

Welcome

BEFORE WE BEGIN, ANSWER IN THE CHAT: What is your New Year's Resolution?

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NEW YEAR'S
RESOLUTIONS

INSTRUCTION FOR CONTACT HOUR

- Your display name **MUST** match your evaluation name for CEU credit. If it does not, type your name and facility in the chat.
- Enjoy the entire program.
- Complete the post-evaluation by January 24, 2025, 5:00 PM (available on the last slide)
- Certificate will be emailed to you by February 15, 2025.



San Diego Skilled Nursing Facility Infection Prevention Collaborative

Grow - Collaborate - Succeed

Coordinated by the County of San Diego
Healthcare-Associated Infections (HAI) Program

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Reminders

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Recording is on!



PHS.HAI.HHSA@sdcounty.ca.gov



Keep your lines muted



Participate in the polls and chat



Use the chat box for questions



Slides will be emailed



Type into the chat your:

- Name
- Title
- Facility



Land Acknowledgement

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Public Health Services would like to begin by acknowledging the Indigenous Peoples of all the lands that we are on today. While we are meeting on a virtual platform, I would like to take a moment to acknowledge the importance of the lands, which we each call home. We respectfully acknowledge that we are on the traditional territory of the Kumeyaay. We offer our gratitude to the First Nations for their care for, and teachings about, our earth and our relations. May we honor those teachings.



Agenda



Welcome

General Updates

Announcements

Featured Topic: "Adult Learning Principles: Making a Positive Learning Experience"

Next Collaborative

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SNF IP
Email List



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Health and Human Services Agency
California Department of Public Health



TOMÁS J. ARAGÓN, M.D., Dr.P.H.
State Public Health Officer & Director

GAVIN NEWSOM
Governor

January 10, 2025

AFL 25-01

TO: All Facilities

SUBJECT: Interim Work Exclusion Guidance for Healthcare Personnel with COVID-19, Influenza, and Other Acute Respiratory Viral Infections
(This AFL supersedes AFL 21-08.9)

All Facilities Letter (AFL) Summary

- This AFL announces the California Department of Public Health's (CDPH's) new [interim guidance](#) for work exclusion of healthcare personnel (HCP) with suspected or confirmed respiratory viral infections.
- This guidance applies to HCP with COVID-19, influenza, and other acute respiratory viral infections, regardless of whether diagnostic testing for viral pathogens is performed or the results of such testing.

