WHO multimodal improvement strategy

Multimodal implementation strategies are a core component of effective infection prevention and control (IPC) programmes according to the WHO Guidelines on Core Components of IPC programmes at the National and Acute Health Care Facility Level. The guidelines’ recommendation 5 states that IPC activities using multimodal strategies should be implemented to improve practices and reduce HAI and AMR. In practice, this means the use of multiple approaches that in combination will contribute to influencing the behaviour of the target audience (usually health care workers) towards the necessary improvements that will impact on patient outcome and contribute to organizational culture change. Implementation of IPC multimodal strategies needs to be linked with the aims and initiatives of quality improvement programmes and accreditation bodies both at the national and facility levels.

Components of IPC programmes at the National and Acute Health Care Facility Level.

WHO multimodal improvement strategy

Five key elements to focus on when improving IPC

WHO identifies five elements for IPC multimodal strategies in a health care context:

1. The system change needed to enable IPC practices, including infrastructure, equipment, supplies and other resources;
2. Training and education to improve health worker knowledge;
3. Monitoring and feedback to assess the problem, drive appropriate change and document practice improvement;
4. Reminders and communications to promote the desired actions, at the right time, including campaigns;
5. A culture of safety to facilitate an organizational climate that values the intervention, with a focus on involvement of senior managers, champions or role models.

In other words, the WHO multimodal improvement strategy addresses these five areas: