Introduction to Project Firstline

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Centers for Disease Control and Prevention
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Project Firstline

CDC's National Training Collaborative for Healthcare Infection Prevention & Control

The power to stop infections. Together.

Every frontline healthcare worker deserves to understand infection control principles and protocols and feel they can confidently apply them to protect themselves, their facility, their family, and their community. CDC's new infection control training collaborative, Project Firstline, is designed to help every frontline healthcare worker gain that knowledge and confidence.

About Project Firstline

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https://www.cdc.gov/infectioncontrol/projectfirstline/

What is Project Firstline?

- Project Firstline is a national collaborative of healthcare & public health partners that aims to provide engaging, innovative, and effective infection control training for millions of frontline U.S. healthcare personnel (HCP).
- The content is designed so that—regardless of a HCP's previous training or educational background— they can understand and confidently apply the infection control principles and protocols necessary to **protect themselves**, their **facility**, their **family**, and their **community** from infectious disease threats.

Project Firstline: Key Features

Project Firstline reaches Oregon's HCP in a variety of settings:

- Hospitals
- Outpatient clinics
- Dialysis centers
- Nursing homes and other long-term care facilities

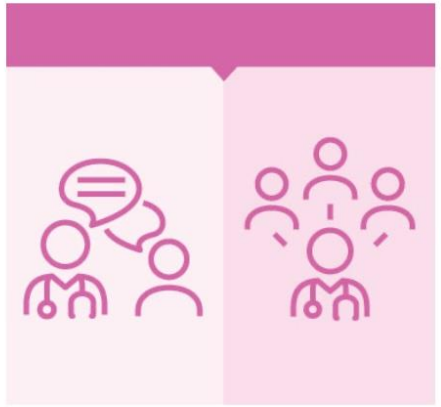
- Project Firstline training materials and educational activities help to empower HCP in building their foundational knowledge of infection control.

Project Firstline

EMPOWERING

Core Training to address immediate workforce infection control training needs, delivered via short and accessible training videos.

Practical Tools to support everyone working in a healthcare facility as they implement infection control protocols and procedures throughout their workday.



IMMERSIVE

Partner Engagement to share information across all healthcare settings through trusted partners and channels, ensuring that training content and tools are delivered to healthcare workers who need them.

Mentorship to connect infection control experts with their local healthcare community so that they may become an ongoing resource.

LASTING RESULTS

Public Health Technical Capacity Building to leverage the public health workforce to facilitate knowledge and tool sharing between public health departments and their local clinical communities.

Innovation to deepen knowledge to better inform infection control recommendations. Project Firstline develops innovative content to provide infection control training to a diverse range of adult learners.

Initial steps for Oregon's healthcare workforce

Needs assessment survey performed in late 2021

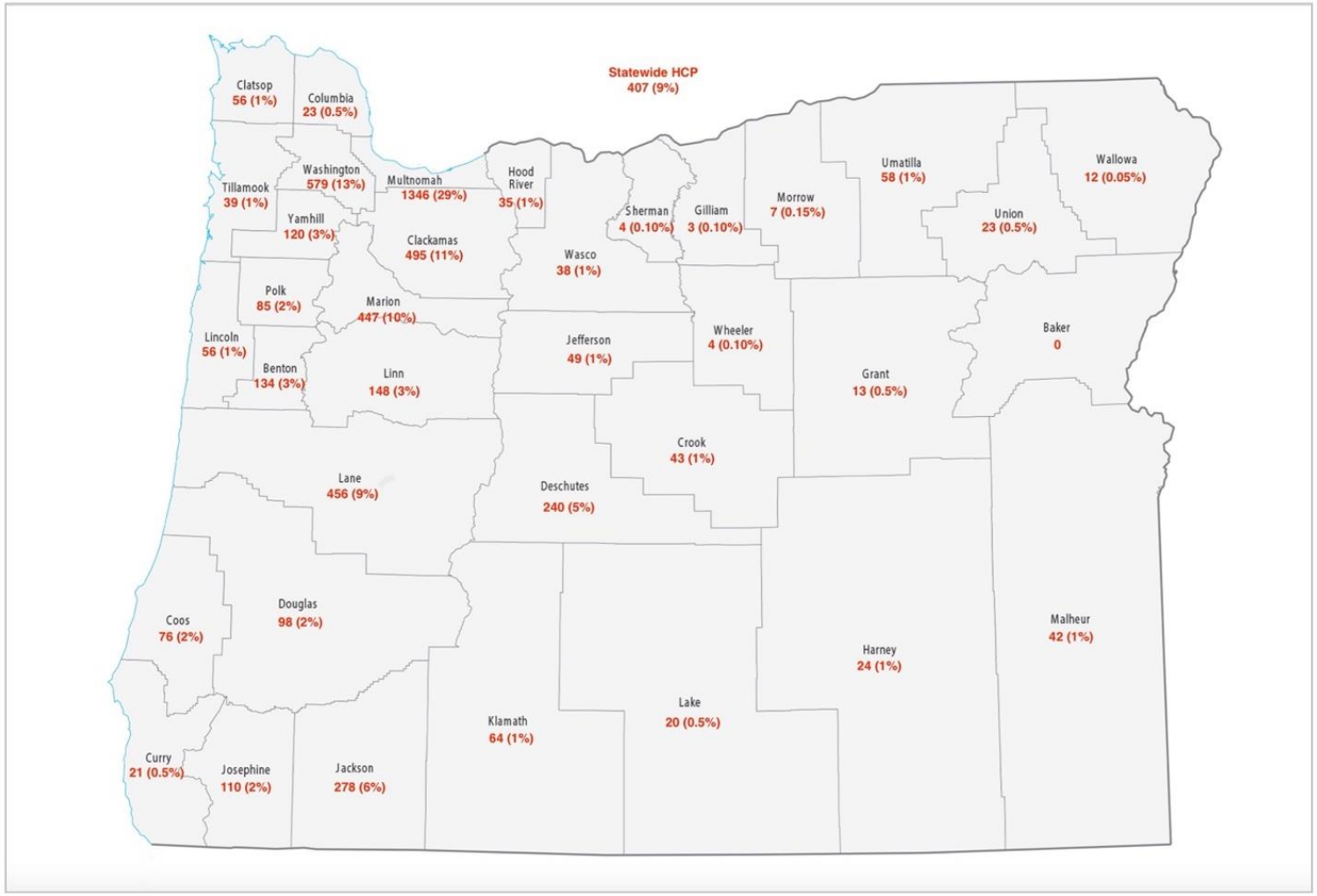
- Determine target audiences that want more information and in what format
- Determine most trusted educators
- Understand what resources these HCP utilize when they have questions related to infection prevention & control
- Electronic survey, using the SurveyMonkey platform
  - Open to Oregon HCP from September 23, 2021 to December 10, 2021.

- A total of 4,674 healthcare personnel (HCP) completed the survey, with a very wide variety of roles.
- The majority (46.3%, n=2,166) of respondents were nurses.

