

Multi-Regional Collaboration through IPAC Education in Northern Ontario

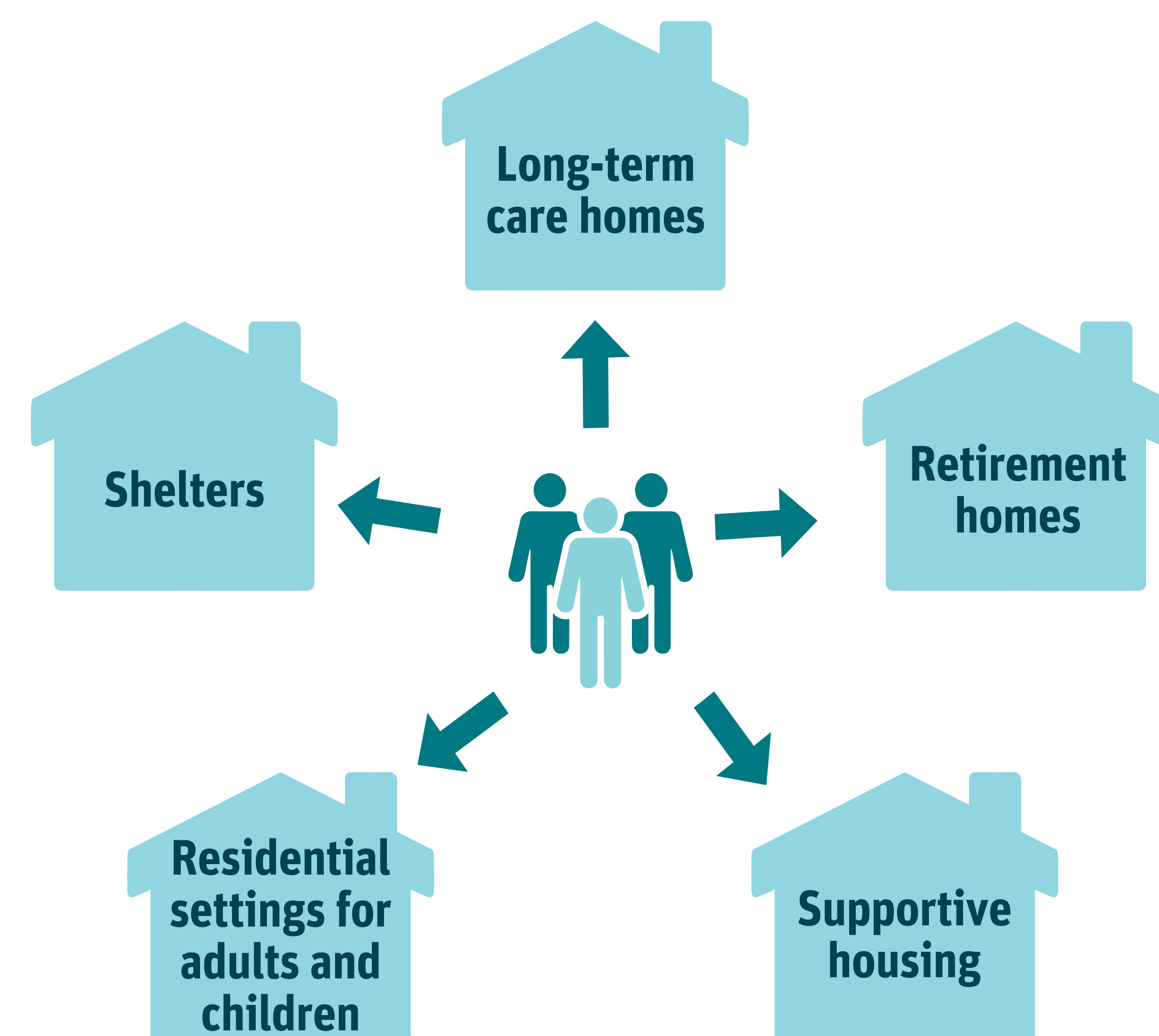


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INTRODUCTION

- Public Health Sudbury & Districts is part of a provincial network of 34 non-profit public health units.
- Infection Prevention and Control (IPAC) Hubs were established to support congregate living settings in Ontario in response to the COVID-19 pandemic.
- In Northern Ontario, IPAC Hubs are part of the local health unit.

