

Resources and Activities for Infection Prevention and Control in Ontario, 2008

Ontario Public Health Association Conference
November 3rd, 2009



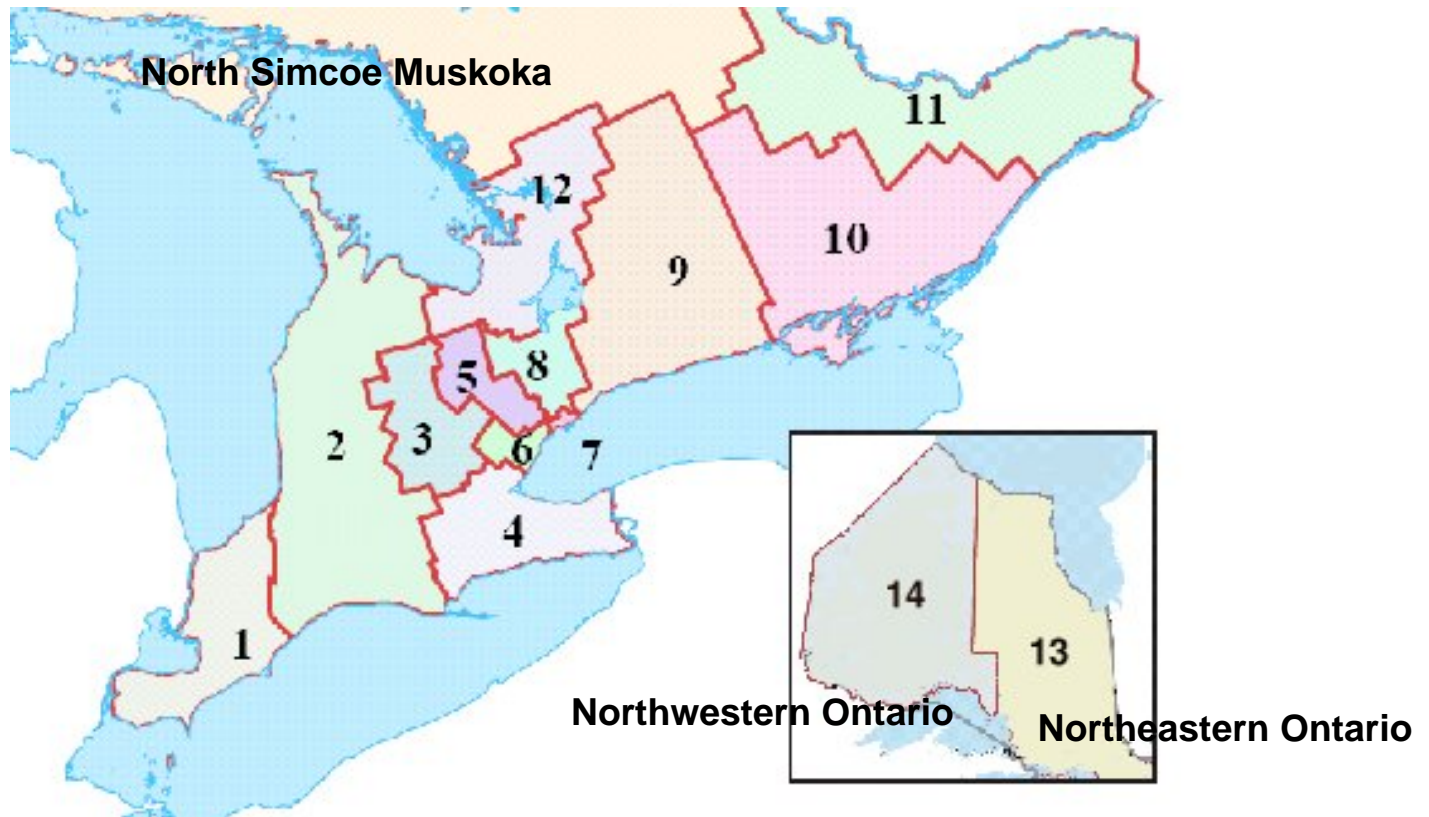
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CONTROL NETWORKS

Giving Health a Helping Hand

Regional Infection Control Networks in Ontario



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The RICN Survey Story

- Why a resources survey?
- How was the survey conducted?
- What did it reveal?