Clinical Roles of Respondents		
	Responses	
Clinical Role	Frequency	Percent
Registered nurse (RN)	2,151	46.56
Certified nursing assistant (CNA)	415	8.98
Other role	350	7.58
Pharmacist	277	6.00
Physician (MD, DO, MBBS)	246	5.32
Licensed practical nurse (LPN)	220	4.76
Technician	191	4.13
Nurse practitioner	159	3.44
Healthcare administrator	135	2.92
Acupuncturist	80	1.73
Respiratory Therapist	71	1.54
Non-clinical support staff	65	1.41
Medical assistant	54	1.17
Health educator	41	0.89
Midwife	24	0.52
Language interpreter	22	0.48
Home health aide/in-home care provider	21	0.45
Physician assistant	17	0.37
Social services staff	15	0.32
Kitchen staff or food services	14	0.30
Naturopathic doctor	14	0.30
Emergency medical technician/paramedic	11	0.24
Environmental services/housekeeping	9	0.19
Dentist	6	0.13
Massage therapist	5	0.11
Dental hygienist	4	0.09
Chiropractor	3	0.06
Total	4,620	100

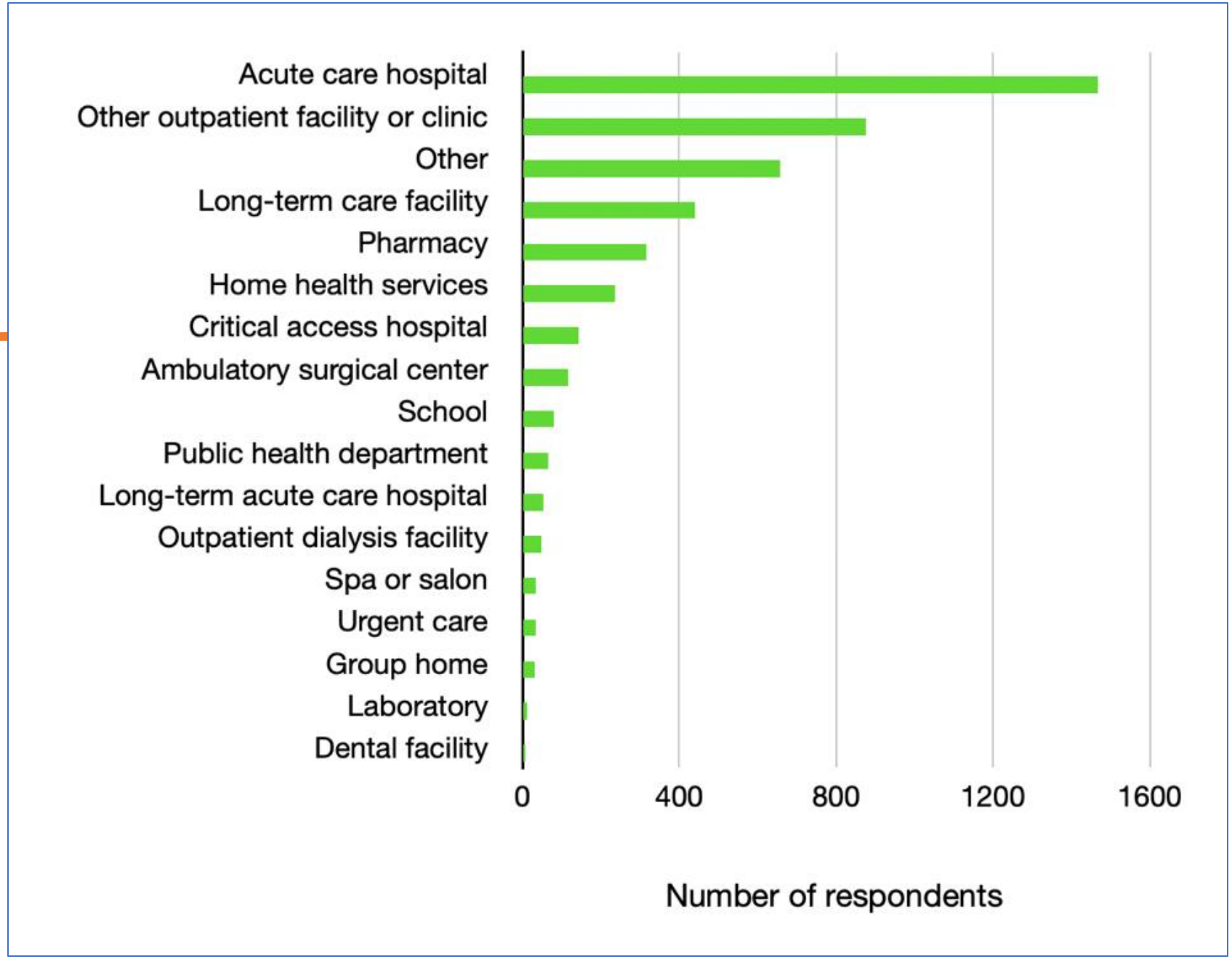
Counties represented by respondents

Oregon is composed of 36 counties. The three counties which contributed to the greatest proportion of responses are our state's three most highly populated counties, reflecting a total of 52.5% of our total respondents: Multnomah County (n=1362 [29.1%], Washington County 589 [12.6%], and Clackamas County 461 [9.9%]). Only one county (Baker County) was not represented, with 0 respondents. The map below shows the number of HCP respondents in each county. Note that 407 (9%) of the respondents work statewide.

