



# Practical and creative ways to increase your IPC resource capacity

Sandra Roodt RN, MPH, CIPC-E, FACIPC

Hospitals | Home Care | Virtual Care | Retirement Living | Residential Aged Care

# Disclosure of interest:

No conflict to declare.





# Setting the scene....

Need to do more with less?




# Agenda:

1. **Formal** ways to increase your IPC resource capacity
2. **Informal** and **creative** ways to increase your IPC resource capacity

# Formal ways to increase your IPC resource capacity


## 1. Put forward a Business Case

 **Calvary**  
Program Brief: Staff Screening and Vaccination Program

NELC Meeting #:	NELC 08/02/2022
Date:	01/02/2022
Title:	Staff Assessment, Screening and Vaccination Project
Author:	Sandra Roodt (National IPC Manager) Prepared for: Kris Salisbury (National Director Clinical Governance)
Recommendation:	The NELC endorse the following to successfully implement and embed the Assessment, Screening and Vaccination Policy and Procedure and comply with current and evidence-based practice Standards, Guidelines and Literature, incl., the Australian Immunisation Guidelines: <ol style="list-style-type: none"> <li>1) Implement a Calvary National Vaccination Database [redacted] that provides a single, consistent, national view of all staff assessment, screening and vaccination data. This would be inclusive of Aged Care and Community Health and not just hospitals.</li> <li>2) From 1 April 2022, recruit a temporary full time Staff Health Nurse (Aged &amp; Community Care) for 12 months to:             <ol style="list-style-type: none"> <li>a. Support implementation of the Assessment, Screening and Vaccination Policy for new recruits and existing employees.</li> <li>b. Review and update vaccination records for staff in Aged Care and Community Health into [redacted]</li> </ol> </li> <li>3) From 1 April 2023, recruit a permanent 0.5 FTE Staff Health Nurse (Aged &amp; Community Care) to vet new recruits and maintain staff records in line with the Policy.</li> <li>4) Approve the Project Plan (attached) for further planning and progression.</li> <li>5) Approve costs outlined below (Assumes commencement at or prior to 1 April 2022).</li> </ol>

	FY22 <sup>1</sup>	FY23	FY24 & Ongoing
Project	[redacted]	[redacted]	[redacted]
Ongoing Costs	[redacted]	[redacted]	[redacted]

<sup>1</sup>Estimated capitalisation of project costs in [redacted] refer financial implications section of this brief

 **Calvary Project Charter**

<b>Overall Objective</b>	Deliver a comprehensive and inclusive of all Calvary sites and services Staff Assessment, Screening and Vaccination Service, which will align with current and evidence-based practice Standards, Guidelines and Literature.	<b>Exp. Completion</b>	April 2023
		<b>Project Budget (inc 15% contingency)</b>	Total cost: 1213,394 Opex: 5179,282 Capex: 241,113
		<b>Business Sponsor</b>	Kris Salisbury