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CONTRÔLE DES INFECTIONS



RESOURCES AND ACTIVITIES FOR INFECTION
PREVENTION AND CONTROL IN ONTARIO,
2008

PROVINCIAL SUMMARY REPORT
PROVINCIAL TECHNICAL REPORT
QUALITATIVE REPORT

PREPARED BY RESEARCH STRATEGY GROUP INC.


RESEARCHSTRATEGYGROUP

Survey Objectives

- Identify strengths and gaps existing within infection control
 - Direct Strategic Planning
 - Collect baseline data which can be used to measure changes and improvements over time
 - Benchmark the outcomes against pre-determined standards or against similar organizations
 - Provide a strategic report, which can be used to engage community partners and advocate for change within these organizations
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Process

- 2007 - A committee of RICN Coordinators developed a sample survey
 - 2007 - Created an RFP for further development of the survey including the implementation and report development
 - 2008 - Survey was conducted in two phases October 2007 and April
 - Complete report distributed August/September 2008
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More on Process

- Survey packages were developed and sent via Canada Post/Courier to respondents
 - The survey's were approximately 20 to 25 pages in length
 - Letters of explanation sent to all CEO's and Sr. Administration with surveys directed to those most responsible for IPAC
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Results

The total overall return rate was 60.2% (n= 641/1064)

Returns by sector – highest to lowest:

Public Health	79%
Acute	77%
Non Acute	61%
Emergency Services	56%
Community	41%

Returns by region ranged from 48% to 71%

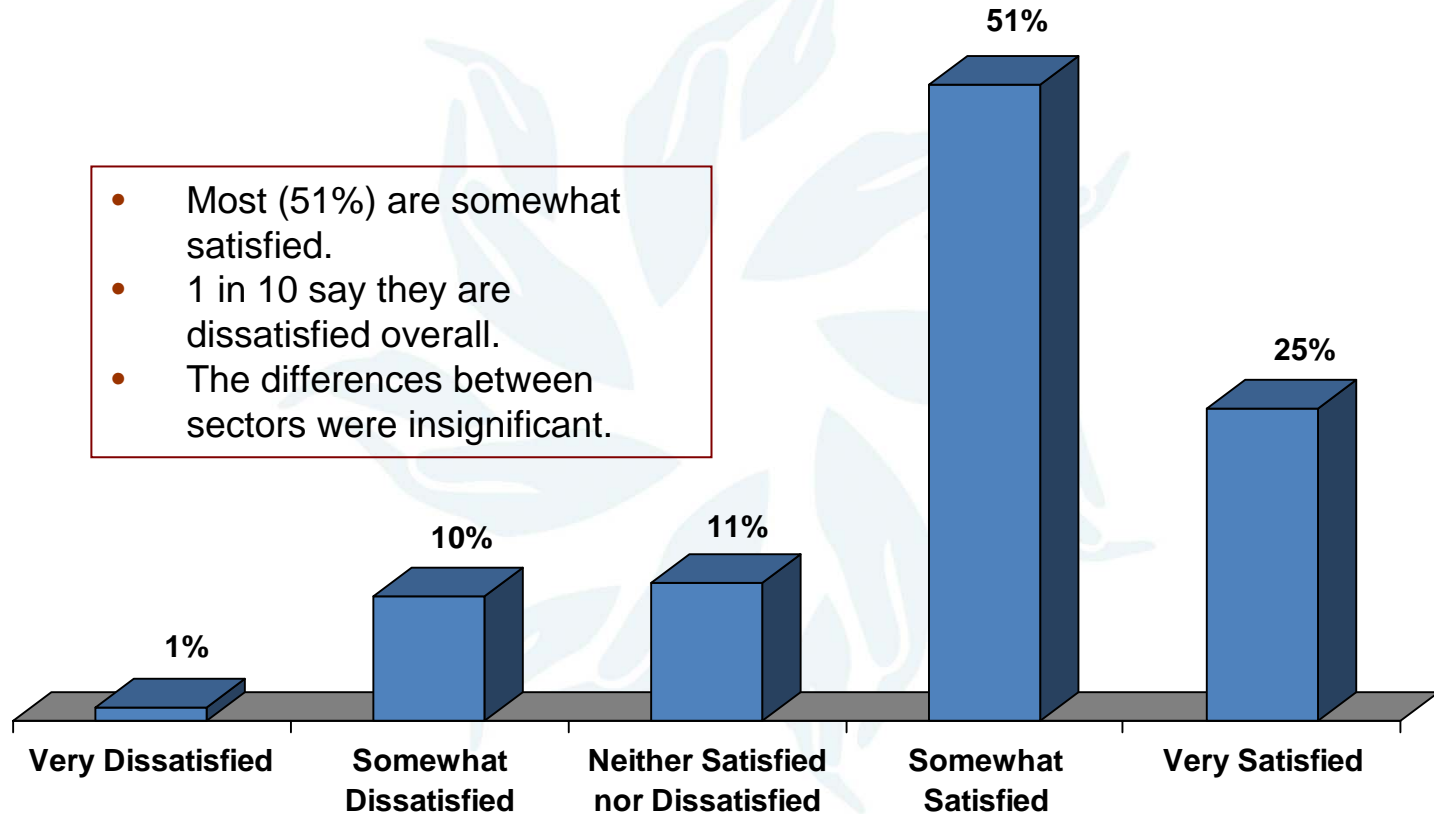
For results based on the total sample, one can say with 95% confidence that the margin of sampling error is ± 2.4 percentage points.

