories:

- [The NSQHS Standards Advisory AS18/07: Reprocessing of reusable medical devices in health service organisations](#)
- [NSQHS Standards Advisory AS18/11: Implementing systems that can provide clinical information into the My Health Record system](#)

ACORN Standards Applied to Practice

The new ACORN Standards will be released on Saturday 18 March 2023 in a hybrid online and face-to-face event in Adelaide. The new Standards will be in a new format to provide guidance for both clinicians and hospital administrators. Position statements and guidelines will be available for members on the website and through the Member jungle app.

Please note that a few key standards have not as yet been updated, while ongoing work at state and national levels is being completed that will impact the new standards. These include:

- Reprocessing re-usable medical devices
- Staffing for safety
- Visitors to the perioperative environment
- Perioperative nurse surgeon's assistant
- Loan sets and trial re-usable medical devices
- New equipment and instrumentation
- Professional development and Performance review

To find out more about the new ACORN Standards, view the [February 2023 release on the ACORN website](#).

Antimicrobial stewardship in private hospitals

Chapter 19 of [Antimicrobial Stewardship in Australian Health Care](#) (the AMS Book) is now available on the Commission's website. The publication of this chapter *Antimicrobial stewardship in private hospitals* provides an opportunity to highlight issues specific to AMS in private hospitals and complements the other recently published chapters on antimicrobial stewardship in specific healthcare settings.

The chapter focuses on:

- Factors that influence prescribing of antimicrobials in private hospitals.
- Resources to support appropriate prescribing of antimicrobials in private hospitals.
- Strategies that can be implemented in private hospitals to improve AMS.
- Role of the multidisciplinary team and clinical governance and leadership in AMS relating specifically to private hospitals.

USE A SHARPS CONTAINER

KEEP YOUR COMMUNITY SAFE



December was *International Sharps Injury Prevention Awareness Month*. To prevent sharps injuries, apply the following rules of sharps and sharps containers:

1. Never reach inside sharps containers to retrieve items.
2. Sharps containers should only be reserved for items that could puncture the skin, do not place other medical items and devices such as medications, batteries, tape, gauze, and gloves into these containers. Dispose of non-sharps in appropriate containers/bins, such as biohazard/clinical waste containers for bodily fluid contaminated gloves and gauze.
3. Follow manufacturers' instructions for use (IFUs) and use engineering controls. Many sharps now contain safety features engineered into them. Be sure to know how to use these features to prevent sharps injuries. Some of these features include retractable needles, needless systems, and sheaths/shields for needles.
4. Never bend, break, or recap needles or blades.
5. Always maintain visual contact with sharps during use.
6. Immediately place needles and other sharps into a sharps disposable container.
7. The location of a sharps container should be deliberate, especially in procedure rooms. Sharps receptacles should be nearby and not be blocked by other furniture or equipment.
8. Report any injuries with sharps. If a sharps injury has occurred, it is essential to report it to your employer and file an injury report. Reporting is critical to receiving immediate post-exposure care and preventing future accidents. By reporting, you may be helping another employee from the same injury. Lastly, report to your supervisor if you find a needle or sharp left at the bedside or in the regular garbage.

[Find out more](#)

Conferences

Upcoming

Sydney International Endoscopy Symposium 2023



The 14th Annual Sydney International Endoscopy Symposium (SIES 2023) will be held at the Hilton Sydney on 16-17th March 2023.

There will be focused lectures, hands-on equipment demonstrations, and live endoscopy cases beamed to Hilton Sydney aimed at nursing delegates. Some of the featured topics include GI bleeding, perioperative nursing in interventional endoscopy, EMR-ESD setup, ERCP basics, biliary and luminal dilation/stenting, and updates on infection control in gastrointestinal endoscopy. The Nurses' Workshop program is available to view [here](#). To find out more about the symposium, [visit the website](#).

Click to register

Upcoming

GENCA National Conference 2023



The GENCA 2023 National Conference – to be held on 19-21 May 2023 at the Perth Convention & Exhibition Centre.

This year's event will feature a range of interesting and relevant topics from International and local speakers, two social networking events where you can reconnect with like-minded industry professionals, and an exhibition where you will get the opportunity to come face to face with suppliers and connect with key people in your industry.

Don't miss this chance to come together and embrace the opportunity to change and be challenged.

Find out more

Quick Links

NSQHS Standards

WA Health COVID-19

ACSQHC COVID-19



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