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Applying multiple strategies to cluster infection of COVID-19 in acute psychiatric wards

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Background

Most of the psychiatric wards live in groups, share measures, have close contact in daily life, and often receive group therapy; the mental state is unstable, there are differences in understanding and cognitive ability, it is difficult to realize the physical symptoms, and the infection is not detected in time occur, thereby affecting the certainty of compliance with preventive measures. In June 2022, a COVID-19 cluster infection occurred in the acute ward of the psychiatric department of our hospital. Colleagues in the psychiatric department did not have sufficient knowledge of the epidemic prevention information and the sensory measures that should be involved in the event. Case investigation and use of multiple strategies to deal with the epidemic, so as to share.

Methods

- Start the contingency mechanism as early as possible.
- 2. Informatization to list the epidemic investigation list.
- 3. Set up a small helper group.
- 4. Simplify the management of moving lines and environment for district care.
- 5. Environmental cleaning and infection control operations.
- 6. Personal protective equipment education and training.
- 7. Stop group activities, implement bedside meals and in-patient medication.
- 8. Start the epidemic prevention materials.
- Establish equipment inventory management system.

Result

- From June 26 to July 4, 2022, there were a total of 34 cases (21 patients, 2 companions, and 11 staff members), with a confirmed diagnosis rate of 48.5%.
- 2. 2022/6/26-7/14 survey and application results, in-hospital diagnosis instant notification accounted for 95.1%, in order to achieve immediate control of infection control and simplify manual epidemic investigation and other operations.

Conclusions

Psychiatric staff are specialized in the assessment and care of patients' mental symptoms. Through cross-disciplinary teamwork, they integrate the medical thinking of infection specialists, so that patients can receive high-quality holistic care.





HPH This experience establishes safe infection control actions and alleviates the anxiety of psychiatric medical practitioners about responding to the epidemic; clearly communicates relevant infection control information and resources to patients and their caregivers, and can take action to avoid group emergencies spread or recur.