Key Findings

- Current resources maybe insufficient to provide required day to day to provide quality practice and meet increased requirements
 - Lack of funding cited as a key reason for not hiring staff, particularly in sectors other than acute care
 - Insufficient staffing ratios based on PIDAC recommendations especially in non-acute care and community sector
 - PIDAC recommendations not well integrated into the culture of organizations
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Satisfaction with IPAC

Q. Overall, how satisfied are you with the current standard of infection prevention and control practices in your facility?



Key Findings

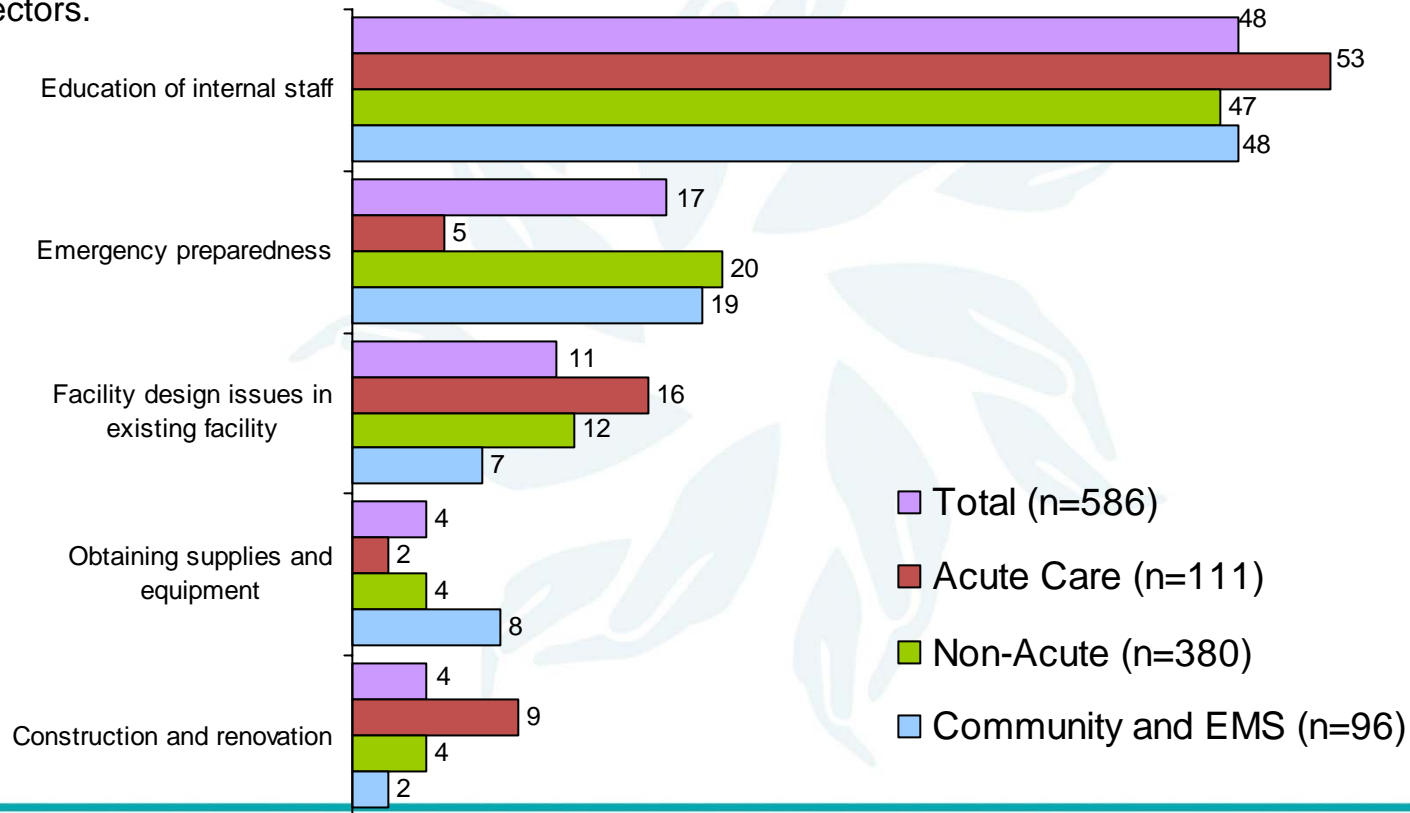


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- Limited ICPs with formal training
 - Value of Certification (and professionals with CIC) is limited outside of Acute Care
 - Resources/Infrastructure limited in most organizations i.e. work space, access to library, IT support
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Most Pressing Issue

- Education is the Number 1 issue in all the sectors.
- Acute Care is less likely to be concerned with emergency preparedness and obtaining supplies and equipment, and more likely to be concerned with construction, renovation and design issues than other sectors.