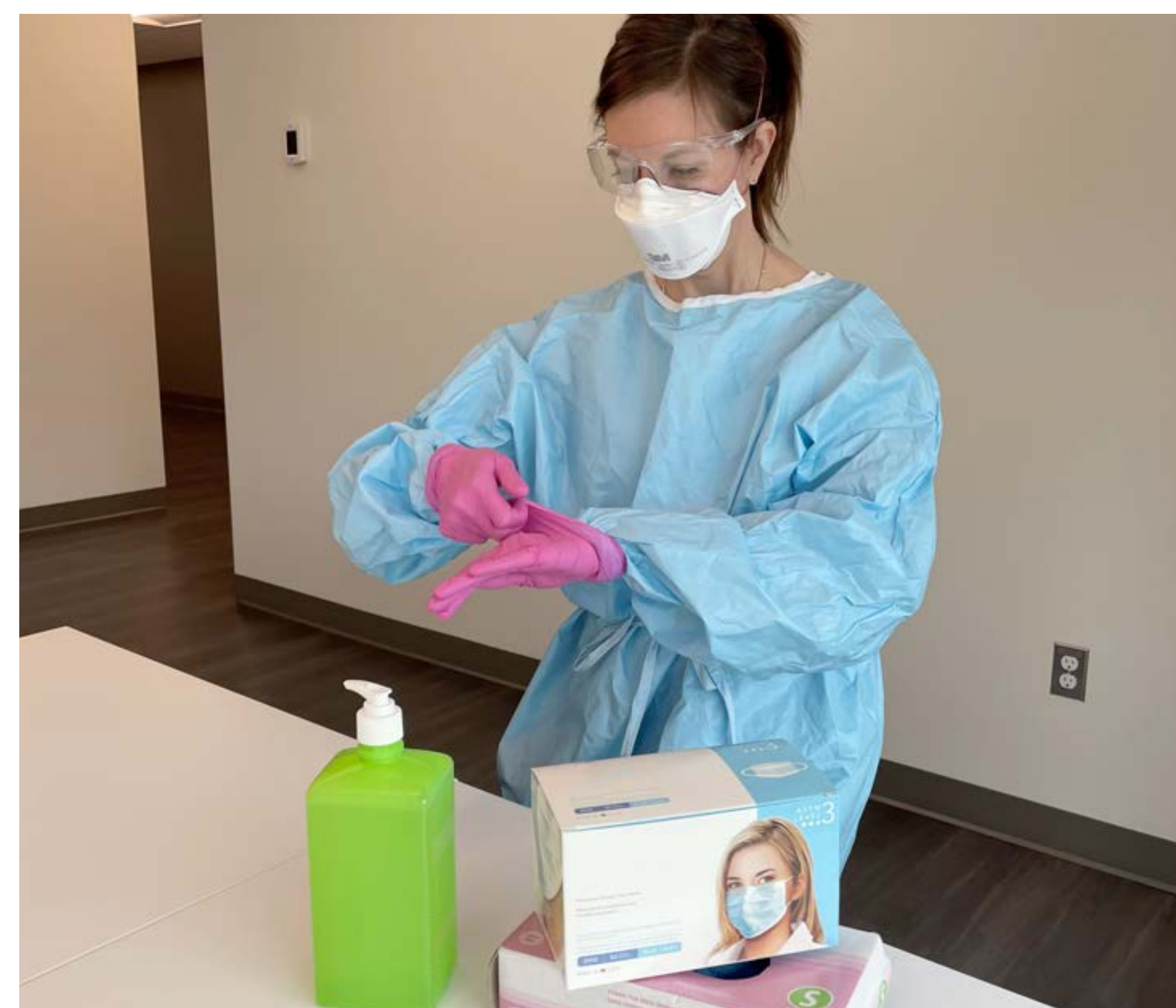
Figure 1. Congregate Living Settings



BACKGROUND

- A needs assessment identified:
 - gaps in IPAC practices and
 - demand for more education for leaders and staff in congregate living settings.
- This need was met by collaborating with IPAC experts through a series of education sessions.
- In-person and virtual education sessions were tailored to front-line staff, managers, and administrators in congregate living settings in Northern Ontario.

Figure 2. Demonstration putting on personal protective equipment



PROJECT

- Six in-person and 10 virtual Training Series sessions were facilitated over five days.
- Virtual sessions:
 - Facilitated by Public Health Sudbury & Districts, Public Health Ontario and two other Northern Ontario IPAC Hubs (Algoma Public Health and Timiskaming Health Unit).
 - Administrators and managers preferred virtual IPAC sessions and had 1-2 hours throughout the day to attend sessions.
- In-person demonstrations:
 - The Public Health Sudbury & Districts IPAC Hub staff facilitated the in-person demonstrations.
 - Front-line staff preferred in-person and practical sessions at their facilities. These staff also required flexibility so drop-in sessions were facilitated where staff could attend for 30 minutes to 2 hours and could choose from three topics.

RESULTS

- Nearly 400 participants from over 14 rural and urban communities across Northern Ontario attended the Training Series.
 - 331 participants attended the 10 virtual sessions.
 - 65 participants attended the six in-person sessions.
- Key findings:
 - Responses from evaluation surveys revealed that participants' IPAC knowledge and expertise were improved following the Training Series.
 - The sessions successfully met participants' expectations in scope, depth, and relevance to their practice.
 - The method of delivery was appropriate to best meet participants' IPAC learning needs.

Figure 3. Virtual session knowledge/expertise rating by participants



Figure 4. Represented Communities



CONCLUSION

- The Training Series brought together congregate living settings across a large geographic area and strengthened pre-existing relationships with partners.
- Education sessions helped to address gaps in IPAC practices and the need for more training opportunities for staff in congregate living settings.
- Future Training Series will consider:
 - Tailoring education for shelters, group homes, supportive housing, and assisted living settings.
 - Creating interactive virtual sessions.
 - Improving the accessibility of session learning materials.

ACKNOWLEDGEMENTS

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