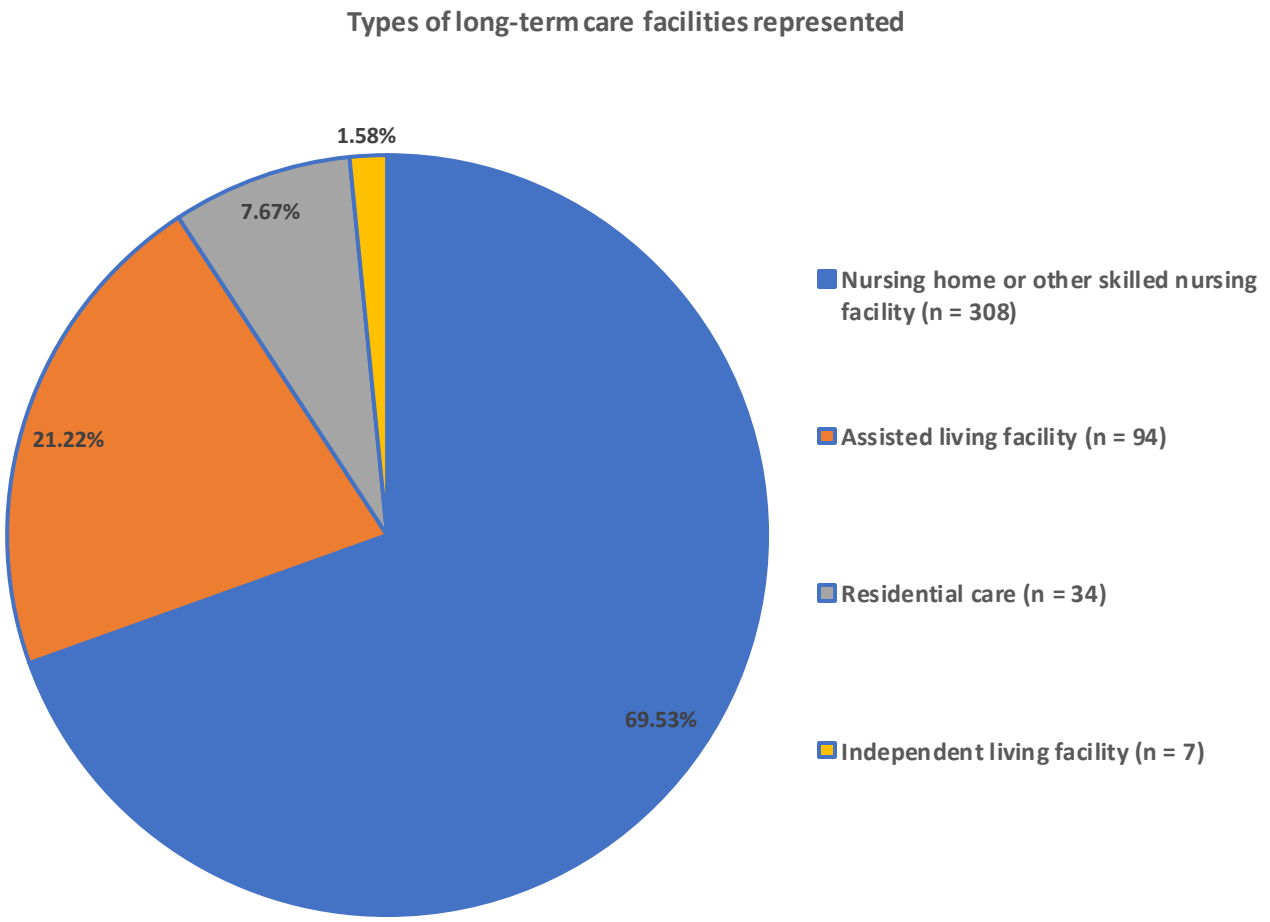


Primary workplace

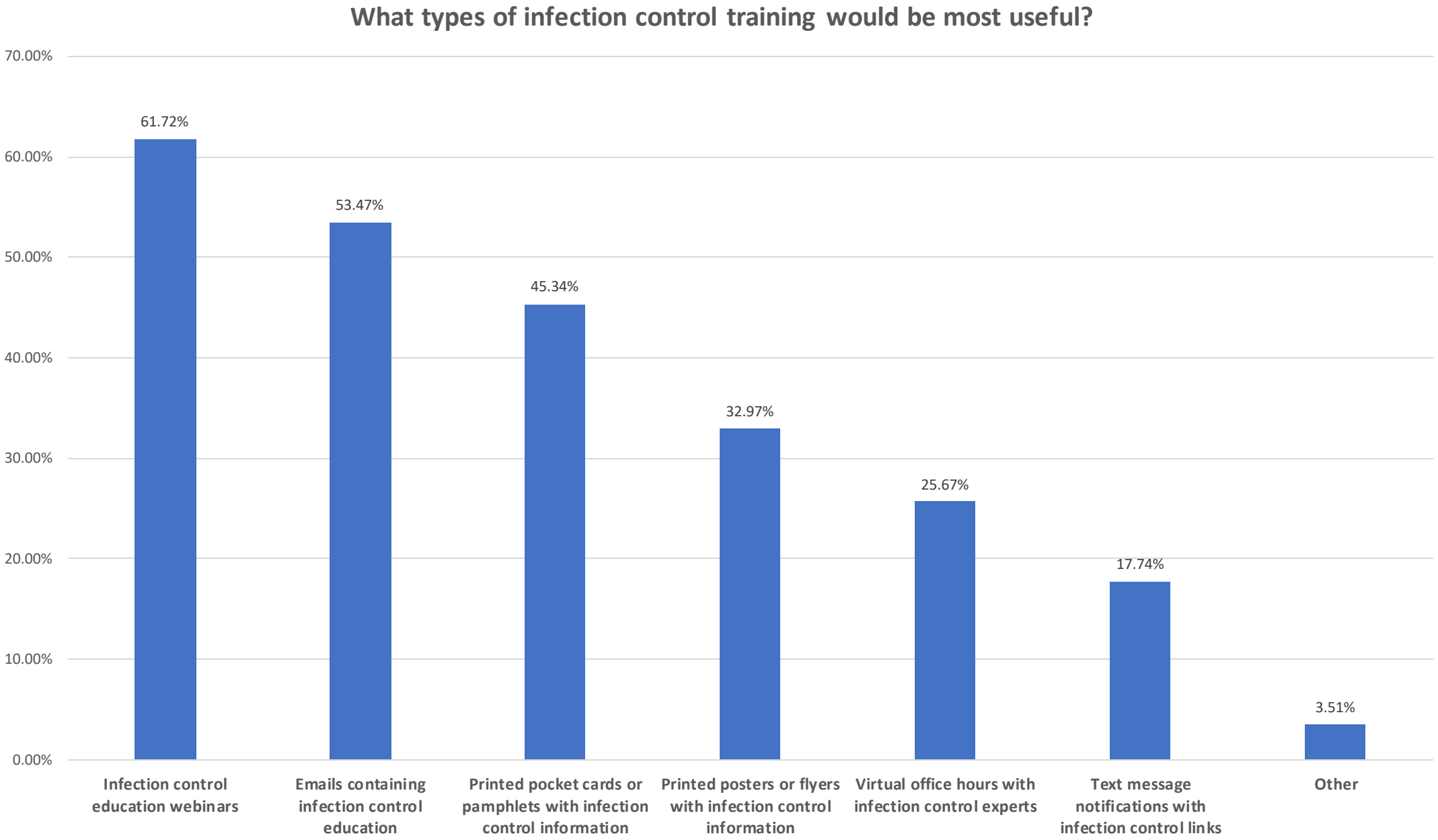
- Critical access hospitals comprised 3% of our total respondents (n=143)

