

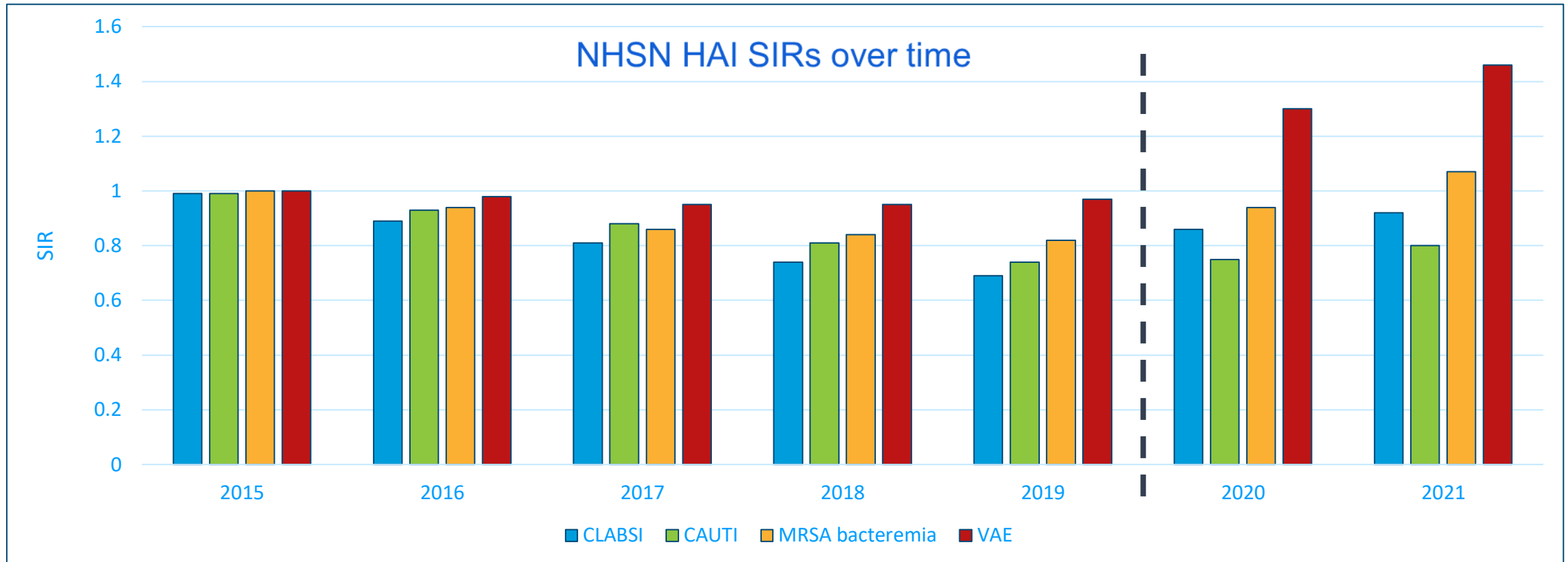


# Tackling the Great Resignation

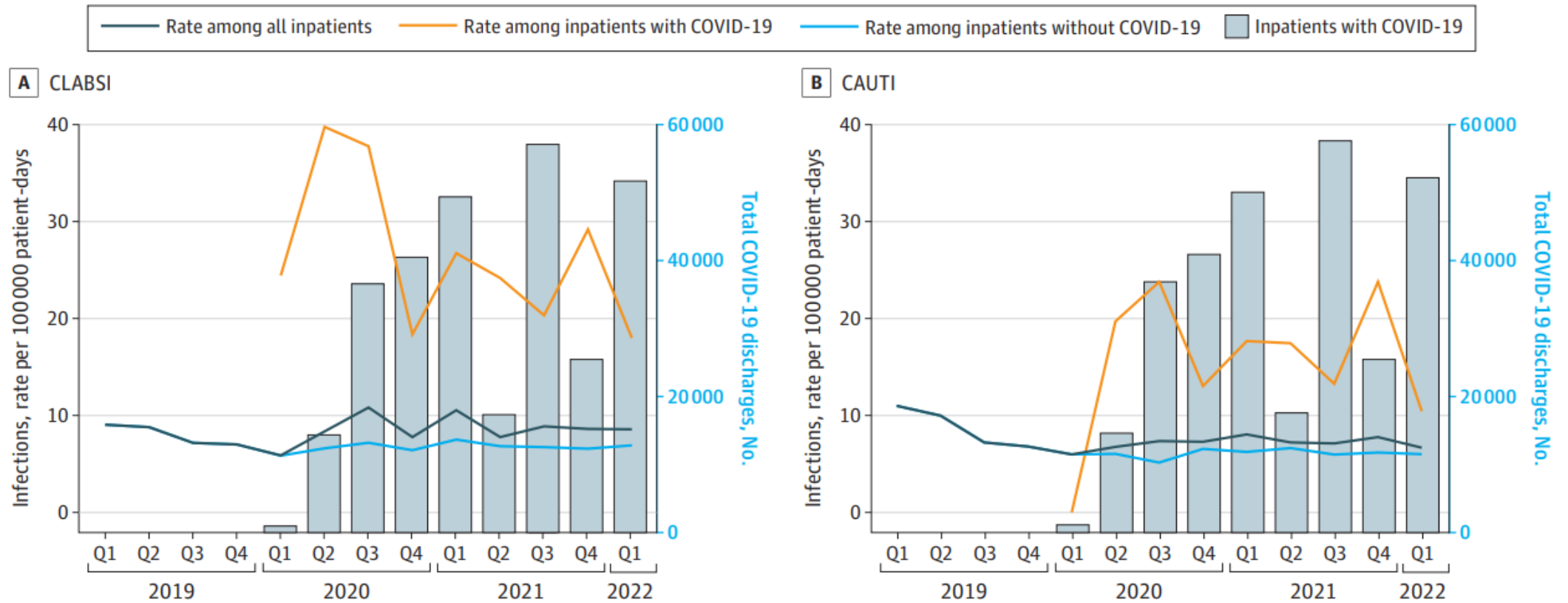
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**Patricia Jackson, RN, MA, CIC, FAPIC**  
**2023 APIC President**

- Impact of increasing demands
  - COVID-19 pandemic and increases in HAIs
  - New, emerging, re-emerging infectious diseases
- Staffing shortages, attrition
  - Aging workforce and lack of diversity
- Burnout



**Figure. Time Trend for COVID-19 Inpatient Volume and Hospital-Acquired Infection (HAI) Occurrence**



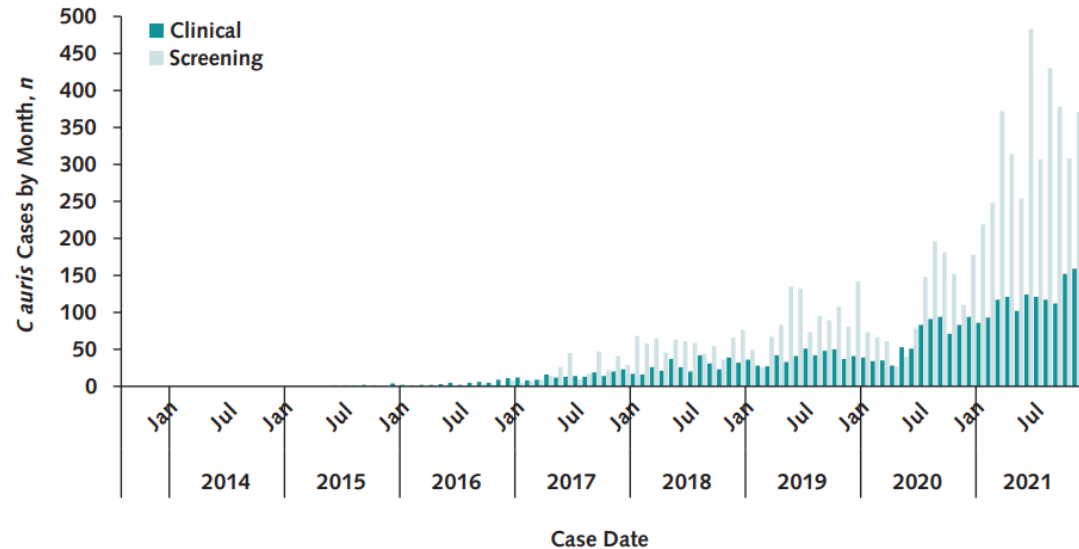


Available data show an alarming increase in resistant infections starting during hospitalization, growing at least 15% from 2019 to 2020.

- Carbapenem-resistant *Acinetobacter* (↑78%)
- Antifungal-resistant *Candida auris* (↑60%)\*
- Carbapenem-resistant Enterobacterales (↑35%)
- Antifungal-resistant *Candida* (↑26%)
- ESBL-producing Enterobacterales (↑32%)
- Vancomycin-resistant Enterococcus (↑14%)
- Multidrug-resistant *P. aeruginosa* (↑32%)
- Methicillin-resistant *Staphylococcus aureus* (↑13%)

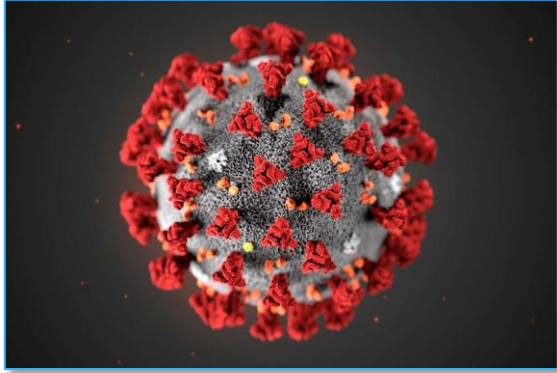
- From 2019 to 2020 hospital-onset infections and deaths due to MDR organisms increased by at least 15%
- Increases in *Candida auris* in both acute care and long-term care facilities

Figure 1. Number of clinical and screening *C. auris* cases reported to the Centers for Disease Control and Prevention during 2013 to 2021.



