

IPSE consensus on Standards and Indicators

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23rd May 2008



National Recommendations and Indicators on HCAI and AMR

- **WP2 Survey**
- **Mapping**
- **Local tool**
- **Proposed practice**
 - Hospital indicator
 - National indicator



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National Recommendations and Indicators on HCAI and AMR

- Guidelines on HCAI in Healthcare settings in Europe: Recommended practices and indicators for monitoring and evaluating progress
- BUT the time necessary to properly validate guidelines
 - Field testing and dissemination
- ... development of indicators should focus on structural and process indicators at national level
- ... the choice of indicators should be based on a selection which is feasible and robust



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WP2 Survey

National Recommendations and Indicators on HCAI and AMR

- 29 of 33 countries (88%)

National Situation

	HCAI	AMR
National Programme	72%	62%
Laws on prevention and control	55%	31%
Reduction in governments health objectives	62%	59%




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WP2 Survey
National Recommendations and Indicators on HCAI and AMR

- **National HCAI programme**
 - 21 of 33 countries (72%)
- **Responsibilities of the IC Committee**

- Setting up objectives	94%
- Planning actions	89%
- Preparing guidelines	83%
- Surveillance and early warning	83%
- Evaluation of Programme	83%
- Monitoring indicators	78%
- Training	78%
- Annual report	67%
- Evaluation of Healthcare facility	50%




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WP2 Survey
National Recommendations and Indicators on HCAI and AMR

- **Recommendations included in the programme**

- Standard precautions	86%
- Transmission-based-precautions	71%
- Prevention of device infections Intravascular Cateter	67%
- Prevention of device infections Urinary Cateter	81%
- Prevention of device infections Respiratory Ventilation	67%
- Rational use of antimicrobials	76%
- Staff Occupational Health	67%
- Cleaning, disinfection, sterilisation	81%
- Engineering and architecture	43%



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WP2 Survey

National Recommendations and Indicators on HCAI and AMR

- **Indicators defined by programme**
 - HCAs rates 71%
 - AMRs rates 71%
 - Human resources devoted to HCAI and AMR 53%
 - Hand hygiene 29%
 - Standard precautions 24%
 - Analyses available at national, regional and provincial level 71%
 - Analyses available at hospital level 94%



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WP2 Survey

National Recommendations and Indicators on HCAI and AMR

- **Conclusions**
 - **Quality of questionnaires varied widely**
 - For some countries information on national, regional or local level was given
 - **There are many differences in the national HCAI programmes of European countries**
 - **A comparison between the systems is therefore very difficult.**
 - **To ensure comparable information about HCAI and AMR**
 - Performance indicators
 - Hospital level
 - National level
 - Checklist for hospital management



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Mapping

National Recommendations and Indicators on HCAI and AMR

- 72% HCAI National Programme



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Mapping

National Recommendations and Indicators on HCAI and AMR

- 62% AMR National Programme



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Mapping

National Recommendations and Indicators on HCAI and AMR

- 86% ICC in charge of the programme



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Mapping

National Recommendations and Indicators on HCAI and AMR

- 29% Hand Hygiene indicators defined by programmes



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Mapping

National Recommendations and Indicators on HCAI and AMR

- **Back to the questionnaires**

In [redacted] regulations on Infection Control are given in different acts of laws and regulations.

The care-giver (county, municipality or private) has the over-all responsibility for Infection Control in their services, as a part of the quality and patient safety. For the different fields of activities, the officer in charge has this responsibility. Every municipality must have a “medical nurse in charge”,

IC experts (nurses and doctors) are advisers to the care-giver, but do not have the formal responsibility for infection control programmes or their implementation.



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Mapping

National Recommendations and Indicators on HCAI and AMR

- **Survey results**

- Difficulties to put the results into map
- Send them again to the countries to get prudent data
- National Contact Point or Ministry of Health

- **Why needed?**

- **Performance Indicators**

- Needs to be agreed with MS
- Smarter use of small groups of indicators



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Local Tool

National Recommendations and Indicators on HCAI and AMR

- Checklist to assess local infection control measures
- Consensus
 - Completed by hospital management level in charge of implementing IC measures
 - Simple and not time consuming data collection and useful for any country
 - Exchange of results at all levels
 - Guidance for development
 - Detection of improvement potential
 - Progress visible over time
 - Available at IPSE or ECDC or WHO/EURO website (TBD)



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Local Tool

National Recommendations and Indicators on HCAI and AMR

Overall	yes
Structure	10
Resources	69
Surveillance	14
Hand Hygiene	8
Policies	9
Alert and Response	2
Education	5
Collaboration	3
	/120



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Structure	yes	
Do you have a multidisciplinary IC committee in your hospital?	<input type="radio"/>	
Does it meet at least twice per year?	<input type="radio"/>	
Is the hospital's management represented on it?	<input type="radio"/>	
Do you have a programme with defined IC objectives in your hospital?	<input type="radio"/>	
Are the objectives of the IC programme reviewed at least annually?	<input type="radio"/>	
Does the programme provide an annual progress report?	<input type="radio"/>	
Is this report received by the senior management of the hospital?	<input type="radio"/>	
Do you have an antibiotic control strategy in your hospital?	<input type="radio"/>	
Do you have an antibiotic prescribing document?	<input type="radio"/>	
Do you have a multidisciplinary drugs and therapeutics committee that meets at least annually?	<input type="radio"/>	/10