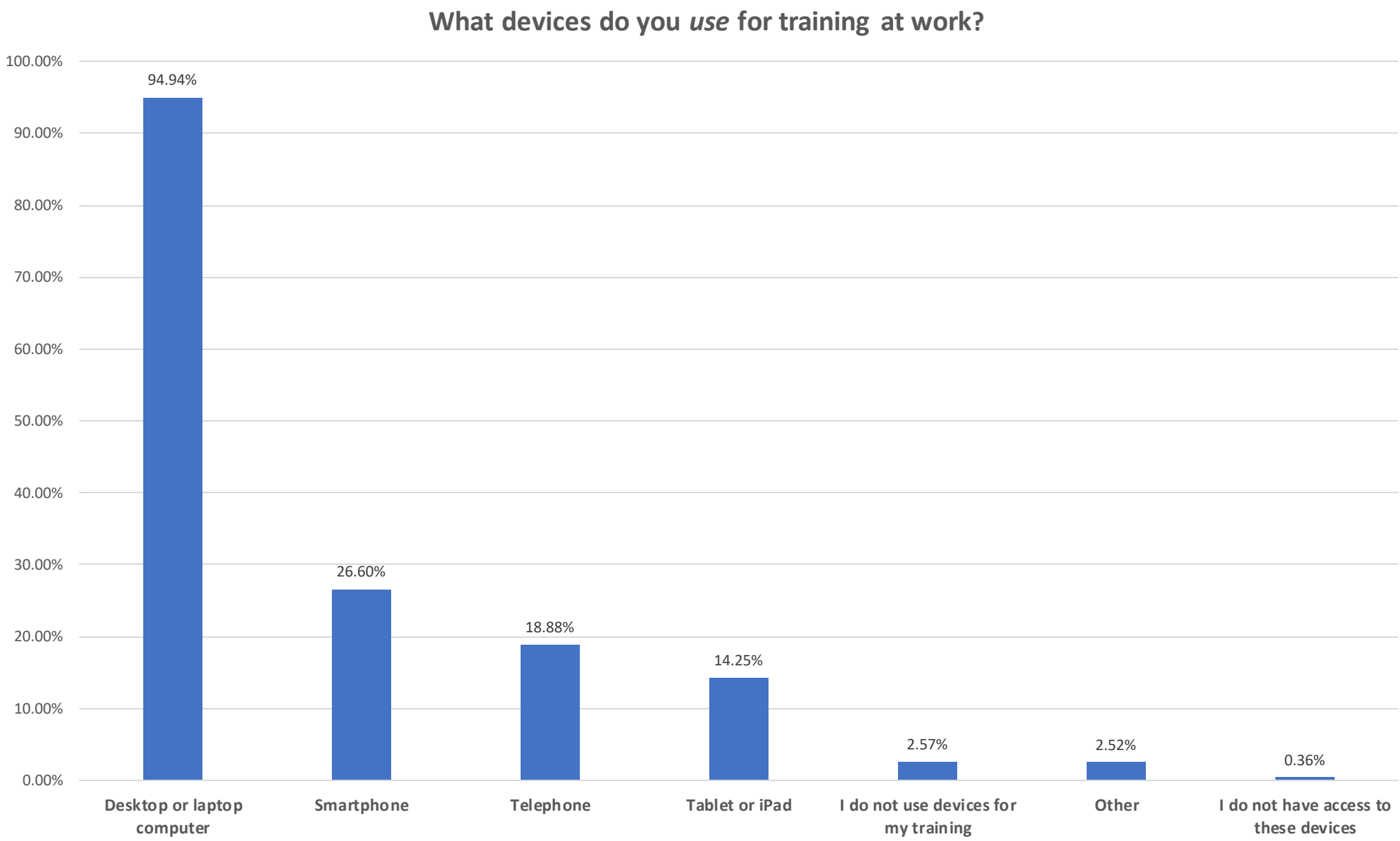


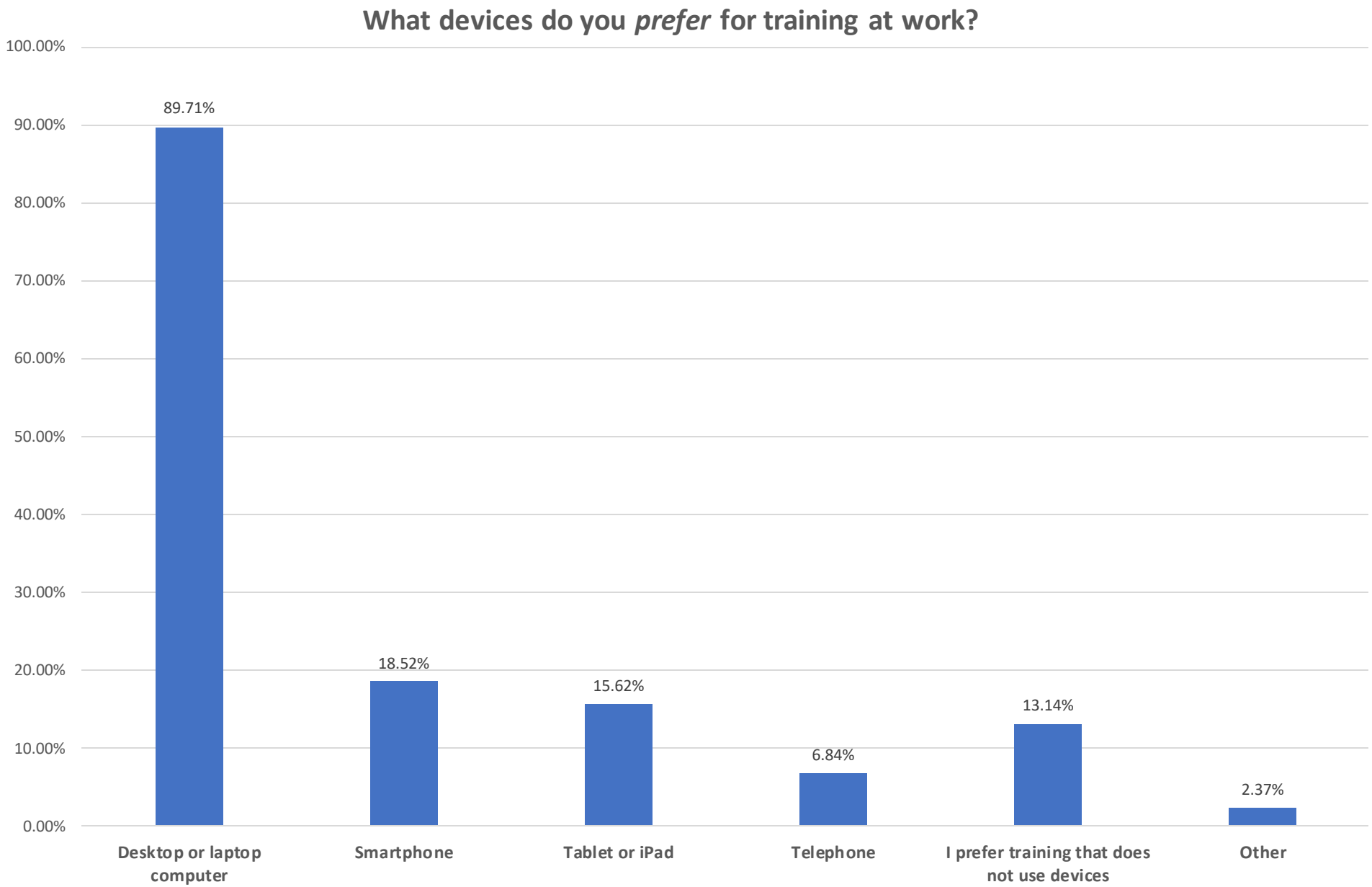
Types of LTCF represented



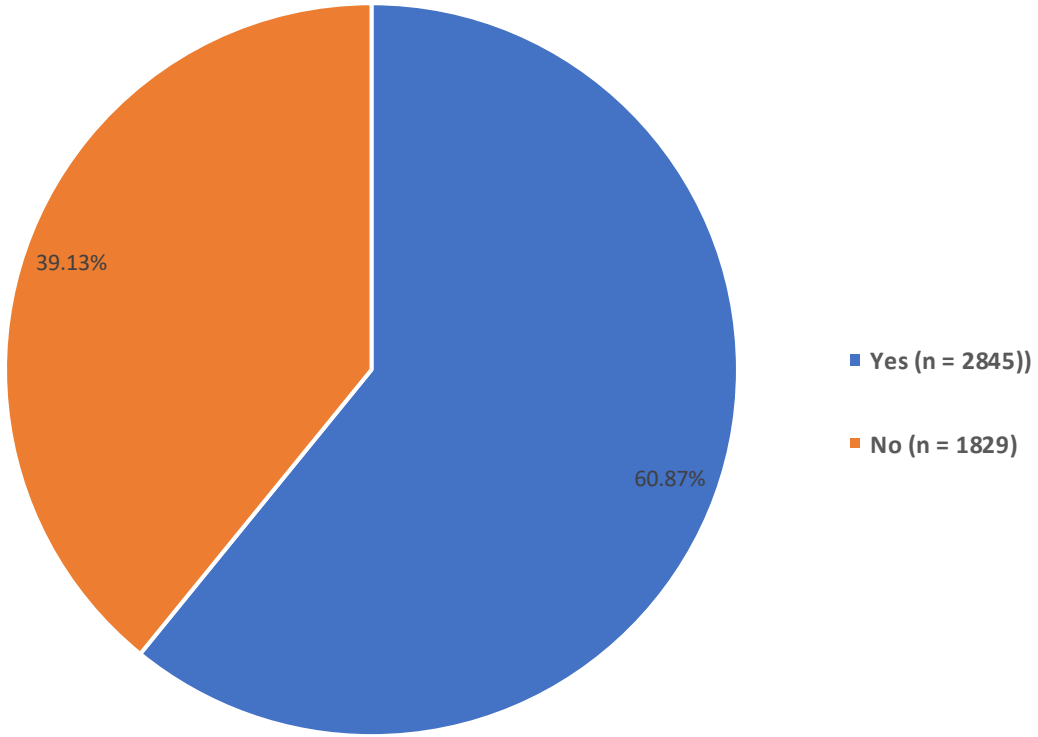
- Of those who work in LTCF (n=442), the majority work in nursing home or other skilled nursing facilities (69.5%).
- The other types of LTCF represented include assisted living facilities (21.2%), residential care facilities (7.7%), and independent living facilities (1.6%).
- There were 195 respondents who work in at least one facility that provides memory care services.