KEY DELIVERABLES AND TIMEFRAMES TO ACHIEVE OBJECTIVE					TEAM			
#	Deliverable or Key Milestone	Change Impact	Timeframe	How Change will be managed through Communications, Training and/or Engagement?	Name	Role	Commitment	
1	Completion and implementation of Calvary Assessment, Screening and Vaccination Policy and Procedure. <b>Note</b> - This must be aligned with the roll-out of PageUp (new recruitment software) as the PageUp Staff Assessment Section has been built to accommodate the new Policy requirements	<ul style="list-style-type: none"> <li>New recruits are compliant with the current and evidence-based practice Standards, Guidelines and Literature, incl., the Australian Immunisation Guidelines</li> <li>Within 12 months, all existing staff are compliant with the current and evidence-based practice Standards, Guidelines and Literature, incl., the Australian Immunisation Guidelines</li> </ul>	April 2022	<b>Communications</b> <ul style="list-style-type: none"> <li>Initial and ongoing e-mail and meeting presentation to HAI Communities of Practice (CoP) members, Staff Health Nurses and all stakeholders involved in the recruitment processes</li> <li>Initial and ongoing Policy and Procedure awareness campaign for existing staff (email, existing newsletters)</li> <li>Staff Health Nurses will establish processes within the services to increase compliance through contact with service/site managers and/or contact with individual staff members</li> </ul> <b>Training</b> <ul style="list-style-type: none"> <li>Virtual training for Staff Health Nurses on [redacted] and the new policy and procedure</li> </ul> <b>Engagement</b> <ul style="list-style-type: none"> <li>HAI Communities of Practice (CoP)</li> <li>Comms to all staff that all existing staff need to comply with new Policy within 12 months</li> <li>Provision of ongoing compliance data to service/site managers</li> </ul>	TBC	Project Manager	0.5 FTE for 3 months	
2	Implementation of [redacted] Staff Health Module including integration with CHRIS21 and PageUp	<ul style="list-style-type: none"> <li>There is a single national system for uploading Staff assessment, screening and vaccination data</li> <li>Program has the ability to also manually upload data from staff not directly employed by Calvary (i.e., not on CHRIS21 e.g., VMDs and volunteers) and therefore will provide more accurate oversight of the compliance across the organisation</li> <li>The staff health nurse have the ability to change, add, delete data loaded into the program, providing validated oversight of the compliance across the organisation</li> </ul> <b>Note</b> - This software also allows for the upload of respirator fit testing data. The provider built this component into their Software on request from Calvary	April 2022		TBC	Aged and Community Staff Health Nurse	1 FTE 12 month (TFT)	
3	Appointment of a Staff Health Nurse to provide a staff assessment and screening service to new recruits and existing staff within Calvary Community and Residential Aged Care Services	<ul style="list-style-type: none"> <li>All health care workers across all Calvary sites and services are compliant with Calvary Assessment, Screening and Vaccination Policy</li> </ul>	April 2022		TBC	Aged and Community Staff Health Nurse	0.5 FTE starting 1/7/23	
4								
5	Transition to BAU of Calvary Assessment, Screening and Vaccination Policy and Procedure	<ul style="list-style-type: none"> <li>Ongoing provision of National oversight of the Staff assessment, screening and vaccination program</li> <li>Ongoing access to inclusive and validated compliance data</li> </ul>	April 2023 - ongoing					

**Hospitality | Healing | Stewardship | Respect**

# Formal ways to increase your IPC resource capacity

## 1. Put forward a Business Case

Lessons I've learnt ....

- Make use of opportunities that presents itself:
  - National Safety and Quality Health Service (NSQHS) Standards, [Preventing and Controlling Infection Standard \(2021\)](#)
  - NSQHS Standards Advisories e.g.:
    - [AS18/08: Antimicrobial stewardship and surgical prophylaxis](#), and
    - [AS24/01: Requirements for reprocessing of reusable medical devices](#)
  - Clinical Care Standards e.g.:
    - [Management of Peripheral Intravenous Catheters \(PIVC\) Clinical Care Standard](#), and
    - [Antimicrobial Stewardship \(AMS\) Clinical Care Standard](#)

# Formal ways to increase your IPC resource capacity

## 1. Put forward a Business Case

Lessons I've learnt ....

- Make use of opportunities that presents itself
- Make it clear what you need and why you need it

Calvary		Agenda Item #
<b>Executive Brief: National Executive Leadership Committee</b>		
<b>Date:</b>	27/07/2023	
<b>Title:</b>	Staff Health (SH) Administrative & Technical Support	
<b>Executive Sponsor:</b>	Kris Salisbury	
<b>Author:</b>	Sandra Roodt	
<b>Recommendation:</b>	Part time (10 hr's a week), short term (6 months) employment of a staff member to provide administrative/technical support to the Staff Health Program. Total expected expenditure [REDACTED] (plus 11% super)	
<b>Background:</b>	<p>All healthcare facilities in Australia must provide a risk-based workforce vaccine-preventable disease screening and immunisation program consistent with:</p> <ul style="list-style-type: none"><li>• the current edition of the Australian Immunisation Handbook,</li><li>• jurisdictional requirements for vaccine-preventable diseases,</li><li>• NSQHS Preventing and Controlling Infections Standard</li><li>• Aged Care Quality Standards – Standard 3</li></ul> <p>The program must address the specific risks to the workforce, consumers and patients.</p> <p>In August 2021, Calvary implemented the Occupational Assessment, Screening and Vaccination Policy and Procedure.</p> <p>In July 2022, we employed 0.8FTE of a Staff Health Advisor to:</p>	

# Formal ways to increase your IPC resource capacity

## 1. Put forward a Business Case

Lessons I've learnt ....