During the COVID pandemic my institutions HAIs:

- A. Increased
- B. Decreased
- C. Remained the same



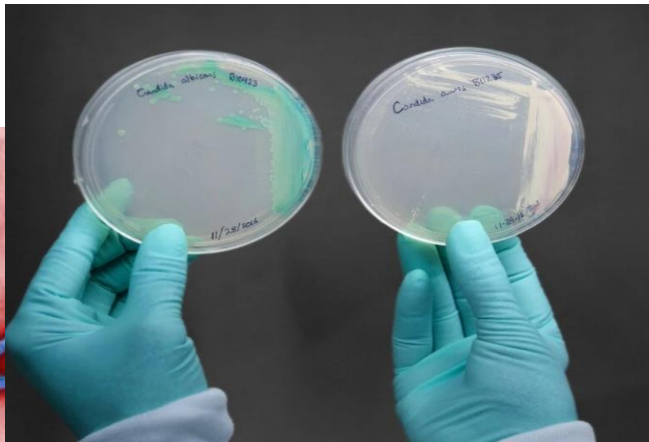
## *A 'Tripledemic'? Flu, R.S.V. and Covid May Collide This Winter, Experts Say*

Flu cases are higher than usual for this time of year and are expected to soar in the coming weeks. Another virus, R.S.V., already is straining pediatric hospitals in some states.



## **Measles Outbreak in Ohio Declared Over After 85 Cases**

By [HealthDay](#) | Feb. 6, 2023, at 7:23 a.m.



## *Outbreaks of Untreatable, Drug-Resistant Fungus Spread in 2 Cities*

For the first time, the C.D.C. identified several cases of *Candida auris* that were resistant to all drugs, in two health facilities in Texas and a long-term care center in Washington, D.C.

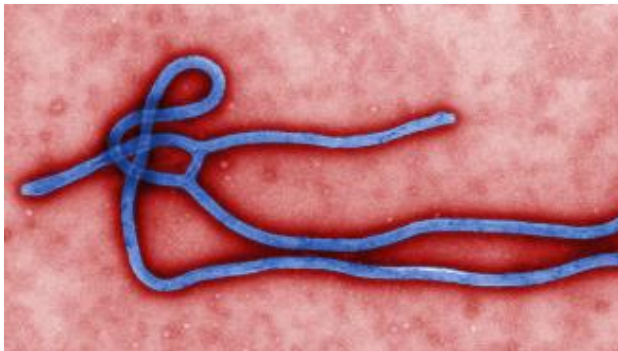
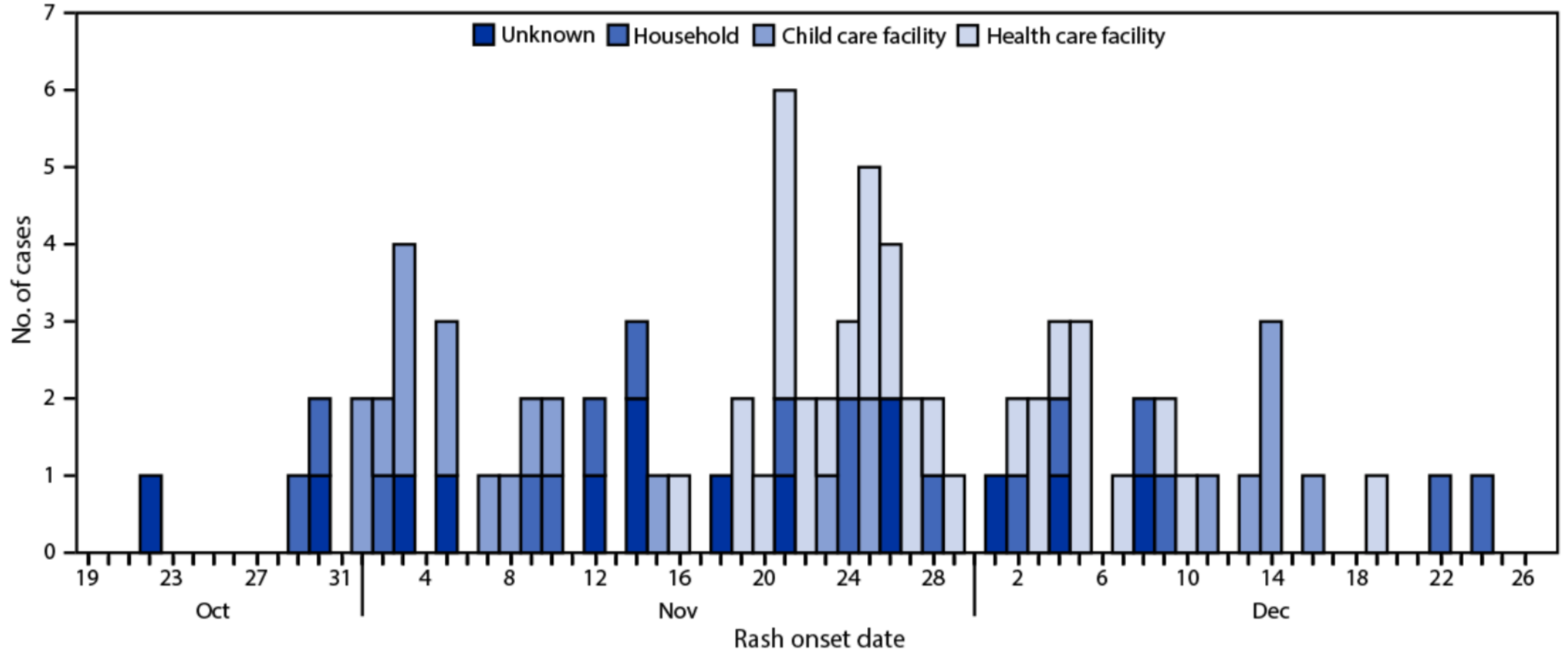


FIGURE. Measles cases, by rash onset date and exposure locations (N = 85) — Central Ohio, October–December 2022







ABOUT  
EOS<sup>CU</sup>


CLINICAL  
TRIALS

EOS<sup>CU</sup>  
APPLICATIONS

## What the Nation's Nursing Shortage Means for Infection Control

by Erica Mitchell | September 16 2022 | Hospitals, HAIs, Nurses | 0 Comments

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## Infection prevention field faces shortages, even as need increases

The pandemic has led to a shortage of infection preventionists, even as the field expands, an Association for Professional in Infection Control and Epidemiology focus group study found. Published this week in the Journal of Infection Control, the 90 IPs who participated in late 2021 described how the pandemic has changed the field. The IPs discussed being more involved in policy, the challenge of transitioning back to routine care while still responding to the pandemic, the heightened need for IPs across practice settings, challenges in recruiting and retaining IPs and significant burnout. They proposed initiatives to improve their well-being and said they wanted more authority and resources to make changes necessary to protect patient and worker safety. (Journal of Infection Control study, 3/4/23)




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### A Public Health Crisis: Staffing Shortages in Health Care

March 13, 2023

Articles

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Contents lists available at ScienceDirect

American Journal of Infection Control

journal homepage: [www.ajicjournal.org](http://www.ajicjournal.org)



Major Article

APIC Megasurvey 2020: Methodology and overview of results

Monika Pogorzelska-Maziarz PhD, MPH, CIC, FAPIC, FSHEA<sup>a,\*,</sup>, Elizabeth Monsees PhD, RN, CIC, FAPIC<sup>b</sup>,  
Amanda Hessels PhD, MPH, RN, CIC, CPHQ, FAPIC, FAAN<sup>c,d</sup>



- 2030 respondents (13% response rate)
- 40% of IPs will be retirement age in 5 years
- Lack of diversity
  - 92% Female
  - 86% Non-Hispanic Whites
  - 78 % Nursing background



Contents lists available at ScienceDirect

American Journal of Infection Control

journal homepage: [www.ajicjournal.org](http://www.ajicjournal.org)



Major Article

Recruitment and hiring practices in United States infection prevention and control departments: Results of a national survey

Heather Gilmartin PhD, NP, CIC, FAPIC<sup>a,b,\*</sup>, Sara M. Reese PhD, MPH, CIC, FAPIC<sup>c</sup>,  
Sarah Smathers MPH, CIC, FAPIC<sup>d</sup>



- 101 of 113 APIC chapters surveyed
- Vacant positions in 25% of respondents
- Recent IP hires primarily nurses

I plan to retire in the next

- A.  $\leq 5$  years
- B. 10
- C. 15 years
- D.  $\geq 20$  years

# Polling Question

I currently have a vacancy in my department

- A. Yes
- B. No

- High rates of burnout among healthcare personnel
- Studies suggest a significant effect on quality
  - Medical errors
  - HAIs
- Decreases in patient satisfaction
- Increased Turnover
  - Healthcare costs
- Increases in alcohol abuse/dependence
- Suicidal ideation



<https://nam.edu/burnout-among-health-care-professionals-a-call-to-explore-and-address-this-underrecognized-threat-to-safe-high-quality-care/>

## Professional Challenges by Job Level

What are the top challenges you are currently facing in your day-to-day work? Base: Employed members, by job level

| Senior management<br>(N=98)                               | Director<br>(N=250)   | Manager<br>(N=288)  | Coordinator/Practitioner<br>(N=687)                           |
|---|---|---|---|
| Compliance and keeping up with changing regulations (49%) | Burnout/fatigue (50%)   | Burnout/fatigue (46%)   | Burnout/fatigue (45%)   |
| Burnout/fatigue (37%)                                     | Compliance and keeping up with changing regulations (40%)     | Compliance and keeping up with changing regulations (40%)     | Compliance and keeping up with changing regulations (34%)     |
| Recruiting staff (33%)                                    | Productivity strains such as lack of time and resources (31%) | Productivity strains such as lack of time and resources (33%) | HAI reduction (30%)   |
| Training staff (28%)                                      | Recruiting staff (30%)  | Keeping up with emerging infectious diseases (30%)            | Productivity strains such as lack of time and resources (29%) |
| Budget constraints (28%)                                  | Training staff (27%)  | Adapting to impact of COVID-19 pandemic (27%)                 | Keeping up with emerging infectious diseases (24%)            |



Regardless of job level, burnout and compliance were top challenges. Senior management and Directors were more likely to cite staffing issues (recruiting and training staff), and all outside of Sr. Management commonly struggled with productivity strains. Coordinators/practitioners more commonly cited HAI reduction to be challenge, and they were the only job level for which this challenge rose to the top five most-selected.

- Random sample of 6000 APIC members emailed a survey on mental and physical well-being between July and August 2021
  - 926 responded (15% response rate)
- Rates of depression, anxiety and burnout were 21.5%, 29.8%, 65%
- Worsening mental and physical health related to the COVID-19 pandemic
  - **Three fourths** of respondents reported worsening mental health
  - **Three fifths** of respondents reported worsening physical health
- IPs with shorter shift lengths and more workplace wellness support had better outcomes

## Polling Question

During the COVID pandemic a member of my infection prevention team left due to stress/burnout?

- A. Yes
- B. No



# Polling Question

My current level of burnout is greater than what I felt pre pandemic?

- A. Yes
- B. No

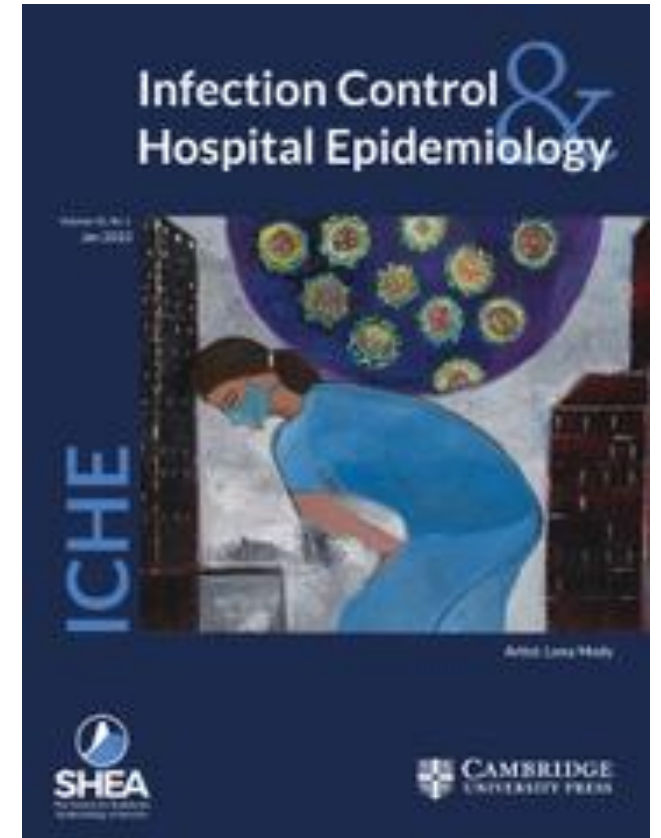
# What can we do?



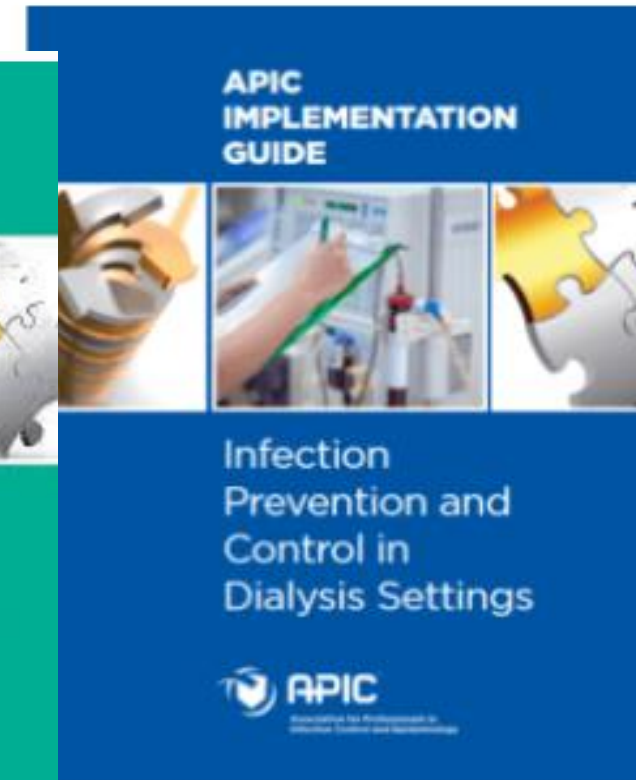
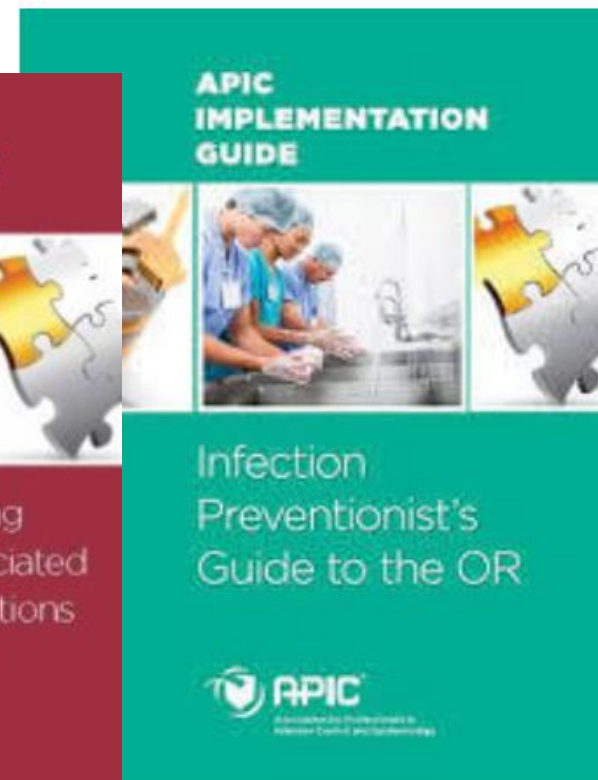
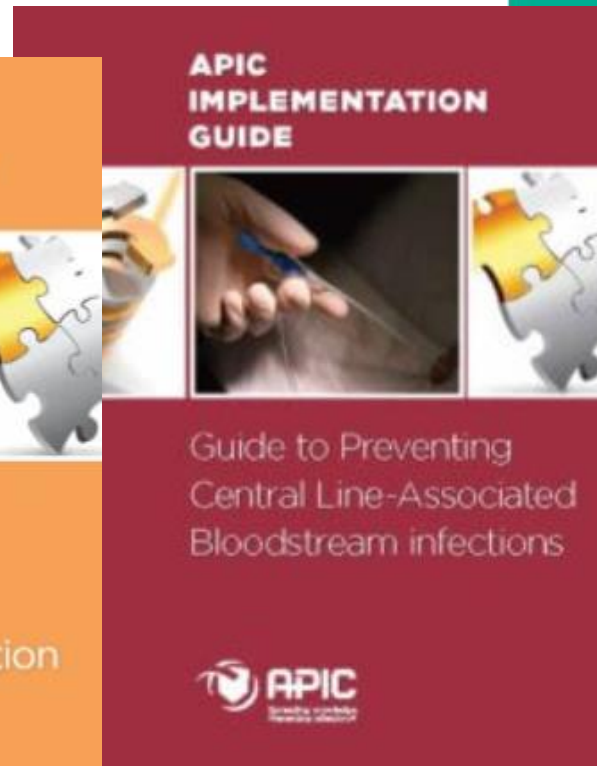
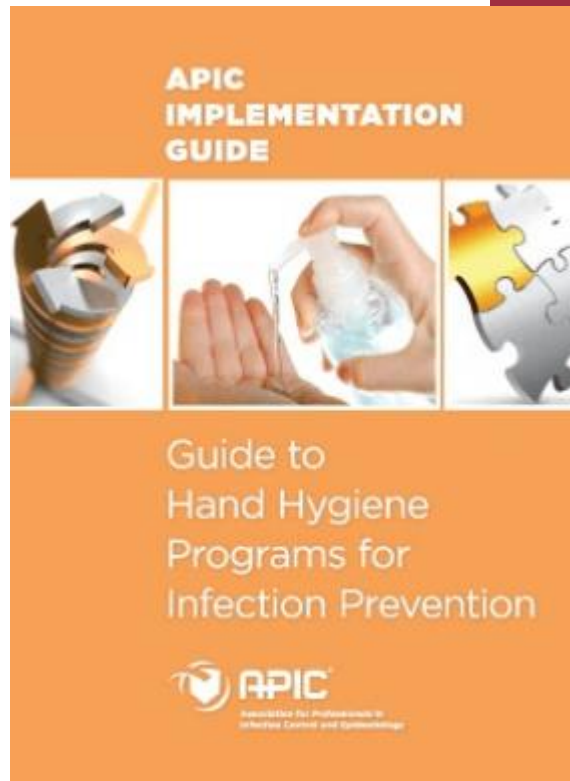
# Back to the Basics



- Catheter-associated urinary tract infections (CAUTI)
- Surgical site infections (SSI)
- *Clostridioides difficile* infections (CDI)
- Methicillin-resistant *Staphylococcus aureus* (MRSA)
- Central line-associated bloodstream infections (CLABSI)
- Ventilator-associated pneumonia/ events (VAP/VAE) and non-ventilator hospital-acquired pneumonia (HAP)
- Hand hygiene
- Implementation strategies



- Provides practical, evidence-based strategies for surveillance and the elimination of infection