What types of infection control training would be most useful?
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
61.72%
53.47%
45.34%
32.97%
25.67%
17.74%
3.51%
Infection control education webinars
Emails containing infection control education
Printed pocket cards or pamphlets with infection control information
Printed posters or flyers with infection control information
Virtual office hours with infection control experts
Text message notifications with infection control links
Other

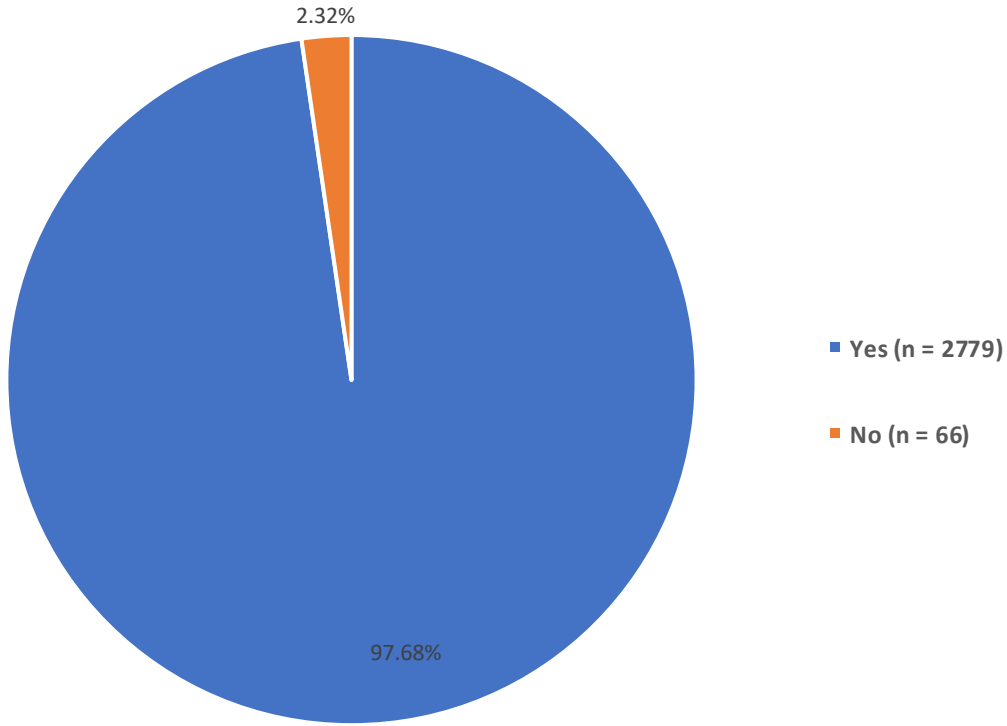

What devices do you *use* for training at work?
100.00%
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
94.94%
26.60%
18.88%
14.25%
2.57%
2.52%
0.36%
Desktop or laptop computer
Smartphone
Telephone
Tablet or iPad
I do not use devices for my training
Other
I do not have access to these devices

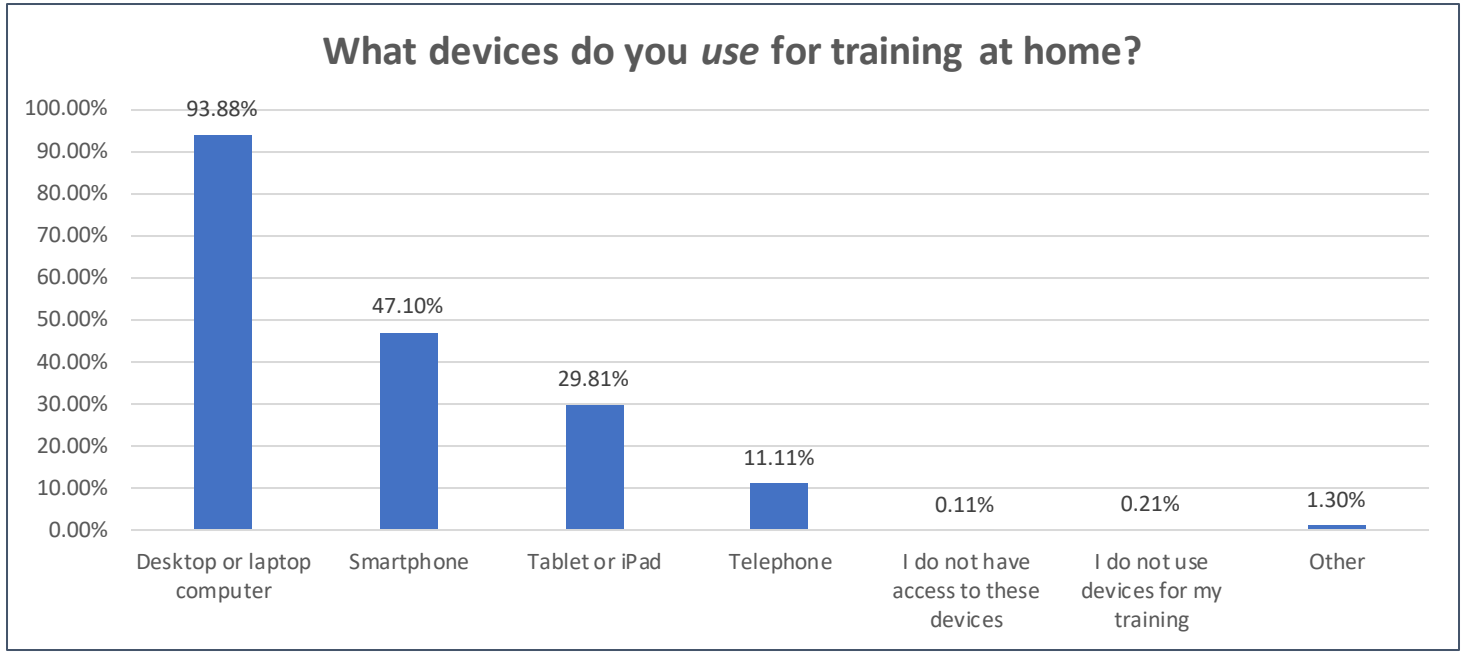

What devices do you *prefer* for training at work?
100.00%
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
89.71%
18.52%
15.62%
6.84%
13.14%
2.37%
Desktop or laptop computer
Smartphone
Tablet or iPad
Telephone
I prefer training that does not use devices
Other

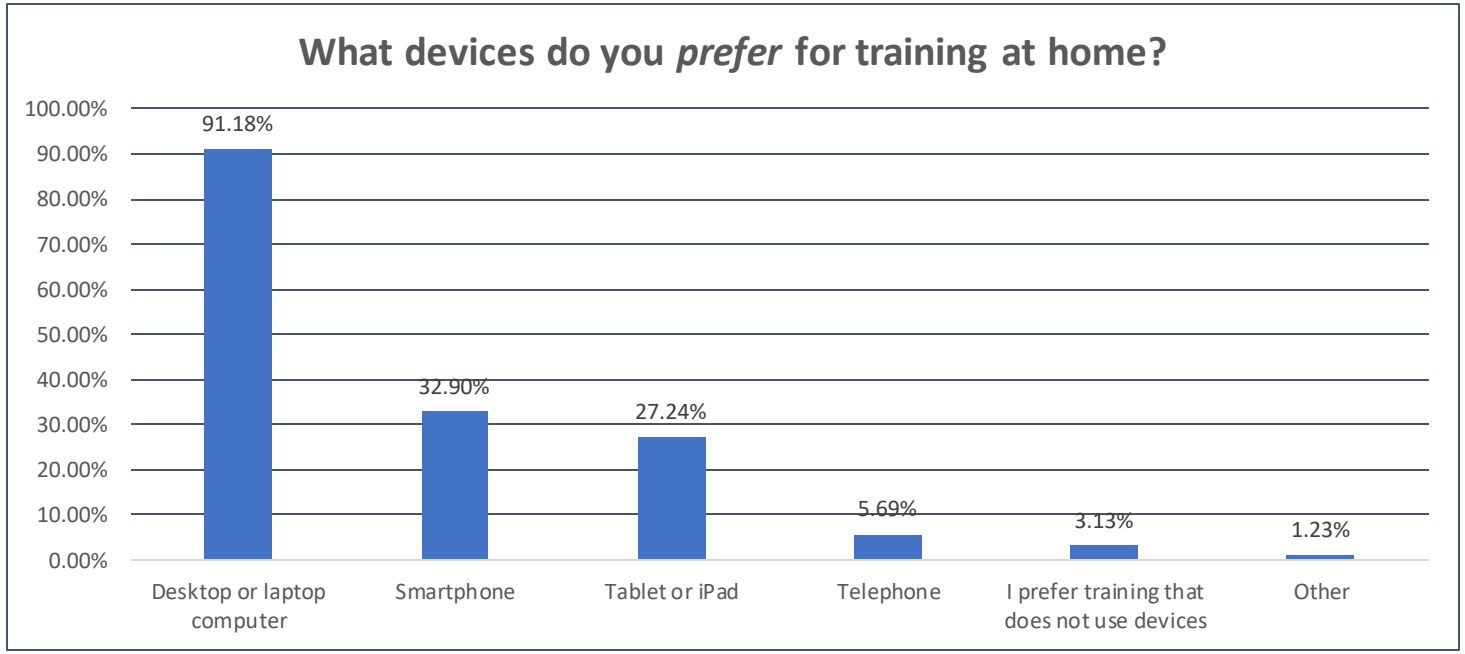
Do you receive any job training/education at home?