Respiratory Virus Update



LIVE WELL
SAN DIEGO

San Diego County Respiratory Virus Surveillance Report

Prepared by Epidemiology and Immunization Services Branch

www.sdepi.org

January 16, 2025

COVID-19

Cases

21,674

Deaths

203

Outbreaks*

183

6/30/2024 – 1/11/2025

Influenza

Cases

16,545

Deaths

27

Outbreaks*

21

6/30/2024 – 1/11/2025

RSV

Cases

2,112

Deaths

2

Outbreaks*

1

6/30/2024 – 1/11/2025

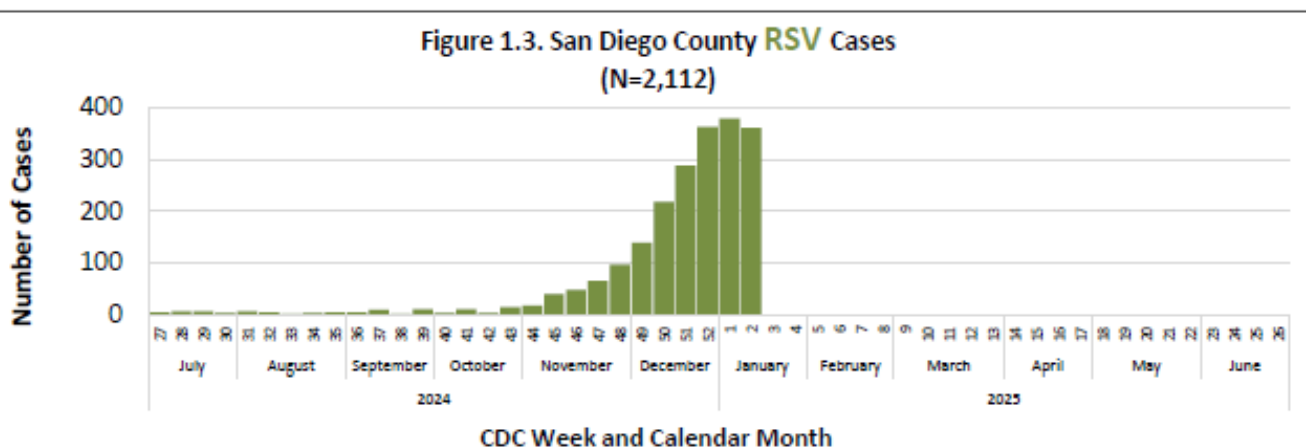
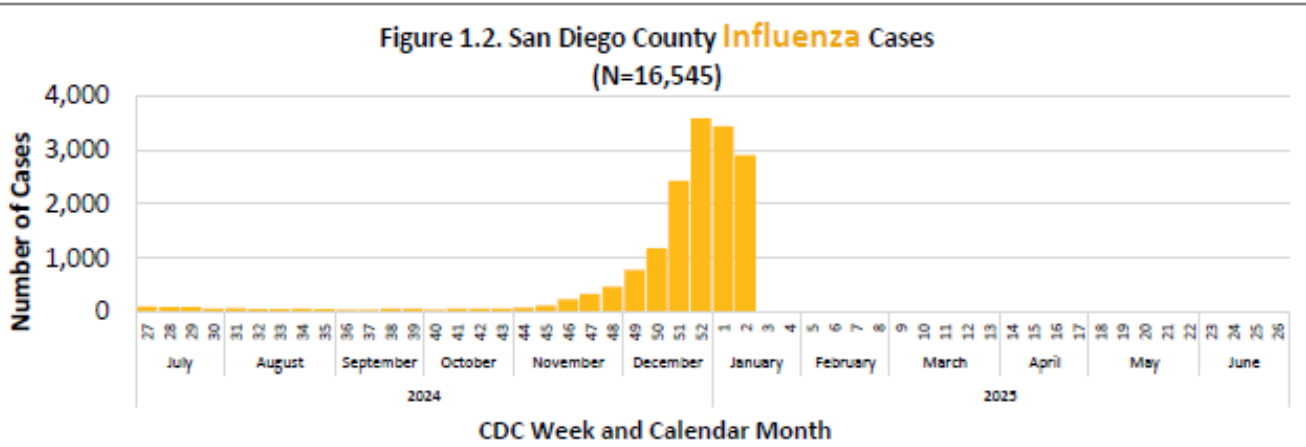
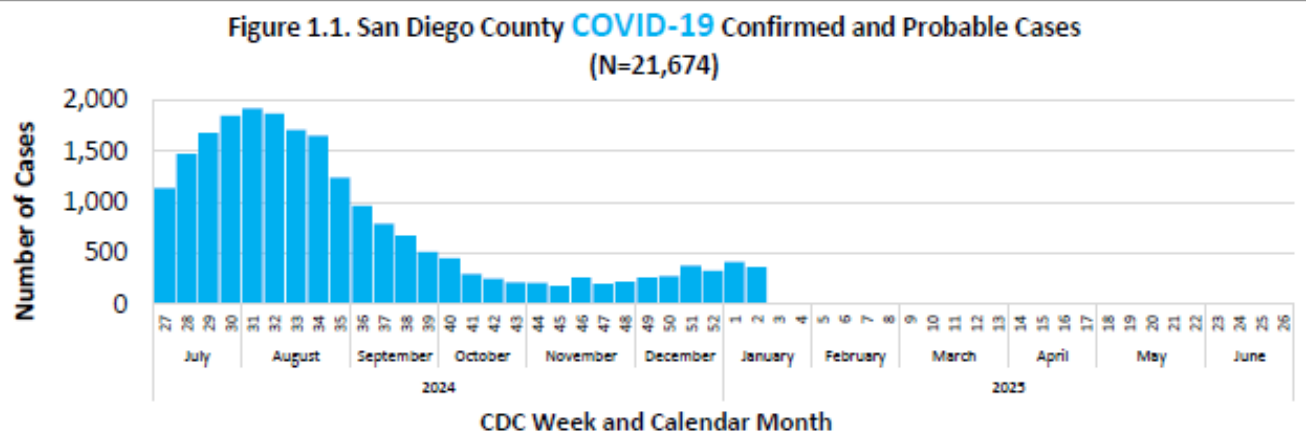
*In residential congregate settings



Respiratory Virus Update

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*Episode date is the earliest available of symptom onset date, specimen collection date, date of death, date reported. Data for the most recent week may be incomplete.



Respiratory Season Reminders



Reporting

- Report Outbreaks: PHS.OutbreakReporting.HHSA@sdcounty.ca.gov
- Reporting Guidelines:
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/community_epidemiology/disease_reporting_requirements_for_health_care_providers.html

Guidance

- CDPH Recommendations for Prevention & Control of COVID-19, Influenza, & Other Respiratory Viral Infections in California Skilled Nursing Facilities
https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/CA_RecsPrevControl_RespVirus_SNFs.pdf
- CDC Long Term Care Facility Respiratory Virus Toolkit
[Viral Respiratory Pathogens Toolkit for Nursing Homes | LTCFs | CDC](#)

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Federal Health Partner Ordering Portal



- **Health and Human Services (HSS) Health Partner Ordering Portal (HPOP)** is available as a resource for organizations for **COVID-19 Testing supplies** for facilities/organizations that provide resources/services/care for uninsured/underinsured and/or those of the age of 65 years of age.
 - Licensed Care Facilities, including SNFs, RCFEs, ARFs, Adult Day Care, Community Health Clinics, etc. are eligible.
- Intended as a preparedness resource, not able to ship with a fast turnaround.
- It can take up to 10-14 days for HPOP access to be granted
- For more information, please email OTCtesting@cdph.ca.gov

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Disaster Preparedness/Response Assistance: Medical Health Operational Area Coordinator (MHOAC) DUTY OFFICER



When should my facility contact the Medical and Health Operational Area Coordinator (MHOAC) Duty Officer?

Examples:

- Evacuation planning
- Utility and power outages, both planned and unplanned
- When experiencing medical and health supply chain issues
- Planned strikes
- During emergencies when requested by the Medical Operations Center (MOC)
- Notification that the facility is activating the command center
- Patient Tracking
- To support facility reunification efforts

***For help. Please note that 9-1-1 should always be called first for medical emergencies.
For hospitals, this does not supersede Base Hospital and EMS Procedures.***

Disaster Preparedness/Response Assistance: Medical Health Operational Area Coordinator (MHOAC) DUTY OFFICER



The San Diego Medical and Health Operational Area Coordinator (MHOAC) Duty Officer Program

24/7/365 Days A Year

Duty Officer Phone Number: (619) 772-4247

MHOAC Duty Officer Email: MHOAC.HHSA@sdcounty.ca.gov

The San Diego Healthcare Disaster Coalition (SDHDC)

- The mission of the SDHDC is to build a regional organization to promote engagement, coordination, communication and situational awareness between community partners and private and public sectors prior to, during and after an incident/disaster.
- You can also visit our website at www.sdhdc.org for more information.
- Please email SDHDC.hhsa@sdcounty.ca.gov to join or to ask questions.