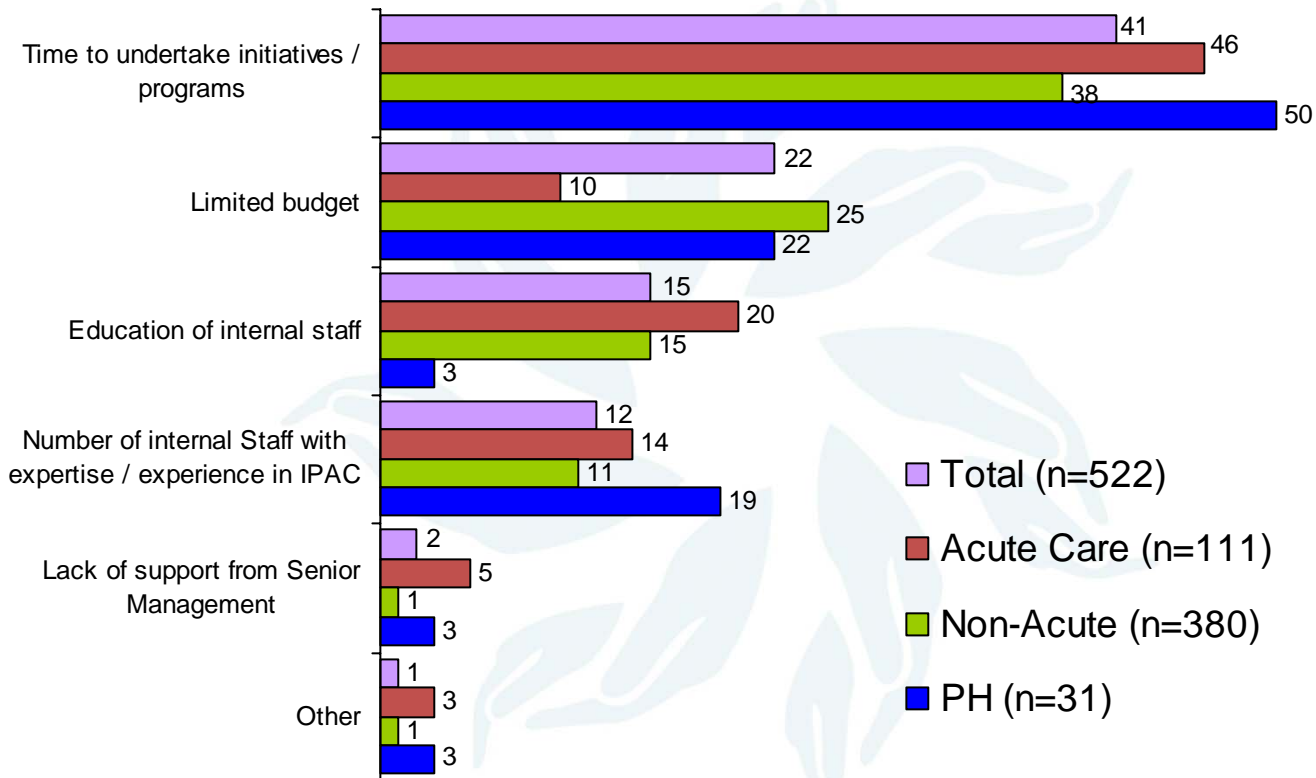
Most Pressing Issues for IPAC Programs



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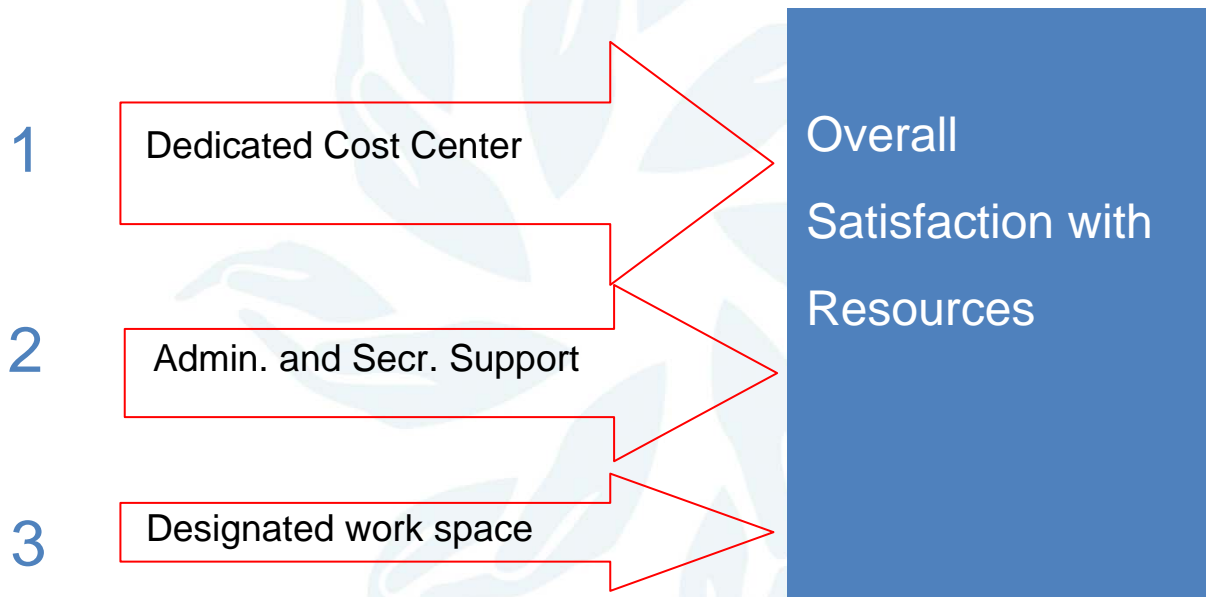
- Overall, time to undertake initiatives/programs
 - Limited budgets
 - Training of internal staff
 - Number of internal staff with training/experience in IPAC
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Most Pressing Issue IPAC Manager



Satisfaction with IPAC Infrastructure & Resources

Drivers of Satisfaction



Next Steps



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From a RICN perspective

- Assists in Strategic Planning
 - Increases our awareness of limitations and strengths
 - Gives us a tool to measure the impact of the RICNs
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Access to the Reports

Find the reports on the RICN main website
For Regional Reports contact your RICN
Coordinator

www.ricn.on.ca

Thank you



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