

What's In Your Way? IPAC Roadblocks

#9 - The Policy is in Place, But Rarely Followed

This roadblock highlights only one component of a larger responsibility you have as an Infection Control Professional - Policy and Procedure creation and maintenance! It is a thankless job but somebody has to do it. So where do you start if your IPAC P&P manual is in serious need of an overhaul? Or if you don't have an IPAC P&P manual at all? To begin, consider seeking out example policies and procedures from your colleagues to use as a starting off point. We are all trying to implement the same best practice principles in our own facilities, so why reinvent the wheel? As well, some guidelines and best practice documents even have sample policies and/or procedures contained in the text (see PIDAC's Environmental Cleaning document for examples). A quick online search can also link you to policy and procedure documents from other jurisdictions or countries (the numerous UK based National Health Service (NHS) online policies and procedures come to mind). Although you cannot simply use text from these documents verbatim, at least it gives you just one more resource to reference when you begin compiling a P&P document that applies to your healthcare institution.



Remember to keep your policies and procedure documents short and to the point. Do not include extraneous information that discourages the reader from reviewing the document thoroughly. For example, consider removing background information that does not dictate formal guidance (the "policy" of policy and procedure) or step by step operational processes (the "procedure" of policy and procedure). SWOICN will be taking a dose of its own medicine and will be exercising these principles in the upcoming policy and procedure template project. Background information that you feel as an ICP is important to provide to frontline staff can be included in a fact sheet as an appendix or linked to via a web address. Even better, consider linking to a fact sheet from a reputable organization that you know is correct and is kept up to date. This way it saves you the added responsibility of updating your fact sheets whenever new information is available regarding a particular organism or disease.

Lastly, and to address the roadblock highlighted by author Martha Wallander, having a policy and procedure, even if it is up-to-date and follows the most current best practice recommendations, is not useful at all if staff in your facility are not aware of it or do not follow it. This has critical implications that can have a detrimental effect on patients and staff members when, for example, a rarely encountered communicable organism arrives at your facility's doorsteps. Employees need to be confident in their abilities to respond to any IPAC issue that is thrown their way. This can be accomplished by providing clear, concise, and easy to navigate P&P documents available at their finger tips. As well, consider your roll out plan when a new or revised policy and procedure needs disseminating. Does simply notifying staff by email or attaching a copy to a paystub ensure they read and understand its contents? Think about how you can creatively educate staff and assist them in absorbing the new information. Wallander suggests performing regularly-scheduled drills to reinforce policies and procedures in place in your organization. Consider setting up mock care situations where staff can act out a care sequences while trying to implement a newly instituted or revised P&P. Allowing staff to see for themselves how a procedures should be incorporated into their every day work routines reinforces learning. Better yet, ask staff members to explain the policy and procedure to a small group of their peers. Teaching others is a great way to gain knowledge.