- Make use of opportunities that presents itself
- Make it clear what you need and why you need it
- Gap analysis and action plan ..... my best friend!

National Clinical Governance Team Date of Completion: Sept 2022		GAP ANALYSIS - NATIONAL PROCESS AND RESOURCES							NATIONAL ACTION PLAN				
No	Quality Statement	Organisational Responsibility (read in conjunction with full text in the Clinical Care Standard)	Describe the Process in place	Improvement Strategy	Consumer Involvement	Monitoring	Reporting	Safety Systems	Action Plan	Person Responsible	Due Date	Outcome	Progress Notes
11	A policy requiring medicines or fluids is assessed to identify the most appropriate route of administration for their clinical needs.	Ensure that organisational policies, procedures, processes and support tools/resources support the consideration of all routes of administration of medicines and fluids before therapy is started, and that the IV route is only used if other routes are not available.	No National Policy in place.  Met all hospitals have local Policy and Procedures and where in place, not necessarily in line with the Clinical Care Standard.					National Committee of Practitioners for IPC closed up in 2021 to improve systemic monitoring and action of practice and HAI; CoP reports to new Clinical Quality and Safety Committee	Develop and implement a National (working) Policy for IVC insertion, Management & Care to include/ensure Quality Statement 1	S Readl PIVC CCS Working Group	Aug-23	In Progress	4/18/2023 - In draft. Plan to release for consultation mid Jan 2024. <b>22/04/2024 - Draft not for consultation</b>
									Develop National Invasive Device Audit tool to include Quality Indicator 1	S Readl HAI CoP	Oct-22	Complete	16852022 - Tool developed and used for consultation Nov 2022 - MEG tool implemented
									Develop and/or implement clinical procedure to include/ensure Quality Statement 1	S Readl PIVC CCS Working Group	Sep-23	Complete	24872023 - Lippisall Procedure - IV catheter assessment and management
	A policy requiring intravenous access devices information and education about their use for the device and the procedure. Their use is obtained and they are advised on their role in reducing the risk of device.	Ensure that systems are in place for clinicians to provide information and education to patients about their PIVC, to support shared decision making. Also ensure that patients have access to ongoing advice	National Consent Policy provides guidance regarding written, verbal and implied consent.	National Consumer Facing app in development	Consumer involvement in development and testing of the app; members on NCGC	Calvary has multiple mechanism for monitoring consumer feedback including ANPEQS, verbal feedback	Consumer feedback reported to NCGC, HELT and the Board	Integrated Feedback/Incident/Risk/Improvement Register within Riskbase	Develop/adapt National Consumer PIVC Education Document	S Readl PIVC CCS Working Group	Sep-23	Complete	RCSQHC Patient information - How to look after your cannula included in National Policy

# Formal ways to increase your IPC resource capacity

## 1. Put forward a Business Case

Lessons I've learnt ....

- Make use of opportunities that presents itself
- Make it clear what you need and why you need it
- Gap analysis and action plan ..... my best friend!
- If at first you do not succeed ..... 'park it' and try again at a later stage!

# Formal ways to increase your IPC resource capacity

1. Put forward a Business Case

2. Budgeting

- Leave cover
- IPC promotional activities
- Consumer representative on IPC committee
- Additional FTE cost to cover audit requirements

