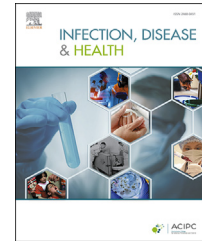




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Abstracts from the 9th International Australasian College for Infection Prevention and Control (ACIPC) online conference (7-10 November 2021)

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AIR TRAVEL AND COVID-19: PASSENGERS' ATTITUDES AND ENGAGEMENT IN INFECTION CONTROL MEASURES

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Introduction: COVID-19 and its associated travel bans have reduced international passenger traffic by over 80% below 2019 levels. If airlines are to resume flying at commercially sustainable levels, they must work to restore passengers' confidence and sense of security. This study examined commercial airline passengers' health concerns and attitudes towards infection prevention and control (IPC) measures for travel health and safety in the current COVID-19 global pandemic.

Methods: A cross-sectional study was conducted inviting adult members of 39 frequent flyer groups across three social media platforms to participate in an online survey.

Results: A total of 205 respondents completed the survey. The majority (75.6%) reported feeling 'somewhat' to 'extremely concerned' about contracting an infectious disease while flying, particularly respiratory-related. Few (9.8%) reported perceiving their health as an 'essential priority' for their preferred airline. Most respondents agreed airlines should provide complimentary hand sanitisers (86.8%), sanitary wipes (82.9%) and masks (64.4%) for passengers to use while flying as well as more information about preventing the spread of infections (90.7%), which would make the majority feel safer to fly.

Conclusion: COVID-19 has extensively challenged the air travel industry. Passengers have signalled that they expect more from airlines, and that they would actively engage in additional infection prevention and disease control measures while flying. Airlines must ensure passengers about the steps taken to minimise travel-associated risks, and their commitment towards passengers' health and wellbeing, in order to rebuild consumers' confidence in the recovery of the air travel industry.

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EPIDEMIOLOGY OF HEALTHCARE-ASSOCIATED INFECTIONS IN AUSTRALIA: NEW DATA AND CHALLENGES

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Introduction: Healthcare-associated infections (HAIs) are a major patient safety problem and lead to increased morbidity, mortality and excess healthcare expenditure. While surveillance is central to all efforts to control and prevent HAIs, there is no single unified national HAI surveillance system in Australia.

Methods: In an attempt to collate the available data on the epidemiology of HAIs in Australia, three types of HAIs were included: (i) proportions of HAI hospital-acquired complication (HAI HAC) in Australian public hospitals (1st July 2017-30th June 2019); (ii) publicly available Australian jurisdictional surveillance data (2017-2019); and (iii) peer-reviewed literature data (1st January 2010-31st August 2019).

Results: Proportions of HAI HAC data for each HAI remained stable over 2017-2019, with 75-80% of each HAI occurring in NSW, VIC and QLD. *Staphylococcus aureus* bacteraemia was the only HAI data reported nationally and by all jurisdictions. A benchmark of 2.0 cases/10,000 patient days was established, and in 2018-19 all jurisdictions reported rates below the benchmark. A 2017 systematic review of the burden of HAI in Australian hospitals suggested there were 83,096 HAIs/year in Australia. Two national point prevalence studies of HAI in Australia have been conducted, with latest 2018 study indicating an overall HAI prevalence of patients with a HAI of 9.9%.