

# WIFI: Hilton Meeting

Password: NACCHO25

# Welcome!

## Beyond the Basics: Leveling Up IPC Training with Connection and Creativity

July 14, 2025: 8:00 – 4:00 PM PT

Anaheim, CA  
Hilton Anaheim  
Capistrano A & B



# About NACCHO

NACCHO serves **over 3,300 local health departments** across the United States and is the leader in providing cutting-edge, skill-building, professional resources and programs. Our mission is **to improve the health of communities by strengthening and advocating for local health departments.**

-  Advocacy
-  Partnerships
-  Funding
-  Training and education
-  Networking
-  Resources, tools, and technical assistance

# About Project Firstline



NACCHO's Project Firstline work aims to build the capacity of local health departments to deliver training and education to their community partners through the development and promotion of tools and resources.

# NACCHO University Courses



- Principles of Adult Learning
- IPC Fundamentals of Infection Control

# IPC Living Learning Network (LLN)

Provides LHD staff opportunities to build subject matter expertise related to IPC.

Group activities include:

- Peer discussions,
- Expert presentations, and
- Review of CDC Project Firstline training materials.



All interested in IPC at the local level are welcome to join!



# IPC Resource Library

**Infection Prevention and Control Resource Library**

Infection prevention and control (IPC) describes a set of practices which aim to prevent the spread of infections, including healthcare-associated infections (HAIs) and emerging infectious diseases. NACCHO, with support from the Centers for Disease Control and Prevention's (CDC's) [Project Firstline](#), has compiled resources to enhance the capacity of local health department staff to address unique IPC needs in a range of high-risk settings. All tools included are free, however, a few may require you to be logged in to your MyNACCHO account to access. All resources were developed after 2016 with the majority of resources having been created between 2020 and 2022.

Suggestions for additional resources, as well as feedback on this resource library can be sent to [infectiousdiseases@naccho.org](mailto:infectiousdiseases@naccho.org).

Disclaimer: The positions and views expressed in these materials do not necessarily represent the official positions of CDC.

Page last updated in July 27, 2022.

**BEST PRACTICES AND GUIDANCE**    PRACTICAL TOOLS    TRAINING    COVID-19    ANTIMICROBIAL RESISTANCE

This section of NACCHO's IPC Library contains presentations, handbooks, and tools for understanding and communicating IPC guidance and best practices. Tools can be sorted by alphabetical order in each column. Click the resource title to directly view the resource. Please note this section includes tools for general healthcare settings (not facility specific) and for long term care facilities.

TITLE	RESOURCE TYPE	AUDIENCE	DESCRIPTION
<a href="#">Standard Precautions and Transmission-Based Precautions</a>	Quick guide	General healthcare facility	This quick facility reference guide developed by Ingham County Health Department explains the "standard" and "transmission-based" precautions for healthcare personnel in residential facilities and links to CDC resources for both categories.
<a href="#">OSHA Small Entity Compliance Guide for the Respiratory Protection Standard</a>	Guidance	Workplace	This OSHA compliance guide for the respiratory protection standard submitted by Fort Bend County Health & Human Services is intended to assist program administrators, employers who need to develop a program, employees who may be required to wear respirators, and licensed medical professionals who must evaluate an employee's ability to wear respirators, among

Compilation of resources to enhance the capacity of LHD staff to address unique IPC needs in a range of high-risk settings.



# Women Entrepreneurs in Public Health

Co-creating a more just and equitable world.



# Agenda

Time	Topic
8:00-8:30 am	Welcome
8:30-9:00 am	Building Trust and Connection
9:00-9:30 am	Why IPC Matters
9:30-10:30 am	Activate IPC Knowledge
10:30-10:45 am	Break
10:45-12:00 pm	Train The Trainer: How We Design Trainings
12:00-1:30 pm	Lunch
1:30-2:30 pm	IPC Training Design Lab – Part 1
2:30-2:40 pm	Break
2:40-3:30 pm	IPC Training Design Lab – Part 2
3:30-4:00 pm	Workshop Wrap-Up

## Our Objectives

- ✓ Apply adult learning principles & interpersonal skills to IPC trainings
- ✓ Identify & explain key IPC concepts
- ✓ Practice design & facilitation
- ✓ Have fun!

Reflections & Your Learning Goals

Curiosity Corner

Group Agreements

# Building Trust & Connection

To help participants reflect on how trust and interpersonal connection influence IPC effectiveness and prepare them to foster stronger relationships in their work.





**What words or feelings come to mind when you hear the word "trust"?**

# What Is TRUST?

Trust is the overall feeling of safety and confidence in another person's actions and intentions.