County/CDPH Briefings



- **County LTC Sector Bi-Monthly Telebriefing:**
 - Bi-monthly 4th Thursday @ 2PM-3PM
 - Next briefing is on **1/23/25**



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San Diego County's Healthcare-Associated Infections (HAI) Program presents:

Infection Prevention 1-day Course

March 18, 2025

8:00 am - 5:00 pm

North Central Live Well Center

5055 Ruffin Road San Diego, CA 92123

PBS Room 2220



Suggested Audience:

Individuals responsible for infection prevention in SNFs.



- No cost to attend.
- Provider approved by the California Board of Registered Nursing, Provider Number CEP579, for 7 CEUs.

Registration QR Code



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Contact Hour Instructions

Ensure

- Ensure your full name identifies you on Teams

Enjoy

- Enjoy the full presentation

Complete

- Complete the post-evaluation

Today's Speaker

Adult Learning Principles: Making a Positive Learning Experience

January 22, 2025 11:00 am - 12:00 pm

Presenter



Margaret M. Turner, M.Ed., BSN, PHN, FAPIC, CIC, RN
Healthcare-Associated Infection Preventionist
Education and Training Workforce
California Department of Public Health
Healthcare-Associated Infections Program

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Adult Learning Principles: Making a Positive Learning Experience

Healthcare-associated Infections Program

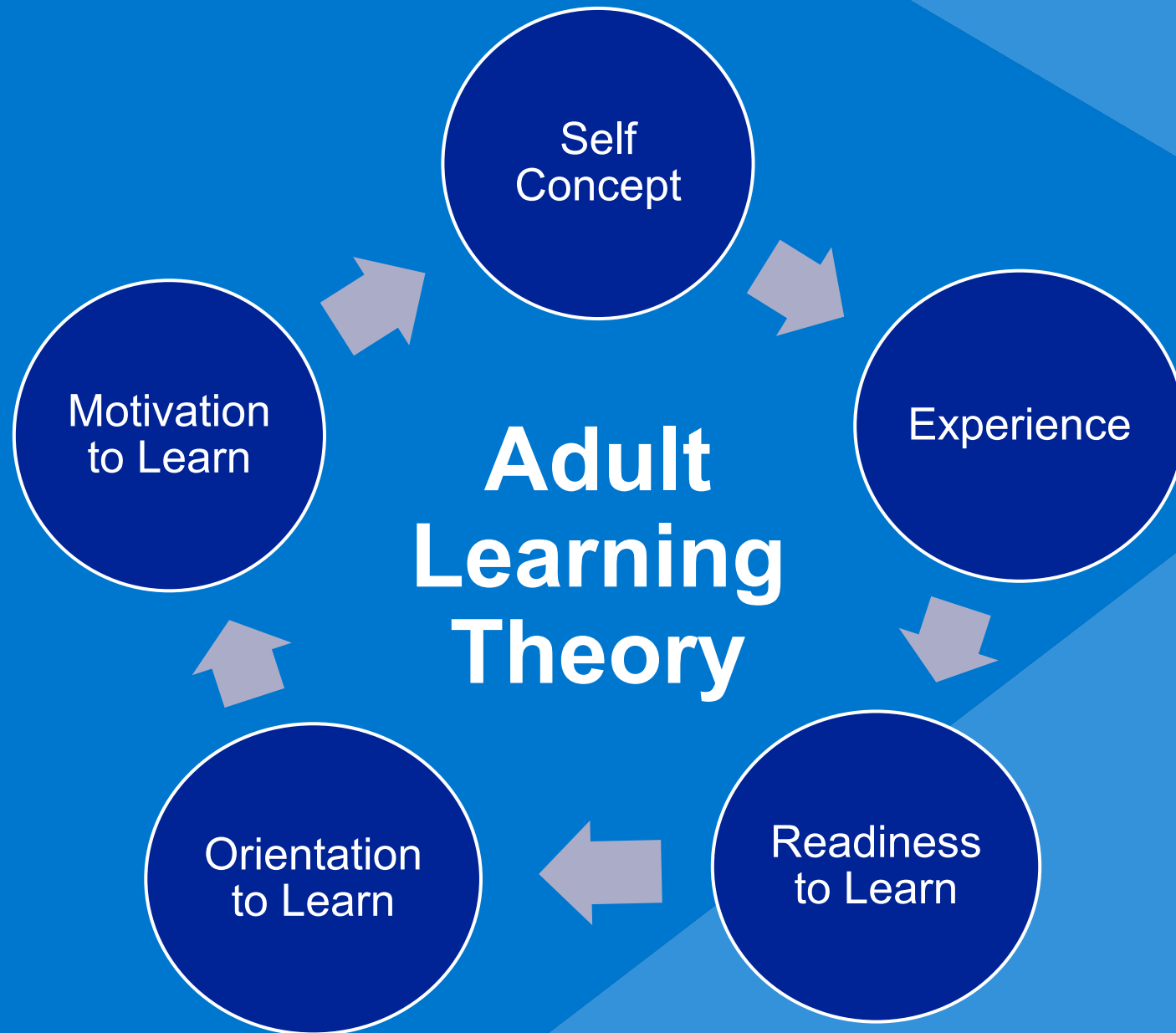
Center for Healthcare Quality

Maggie Turner, M.Ed., CIC, FAPIC, PHN, RN

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Objectives

- Review adult learning principles and their importance when planning facility inservices
- Identify different adult learning styles and how they impact learning
- Discuss how using different adult learning styles while delivering information can improve attendee's comprehension and prevent safety issues
- List at least one barrier to learning to avoid when planning infection prevention inservices



What is the Definition of Learning?