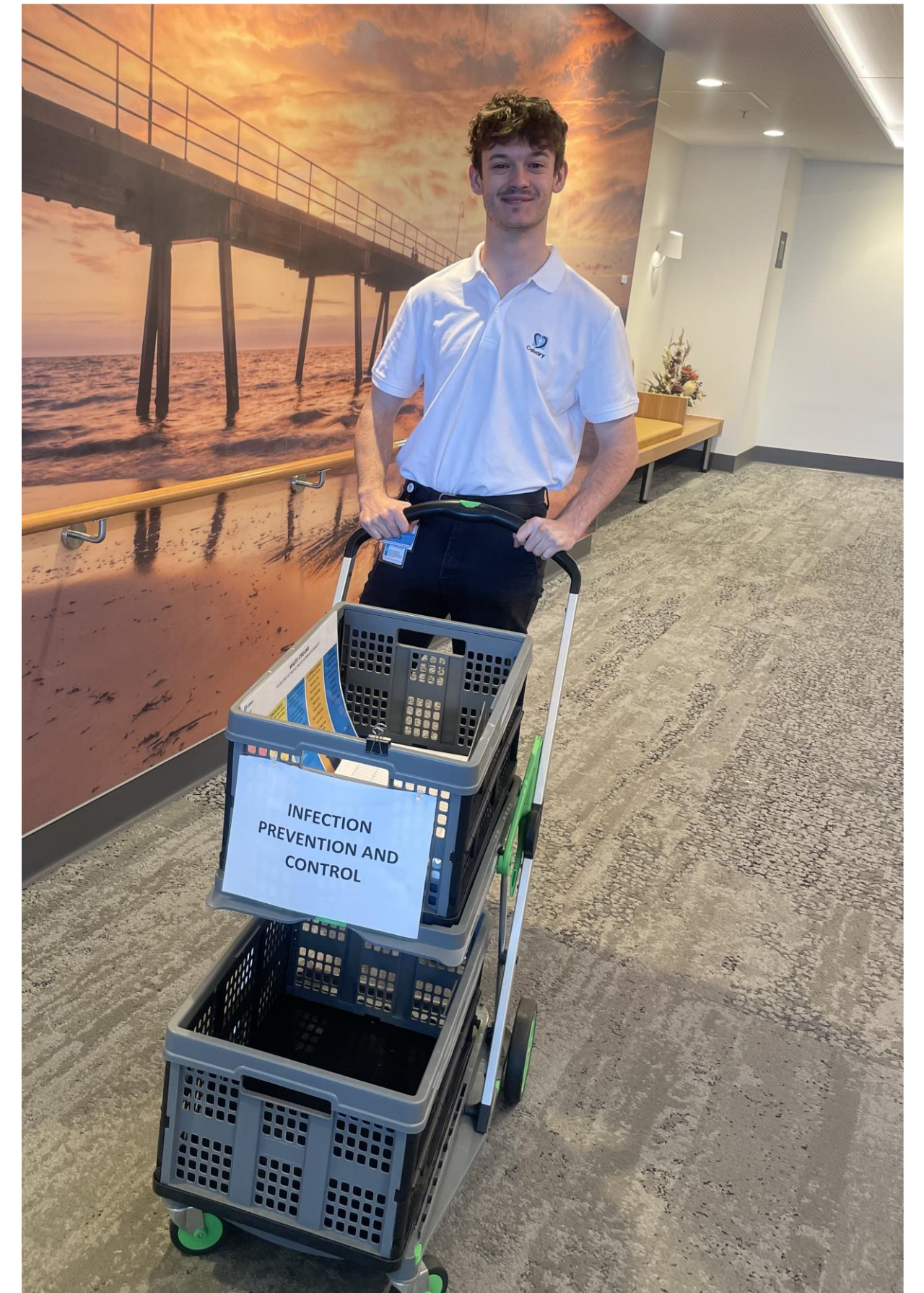
# Informal and creative ways to increase your IPC resource capacity

## 1. Generate your 'own' bucket of money



# Informal and creative ways to increase your IPC resource capacity

1. Generate your 'own' bucket of money
2. Volunteers



# Informal and creative ways to increase your IPC resource capacity

1. Generate your 'own' bucket of money
2. Volunteers
3. **'Adopt' a staff member on a gradual return to work program**

# Informal and creative ways to increase your IPC resource capacity

1. Generate your 'own' bucket of money
2. Volunteers
3. 'Adopt' a staff member on a gradual return to work program
4. **Networking – share resources**

# Informal and creative ways to increase your IPC resource capacity

1. Generate your 'own' bucket of money
2. Volunteers
3. 'Adopt' a staff member on a gradual return to work program
4. Networking
5. **Use resources already out there**
  - Australian Commission on Safety and Quality in Healthcare (ACSQHC)
  - Department of Health and Aged Care
  - Various State and Territory Departments of Health
  - Australasian College for Infection Prevention and Control (ACIPC)
  - Many more ....



# Questions?

Hospitals | Home Care | Virtual Care | Retirement Living | Residential Aged Care