- **T**ransparency
- **R**eliability
- **U**nderstanding
- **S**teadiness
- **T**ime

*Trust isn't given—it's built through  
**consistent action over time.***

# Why Trust and Connection Matter in IPC

- Trust drives behavior change.
- Connection opens the door to honest communication.
- Trust and connection turn IPC from a set of rules into a shared commitment.



# Trust Builds Collaboration, Not Resistance

Without trust:

- Facilities may perceive guidance as criticism
- Staff may feel defensive or micromanaged
- Change becomes an uphill battle

# Interpersonal Skills = Trust Builders

Soft skills that help us interact and communicate with others effectively



Active Listening



Trust Building



Conflict Resolution



Problem Solving



Self Awareness



Clarity & Feedback

- **Interpersonal skills** are how we *show up* in relationships.
- **Trust** is the *emotional result* of showing up with integrity, empathy, and respect.
- **Connection** is the *human bond* that forms when trust is nurtured over time.

# How to Exercise Interpersonal Connection

For Example:

- When someone **listens** without interrupting, it signals respect.
- When they show **empathy**, it signals care and understanding.
- When they **communicate** honestly and follow through on commitments, it builds reliability and credibility.

# Bridge to Connection Activity

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## Part 1: Individual Reflection (7 min)

- Use the “Bridge Worksheet”
- Prompts: Strengths, Barriers, Growth, Strategies



## Part 2: Table Discussion (15 min)

- Discuss: Why is relationship-building important in IPC? What qualities support trust? What are common challenges/barriers? What strategies help rebuild trust?

## Part 3: Group Share-Out (10–15 min)

- Each group shares 1–2 highlights

# Why IPC Matters

The Five Core IPC Concepts



# What We're Up Against

©CBS NEWS · 15m

## Measles cases in the U.S. hit 1,288, the highest recorded in more than 30 years

The number of measles cases in the United States has surpassed 2019's wave of infections, according to Centers for Disease Control and Prevention data.

## Bacteria remain on hospital surfaces after routine disinfection

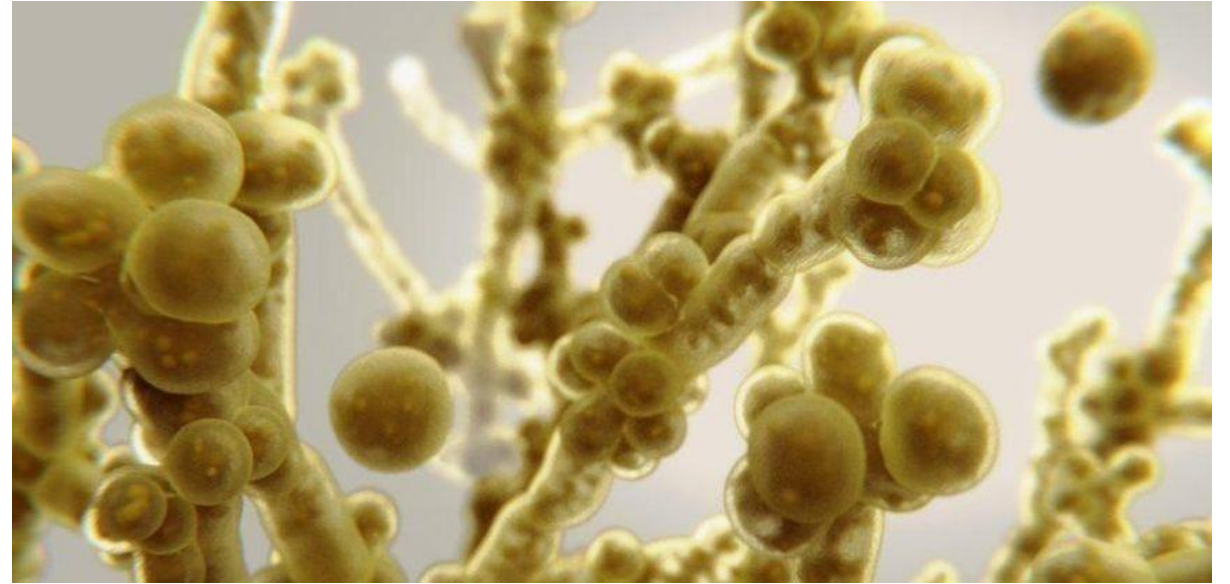
pathogenic bacteria is still detectable on high-touch surfaces in hospitals, new research published Jan. 10 in the American Journal of Infection Control found. Led by researchers from the Central ...

## Hospital germs survive common household washing machines, raising concerns about infections and antibiotic resistance

Infections that are hospital-acquired are a major public health concern, as they frequently involve antibiotic-resistant bacteria ... improve patient safety and control the spread of antibiotic ...