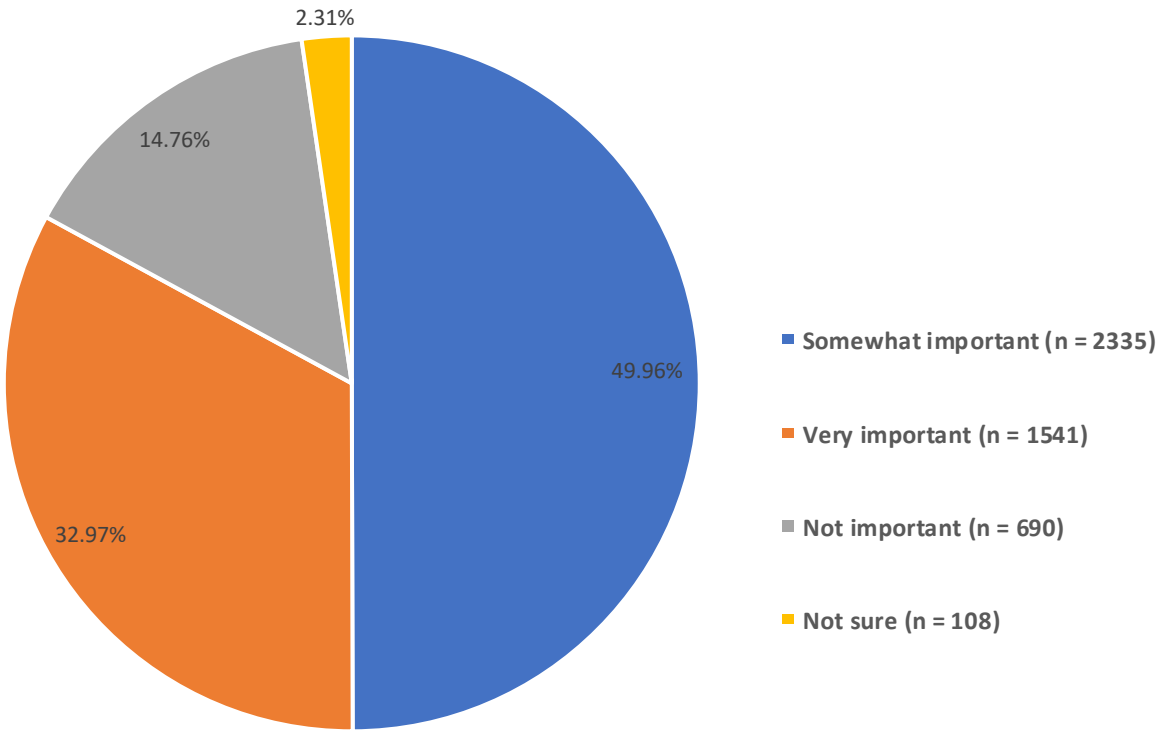
Do you have reliable access to internet or WiFi while you are at home?



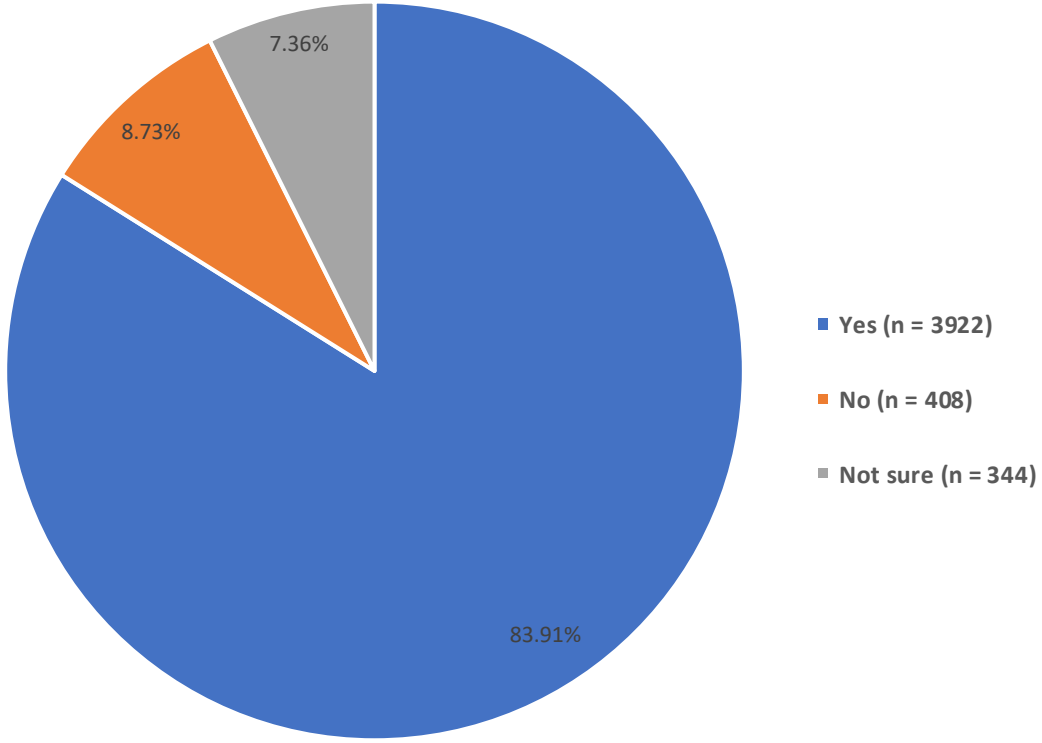

What devices do you *use* for training at home?
100.00%
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
93.88%
47.10%
29.81%
11.11%
0.11%
0.21%
1.30%
Desktop or laptop computer
Smartphone
Tablet or iPad
Telephone
I do not have access to these devices
I do not use devices for my training
Other

