

Which factors influence the implementation of COVID-19 specific infection prevention and control guidance in long-term care facilities in Finland?

Objectives

The aim is to identify and describe factors influencing the compliance to COVID-19 specific infection prevention and control guidance.

Methods and target group

The cross-sectional study included an online survey and qualitative interviews based on the Theoretical Domains Framework (TDF) (14 subareas that affect behaviour).



422 healthcare workers working in long-term care facilities from 17 hospital districts responded to the online survey.



20 registered nurses or assistant nurses participated in the qualitative interviews.

TDF subareas that affected practices

TDF subarea	Explanation of the subarea	Normal logistic regression	Ridge logistic regression	Qualitative thematic analysis explaining how the TDF subareas affected behaviour
External factors	Sufficiency of human resources	Odds ratio (OR) 0.55; 95% CI, 0.32–0.94; p=0.027	OR 0.52; 90% CI, 0.33–0.82; p=0.018	Human resources are not sufficient because: many new infection control measures are labour-intensive, the crisis situation (pandemic) has not been accounted for in the planning of human resources.
Reinforcement	Supervisor feedback		OR 1.73; 90%CI, 1.00-2.99; p=0.10	Healthcare workers do not receive sufficient feedback because: management culture does not include regular feedback; supervisors are not physically present (remote work).
Beliefs about capabilities	Ability to follow instructions			Healthcare workers are unable to improve their practices because: they cannot manage information (too much information and it is constantly changing), some of the guidance are difficult to implement, and there are often infrastructural challenges