# Why We Take Action

- 1 in 31 hospital patients has a healthcare-associated infection (HAI).
- 2.8 million antibiotic-resistant infections occur annually.
- \$28-45 billion cost to the healthcare system.



Sources:

CDC, 2019; CDC, 2020; Magill et al., NEJM, 2018; Scott, CDC, 2009

# What is Your Why?

- How do you define your role in IPC?
- What makes training healthcare staff on IPC different than other topics?
- What do you wish healthcare workers understood?



[Image Retrieved from The Culture of Infection Prevention and Control at a Healthcare Facility](#)

# What I Didn't Know Then: My Story of Risk Recognition in Healthcare

1. Shift from Public Health to IPC
2. Knowledge of data, surveillance and communication
3. Learned to lead without clinical expertise and authority



# Shifting Landscape-Current Challenges

- Emerging and Re-emerging Diseases
- Antimicrobial Resistance (AMR)
- 79% of Hospitals Understaffed
- Resource & Infrastructure Gaps
- Regulatory & Reporting Burden
- Expanded Care Settings & Vulnerable Populations

# **Discussion Prompt:**

Which challenges do you see as most impacting your facilities?

# IPC is about Recognizing Risks in Real Time

- Germs-What they are?  
Where they live  
(**Reservoirs**)
- How they move (**Pathways**)
- When there is opportunity to spread
- Actions to prevent spread (**Standard Precautions**)



# How Germs Spread

## Germs need

- A reservoir (body & environment), person to infect, pathway, a way around natural defenses , to survive
- **Pathways** (touch, breathing in, splashes)



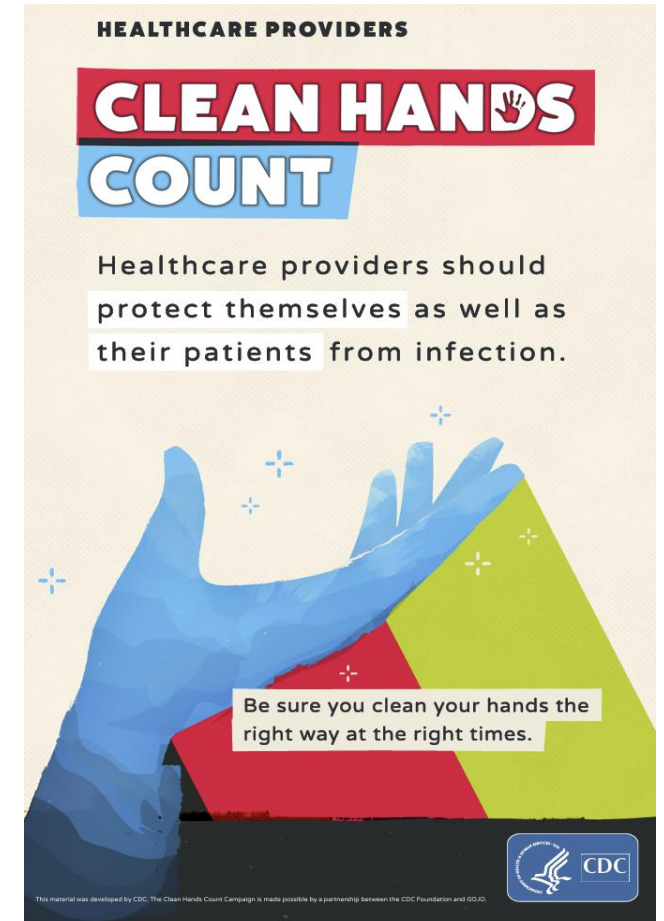
# Example: Viral Scrubs Episode About Germs



# Standard Precautions-What Protects Us All

Assume every surface and person could transmit germs.

- Hand Hygiene
- PPE that fits & matches risk
- Cleaning & Disinfection
- Safe injection & sharp practices
- Respiratory etiquette



# Discussion Prompt:

What's something you see overlooked the most—  
and how do you address it?

How do we talk about the importance of infection prevention & control?

What message gets through to people?

# Communicating Risks

- We must make IPC relatable and easy to understand.
- Communication is a tool of prevention — tell the why, not just the what



Retrieved June 23, 2025 from [who.int](https://www.who.int) [Five moments for hand hygiene](#)

# Activate IPC Knowledge



# Scenarios: What Would You Do?

## Purpose of Activity

Practice real-world IPC coaching and decision-making in response to facility calls and concerns.

Teams will explore one realistic scenario, analyze contributing factors, and design support strategies.

