IPAC Teaching Huddle: Surveillance and QI Actions

What is IPAC surveillance?

Infection Prevention and Control (IPAC) reviews microbiology results for antimicrobial resistant organisms (ARO) and for healthcare-associated infections (HAI), to understand what puts our patients at risk:

- Methicillin resistant *Staph aureus* (**MRSA**)
- *Clostridioides difficile* infections (**CDI**)
- Bloodstream infections (**BSI**)
- Surgical Site Infections (**SSI**)
- Carbapenemase producing organisms (**CPO**)
- *Candida auris*

IPAC also monitors:

- **Hand hygiene** performance
- **Unit practices and infrastructure**

What do we do with the information?

Information and **Knowledge** lead to **ACTION**

Results	Knowledge	ACTION
	Expected	Maintenance
	Increasing	First steps
	Unexpected	Escalation

Based on understanding the organism or the health care-associated infection, the right **ACTIONS** can lead to improving patient safety.

How we respond may differ for the surveillance rates and the type of HAI or ARO.
Next steps may include

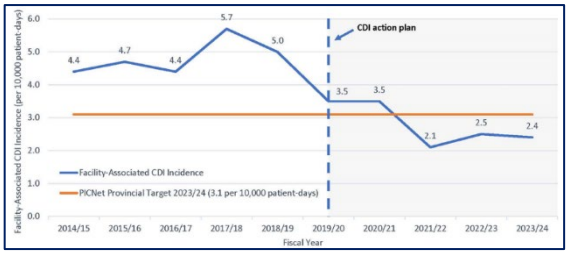
- Reviewing hand hygiene activities
- Using the correct PPE
- Implementing Additional Precautions
- Tidying and decluttering the area
- Cleaning equipment between patient use

Why do we need these results?

Data and **Knowledge** provide **Information**

When we review the IPAC surveillance results, we can identify effective strategies to protect patients, staff and families.
We respond using

- The IPAC Chain of Infection
- Point of Care Risk Assessment
- Routine Practices
- Additional Precautions



How do we know we are improving patient safety?

Action + Knowledge = RESULTS

Understanding how to act in the right way leads to improved patient safety, including

- Improved patient experience
- Shorter healthcare admissions
- Fewer patients acquire HAI or AROs
- Increased hand hygiene performance
- Increased cleaning and disinfection

Interior Health
INFECTION PREVENTION & CONTROL

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For more resources visit the IPAC webpage