

Creative Isolation: A review of the implementation of transmission based precautions in the Emergency Department

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Aim

Prevention and control of healthcare associated infections (HAI) is one of the greatest challenges confronting healthcare providers and clinicians worldwide. Emergency Departments (ED) have a significant role in identification, triage and application of proven Infection Prevention and Control (IPC) measures to curb the risk of transmission of communicable disease within the healthcare setting. Best practice indicates this is achieved through the swift identification and implementation of transmission based precautions (TBP) for patients who are known or suspected of having an epidemiologically important pathogen. This paper aims to review the current literature around the implementation of TBP in the ED context. This illuminates mechanisms that hamper or support the adoption of TBP. Areas for further research shall be identified.

Method and findings

A systematic search for literature published in English available via MEDLINE and Ovid, for the years 2004 through to April 2014 was conducted. Search terms included infection control and emergency department(s), and triage.

Preliminary results indicate that the literature is heavily influenced by the Severe Acute Respiratory Syndrome (SARS) and H1N1 influenza outbreaks of 2003 and 2009, respectively. This has resulted in an increase in awareness of the importance of rapid identification of syndromes that require the implementation of TBP. It is also evident that there are a number of factors impinging upon the application of these, including the knowledge and attitude of ED staff, infrastructure, bed shortages and throughput performance indicators. There is a burgeoning body of knowledge around the importance of instituting IPC in the ED context to prevent HAI which requires further exploration.

Keywords: infection control, emergency department, triage, throughput, throughput targets, performance indicators