<b>Time Breakdown</b>	<b>Details</b>
3-5 Minutes	Introduction
20 Minutes	Answer 6 questions Prepare your response strategy
10 Minutes	Share scenario, key insights and coaching plan

# Scenarios: Your Role as the LHD Staff

## Instructions

- Read through your folder
- Sort through the information: What's helpful? What's noise?
- Answer the 6 questions
- Prepare your response strategy
- During large group debrief share key insights and coaching plan

## Coaching focus

- Each scenario emphasizes:
- Clarifying what the facility really needs
- Distinguishing between panic and priority
- Offering guidance in plain language
- Building staff capacity and trust
- Avoiding “checklist compliance” coaching

# Scenarios: Debrief

- What scenario did you have?
- IPC concept was easiest to apply? Hardest?
- What would coaching look like if the facility was under-resourced?
- Where did you see an opportunity to build trust vs. just correct behavior?
- How can we help facilities feel more confident and less reactive?

# Break



# Train-the-Trainer: How We Design Trainings



# Let's Be Honest

Where have you seen a training miss the mark, either one you led or attended?



# Key Challenges You Shared

Need for **interactive, hands-on training** rather than passive presentations.

Designing **inclusive content across diverse learner groups** and cultural backgrounds.

Linking training to **real-world IPC challenges** and outbreaks

**Tailoring content** to various roles

**Balancing virtual vs. in-person training methods** and their effectiveness.

**Creating engaging content** that is accessible to both clinical and non-clinical staff

**Train-the-trainer models**, especially customized by job roles and languages

# Steps to Develop Training

- ✓ Identify audience & needs
- ✓ Determine learning outcomes
- ✓ Design training & materials (adult learning +)
- ✓ Deliver training (facilitation)
- ✓ Evaluate & improve training

## TRAINING DEVELOPMENT PLAN

Common steps for building an effective training program include the below:

1. Identify the audience
2. Determine learning outcomes
3. Develop training materials
4. Deliver training
5. Evaluate training
6. Revise the training

Creating a Training Development Plan is foundational to building an effective training program. It is a dynamic document, developed with learners, trainers, and stakeholders in mind. It ensures that all aspects of the training are well-thought-out, organized, and aligned with the overall goals of the organization or professional development needs.

A Training Development Plan identifies learning outcomes for the program, the strategy for training, and the schedule for training initiatives. An effective training plan should also include, or be linked to, basic communication and registration plans. It is a living document and should be monitored and updated as the planning phase develops.

### PROGRAM/SESSION OVERVIEW

Program/Session Title		
Facilitator(s)		
Primary Audience <i>(Ex. Clinical/Non-Clinical staff at XYZ Center)</i>		
Date and Duration		
Modality	<input type="checkbox"/> Virtual	Platform:
	<input type="checkbox"/> In Person	Location:
	<input type="checkbox"/> Blended	Platform and Location:

# What Happens When We Skip a Step?

## If You Skip This Step...

- ✓ Identify audience & needs
- ✓ Determine learning outcomes
- ✓ Design training & materials (adult learning principles)
- ✓ Deliver training (facilitation)
- ✓ Evaluate & improve training

## What Happens...

- Training feels irrelevant
- Content lacks focus and doesn't build on the knowledge and skills needed
- Training doesn't include adult learning principles or isn't designed for how participants learn best
- The delivery falls flat and participants disengage
- Training doesn't improve and issues repeat