- The Practice Guidance Committee (PGC) has a number of projects underway to update existing guidance and create new in areas:

| Initiative   | Status      | Estimated Delivery |
|--|-------------|--------------------|
| USP <797> Top Ten Key Points Infection Preventionists Need to Know | Completed   | September 2023     |
| Patient Hand Hygiene Toolkit                                       | In progress | December 2023      |
| Safe Injection Practices White Paper                               | In progress | 2024               |
| WOCN Clean vs Sterile Task Force Collaboration                     | In progress | 2024               |
| Creating a focus on practice guidance in Behavioral Health         | Initiated   | 2024               |
| Updating APIC Implementation Guides (see below)                    | Initiated   | 2024               |
| Creating <i>Candida Auris</i> Implementation Guide                 | Initiated   | 2024               |

## 5 Second Rule Podcast



## Revamped website in 2024



Arnie A. Sahay, RN, BSN, CIC  
Infection Preventionist, Multicare Healthcare Institute

Janell Garner, PhD, MEd, MEd, CIC, IAHIC  
Infection Prevention Director, Spauld County Health System

Melissa Campbell, RN, MSN, CPH, CIC  
Infection Preventionist, VCA Healthcare

Stephanie Hickey, RN, BSN, CIC, IAHIC  
Infection Preventionist, University of Iowa Hospital and Clinics

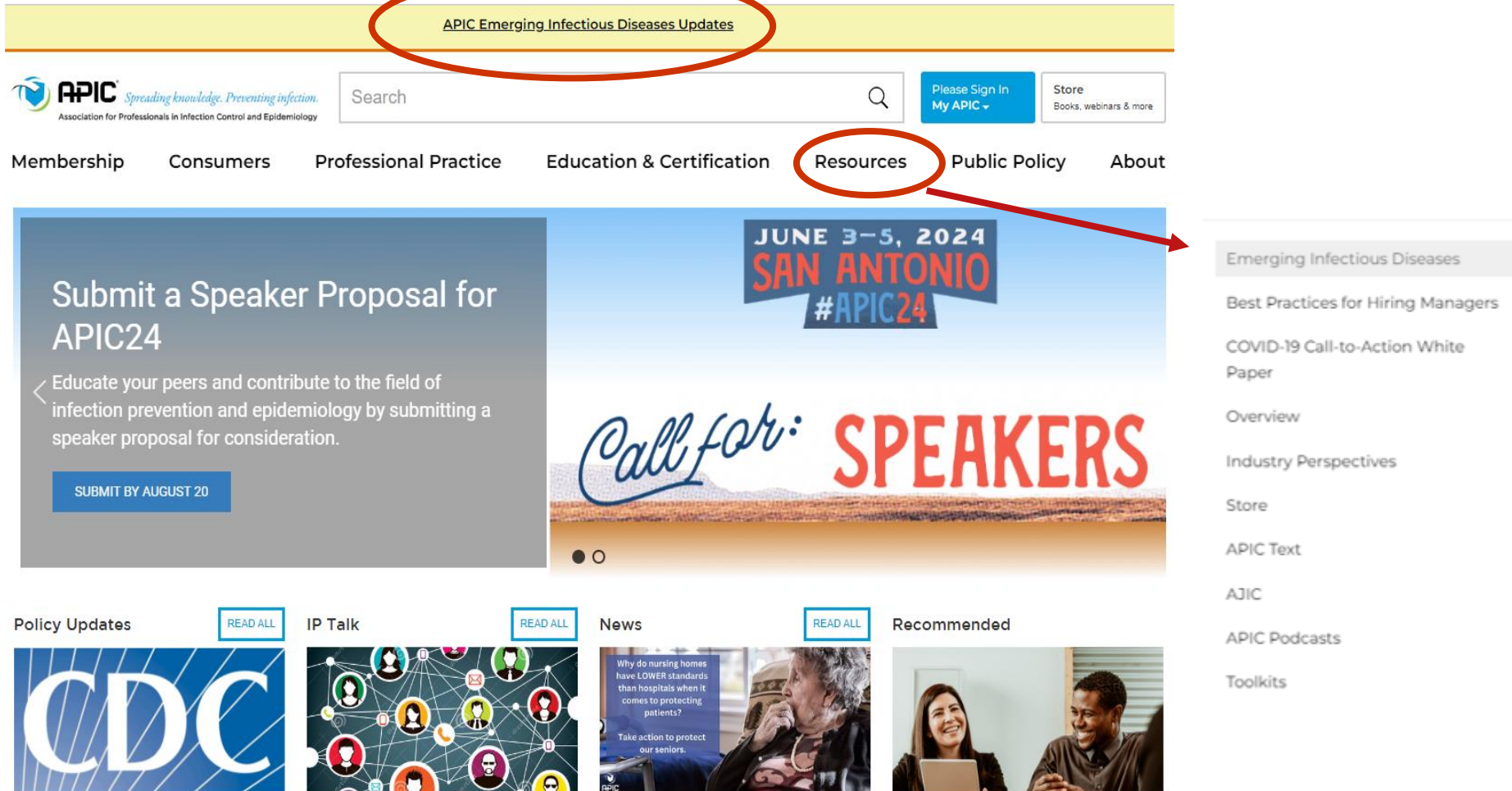
Erin S. Sherman, MS, CIC, IAHIC  
System Director, Infection Prevention and Control, Main Line Health

Christina Rogers, DNP, APRN, BC, CIC, IAHIC  
System Director of Infection Prevention, SDF Health - St. Louis



# The APIC Text

<https://apic.org/>



The screenshot shows the APIC website homepage. At the top, a yellow banner contains the text "APIC Emerging Infectious Diseases Updates", which is circled in red. Below this is the APIC logo and tagline "Spreading knowledge. Preventing infection." followed by a search bar, a "Please Sign In My APIC" button, and a "Store" button. The main navigation menu includes "Membership", "Consumers", "Professional Practice", "Education & Certification", "Resources" (circled in red with a red arrow pointing to the right sidebar), "Public Policy", and "About". The main content area features a "Submit a Speaker Proposal for APIC24" section with a "SUBMIT BY AUGUST 20" button, and a "Call for: SPEAKERS" banner for the "JUNE 3-5, 2024 SAN ANTONIO #APIC24" event. Below the main content are four sections: "Policy Updates" with a "READ ALL" button and a CDC logo, "IP Talk" with a "READ ALL" button and a network diagram, "News" with a "READ ALL" button and an article about nursing home standards, and "Recommended" with a photo of two people. On the right side, a vertical sidebar lists various resources: "Emerging Infectious Diseases", "Best Practices for Hiring Managers", "COVID-19 Call-to-Action White Paper", "Overview", "Industry Perspectives", "Store", "APIC Text", "AJIC", "APIC Podcasts", and "Toolkits".

- C a u r i s
- M p o x
- P o l i o
- C O V I D - 1 9
- i G A S
- M e a s l e s
- M a l a r i a



# Thought Leadership Whitepapers

## Whitepaper IFU Strategy

This whitepaper will present results from survey and focus groups and make recommendations for policy and action

## Setting Board Level IPC Goals

Will present a framework for how acute care facilities can develop Board level IPC goals, explore case studies, and present models for executive compensation

## IPC in Hospital @ Home

Will explore challenges to IPC in hospital @ home and homecare settings and make recommendations for policy and practice

---

# Thought Leadership

---

# Strategic Plan

**Champion the scientific advancement and practice of infection prevention and control**

**Elevate Infection Preventionists as essential advocates, leaders, and experts**

**Foster development of the next generation infection prevention and control workforce**

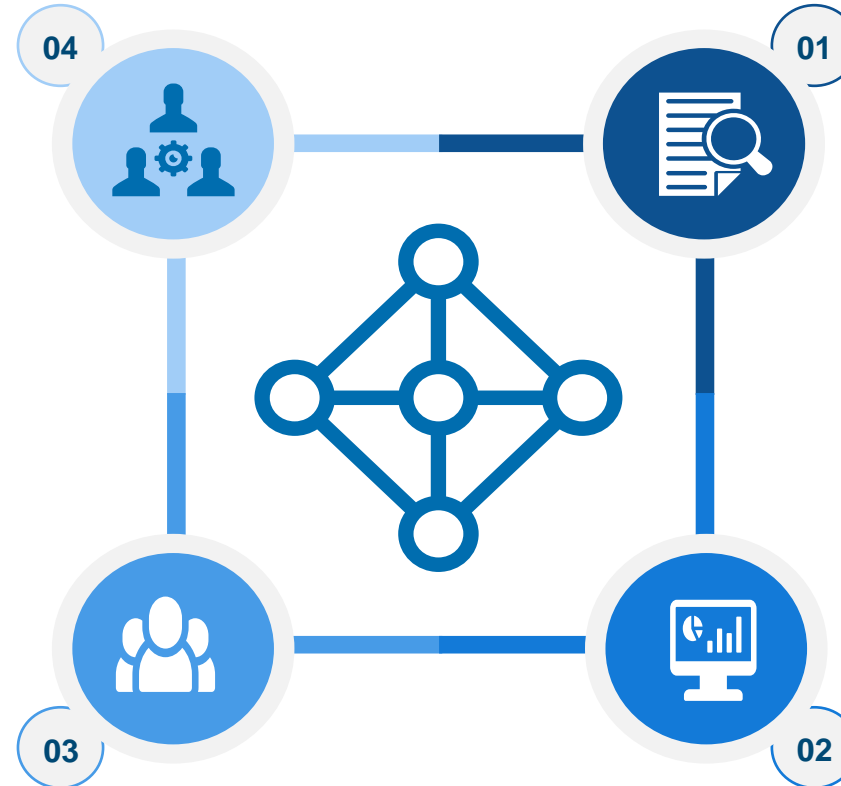
|   |  |   |
|---|--|---|
| <i>Prioritize, promote, and support infection prevention research</i>                                     | <i>Engage and influence key leaders on the value of the IPC field and profession</i>   | <i>Develop and promote pathways to enter the field of IPC</i>     |
| <i>Advance research competency among IP professionals</i>   | <i>Strengthen leadership capabilities to enhance the influence of IPs</i>              | <i>Develop a nationally recognized career advancement pathway</i> |
| <i>Develop and disseminate evidence-based best practice guidance for infection prevention and control</i> | <i>Modernize IP staffing guidance to influence employers</i>                           | <i>Develop strategies to attract new talent</i>                   |
|   | <i>Influence the policy and regulatory environment to advance infection prevention</i> | <i>Develop strategies to retain existing IPs</i>                  |

