





Pacific Infection Prevention and Control Network Meeting

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2023 PACIFIC INFECTION PREVENTION AND CONTROL NETWORK MEETING 24 – 26 May 2023, Nadi, Fiji

Agenda Item N°2.1

OPPORTUNITIES FOR IPC EDUCATION AND RESEARCH

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Evidence demonstrates that the higher the qualification and/or credential of the infection prevention and control (IPC) staff delivering the service the better the patient outcomes and reduction of healthcare associated infection (HAI) rates. Supporting this is the World Health Organization (WHO) Core Competencies for Infection Prevention and Control Professionals. The recent Global report on infection prevention and control reports the Western Pacific Region, which includes the nations and territories of the Pacific Community (SPC), as having less than 20% of countries meeting Core Component 3: IPC education and training. This indicates a lack of IPC experts and mentors, standardised IPC curricula, and career pathways and development for IPC professionals. Research produced from SPC members states is limited to date and has focused on elements such as hand hygiene and antimicrobial stewardship in isolation. Significant gaps are present in implementation science, IPC programs and organisation, leadership, and education.

1. BACKGROUND

1. The World Health Organization (WHO) <u>Core Components for Infection Prevention and Control</u> provide a holistic and programmatic framework for establishing and/or strengthening infection prevention and control (IPC) programs at the national and facility level. This is linked to the <u>Core Competencies for Infection Prevention and Control Professionals</u>. Both of these provide guidance for moving ahead in our field from both an education and research perspective.

2. PROGRESS AND ACHIEVEMENTS

- 2. **EDUCATION** Through the work of the IPC Focal Point of the Pacific Public Health Surveillance Network (PPHSN) a lot has been achieved to date that has supported the role of IPC professionals in the region. Through the assessment and evaluation of IPC programmes, production of the new IPC Guidelines, and the reinvigoration of PICNet, the need for specialised training and knowledge has been identified as a situation in need of improvement. To this end the Pacific Community (SPC) is using this evidence and the IPC workplans that have come from this work to seek and secure partnerships for this training from an array of providers.
- 3. **RESEARCH** There is increasing evidence of research capability and capacity in the region, mainly supported by educational opportunities at various levels, including Master and Doctoral qualifications. There is also a growing body of researchers with experience of working clinically with the low- and middle-income country settings that also possess the research mentoring capability to support novice in-country researchers in their endeavours. This is resulting in published works and presentation of findings at international fora, which again provides further opportunities for networking and mentoring in research.

3. CHALLENGES

4. **EDUCATION** One of the greatest challenges to supporting both under-graduate and post-graduate education in IPC is the status of IPC at a national level. The profile of IPC has been increased in the region by the SPC, however this needs to be replicated at each national government level where the governance of IPC is part of accreditation, and possibly legislative, requirements for health services with appropriate key performance indicators and consequences for non-compliance. This would then need to be reflected in core curricula for healthcare education at all levels that is a requirement for registering or governing bodies of the healthcare workforce. If IPC is seen to be core business and a requirement of safe healthcare delivery and practice by leadership (at all levels), it will assist in raising the status of the profession.

5. **RESEARCH** Perhaps the greatest challenge for IPC research in the region is opportunity, followed by funding. There is clear capacity for research within regional academic institutions, but perhaps not the IPC content expertise. Associated with this is the apparent reluctance of clinicians to engage in formal research, primarily due to a lack of confidence. There is an opportunity here, through institutional partnership and mentoring opportunities, to change this situation.

4. FUTURE DIRECTIONS

- 6. By connecting in this PICNet meeting we, as individuals and institutions, can identify opportunities to move forward with the status of IPC as a profession in the region through education and research opportunities and partnerships. This is also an opportunity for us, as individuals, to recognise our knowledge, skills, and passion for IPC and patient and healthcare worker safety. We also have an opportunity to acknowledge our curiosity and willingness to problem-solve through research and using this in making a difference to our communities in practice. This can be achieved by:
 - Recognition of the IPC professional specialisation at all levels of health service delivery
 - Promote and actively seek research opportunities and partnerships.
 - Actively seek funding from donors to support education and research.