



Advanced Dialysis Unit Infection Prevention and Control Training Course

28 December 2026 – 1 January 2027
Paris

Advanced Dialysis Unit Infection Prevention and Control Training Course

Ref: 1479_209174 **Date:** 28 December 2026 – 1 January 2027 **Location:** Paris **Fees:** 5700 Euro

Overview

Advanced Dialysis Unit Infection Prevention and Control Training Course is a one-week advanced course for dialysis unit managers, renal nurses, infection prevention personnel, nephrology service leaders, quality teams, and healthcare operations professionals who leave with a Dialysis Unit Infection Prevention Control Pack. Participants apply dialysis transmission risk controls, vascular access aseptic practice, dialysis station disinfection, injection safety controls, dialysis infection surveillance, and audit methods to strengthen unit operations. Agile Leaders Training Center presents operational infection prevention for dialysis settings.

Who Should Attend

- Teams responsible for dialysis unit operations and patient-flow controls
- Personnel responsible for renal nursing practice and vascular access care
- Functions responsible for infection prevention observation and feedback
- Leaders responsible for nephrology service governance and escalation
- Teams responsible for healthcare quality measurement and improvement

The course assumes participants already support dialysis or infection prevention operations and leaves out clinical licensure, treatment advice, certification, and regulator authorization.

Departments and Industries

The course supports departments and industries responsible for safe dialysis delivery and infection control.

- Hospital renal and nephrology services
- Outpatient dialysis center operations
- Infection prevention and clinical quality functions
- Healthcare facilities and environmental services
- Medical supply and equipment support functions

Learning Objectives

By the end of this course, participants will be able to:

- Analyze dialysis transmission pathways and unit control gaps
- Apply vascular access and aseptic practice controls
- Use station, medication, injection, and equipment safety checks
- Build surveillance, feedback, and escalation arrangements
- Evaluate workforce and patient engagement processes

- Prioritize audit findings and improvement actions

Course Agenda

Day 1: Dialysis Transmission Risk and Unit Controls

- Dialysis Transmission Pathway Map
- Patient, Staff, and Station Risk Assessment Matrix
- Clean and Contaminated Zone Workflow Map
- Dialysis Infection Prevention Roles and Escalation Chart
- Unit Readiness and Supply Control Checklist

Day 2: Vascular Access and Aseptic Practice

- Hand Hygiene Opportunity Observation Tool
- Vascular Access Care and Aseptic Technique Checklist
- Catheter Connection and Disconnection Observation Form
- Exit-Site Care and Dressing Change Review
- Staff Competency and Coaching Record

Day 3: Station, Medication, and Equipment Safety

- Dialysis Station Turnover and Disinfection Checklist
- Medication Preparation Area Control Map
- Injection Safety Observation Tool
- Equipment and Shared-Supply Separation Review
- Water and Treatment System Interface Checklist

Day 4: Surveillance and Incident Response

- Dialysis Event Surveillance Definition Sheet
- Bloodstream Infection Rate and Process Dashboard
- Infection Signal Verification and Case Review Worksheet
- Outbreak Coordination and Contact Map
- Patient Communication and Engagement Plan

Day 5: Dialysis Infection Prevention Practice

- Suggested Exercise: Unit Risk and Zoning Review
- Suggested Exercise: Access Care and Hand Hygiene Observation
- Suggested Exercise: Station and Injection Control Audit
- Suggested Exercise: Surveillance and Response Decisions
- Capstone Exercise: Dialysis Unit Infection Prevention Control Pack



Practical Exercises

The course uses suggested activities with fictional hospital, outpatient dialysis, and healthcare facility scenarios.

- Suggested activity: map transmission pathways, unit zones, responsibilities, and escalation points.
- Suggested activity: observe access care, hand hygiene, station turnover, and injection safety using structured tools.
- Suggested activity: review surveillance signals and coordinate an outbreak response decision.
- Suggested activity: prioritize audit findings and assemble the improvement pack.

FAQs

Who suits advanced dialysis unit infection prevention training, and what does it assume?

Advanced dialysis unit infection prevention training suits operational, nursing, infection prevention, nephrology, and quality personnel. It assumes practical familiarity with dialysis or infection prevention work and excludes clinical licensure, treatment advice, certification, and regulator authorization.

How does dialysis unit infection prevention differ from general clinical infection control training?

Dialysis unit infection prevention focuses on repeated blood access, vascular access care, station turnover, medication preparation, shared equipment, event surveillance, and dialysis-specific observation tools, while general clinical infection control addresses broader healthcare settings.

How do vascular access care and hand hygiene support dialysis infection prevention?

Vascular access care and hand hygiene support dialysis infection prevention through defined opportunities, aseptic sequences, connection and disconnection observations, exit-site review, staff competency checks, and timely feedback on missed controls.

How are station disinfection and injection safety controlled in dialysis units?

Station disinfection and injection safety are controlled through clean-to-contaminated workflows, turnover checklists, separation of medication preparation from treatment areas, single-use handling rules, shared-supply controls, observation, and documented feedback.

How do surveillance and audit drive dialysis infection prevention improvement?

Surveillance and audit drive improvement by defining events, reviewing process measures, verifying signals, comparing practice against unit controls, prioritizing gaps, assigning actions, and tracking feedback through an improvement cycle.



Conclusion

Participants leave with a Dialysis Unit Infection Prevention Control Pack containing risk maps, observation tools, station controls, surveillance records, response arrangements, and improvement priorities. The pack connects daily practice with measurable feedback and escalation. It helps dialysis teams coordinate safer operational controls across access care, treatment stations, medication areas, and unit governance.