## Collaboration

Build a network to foster collaborative research

## Agenda Setting

Establish a research agenda for both original APIC research and identify critical questions for the broader IPC profession



## Development

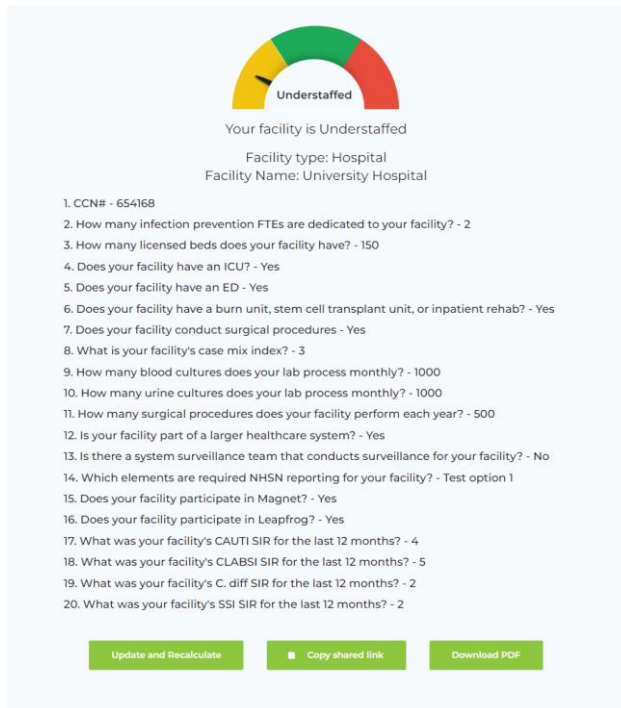
Build the next generation of IPC researchers through mentorship and opportunities for junior researchers


## Science to Practice

Leverage data collection and analysis to inform the development and refinement of guidance

- New Executive Director, Dr Rebecca Bartles
- Health equity committee
  - Advance health equity through the lens of IPC
- Practice Guidance Committee
- Developing research agenda for creating IPC science and translating science into practice
- Research mentoring program

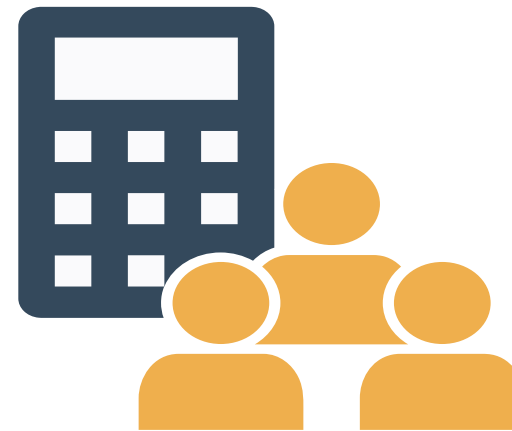
- December of 2023, APIC will launch a new staffing calculator that provides wholistic approach to calculating the optimal number of IPs and allows organizations to conduct their own modelling to reflect their individual organizations



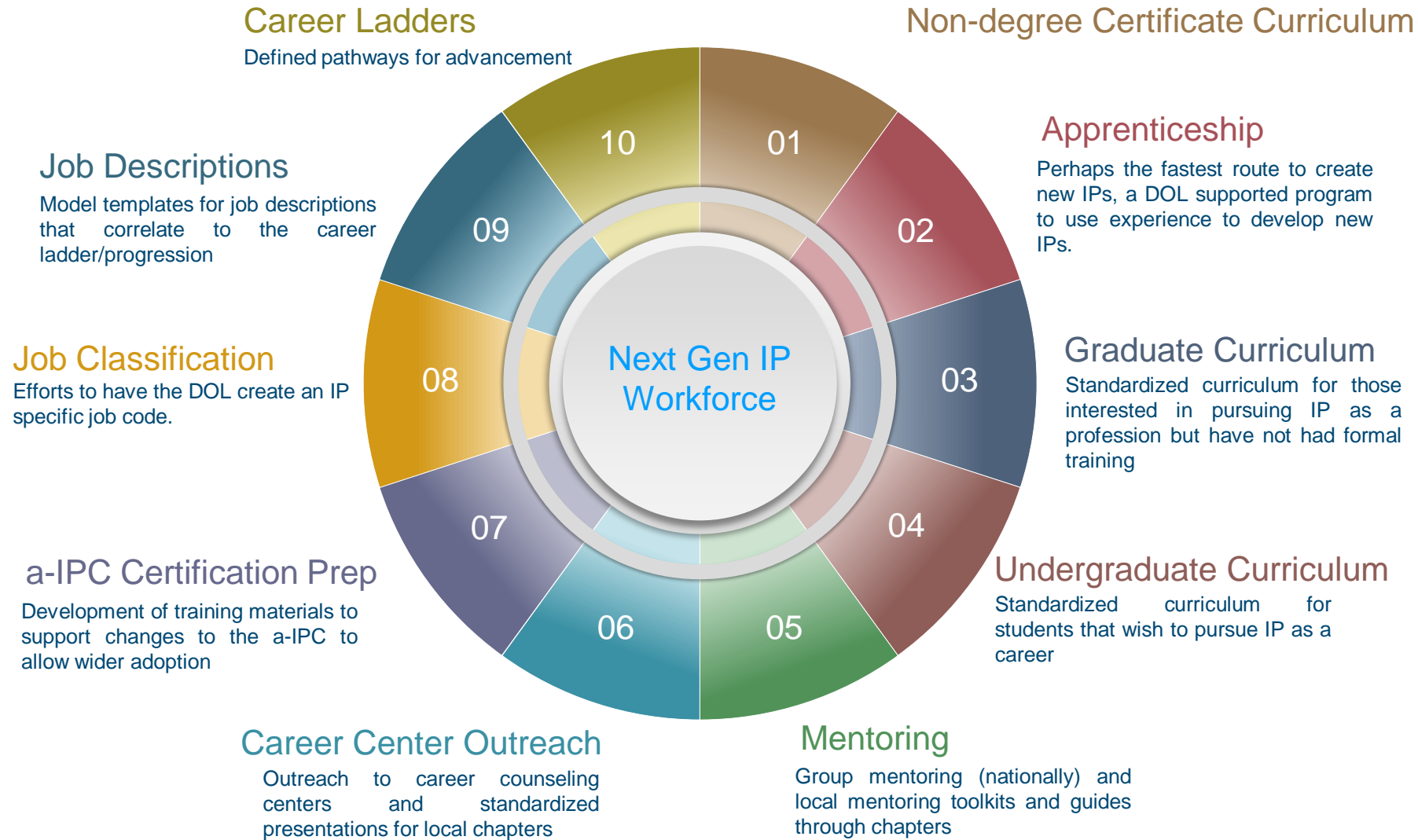
  
Your facility is Understaffed  
Facility type: Hospital  
Facility Name: University Hospital

1. CCN# - 654168
2. How many infection prevention FTEs are dedicated to your facility? - 2
3. How many licensed beds does your facility have? - 150
4. Does your facility have an ICU? - Yes
5. Does your facility have an ED - Yes
6. Does your facility have a burn unit, stem cell transplant unit, or inpatient rehab? - Yes
7. Does your facility conduct surgical procedures - Yes
8. What is your facility's case mix index? - 3
9. How many blood cultures does your lab process monthly? - 1000
10. How many urine cultures does your lab process monthly? - 1000
11. How many surgical procedures does your facility perform each year? - 500
12. Is your facility part of a larger healthcare system? - Yes
13. Is there a system surveillance team that conducts surveillance for your facility? - No
14. Which elements are required NHSN reporting for your facility? - Test option 1
15. Does your facility participate in Magnet? - Yes
16. Does your facility participate in Leapfrog? - Yes
17. What was your facility's CAUTI SIR for the last 12 months? - 4
18. What was your facility's CLABSI SIR for the last 12 months? - 5
19. What was your facility's C. diff SIR for the last 12 months? - 2
20. What was your facility's SSI SIR for the last 12 months? - 2

