

What's in YOUR Way?

This marks the last in our 10-part series outlining roadblocks ICPs face when trying to implement effective IPAC programs. Marsha Wallander, the author of the original Top 10 Roadblocks to Infection Prevention article, has chosen a fitting closing barrier to highlight.



#10 Not making your program interesting, challenging or meaningful

It is easy to get absorbed in the day-to-day events of an Infection Prevention and Control Practitioner. Performing daily surveillance, attending various meetings, and simply keeping up with emails can very quickly diminish one's feeling of energy and excitement in the workplace, resulting in a lack of forward momentum for an Infection Prevention and Control program. This is important to take note of because how you feel about your work can often translate into the impact you make in your organization. Be conscious of the fact that every program needs review with a critical eye to what is actually making a difference. Remember, for example, that just because you've been performing surveillance on a particular organism or syndrome since you joined your IPAC program, does not necessarily mean that the surveillance data you are collecting is valuable and is actually resulting in decreased infection rates. Or if you have been using the same IPAC orientation slides for the last 5 years, it might be time to shake it up a bit with something different, not only to ensure your material is up to date, but also to infuse in you a new excitement about delivering orientation in a new way.

Remember the importance of networking with colleagues outside of your team. Consider attending an education session you may not have in the past. Go to the national CHICA-Canada conference (coming up in Saskatoon, SK in June 2012). This is a great forum to connect with others who work in similar settings, to investigate new technologies in the Exhibitors Hall, and to listen to speakers who may inspire you to try a new initiative in your healthcare setting.

Lastly, often one of the areas of Infection Prevention and Control Professionals' work that tends to be a continual challenge is teaching healthcare workers in a way that promotes positive behaviour change. Even more basic than this is getting healthcare workers to actually attend your education sessions in the first place! Remember that simply delivering a didactic education session to a group of adult learners is often not the most effective way to engage these types of learners. In order to engage the adult learner a presenter must try to make the session meaningful and relevant to some degree to each individual in attendance. Consider mixing up your delivery methods. Think about using an actual patient experience as a learning tool. Talk about Mr. Smith's tragic surgical site infection or Mrs. Brown's awful experience with *C.difficile* to personalize the IPAC message. Actually using patient's real names and stories can really remind healthcare workers that what they choose to do (or not do) has a direct impact on the quality of care a patient or resident will receive.

If you do not feel inspired by the work that you do, you likely will not inspire others to participate in a positive way in your IPAC initiatives. Schedule a program review at least once a year, if not more, to force yourself to critically look at the components of your program with an eye to what is actually meaningful and relevant to your organization.