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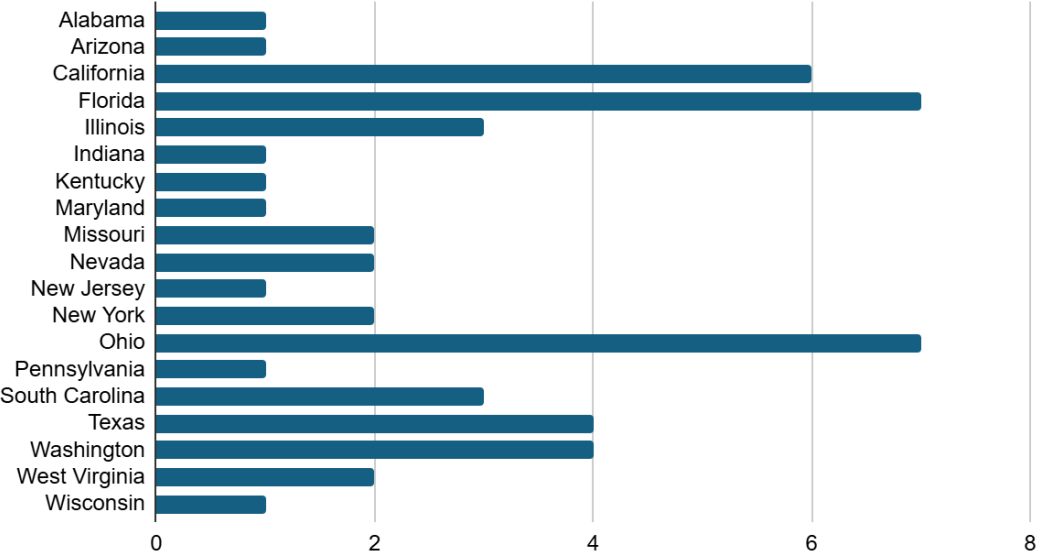
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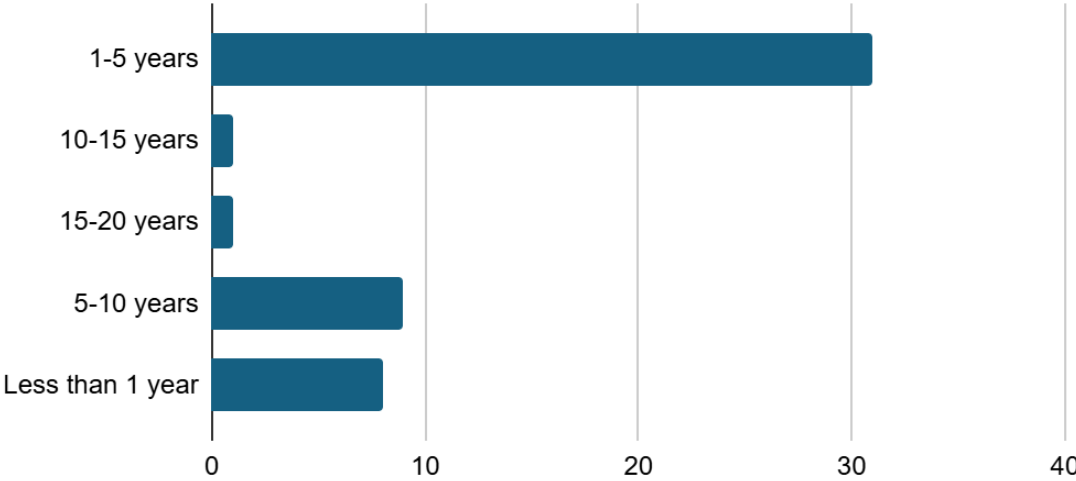
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# Our Audience (You!)

States Represented by Participants



Years of IPC Experience Among Participants



# Our Audience (You!)

100% involved in training

## What challenges to address here?

- ✓ Make training fun & interactive
- ✓ Adult learning principles
- ✓ How to be hands-on/not theoretical
- ✓ Improve my facilitation

# What We'll Explore Today

**How Adults  
Learn**

**Facilitation  
Techniques &  
Training Formats**

**Peer Teach-  
Backs**

# Bingo!

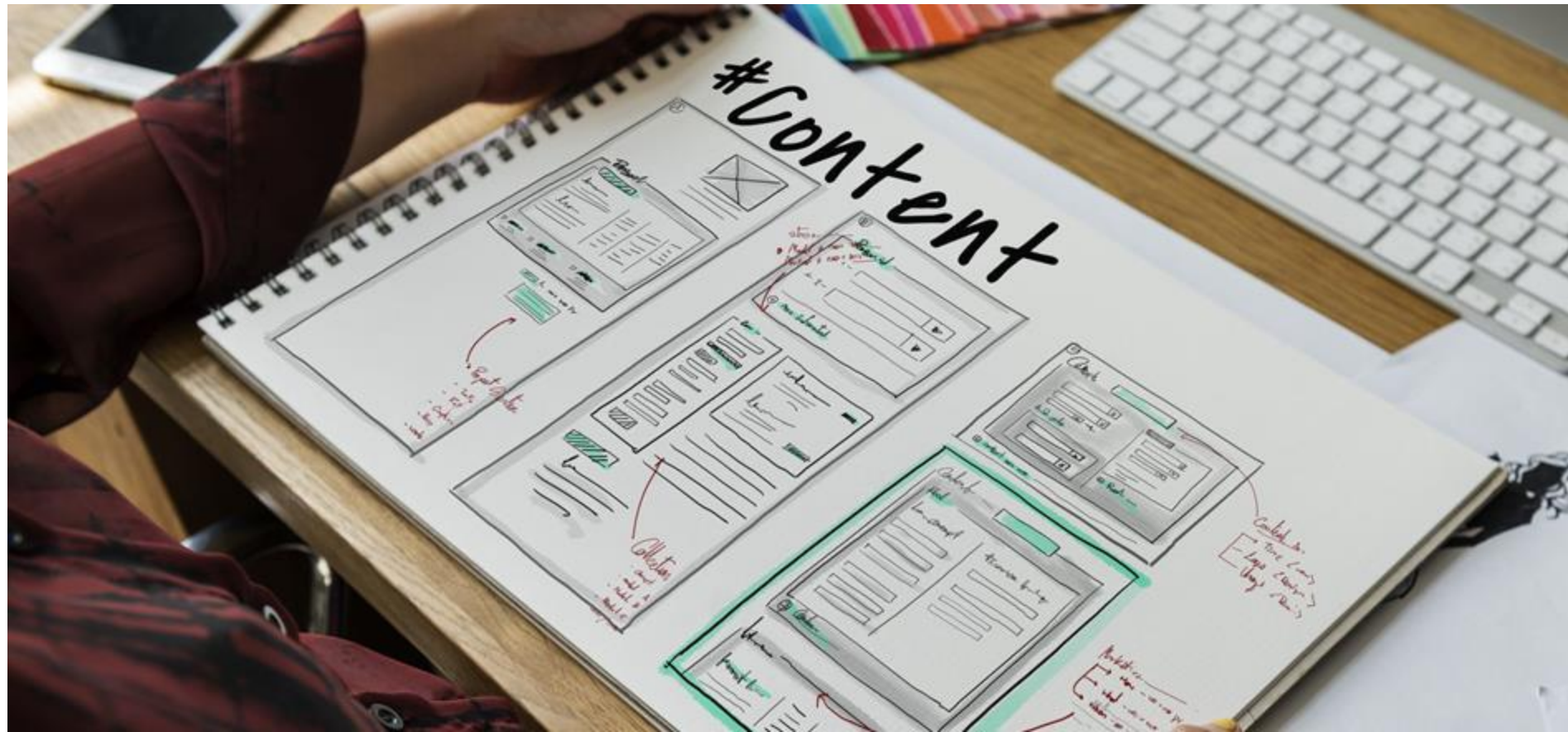
- ✓ Put a **check mark** next to what you already do
- ★ Put a **star** next to what you want to try next

