

Being Prepared: All Hazards Training for High Consequence Pathogens



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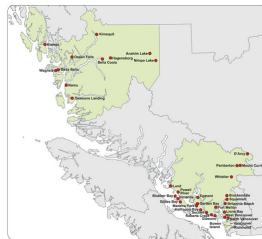


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Vancouver Coastal Health

- Regional health authority within British Columbia serving over 1 million people
- 4 urban, 7 rural sites



Extraordinary Outbreaks



Healthcare Worker All Hazards Personal Protection Training Framework (BC MOH mandate)

- Routine IC practices (for all HCWs)
- Intermediate IC (including N95 fit testing)
- “High level” IC for Rare and Emerging High Consequence Pathogens eg. Ebola
- Chemical/Radiation Decontamination

Initial + Refresh + Simulation



4

Phase One (fiscal 2018/19)

Goal:

“To improve institutional readiness to safely manage communicable **rare or emerging high consequence pathogens** across all Vancouver Coastal acute care sites”

Funding:

Provided by the BC Ministry of Health



5

April 2018 – the journey begins

Key questions:

1. How to efficiently train a large, diverse group of staff (RNs, MDs, RTs, EVS, & lab)?
2. How to overcome resistance and engage staff in training for a rare event?
3. Will trained staff be confident that they can safely care for a patient with a biohazardous threat?



6

The Approach

1. Start at the most complex institution
2. Obtain director level support
3. Build local working group
 - Flexible training options
 - Communication plan
 - Compensation issues

The Approach con't

4. Create learning materials, order PPE, book rooms, provide refreshments
5. Develop a tracking system & evaluation plan

It could happen... Are you ready?

Lassa

Ebola



Marburg

? Unknown

"Let me guess...it's contagious!"

What did we accomplish? (Apr '18 to Jan '19)

- 3 main urban sites
- 110 training sessions
- 606 attendees



10

Participant rates of the 3 main prof. groups (RNs, RTs, MDs)

	Site #1		Site #2		Site #3	
	# trainees	% total staff	# trainees	% total staff	# trainees	% total staff
ED RNs	104	69%	50	63%	66	60%
ICU RNs	125	50%	NA	NA	NA	NA
ED MDs	22	37%	20	67%	19	63%
ICU MDs	11	85%	4	80%	NA	NA
RTs	81	81%	11	100%	18	82%
TOTAL <small>*Excluding ICU</small>	343	67%*	85	67%	103	64%



11

Poll

AHT Training - Staff Satisfaction Poll

1. Are you?
 RN RT MD
 MLT MLA EVS worker Other?

2. Overall, how comfortable are you that you can safely care for a patient with a suspect rare/emerging pathogen? (* Please circle your response)

Very uncomfortable
 Not comfortable
 Neutral
 Comfortable
 Very comfortable

3. Did the offered schedule of sessions meet your needs?
 Yes No

How could the schedule or training sessions be improved? _____



12

How comfortable are you that you can care for a patient with a suspect high consequence pathogen?

	Total reports	Very comfortable	Comfortable	Neutral	Uncomfortable	Very uncomfortable
MD	38	14	20	3	1	0
RN	361	66	217	56	16	6
RT	80	17	52	9	1	1
EVS	42	18	14	8	2	0
Total	521	115	303	76	20	7
%		22%	58%	15%	4%	1%

80%



Feedback Themes

Number of comments*	Positive comment only	Requests for more practice	Requests for more realism	Requests re schedule/backfill
241	49%	15%	14%	11%

*606 trainees, 521 feedback forms, 241 free text comments



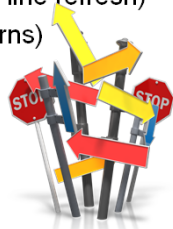
Lessons Learned

- Staff responded very positively.
- Practicing donning & doffing PPE resulted in high degree of confidence among staff to be able to safely respond.
- Staff feedback reinforced the value of on-going training.
- Flexible scheduling and appropriate support (i.e. backfill, compensation) to attend sessions is a significant consideration.



Next Steps

- Updating, standardizing local guidelines
- Sustainment (in-person/on-line refresh)
- Simulations (clinical concerns)
- Decontamination training (chemical, radiation)
- Work with partners to continually improve



Thank you!

Tracey Woznow - Project Co-ordinator
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Lauren Kim - Interim Regional IPAC Director
Allison Muniak - Regional Director, Quality and Patient Safety
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