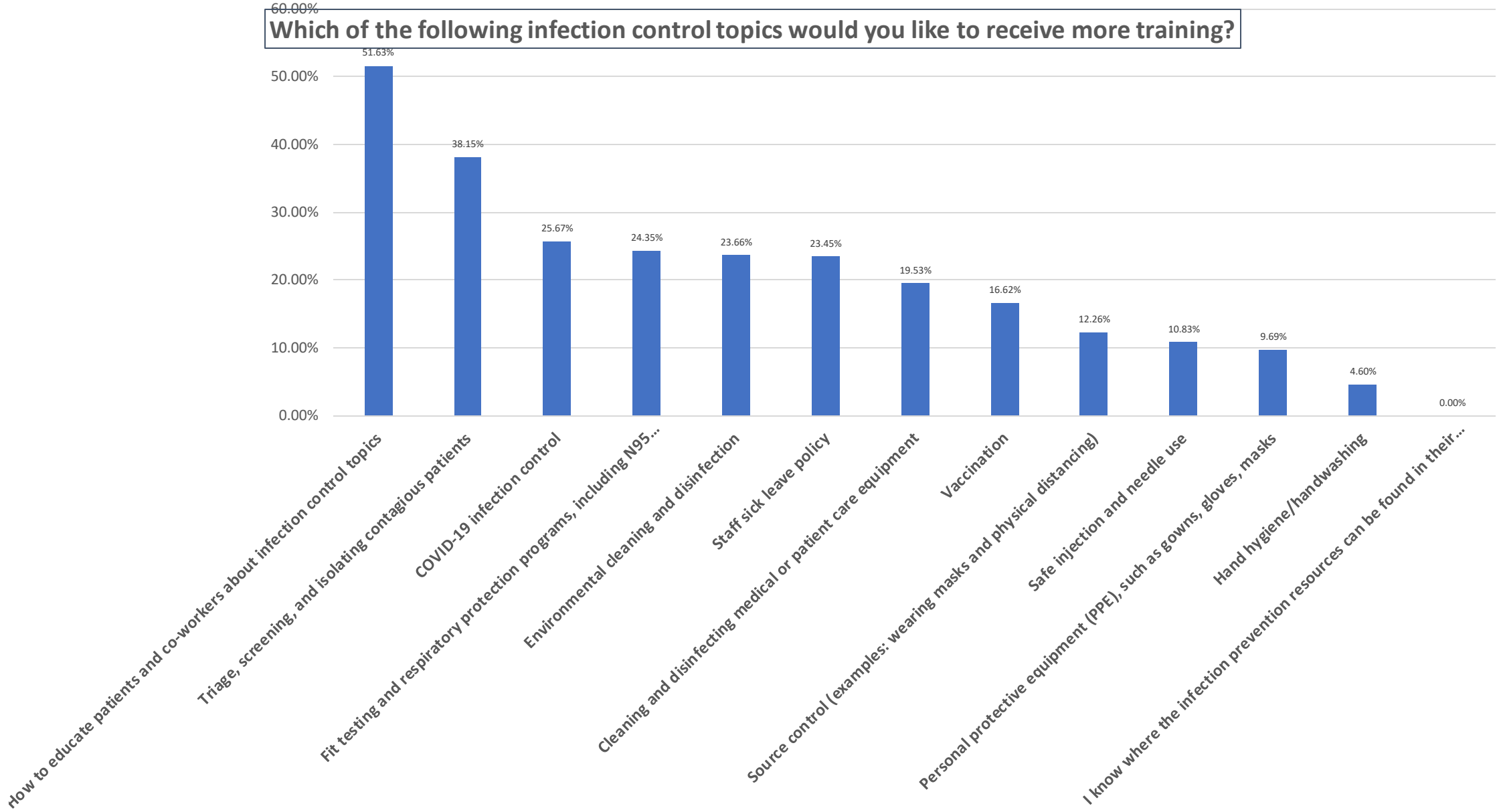

What devices do you *prefer* for training at home?
100.00%
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
91.18%
32.90%
27.24%
5.69%
3.13%
1.23%
Desktop or laptop computer
Smartphone
Tablet or iPad
Telephone
I prefer training that does not use devices
Other

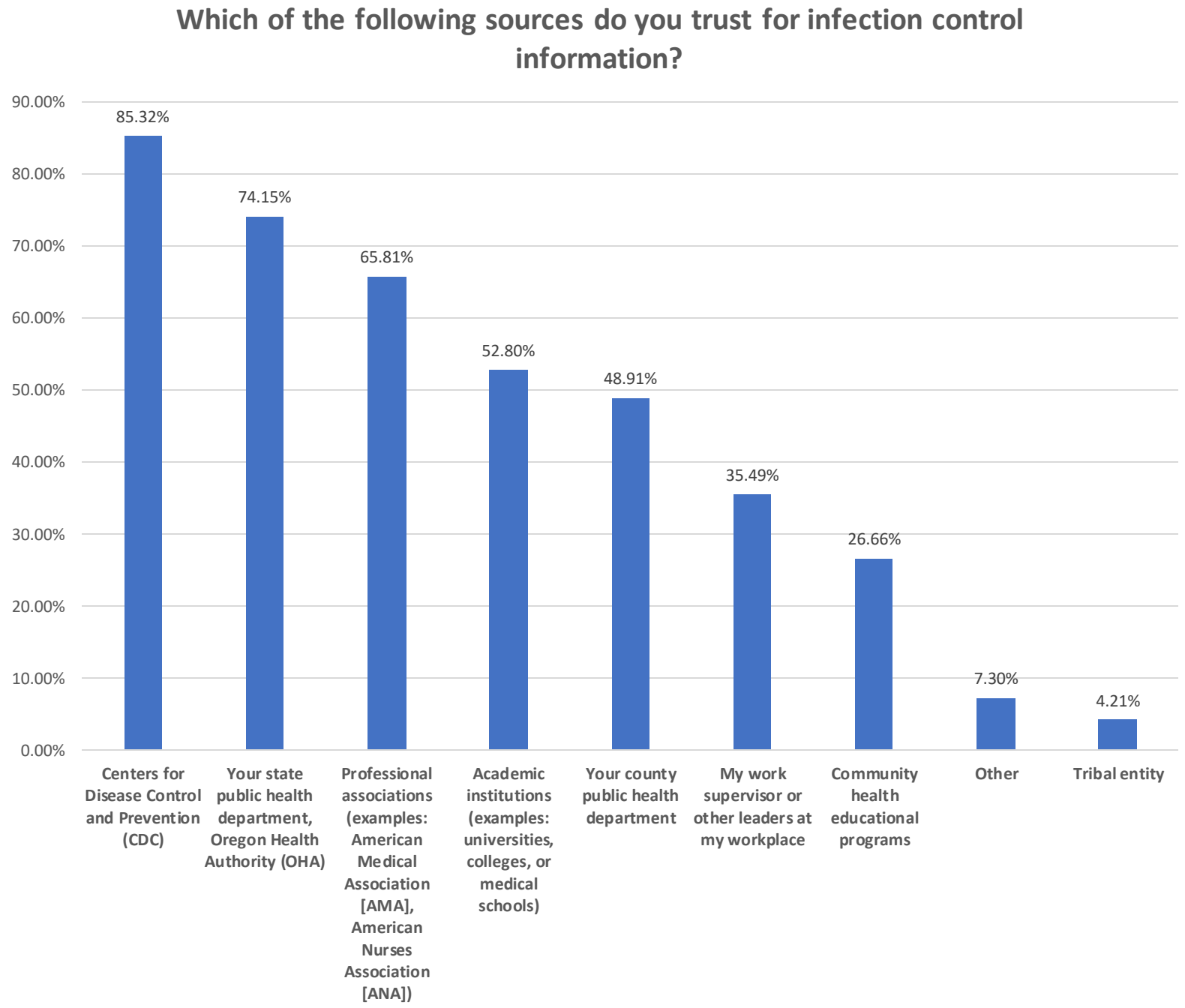
How important is it for you to be able to ask questions during a training (either verbally or via a chat function)?



Have you ever received infection control job training?




Which of the following infection control topics would you like to receive more training?
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
51.63%
38.15%
25.67%
24.35%
23.66%
23.45%
19.53%
16.62%
12.26%
10.83%
9.69%
4.60%
0.00%
How to educate patients and co-workers about infection control topics
Triage, screening, and isolating contagious patients
COVID-19 infection control
Fit testing and respiratory protection programs, including N95...
Environmental cleaning and disinfection
Staff sick leave policy
Cleaning and disinfecting medical or patient care equipment
Vaccination
Source control (examples: wearing masks and physical distancing)
Safe injection and needle use
Personal protective equipment (PPE), such as gowns, gloves, masks
Hand hygiene/handwashing
I know where the infection prevention resources can be found in their ...