Principles of Adult Learning					

Facilitation Techniques					

# How We Design Training: *Principles of Adult Learning*



# Principles of Adult Learning

- ✓ Autonomous & Self-directed
- ✓ Goal or Result-Oriented
- ✓ Connected to Lived Experiences (relevant, practical)
- ✓ Collaboration/Shared Learning
- ✓ Feedback & Reflection
- ✓ Modern Learning
- ✓ Respect and Inclusivity
- ✓ Active/Interactive Learning (Environmental Comfort)

# Principles of Adult Learning

We retain approximately

- ✓ 10 percent of what we see;
- ✓ 30 to 40 percent of what we see and hear; and
- ✓ 90 percent of what we see, hear, and do.

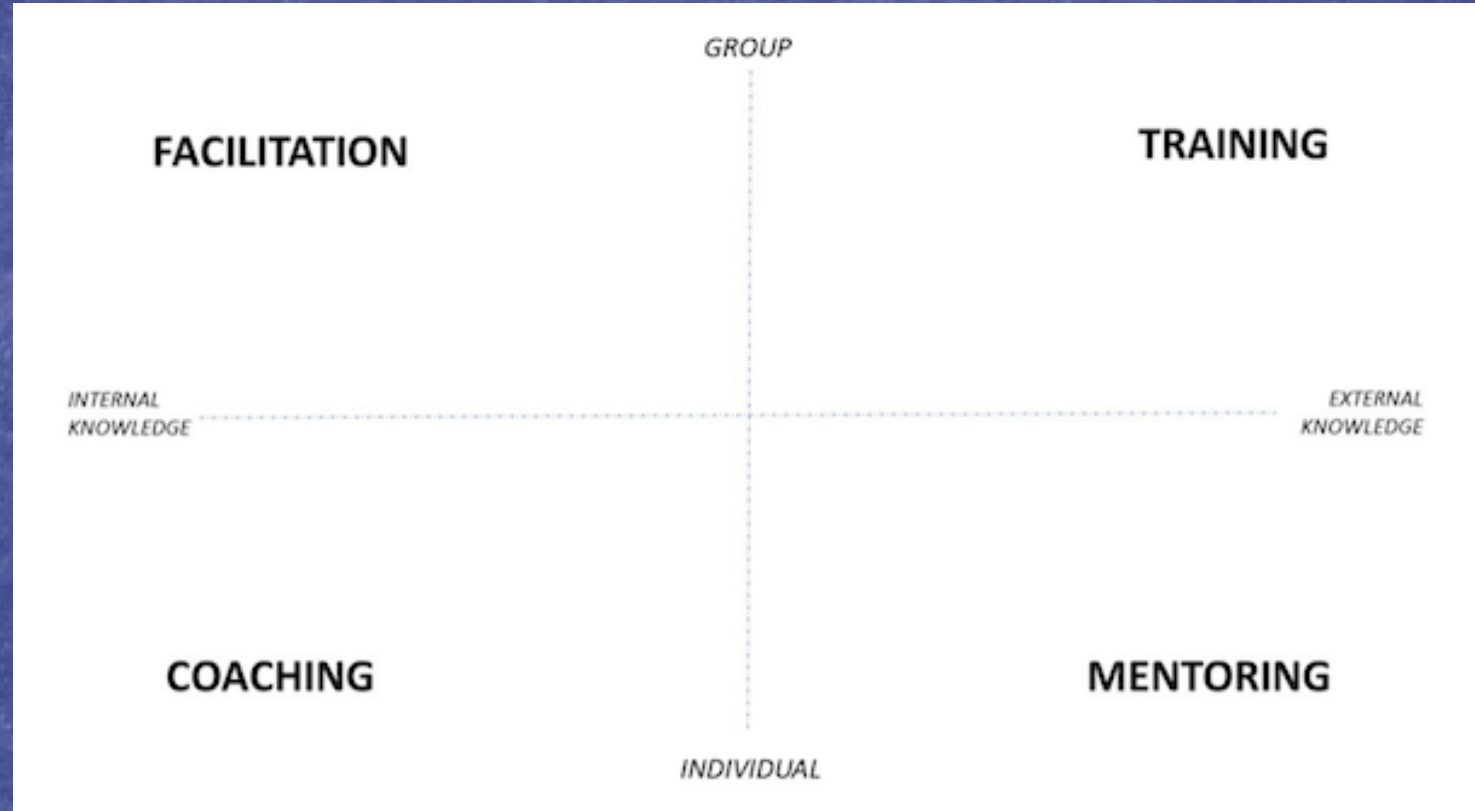
# How We Deliver Training & Engage Participants: *Activating Your Inner Facilitator*