- Acquisition of novel information, behaviors, or abilities after practice, observation, or other experiences, as evidenced by change in behavior, knowledge, or brain function
- Learning involves consciously or unconsciously taking in information, mentally organizing the information into a way that makes sense to them, and adding it with relevant existing knowledge activated from long-term memory
- Behavior change can be measured
 - Adherence monitoring rates after a PPE donning/doffing inservice for example

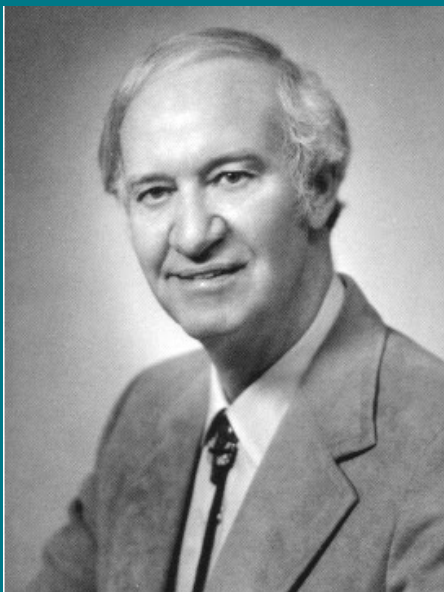
[APA Dictionary of Psychology](https://dictionary.apa.org/learning)

(dictionary.apa.org/learning)

Attending Inservice Education

- Adults attend in-services to satisfy an immediate need
 - Various reasons to attend
 - Mandated by the facility and required for job performance evaluations
 - Interested in topic and what presenter has to say
 - Desire to change and improve how care is provided
 - Concern for the safety of the residents and themselves
- Purpose of education is to change a behavior after learning
 - Sign of successful learning can be measured
 - Adherence monitoring rates are one way to measure this
 - Example: Hand hygiene rate improvement

Malcolm Knowles' Theory of Adult Learning



Adults do not learn the same way as children
Knowles' Theory of adult learning is based on:

- Self-concept
- Experience
- Readiness to Learn
- Immediate application
- Orientation to Learning
- Motivation to Learn

[The Andragogy Approach: Knowles' Adult Learning Theory Principles in 2024 | Research.com](https://research.com/education/the-andragogy-approach)

(research.com/education/the-andragogy-approach)

Principles of Adult Education: Self-concept

- Self-concept directs learning to seek ways to positively impact resident care, and want to improve how its delivered
- Adults are self-directed
 - Adults take responsibility for their own learning
 - Adults will apply information to their current knowledge base and expand
 - If attendee feels information is not valued, or reason for information is not clear, adults will disregard
 - If they feel it doesn't apply to them, doesn't add to their self-concept, or won't improve their care delivery

Experience in Adult Learning

- Adults rely on the experience of their teachers or persons in authority
 - The person giving the inservice must know the material well in order to present it effectively
- Adults bring a wealth of experience into their work
 - New knowledge is built on past experiences
- Respect these experiences
 - Don't assume there is a knowledge deficit, but build on their prior knowledge
 - Ask “show of hands, who knows...”
 - “Who has worked with this before?”

Readiness to Learn

- Information pertaining to their job, or for personal growth potential, increases readiness to learn
 - Plan for new career opportunities or position change
 - Students working on obtaining higher degrees
 - New to the role and eager to learn
 - No interest in promotions, but want to learn more
- Adults may decide to listen to the inservice based on topic
 - Why do I need to know this?
 - What's in it for me?
 - How can I use this in my role or work?
- Safety concerns increase readiness to learn

Immediate Application

- What is learned needs to be applied in a real world setting or long- term behavior change will not happen
- Use skills fairs, hands-on demonstrations, with return demonstrations, with continued reinforcement for learning to become a habit
- Apply new information learned immediately to their current setting
 - New product or equipment that won't arrive for six months won't be used correctly when it does arrive
 - Creates a safety concern

Education for Problem Solving: Orientation

Adults should be equipped to

- Learn to know
 - A person should have the tools to be able to understand the affairs of the world
- Learn to do
 - A person should be equipped with the skills and knowledge to be able to produce the changes they want in their environment
- Learn modern life
 - A person should be able to take part in various kinds of human activities while cooperating with other people

Galustyan, O. V. et. al. E-learning within the Field of Andragogy

(<https://doi.org/10.3991/ijet.v14i09.10020>)

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Orientation to Learning

- Goal is to problem solve
- Looks for information that can be used for their situation
- ‘Need to know’ information is essential to solve problems
- ‘Nice to know’ information is not essential and may or may not be learned
 - Examples
 - Need to know: Importance of hand hygiene in preventing transmission of pathogens
 - Nice to know: How many desserts are served per week
- “I don’t want to take this home, so how do I prevent it?” creates a need to learn for problem solving

Motivation to Learn

- Job satisfaction as a motivation to learn new information
 - Performance evaluation may motivate learning
 - Doing a job well as motivation
 - Seeking promotions or more responsibility
 - Looking for positive changes in their workplace
 - If staff seem supported and happy, are more likely to look for positive changes
- Apply information to those looking for motivation in their role
 - Sense of relatedness/belonging increases during education and discussions afterward

Different Adult Learning Styles

- Auditory: Learn by hearing information
- Visual: Learn by seeing what the content is
- Kinesthetic: Hands-on learners
- Convergence: Any or all of the above needed to grasp concepts

Adult Learning Theory

Performing Facility Inservices: Attendees and Messaging



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Why is this Education Needed?

- Urgent issue in the facility
- Outbreak of scabies or other transmissible disease event
- MDRO discovered after admission of a resident
- New equipment or product purchased by facility and needs staff competency
- IPC practice gaps were found and need to be corrected
- CEUs or inservice hours needed for licenses or certifications
- New employee orientation and mandatory trainings

Plan for Inservices Depending on Urgency

- Decide whether to include the facility leadership as attendees
 - Leadership presence for urgent situations reinforce the gravity of the situation
 - Can become aware of resources needed to manage the urgent situation
 - Budget approvals for needed equipment
 - Approving overtime for staff to attend
 - Aware of the need for off-shift inservices

Facility Situations Determine Urgency

- Choosing the right words that get attention
 - ‘Urgent’, ‘public health emergency’
- Using body language to convey the message
 - Leaning in indicates interest and connecting with attendees
 - Leaning away indicates rejection or disconnecting with attendees
- Top issues must be covered within the first five minutes
 - Most important items should be presented first
 - Repeat items later as late arrivals may miss the information
- Reset the conversation if there are interruptions to important points
 - Repeat last information given before the interruption
 - Ask, “Where did we leave off?”

The Attendees

- Assess their experience with infection prevention practices and baseline level of knowledge
 - No need to repeat basics if well known
 - Can assess level of knowledge by asking, “Who can tell me...” (how important hand hygiene is, for example)
- Once basic level is assessed, proceed with providing remaining information
- Supervisor or leader present at the inservice can make engagement supportive or challenging
- Dealing with difficult attendees
 - Interrupting or interjecting unimportant information or opinions
 - ‘Correction’ of the IP statements

Making a Connection with the Audience

- Applicability of what you are teaching
 - Different educational backgrounds and experiences will affect amount of learning more than their current role
 - Language and learning barriers inhibit comprehension
- Conducting mandatory all-facility inservices
 - How can you reach different levels in the same inservice?
 - Housekeepers
 - Dietary aides
 - DONs
 - CNAs
 - Physicians

External Partner Outreach

- Outreach from the facility to external partners such as public health can occur for these reasons:
 - Administrator is concerned about adherence monitoring rates
 - Transmission of MDROs continues after action plans implemented
 - DON is looking for guidance to help nursing staff understand infection prevention practices
 - IP looking for help in setting up the program
 - DSD needs resources for inservice planning on infection prevention topics
- Leadership should consult with IP before reaching out to external partners to conduct infection prevention inservices

If Public Health Reaches Out to the Facility

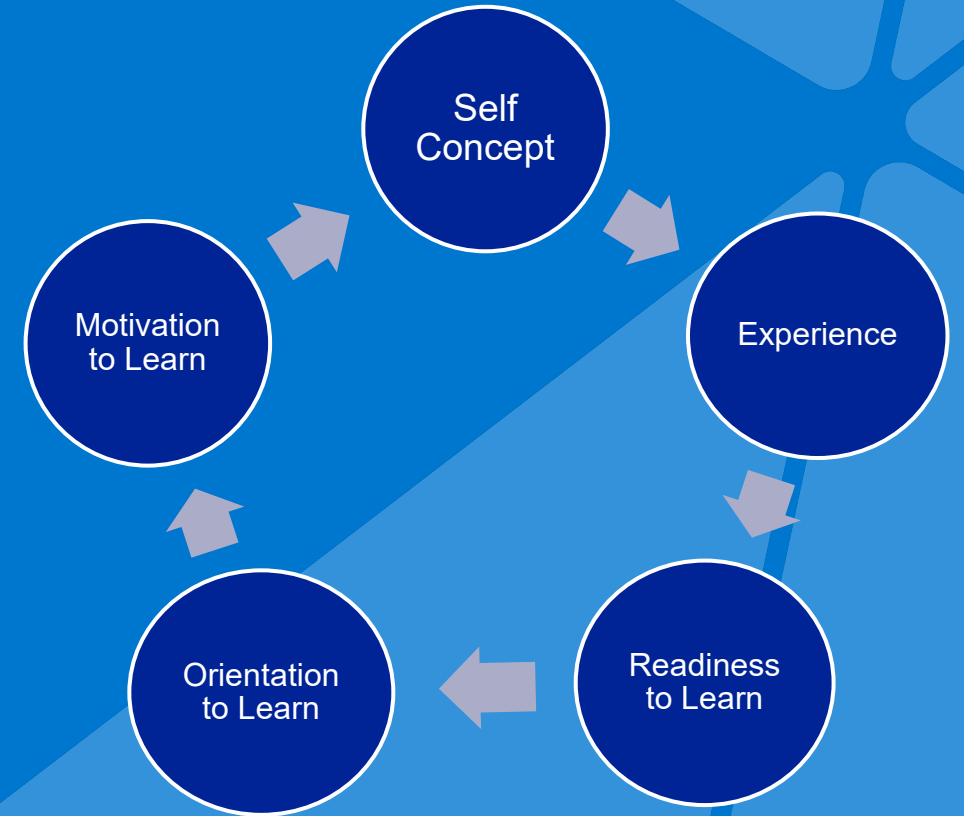
- Public health request to give an inservice may be due to facility issue
- Urgency increases from potential to actual case of transmissible disease
- If an actual case or outbreak occurs in the facility
 - Staff will listen more closely
 - Will voice concerns about their own safety
 - Anticipate questions such as: “Can I bring this home to my family?”
- If risk of a potential case is the topic, may not have as strong of an impact
 - Is viewed as a theoretical, ‘what if’ or ‘could but not happening yet’
 - “That won’t happen here” attitude may become a barrier to learning

Vendor Presentations

- Vendors presentations for facility purchase of a new product or equipment
 - Prevent safety issues with new product use
 - Vendor wants the facility to keep the product
- There could be bias in vendor presentations
 - Sales of product could be primary reason the vendor wishes to present
 - Monitor the vendor presentation and interrupt if the vendor is going against the facility plans
 - Have conversation beforehand to review the vendor's content

Adult Learning Theory

Inservice Setting Impact on Learning



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Where to Conduct the Inservice

- Look at the planned setting
 - Appropriate for number of attendees
 - Private area if discussing sensitive topics (outbreaks, for example)
 - Last-minute scrambling to find the proper needed space will decrease your inservice time, and may possibly lose attendance
 - Does the room
 - Have other staff occupied the space for unscheduled meetings?
 - How to prevent conflict by politely claiming your space
 - It's easier to move 2 or 3 people than 20 - 30

The Inservice Setting

- Avoid rooms that are:
 - Too small for number of attendees
 - Insufficient seating capability for number of attendees
 - Too large of a room for the type of inservice delivery
 - May not be able to hear or see presentation
 - Temperature issues: too hot, no air movement, or too much sunlight, too cold, or drafty
- If the reserved room is not acceptable
 - Check if alternative site is available
 - Have expectations of attendee numbers and type of presentation before confirming a room reservation

Planning for Auditory Learners

- Noise, sound issues
 - Avoid rooms adjacent to kitchen during dishwashing or meal preparation
 - Loud conversations by attendees talking about their own issues with work will distract auditory learners
 - Sharing the room with other who hold conversations off topic will distract auditory learners
- Have sound system or other means to ensure attendees can hear lecture



Visual Learners

- Ensure attendees have clear line of sight of information
 - Handouts
 - Projection of slides
 - Large pictures on poster boards
 - Trifold posters with step by step directions



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Kinesthetic Learners

- Hands-on demonstration/return demonstration for learning
 - Hand hygiene demonstrations with fluorescent marking (Glo-Germ)
 - Skills fairs are conducive to these learners
 - PPE donning and doffing with return demonstrations work best
 - For new equipment, model of equipment to demonstrate and give return demonstrations
 - Allow for unit inservices to support new information and prevent errors



Convergence Learners

- Use of all of the learning strategies: visual, auditory, kinesthetic will be needed
- Supply handouts along with lecture/demonstrations
- Visuals with posters along with lecture that can be viewed after the inservice
- Reinforce learning with demonstration/return demonstration



Alternative Types of Presentations

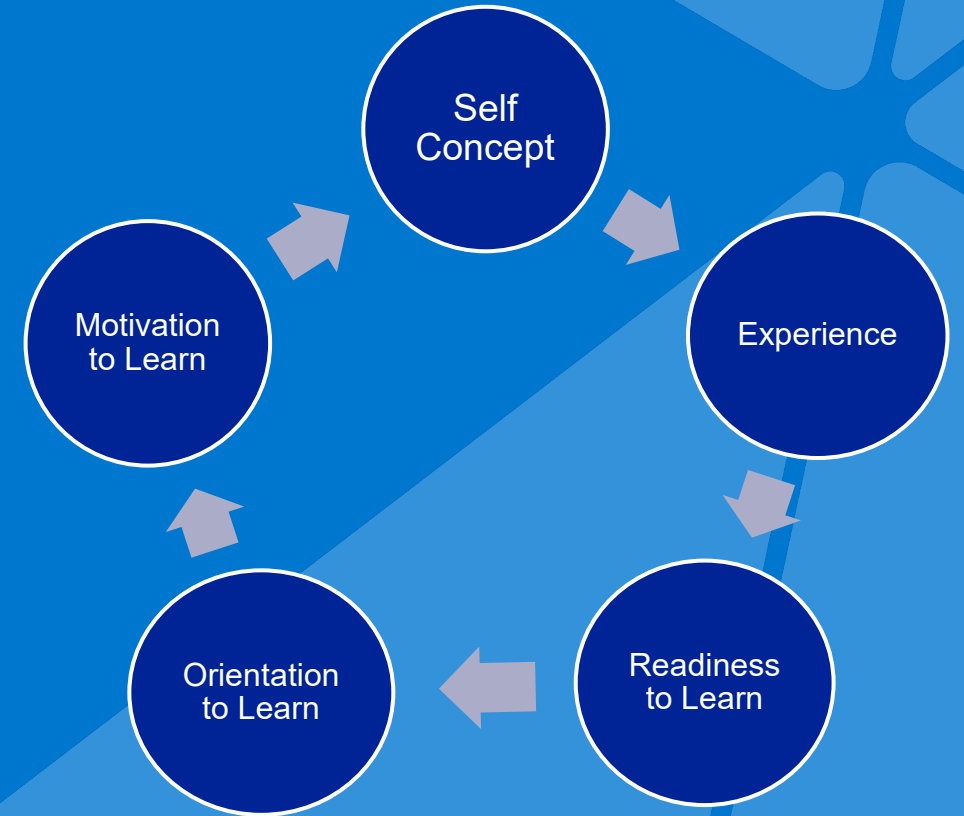
- Learning in a group setting
 - Bouncing idea off each other some find stimulating
 - Others may find it confrontational and not engage
- Shy persons may be uncomfortable in group settings
 - May need 1:1 coaching
- Leadership can help by starting the conversation in groups and participating in discussions as an equal participant and as a support, and not in a supervisory role
- Some learn sitting by themselves in quiet area
 - Offer opportunities to download resources or handouts to read afterward

Those Late Arrivals...

- Those who miss most of the presentation
 - DSD, leadership, and IP will need to work out how to deal with those missing important information
 - Consider how being late to the last presentation can be made up

Adult Learning Theory

Communication is Key



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Failure to Apply Principles of Learning

- A facility IP reviewed PPE donning and doffing with staff
 - This is the third time this has been presented in a month
 - PPE adherence monitoring scores aren't improving afterward
 - When questioned, staff are aware of donning and doffing procedures and demonstrate the steps but not the correct order
- HAI IPs found:
 - Posters with the donning and doffing instructions had not been posted
 - LHD HAI IPs had suggested this strategy to the facility at the previous two visits for MDRO outbreak
 - When asked why the signs weren't posted, the facility leadership stated "it is a fire hazard to put up signs" and facilities staff took them down

What Happened?

- Lack of communication between departments
- No follow up with need for posters as prompts when staff are learning a new process/concept
- No discussion with facilities staff about appropriate use of laminated signs
- No plan to speak with housekeepers about cleaning signs after use, so laminated signs were disposed of and paper ones substituted
 - Leadership saw paper signs and ordered them removed
 - Signs were posted in areas where staff could not view them
- Result: Wasted time, safety issue of inappropriate PPE usage

If Same Inservice was Held Once Again...

- Staff may tune out the lecture
 - May feel threatened or undervalued
- Evaluation comments
 - “This is a waste of my time”
 - “We already know this”
- Staff may skip the inservice
- Repeated inservices is a waste of everyone’s time
 - Need to find the root cause of the problem, not assume the issue
 - Incorrect focus was on the people, not the problems

Planning for Adult's Readiness to Learn

- Information needed to learn by participants depends on job role
- Anticipate which staff will attend:
 - Nursing
 - Facilities
 - Housekeeping staff
 - Therapy staff
 - Activities staff
 - Everyone
- Each discipline will have a different readiness and level of understanding
 - Is the terminology understandable for these different disciplines?
- Facility leadership may think all will need to attend
 - Those who will never encounter the topic will feel their time was not valued
 - Explain to leaders what the topic will cover and who should attend

Orientation to Learning

- Adults want to be able to be part of the solution to problems
- To increase attention, make the event interactive
 - Ask the audience what they think is a solution
 - If they fear leadership reaction to their answers, give some ideas that may start conversations
- Apply information to the facility
 - If the facility doesn't have AIIR, avoid using that as aerosol-transmissible mitigation strategy for a measles case scenario, for example
- Make it fun depending on the topic, be careful with joking
 - Humor must be delivered correctly to avoid offending attendees or sounding as if the topic was not serious

Information to Use for Future Inservices

- Change your presentation strategy and update information when providing your in-service if no changes in behavior are noted
 - Watch staff don and doff PPE during the adherence monitoring
 - Check at least two or three people on each unit after the inservice
 - Look for common or recurring errors and correct them immediately
 - Find reason for the misunderstanding: Messaging, inservice site, method of delivery
- Present errors commonly found during adherence monitoring at your next session anonymously
 - Follow up with additional adherence monitoring and look for specific behavior changes after the inservice
 - Use prompts such as posters to reinforce the message

Barriers to Learning

- Pressure to get back to their duties will keep staff attention away from your presentation
- Get leadership support if staff cannot attend inservices at the time they are scheduled
 - Those on medical leave need a way to make up mandatory inservices
 - Suggest ways to assist with attendance with DSD and leadership
 - Suggest how to increase staffing to allow attendance
 - Schedule off-shift or per diem staff to attend
- Plan for late arrivals and other disruptions
- Make sure you end the inservice within the timeframe you have set
 - Staff will need to get back to their work as others have to cover for them

Attendee Behaviors to Watch For

Do the attendees:

- Seem nervous?
 - Give them a minute to get settled in
 - Engage with attendees by starting conversations with individuals or groups
 - Find a quiet area for a setting
- Look overwhelmed/fatigued/stressed?
 - Provide additional schedule times
 - Offer alternate days for the inservice
 - Record sessions for later review
- Attendees that act like a “Know It All”?
 - Review the important points of the inservice

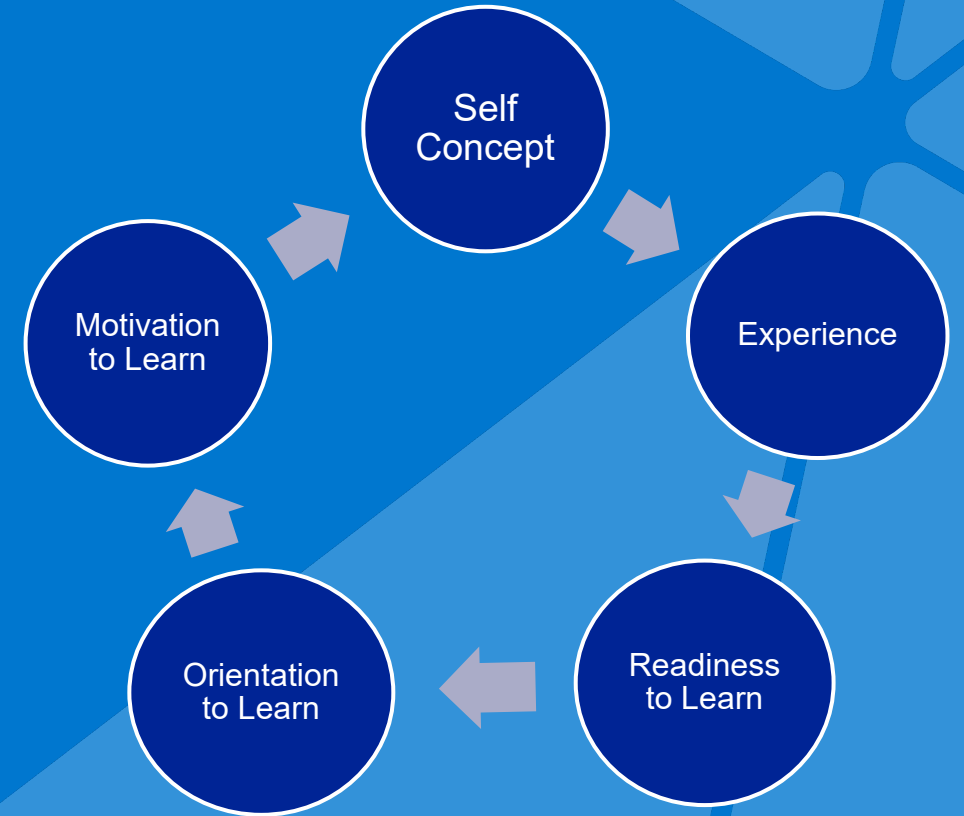


The Most Important Things

- List consequences of not changing current practice if urgent situation
- Review and have staff repeat back your high priority information
 - Ask questions to the group at large or ask them to restate what you presented
 - Help clarify any information that was misunderstood
 - Adherence monitoring can help identify learning gaps
- Offer support and reinforce learning with coaching after the inservice

Adult Learning Theory

Being the presenter that makes an impact



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Making an Impactful Presentation

- What was the worst class you have ever taken?
 - Instructor did not allow time for questions
 - Instructor embarrassed attendees by pointing them out to others
 - Was boring
 - Used monotone or flat affect – no voice inflections
 - No interaction with audience
 - Subject didn't pertain to what their job role was
- Use this as a framework to plan your inservice

Visual Aids and Language

- Small posters or 8 x 10 inch paper won't be seen by those located in the back of a large room
- Colorful images attract attention
 - Some colors are not seen without color discernment
 - ADA formatting: [Creating PowerPoint Templates | Section508.gov](https://www.section508.gov/training/presentations/creating-powerpoint-templates/)
 - Monochrome images are less impactful for some
 - Color printing capability option for handouts
 - Handouts with same images as Power Point notes pages can be distributed
- Translation into languages spoken at the facility
 - Different dialects of the same language could have different meanings

Images in Color versus Monochrome for Color Visuals



Rehearsals

- Rehearse your presentation informally ahead of scheduled event to others:
 - Can be your peers, willing family members, friends who will be honest
 - Feedback helps with ums, ahs, stumbling
 - Videotaping (if possible) makes you aware if you are doing something you didn't know you were doing
 - Distracting movements
 - Nervous habits
 - Facial expressions

Rehearsals (continued)

- Rehearsals help with pre-event nervousness
 - Feedback smooths out the rough delivery of information
- Repeat practicing of hard to pronounce words
- Changing the order of topics to make sense
 - Think of it as ‘telling a story’
 - Add or take out information that may not be useful

How Did It Go? Evaluation

- Allow time for questions and comments at the end of the inservice
- Allow your attendees to give honest feedback
- Anonymous submissions will give better evaluation
 - Can be verbal or written, anonymous or name requested
- Evaluate if they understood the content
- Did they find any issues with the inservice site?
- Did the speaker's method of presenting make an impact
 - If not, why not?
- Ask for suggestions for improvement
- Ask for suggestions for further inservice topics of interest

Summary

- Planning for a successful inservice includes:
 - Adapted to different learning styles
 - Topic, delivery, inservice site, length, urgency
- Using different learning styles to plan for different delivery of inservice material
 - Watch your audience reactions
 - Could they understand you?
 - Ensure attendees can hear and see any visual aides at future presentations
 - Ask for honest evaluations for feedback
- Keep to time schedule
 - Plan for length of inservice so attendees may not be pressured to return to their work

Adult Learning Theory

Resources



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References



- [The Andragogy Approach: Knowles' Adult Learning Theory Principles in 2024 | Research.com](https://www.research.com/education/the-andragogy-approach) (research.com/education/the-andragogy-approach)
- Galustyan, O. V., Borovikova, Y. V., Polivaeva, N. P., Bakhtiyor, K. R., & Zhirkova, G. P. (2019). E-learning within the Field of Andragogy. *International Journal of Emerging Technologies in Learning (iJET)*, 14(09), pp. 148–156. <https://doi.org/10.3991/ijet.v14i09.10020>

Resources



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Contact Hour Instructions

- **Ensure your TEAMS name is your full name**
- **Complete by January 24th, 5:00 PM**
- **Expect your certificate by February 15th.**





Next Collaborative

*****February 26, 2025*****

11:00AM – 12:00PM

Microsoft TEAMS

Featured Topic:

**Tuberculosis Prevention/Mitigation
in Skilled Nursing Facilities**

1 Contact Hour Offered

Submit questions or
feedback about today's meeting to:

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The Public Health Services department, County of San Diego Health and Human Services Agency, has maintained national public health accreditation, since May 17, 2016, and was re-accredited by the Public Health Accreditation Board on August 21, 2023.

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