Which of the following sources do you trust for infection control information?
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
85.32%
74.15%
65.81%
52.80%
48.91%
35.49%
26.66%
7.30%
4.21%
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Your state public health department, Oregon Health Authority (OHA)
Professional associations (examples: American Medical Association [AMA], American Nurses Association [ANA])
Academic institutions (examples: universities, colleges, or medical schools)
Your county public health department
My work supervisor or other leaders at my workplace
Community health educational programs
Other
Tribal entity

Infection control training: specific sessions

1. **What does it mean to “recognize a risk?”**
2. **How germs make people sick**
3. **Recognizing risk using reservoirs: A review**
4. **Body reservoirs**
   - Skin, GI system or “gut,” respiratory, and blood
5. **Healthcare environment reservoirs**
   - Water & wet surfaces, dry surfaces, dirt & dust, devices
6. **Putting it all together: Body and healthcare environment reservoirs**

Infection control training series

Recognizing Risk Using Reservoirs Training Toolkit

Session 1:
What Does it Mean to Recognize A Risk?

Session Plan: Recognizing Risk [PDF – 18 Pages]

Slide Set: Recognizing Risk [PPT – 22 Slides]

Participant Booklet: Recognizing Risk [PDF – 4 Pages]

Session 2:
How Germs Make People Sick

Session Plan: How Germs Make People Sick [PDF – 21 Pages]

Slide Set: How Germs Make People Sick [PPT – 25 Slides]

Participant Booklet: How Germs Make People Sick [PDF – 4 Pages]

Session 3:
Recognizing Risk Using Reservoirs: A Review

Session Plan: Recognizing Risk Review [PDF – 20 Pages]

Slide Set: Recognizing Risk Review [PPT – 22 Slides]

Participant Booklet: Recognizing Risk Review [PDF – 4 Pages]

Introduction to Reservoirs: Where Germs Live Training Toolkit

Session 1:
Body Reservoirs

Session Plan: Body Reservoirs [PDF – 24 Pages]

Slide Set: Body Reservoirs [PPT – 21 Slides]

Participant Booklet: Body Reservoirs [PDF – 8 Pages]

Session 2:
Healthcare Environment Reservoirs

Session Plan: Environment Reservoirs [PDF – 21 Pages]

Slide Set: Environment Reservoirs [PPT – 20 Slides]

Participant Booklet: Environment Reservoirs [PDF – 8 Pages]

Session 3:
Body and Healthcare Environment Reservoirs: Synthesis

Session Plan: Reservoirs Synthesis [PDF – 15 Pages]

Slide Set: Reservoirs Synthesis [PPT – 16 Slides]

Participant Booklet: Reservoirs Synthesis [PDF – 5 Pages]

Examples of Project Firstline material

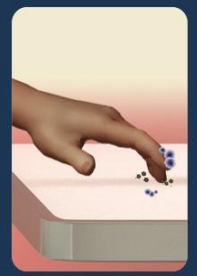
GERMS LIVE ON THE SKIN.

WHERE IS THE RISK?

Know where germs live to stop spread and protect patients

Germs spread through touch.

- Many germs grow on healthy skin.
- Germs on skin can get onto surfaces, other people, and things that will touch other people.
- Skin – especially hands – carries many germs and spreads them easily.
- When one's hands touch surfaces, germs can spread from those surfaces to that person and to others.

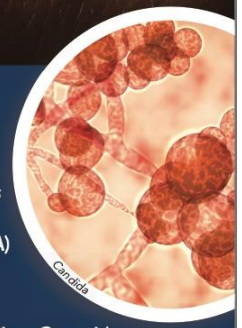


Germs spread by bypassing or breaking down the body's defenses.

- Healthcare tasks often involve breaking the skin.
- Breaking the skin – from putting in an IV, drawing blood, surgery, or trauma – creates a pathway for germs to spread into the body.

Germs That Live on Skin

- *Staphylococcus aureus* (staph, including *MRSA*)
- *Streptococcus* (strep)
- *Candida* (including *C. auris*)



Healthcare Tasks Involving Skin

- Anything that involves touch
- Needlesticks
- Surgery

Infection Control Actions to Reduce Risk

- Hand hygiene
- Appropriate glove use
- Injection safety
- Cleaning and disinfection
- Source control (covering cuts and wounds)

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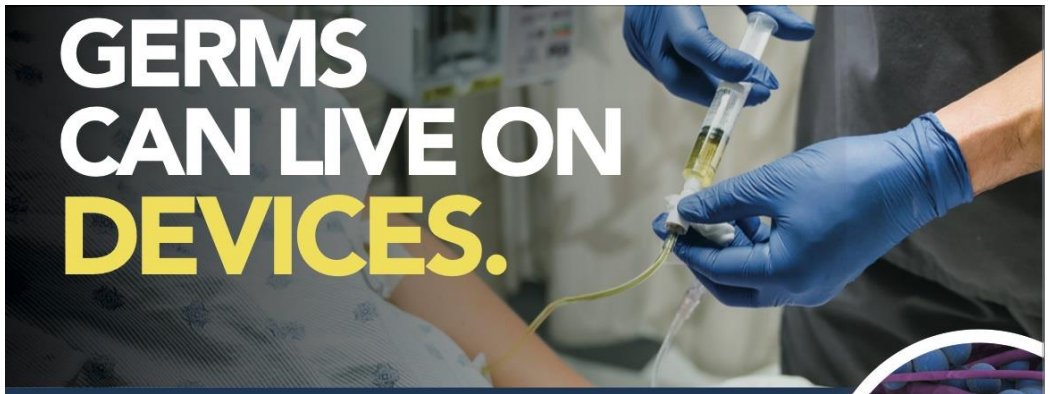
GERMS CAN LIVE ON DEVICES.



WHERE IS THE RISK?

Know where germs live to stop spread and protect patients

- When a device, like a pulse oximeter, is used on a patient's body to provide care, any germs on that device can be spread to places in or on the patient's body.
- When a device is put *into* a patient's body, like an IV needle, endoscope, or artificial hip, any germs on the device can spread into the body.
- If not handled correctly, shared medical devices can spread germs from one patient to another.

Germs That Can Live on Devices

- *Staphylococcus aureus* (staph, including *MRSA*)
- *Streptococcus* (strep)
- *Candida* (including *C. auris*)
- Gut bacteria like *E. coli*, *Klebsiella*, and *C. difficile* (*C. diff*)

Healthcare Tasks Involving Devices

- Surgery and procedures like colonoscopies
- Starting IVs
- Taking vital signs

Infection Control Actions to Reduce Risk

- Cleaning and disinfection
- Device sterilization
- Hand hygiene
- Use of personal protective equipment (gloves)

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There are thousands of germs on this poster... *and everywhere else.*

Recognize the risks.
Protect your patients.

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Centers for Disease Control and Prevention

PROJECT FIRSTLINE

Cited paper: Chirca, I. (2019). The hospital environment and its microbial burden: challenges and solutions. *Future Microbiology*, 14, 1007–1010.

Project Firstline - Moving Forward

- Complete full analysis of our needs assessment survey responses
- Work with external creative strategy and marketing team
  - Determine best methods for dissemination and objective monitoring of our “reach”
  - Determine if new Oregon-specific educational material is needed
- Engage allied health healthcare educators; offer student education using Project Firstline material

Summary

- The new Project Firstline initiative will increase IPC educational resources across our healthcare settings.
- This new educational program will help to improve healthcare workers' understanding of ICP in their line of work.
- Project Firstline will also allow OHA to strengthen partnerships with new HCP groups across the state.

Thank you!
Questions or suggestions?

Listening Session

Project Firstline

Listening Session: Goals

1. Learn from participants regarding Health Care Professional (HCP) training gaps by **type of rural facility setting** and **HCP role**.
2. Preview and provide feedback on new infection prevention training material (videos, print, interactive)
3. Strategize the most effective ways to promote uptake of Project Firstline educational material in rural healthcare facilities.

Questions for you

- What are some effective ways to share this infection prevention education with your frontline workers?
- Based on your experiences, what healthcare personnel groups do you think we should prioritize?
- Suggestions for state organizations or societies that we should approach for partnerships?