Nursing Home Infection Control Audit and Outbreak Course: Risk, Surveillance and Stewardship

13 – 17 September 2027
Geneva

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Programme Summary

Nursing home infection control, covering risk assessment, surveillance, outbreak response and antimicrobial stewardship, is the subject of this one-week training course for directors, nursing leaders and quality managers, ending in an infection control programme pack for one facility. Residents are frail and live close together, so one missed precaution can grow into an outbreak. The programme moves from risk and precautions to surveillance, outbreak response and stewardship, using prepared facility cases. Mars Training Centre UK delivers this programme on nursing home infection control to mixed-organisation cohorts.

The Business Case

A care facility that cannot show how it finds, tracks and contains infection exposes residents and staff to avoidable harm. Leaders who rank risks, check that precautions are followed and agree outbreak steps before they are needed can act sooner.

- Resident Infection Burden: Falls when risks are ranked and precautions are audited against agreed standards.
- Outbreak Disruption: Shortens when detection triggers, roles and isolation options are settled in advance.
- Antimicrobial Use: Becomes easier to review when prescribing data is tracked and fed back to prescribers.

Principles and Evidence Base

- WHO guidelines on core components of infection prevention and control programmes: Applied in Sessions 1 and 5 to review a facility programme for trained staff, guidelines, education, surveillance, monitoring and feedback.
- SHEA guidance on infection prevention and control in the long-term care facility: Applied in Sessions 2 and 4 to frame standard precautions, transmission-based precautions, outbreak management and stewardship.
- ECDC reporting on healthcare-associated infections in long-term care facilities: Applied in Session 3 to shape surveillance definitions and the reading of infection trends.

Intended Participants

- Facility leaders who are accountable for resident safety and for the infection control programme.
- Nursing leaders who supervise daily practice, staffing and the response to suspected infection.
- Quality managers who run audits, collect surveillance data and report findings.
- Clinical governance leads who decide what is reviewed and how often.

Typical settings include nursing homes, residential care homes and rehabilitation units.

Learning Outcomes

1. Participants will be able to evaluate infection risks across residents, activities and areas of a facility.
2. Participants will be able to construct an audit plan that tests precautions and staff compliance.
3. Participants will be able to diagnose trends in surveillance data and set alert thresholds.
4. Participants will be able to prioritise outbreak control actions and assign roles in a response team.
5. Participants will be able to compare stewardship indicators and plan prescribing review.
6. Participants will be able to justify a facility infection control programme pack to management.

Programme Structure

Day 1: Nursing Home Infection Control and Risk

How is infection risk in a care facility identified and ranked?

- Resident and Setting Risk Profile
- Infection Risk Matrix
- Core Components Gap Review
- Programme Roles Chart
- Facility Risk Register

Day 2: Precautions and Compliance Monitoring

How can leaders tell whether precautions are followed in daily care?

- Standard Precautions Audit Tool
- Transmission-Based Precautions Decision Guide
- Hand Hygiene Observation Method
- Environmental Cleaning Check
- Staff Compliance Feedback Loop

Day 3: Surveillance in Long-Term Care

What do infection data say about the facility, and when should they prompt action?

- Surveillance Case Definitions
- Infection Rate Calculation
- Trend Chart and Alert Thresholds
- Healthcare-Associated Infection Reporting Format
- Surveillance Review Meeting Agenda

Day 4: Outbreak Response and Stewardship

How does a facility contain an outbreak and keep antimicrobial use under review?

- Outbreak Detection Triggers
- Outbreak Control Team Roles
- Cohorting and Isolation Options
- Antimicrobial Prescribing Review
- Stewardship Indicator Set

Day 5: Programme Pack for One Facility

Do the findings join into a programme that works when tested?

- Applying the Session 1 Risk Register
- Testing the Session 2 Audit Tool
- Checking the Session 3 Alert Thresholds
- Rehearsing the Session 4 Outbreak Roles
- Completing the Programme Pack

Methodology

The programme is a field-style audit built on prepared records of two facilities, one nursing home and one rehabilitation unit. Participants review audit sheets, read surveillance tables and trace a simulated outbreak, then defend their programme pack to peers acting as a management team.

- Suggested activity: Auditing a prepared hand hygiene record and deciding which finding to report first.
- Suggested activity: Reading a month of infection data and setting the alert thresholds.
- Suggested activity: Running a staged outbreak briefing and assigning response roles.

Capstone Output

Each participant completes an infection control programme pack for one facility. It holds a risk register, an audit schedule, a surveillance and threshold table, an outbreak response outline and a stewardship review plan. At work it goes to management for approval and becomes the reference for updating the programme.

Frequently Asked Questions

Is nursing home infection control training suitable for leaders who have not run a programme before?

Yes. Nursing home infection control is taught through prepared facility cases and templates. You need responsibility for care, nursing or quality in a facility, but no earlier experience of leading an infection control programme.

Which guidance does nursing home infection control rest on in this programme?

Nursing home infection control here rests on the WHO core components of infection prevention and control programmes, SHEA guidance for the long-term care facility and ECDC reporting on healthcare-associated infections, each applied to an audit or outbreak decision.

How is the programme pack from nursing home infection control training used at work?

You take the programme pack to management for approval, use its audit schedule to assign checks and owners, and keep its outbreak outline as the routine for rehearsing the response.

How does nursing home infection control differ from a programme on clinical nursing skills?

Nursing home infection control concentrates on leading audits, surveillance and outbreak response across a facility, while a clinical nursing skills programme concentrates on bedside techniques for individual residents.