# Facilitation Techniques

- ✓ Environmental Comfort
- ✓ Respect & Inclusivity
- ✓ Learner Engagement
- ✓ Support & Encouragement
- ✓ Managing Difficult Situations

# Training vs. Facilitation



# In-Person Training Formats

- ✓ **Presentation:** Traditional lecture-style sessions to convey information directly to the participants.
- ✓ **Real-time clinical observation or situational learning ("Lab"):** Hands-on practice and observation in a clinical setting to reinforce learning through real-world application.
- ✓ **Drop-in Session such as Lunch and Learns:** Informal, interactive sessions during breaks to discuss key topics in a relaxed setting.
- ✓ **Micro-learns:** Short, focused learning modules that cover specific topics and can be integrated into the participants' schedules easily.
- ✓ **One-on-one consultation:** Personalized sessions to address specific questions and provide tailored guidance

# Virtual Training Formats

- ✓ **Scheduled live webinar with presentation:** Live online sessions that allow for real-time interaction and Q&A.
- ✓ **Documentation distribution:** Sharing infographics, fact sheets, reference guides, and FAQs to supplement learning.
- ✓ **On-demand recorded webinar:** Pre-recorded sessions that participants can access at their convenience, ensuring flexibility.

# *Group Discussion & Peer Teach-Backs*

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## **Group Discussion:**

- ⇒ As a group, discuss and capture on your flip chart:
  - ⇒ What is this bucket about and why does it matter (in your own words)?
  - ⇒ What have you tried in IPC training related to this bucket (reference Bingo card)?
  - ⇒ What worked well and what didn't?
  - ⇒ What's one thing you'd change or improve next time?

# ***Group Discussion & Peer Teach-Backs***

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**Peer Teach-Backs** *(You'll have 5 minutes to share):*

- ⇒ What's this bucket all about and why does it matter?
- ⇒ What's worked or not worked in IPC training (concrete example)?
- ⇒ Offer 1-3 simple tips that others should try
- ⇒ Share one change your group will make in future trainings



**What's one thing you'll do differently the next time you design or deliver a training?**

# Lunch



# Bingo!

- ✓ Put a **check mark** next to what you already do
- ★ Put a **star** next to what you want to try next

Principles of Adult Learning					

Facilitation Techniques					

# Mini-Refresher

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- Each table is a group
- Decide on a name for the group
- Assign one person at each table to submit answer in Slido
- Total of 15 questions (30 seconds per question)



# Why is the risk of germ spread different in healthcare settings?



**Which germs are commonly found on the skin?**



**Which of the following tasks increases a healthcare worker's risk of infection through exposure to blood?**



# What are the reservoirs in the human body?



**Germs cannot spread through splashes or sprays of this fluid.**



**Separating clean and dirty medical devices (e.g., blood pressure cuffs, wheelchairs) can help prevent the spread of infection?**