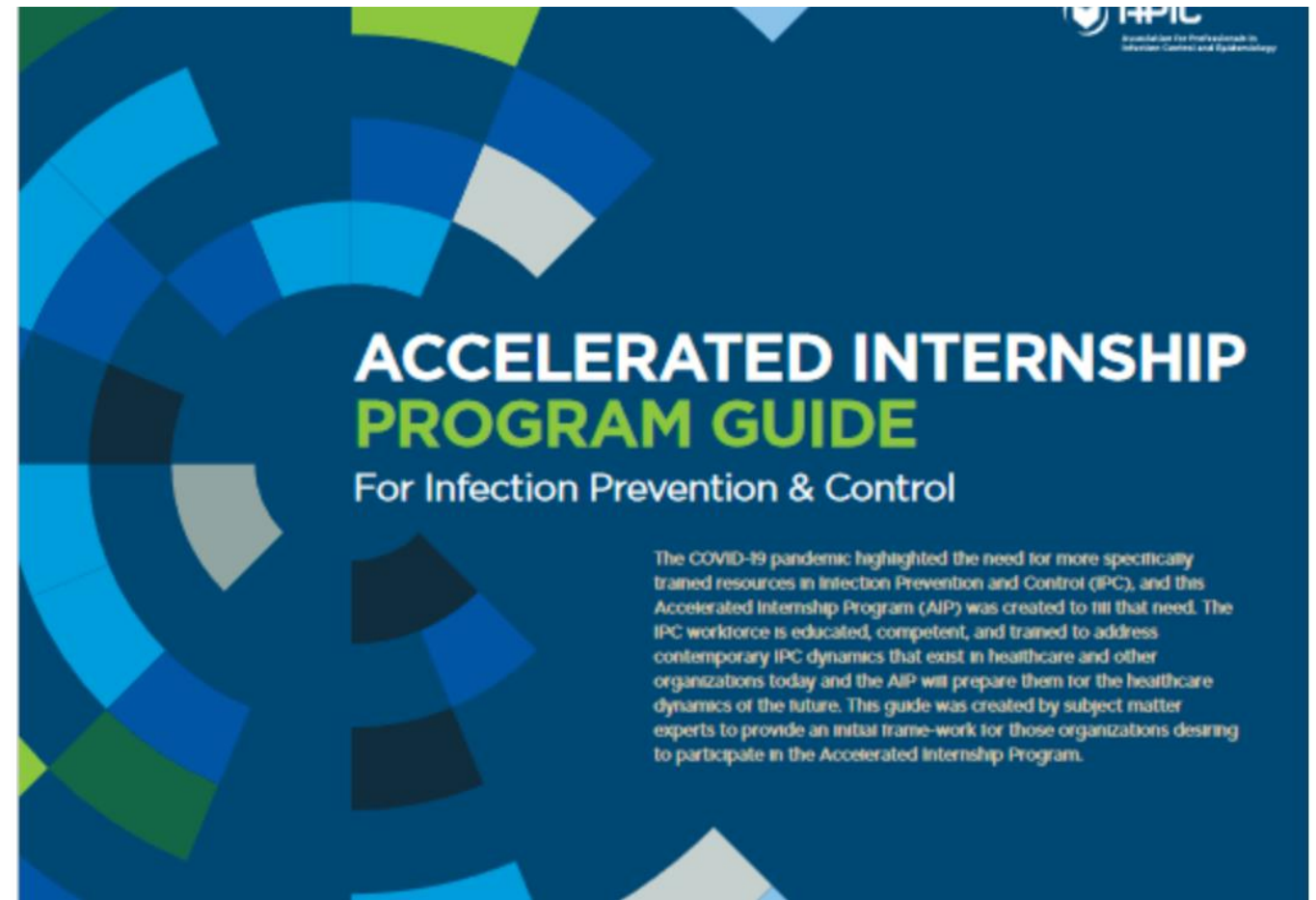
[Update and Recalculate](#) [Copy shared link](#) [Download PDF](#)



# Composite View of Workforce Development Efforts



- 10-week program to provide the initial framework to introduce students to IPC
- Objective is for participants to have a foundational knowledge of IPC to help them navigate the beginning of their career



# Academic Pathway



Certificate  
Curriculum



Masters  
Degree  
Curriculum



Undergraduate  
Curriculum



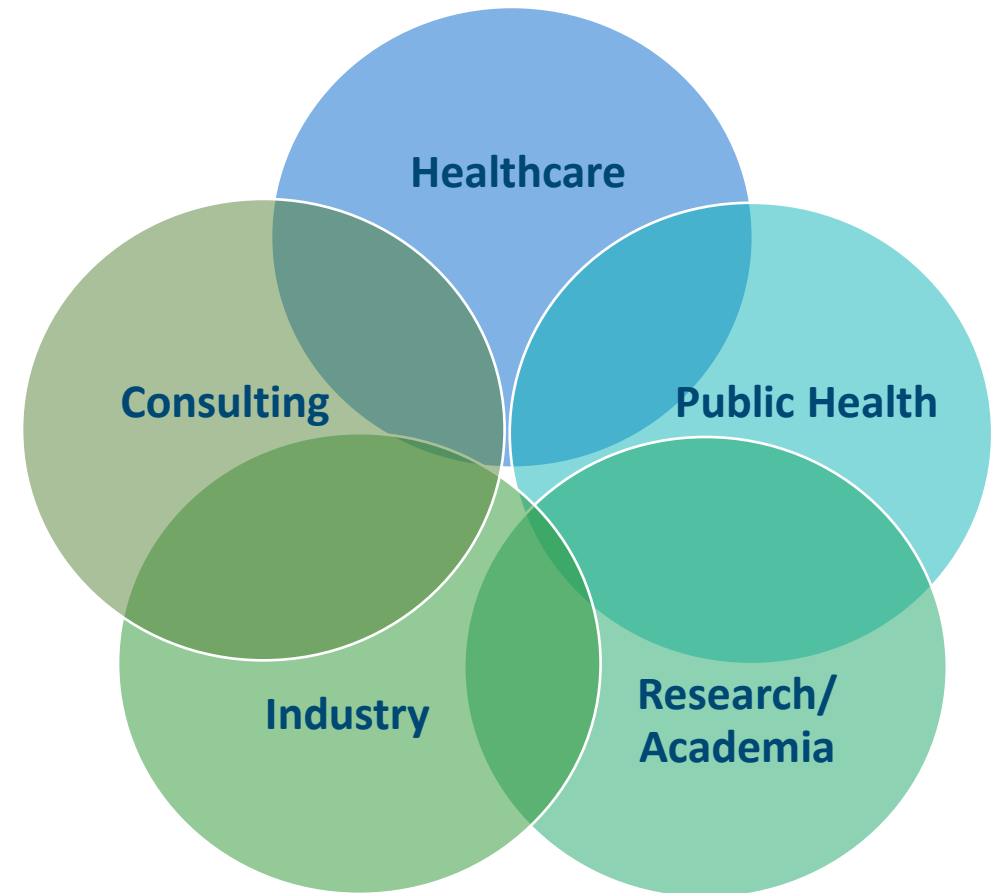


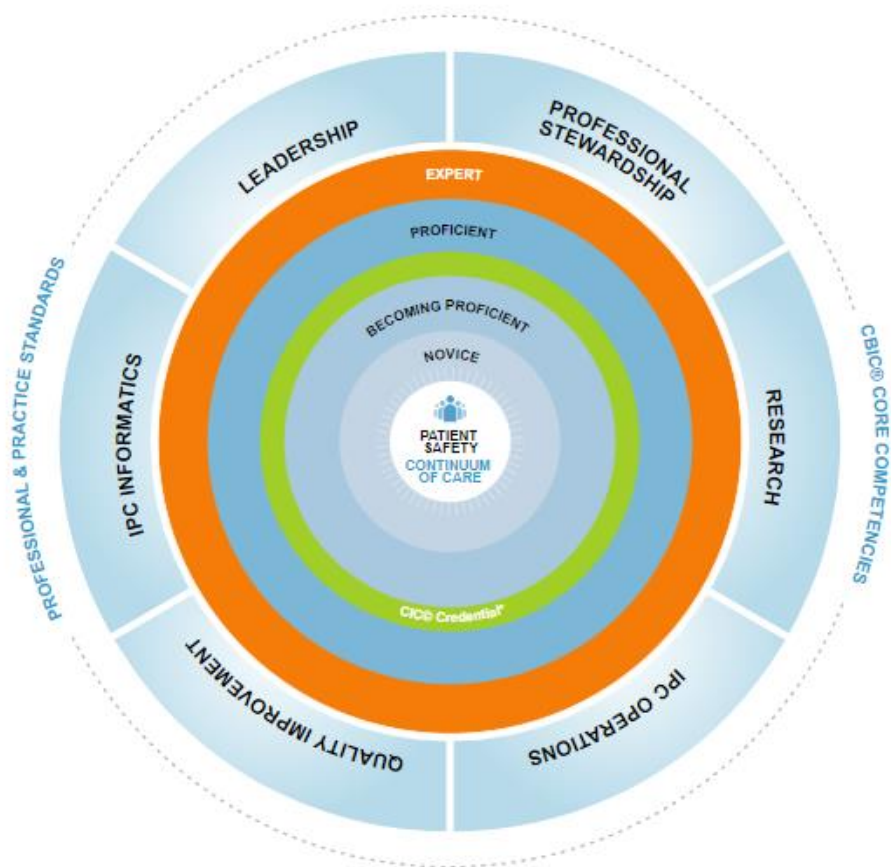
## Infection Preventionist Career Development Guide

- Introduction
  - Purpose & Value
  - Career Paths, Stages, and Ladders
  - How to Use
- Career Stage Summary
- Tools and Resources
  - Career Stage Descriptions
  - Career Stage Advancement Assessments
  - Self-Assessments
  - Professional Develop Plan & Portfolio

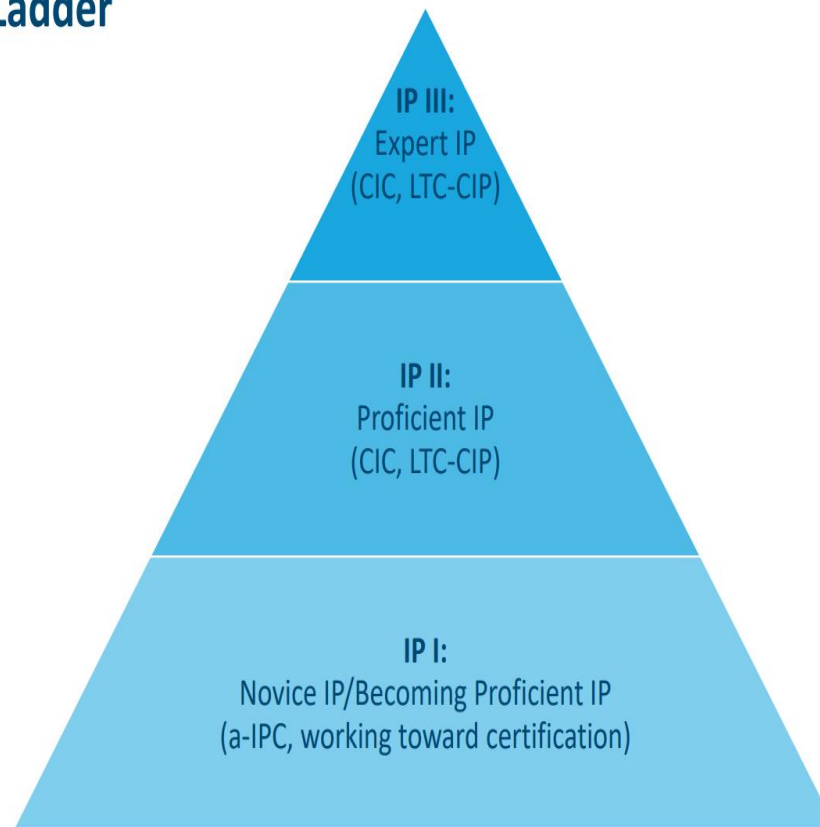
## Career Paths

- A series of jobs within a profession which lead an individual towards their IP career goals.
- Each job provides opportunities to develop new skills and movement is based on expertise, competency and interest.
- An IP career path may represent vertical, lateral or cross functional movement among expanding settings.

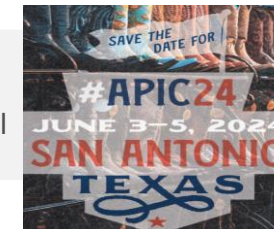
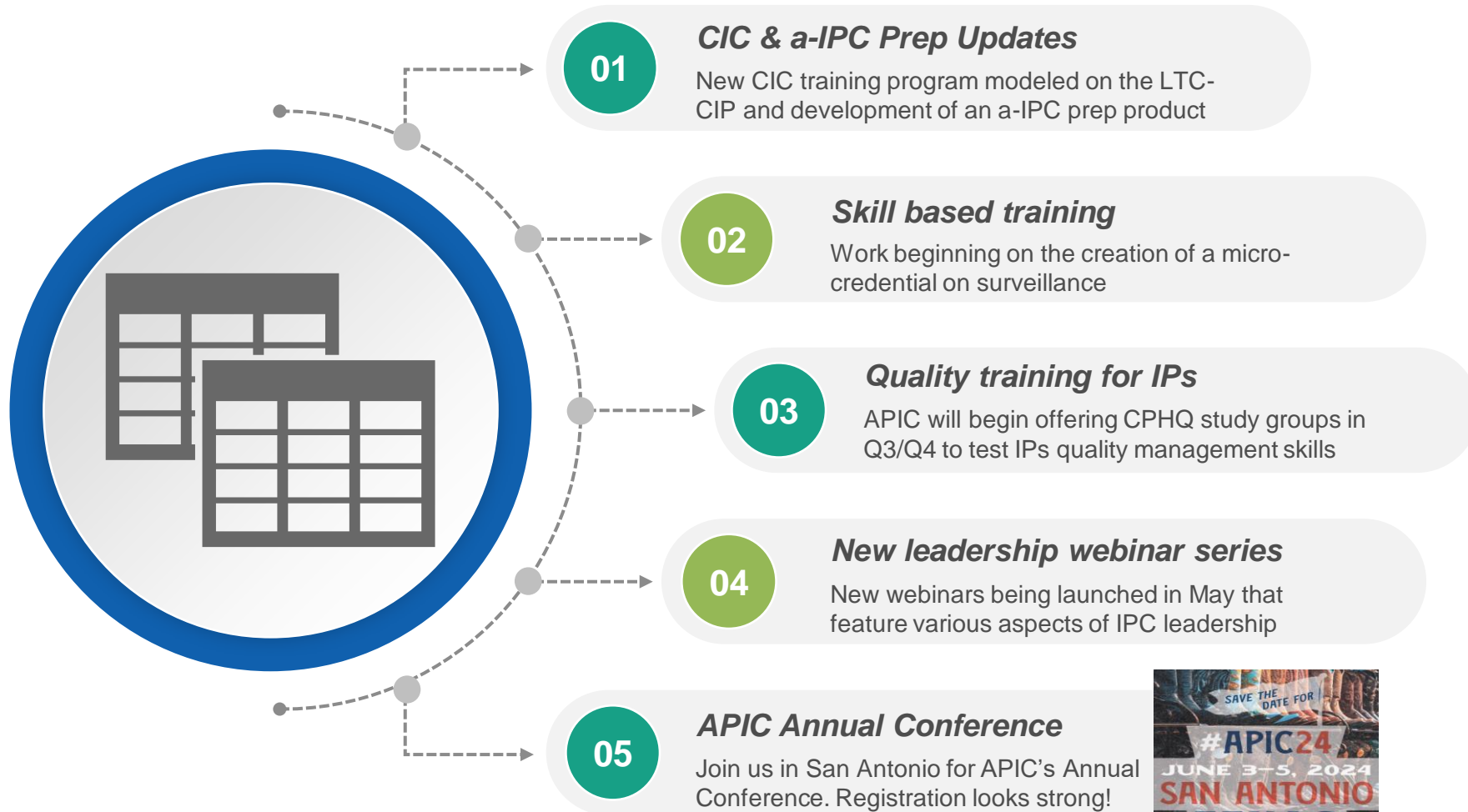




## APIC IP Career Ladder



# Expanding IP Education





## ***Launch of the LTC-CIP Certification & Corresponding Prep Course***

Launch of the new LTC-CIP, with over 300 certificants

## ***State Health Departments Training***

APIC has been working closely with several state health departments and state healthcare associations to contract around LTC-CIP training for IPs

## ***Assisted Living Frontlines Training***

Partnering with Argentum, the assisted living trade association, multiple modules will launch Q2/Q3 of this year on IPC basics for front-line workers

## ***Nursing Home IP Community & QI***

APIC is partnering with AHCA-NCAL on the launch of a new IP community in nursing homes and serving as a lead consultant for quality improvement efforts across 10 states

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 **Coronavirus (COVID-19)**

Home // Policy Watch // [Over 200,000 Residents and Staff in Long-Term Care Facilities Have Died From COVID-19](#)

## Over 200,000 Residents and Staff in Long-Term Care Facilities Have Died From COVID-19

[Priya Chidambaram](#)  
Feb 03, 2022



More than 200,000 long-term care facility (LTCF) residents and staff have died due to COVID since the start of the pandemic (Figure 1). The CDC's latest update reporting data on nursing home deaths as of January 30<sup>th</sup> pushes the reported number of deaths over this bleak milestone. This finding comes at a time when the national surge in cases due to the Omicron variant has started to subside, deaths are rising nationwide, and nursing homes have been working to increase vaccination and booster rates among residents and staff, particularly in light of the new federal rule requiring staff vaccination recently allowed to take effect by the Supreme Court. As of January 16<sup>th</sup>, approximately 82% of nursing home staff and 87% of



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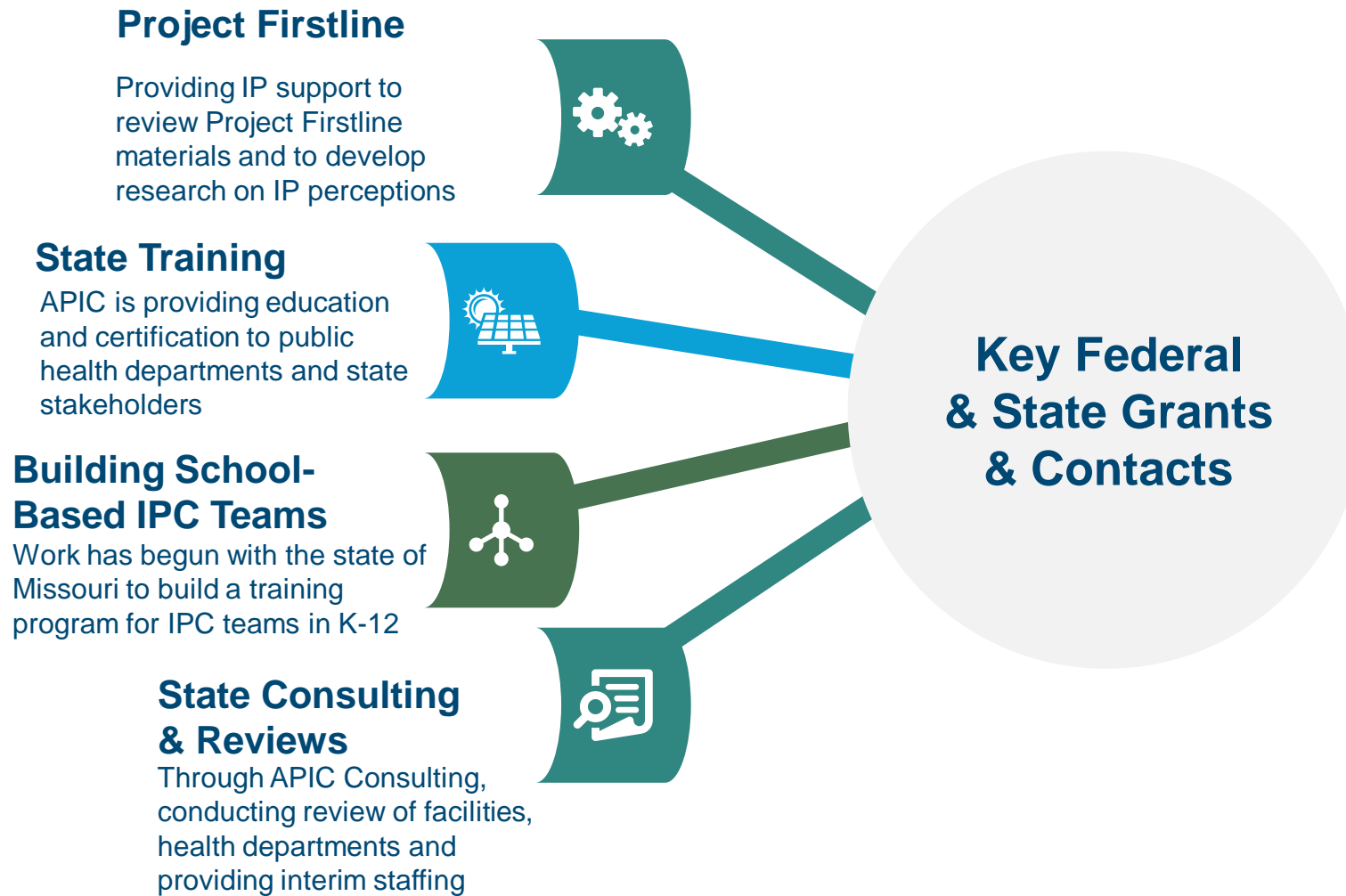
HEALTH NEWS

## Deadly fungal infection spreading at an alarming rate, CDC says

The fungus, a type of yeast called *Candida auris*, or *C. auris*, can cause severe illness in people with weakened immune systems.