# IPC Training Design Lab-Part I



# *Design a 60-Minute Training*

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## **Step 1:**

- ⇒ Review your assigned IPC scenario
- ⇒ Brainstorm a title
- ⇒ Write one learning objective (e.g., By the end of this session, participants will be able to...)
- ⇒ Design one key activity that includes at least 3 adult learning principles and is engaging and relevant for the target audience

<b>Title:</b> <i>What's the name of your session?</i>	
<b>Learning outcome:</b> <i>What will participants do differently because of the training?</i>	
<b>Agenda:</b>	
10 min	Welcome and Introductions
TBD	Key Learning Activity <ul style="list-style-type: none"><li>• <i>What is the activity?</i></li><li>• <i>What is it meant to teach?</i></li><li>• <i>What adult learning principles does it include?</i></li></ul>
10 min	Closing

# *Design a 60-Minute Training*

---

## **Step 2:**

- ⇒ Grab another flip chart sheet
- ⇒ Adapt your key learning activity:
  - ⇒ Mixed clinical and non-clinical staff
  - ⇒ Limited time
  - ⇒ Virtual format

<b>Title:</b> <i>What's the name of your session?</i>	
<b>Learning outcome:</b> <i>What will participants do differently because of the training?</i>	
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10 min	Closing

# Gallery Walk



# Break



# IPC Training Design Lab-Part 2



# Time to Practice

## Activate Your Inner Facilitator

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**You'll work in groups of 3 for a rapid peer facilitation activity.**

### **Each round:**

- One person will **facilitate each round**
- Everyone else will act as **participants and give feedback**
- There are 2 rounds and each round is **8 minutes** (1 min prep, 4 min facilitation, 3 min feedback)
- For each round, we'll provide a prompt to help guide your facilitation.

# Facilitation Techniques to Practice

- ✓ **Exhibit Content Knowledge**
- ✓ **Speak Slowly and Clearly**
- ✓ **Use Active Listening**
- ✓ **Use Non-Verbal Cues**
- ✓ **Be Yourself!**

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# Time to Practice

## Activate Your Inner Facilitator

---

### **Round 1: Teach How to Pack for a Conference**

Teach your group how to pack for a conference.

Highlight a strategy or a helpful tip.

Focus on organizing your steps, connecting to the learner's experience, and keeping it short and engaging.

# Time to Practice

## Activate Your Inner Facilitator

---

### **Round 2: Teach How to Register for a Conference**

Teach your group how to register for a conference

Highlight key steps, barriers, and a helpful tip.

Focus on sharing the information clearly, helping participants avoid mistakes, and keep it short and engaging.

# Steps to Develop Training

- ✓ Identify audience & needs
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- ✓ Evaluate & improve training

## TRAINING DEVELOPMENT PLAN

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# Closing



# Quick Recap: IPC Fundamentals

- ✓ Building Trust & Connection
- ✓ Why IPC Matters
- ✓ Recognizing Risks
- ✓ How Germs Spread
- ✓ Standard Precautions

# Quick Recap: Steps to Develop Training

- ✓ Identify audience & needs
- ✓ Determine learning outcomes
- ✓ Design training & materials
- ✓ Deliver training
- ✓ Evaluate & Improve Training

# REFLECTIONS

## Three New Connections

- 1.
- 2.
- 3.

## Three New Ideas to Try Out

- 1.
- 2.
- 3.

## Action Items for My Next Workday

*Fill out and submit my travel reimbursement form to NACCHO*

## Resources to Check Out

**Scan to complete the  
workshop evaluation!**



<https://forms.gle/4eque1ytyhH5Ghrz9>



# Key Takeaways from Today

- Convening – providing space for them to talk/connect with each other (not just you)
- What you wish healthcare facilities understood?
  - Try flipping this: “**What do you wish we understood?**”
- Rebuilding Trust
- Build the relationship **before** you (or they) need it and during clear sky times

# Our Next Steps

- Share resources and slides (Curiosity Corner)
- Review your feedback and make improvements
- Questions?
  - Jaclyn Abramson
  - [jabramson@naccho.org](mailto:jabramson@naccho.org)



# Resources

- [Project Firstline - Training and Educational Materials](#)
- [Project Firstline COVID-19 Session Plan Topic One: The Concept of Infection Control \(cdc.gov\)](#)

# References

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# Acknowledgements

## **NACCHO PFL Team**

- Christina Baum, MPH
- Jaclyn Abramson, CHES, MPH
- Andrea Chavez Calvi, BS
- Kimberly Nalley, MPH
- Trent Johnson, MPH(c)
- Shirelle Gramby
- Kristen Ross, MPH

## **WE Public Health Team**

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# Thank you!

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Emerging Infectious Disease