## Critical Access Hospital Scholarship

- 3 Critical Access Hospitals will each receive:
  - Up to 150 hours of free consulting services
  - 2 free APIC memberships + Chapter memberships for two years
  - 2 free subscriptions to APIC Text for two years
  - 2 free CIC Prep courses
  - 2 free a-IPC or CIC certification exams
  - 2 free APIC Annual Conference registrations for two years + travel
- Nearly 200 applications received
- 3 Finalists will be chosen by the end of the year.





## Finding Joy in Infection Prevention Theory vs. Practice

Heather M. Gilmartin, PhD, NP, CIC, FAPIC

Sarah Smathers, MPH, CIC, FAPIC



Sarah Smathers, MPH, CIC, FAPIC  
System Director, Infection Preventionist  
Children's Hospital of Philadelphia



Heather M. Gilmartin, PhD, NP, CIC, FAPIC  
Investigator, Research Scientist  
Denver-Seattle VA Center of Innovation

Special thanks to Heather Gilmarin and Sarah Smathers for sharing their slides

I'm the only one that can do it

Riding out the storm

I'm too busy to take vacation

Hunkering down

Things would be better if I  
didn't have to deal with X

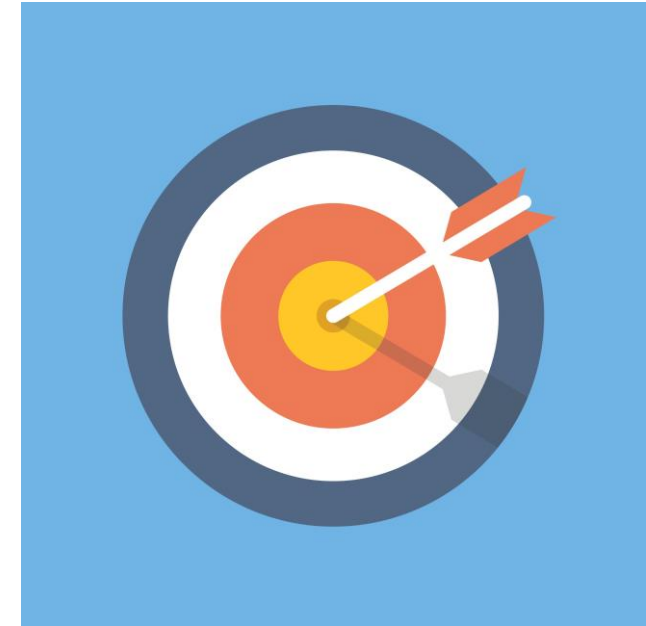
TGIF

Just get through the day

It's a paycheck

Organizations that focus on joy in work report:

- **Improved** patient experience
- **Improved** patient outcomes
- **Improved** patient safety
- **Lower** costs of care
- **Improved** employee well-being



Perlo, J, Balik B, Swensen Sm Kabcenell A, Landsman J, Feeley D, IHI Framework for Improving Joy at Work. IHI White Paper, Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017,

- Excessive workload and work schedules
- Inadequate staffing
- Administrative burdens
- Workflow/interruptions/distractions
- Inadequate technology usability
- Time pressures



Perlo, J, Balik B, Swensen Sm Kabcenell A, Landsman J, Feeley D, IHI Framework for Improving Joy at Work. IHI White Paper, Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017,

- Control over work
- Flexibility about when and where to work
- Stable staff schedules
- Opportunities to identify and solve problems
- Adequate staffing and reasonable workloads
- Support employees' personal needs
- Foster a sense of belong and personal connection

- When leaders and clinical team members have a conversation about what really matters, it helps ensure that work is aligned with staff abilities, preferences, and purpose.
- You can't guess what matters to staff, so you need to ask.
- In a one-on-one conversation, ask the following questions “What Matters To You?”
  - Then listen to what matters and do what matters
- If “What matters to you?” isn't the right fit, try these questions:
  - What is important to you right now?
  - What would you like to achieve as a result of our work together?
  - Is there anything else you want to tell me that I haven't asked about?
  - What are your goals and how can I help you to achieve them?

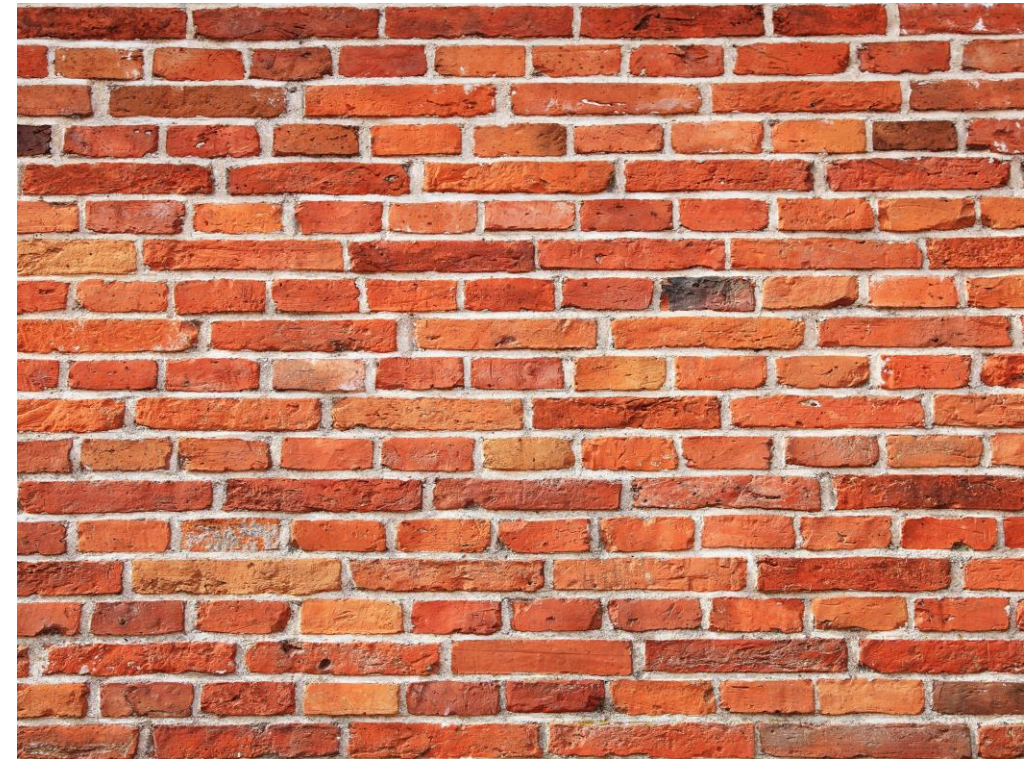
Perlo, J, Balik B, Swensen Sm Kabcenell A, Landsman J, Feeley D, IHI Framework for Improving Joy at Work. IHI White Paper, Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017,



Identify and remove daily irritants and indignities that sap energy and enjoyment



The process flips the “if only they would...” conversation to “What can we do today?”

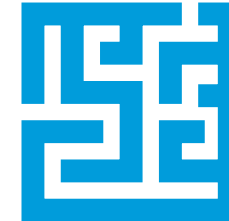


Perlo, J, Balik B, Swensen Sm Kabcenell A, Landsman J, Feeley D, IHI Framework for Improving Joy at Work. IHI White Paper, Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017,



## What are the pebbles in your shoes?

Example: “I have to document things in two different places – for no reason that I can see”



## What else do we need to understand about why this pebble exists?

Example: “Who uses this data?”



- Finding the Positive Frame
  - Has something such as this happened to me before that turned out okay?
  - Is there a bright side?
- Exercising Gratitude
  - Cultivate an attitude of gratitude
    - Gratitude moments at end of huddles
    - At the end of the workday write down three good things that happened
- Being Kinder Every Day
  - Start with yourself
    - Walk away from drama, take a day off
  - Schedule time to help someone else
    - Stranger vs someone you know

It was fun to treat my  
coworker to lunch

Patients are  
safer because  
of me

I enjoyed talking to the EVS  
team and telling them how  
important they are

It was a long week but I  
made a difference

My boss showed me  
appreciation today

Taking the day  
off just because

No CLABSIs this month

WHAT IDEAS DO YOU HAVE OR WHAT HAVE  
YOU DONE TO COMBAT BURNOUT?

- Our work is challenging but incredibly meaningful
- Building infection prevention into standard work is key
- Innovative strategies can impact the effectiveness and efficiency of our work
- We need to advocate and provide support for each other
- Together we are stronger

“Sometimes I just  
want to forget what  
is happening in the  
world and hang out  
with my chickens”

Pat Jackson



## VISION

A safer world through prevention of infection

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## MISSION

To advance the science and practice of infection prevention and control