Resources	yes	
Do you have at least one fulltime equivalent trained IC nurse in your hospital?	<input type="radio"/>	
One per 1000 (1)	<input type="radio"/>	
One per 750 (2)	<input type="radio"/>	
One per 500 (3)	<input type="radio"/>	
One per 250 (4)	<input type="radio"/>	
One per <250 (5)	<input type="radio"/>	
Do you have at least one fulltime equivalent trained IC doctor per 1000 beds in your hospital?	<input type="radio"/>	
Do you have link-nurses working on wards who liaise with the IC team?	<input type="radio"/>	
<10% of wards (1)	<input type="radio"/>	
10-25% of wards (2)	<input type="radio"/>	
25-50% of wards (3)	<input type="radio"/>	
60-75% of wards (4)	<input type="radio"/>	
>75% of wards (5)	<input type="radio"/>	
Do you have single patient's rooms for isolation in your hospital?	<input type="radio"/>	
Do they have an attached bathroom?	<input type="radio"/>	
<10% of such rooms (1)	<input type="radio"/>	
10-25% of such rooms (2)	<input type="radio"/>	
25-50% of such rooms (3)	<input type="radio"/>	
60-75% of such rooms (4)	<input type="radio"/>	
>75% of such rooms (5)	<input type="radio"/>	
Do they have a dedicated ventilation system?	<input type="radio"/>	
<10% of such rooms (1)	<input type="radio"/>	
10-25% of such rooms (2)	<input type="radio"/>	
25-50% of such rooms (3)	<input type="radio"/>	
>75% of such rooms (4)	<input type="radio"/>	
60-75% of such rooms (5)	<input type="radio"/>	
Do you have access to microbial laboratory to support IC and prevention activities	<input type="radio"/>	
Do you have access to microbiological typing facilities	<input type="radio"/>	
Do you analyse at least annually the data of this testing?	<input type="radio"/>	/69

Surveillance	yes	
Do you have a hospital surveillance system for alert organisms?	<input type="radio"/>	
Do you have a hospital surveillance system for alert conditions?	<input type="radio"/>	
Do you screen patients at high risk for carriage of alert organisms?	<input type="radio"/>	
Do you have a surveillance programme in your hospital with annually reviewed objectives?	<input type="radio"/>	
Do you have at least one hospital surveillance system for HCAI?	<input type="radio"/>	
Does it produce incidence or prevalence rates?	<input type="radio"/>	
Does it have annually reviewed objectives?	<input type="radio"/>	
Have you implemented any post-discharge-surveillance for HCAI?	<input type="radio"/>	
Do you produce regular epidemiological reports from the surveillance data?	<input type="radio"/>	
Do you provide the IC committee with these reports?	<input type="radio"/>	
Do you provide the relevant clinical staff with these reports?	<input type="radio"/>	
Do you record at least annually the whole hospital antimicrobial usage data?	<input type="radio"/>	
Do you investigate high/low levels and changes of consumption?	<input type="radio"/>	
Do you inform the prescribers of the findings?	<input type="radio"/>	/14

Hand Hygiene	yes	
Do you have a programme for the promotion of hand hygiene?	<input type="radio"/>	
Does this include at least annual educational activities	<input type="radio"/>	
Are hand hygiene rubs available at every patient contact area?	<input type="radio"/>	
Do you monitor the amount of hand hygiene consumables (e.g. rubs, soap, towels) used?	<input type="radio"/>	
Do you have a policy when to use gloves?	<input type="radio"/>	
Do you recommend washing or disinfecting hands after usage of gloves?	<input type="radio"/>	
Do you audit the compliance of health care workers concerning hand hygiene?	<input type="radio"/>	
Are the audit data fed back to management and healthcare workers?	<input type="radio"/>	/8

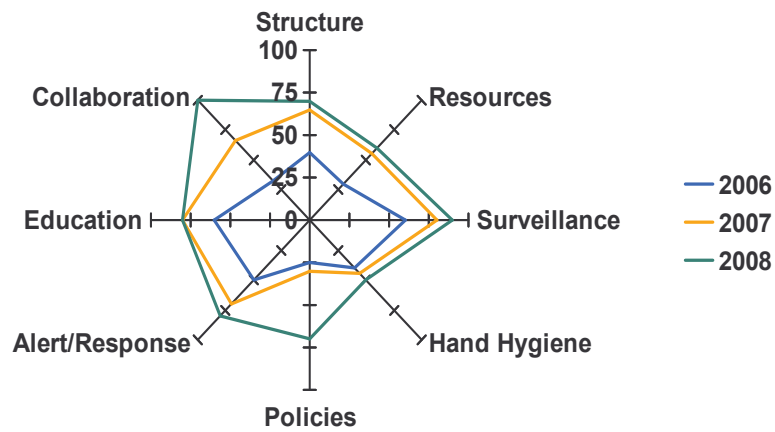
Policies	yes	
Do you have good practice policies in your hospital produced on evidence based guidelines?	<input type="radio"/>	
Are these policies written and agreed on by a multidisciplinary group incl. health care workers?	<input type="radio"/>	
Do you have policies on sharps injuries and blood contact?	<input type="radio"/>	
Do you have policies on urinary tract devices?	<input type="radio"/>	
Do you have policies on central venous catheters?	<input type="radio"/>	
Do you have policies on sterilisation and disinfection?	<input type="radio"/>	
Do you have policies on waste disposal?	<input type="radio"/>	
Do you have a regular at least annual audit infection control programme?	<input type="radio"/>	
Are the results fed back to management and staff and policies reviewed accordingly?	<input type="radio"/>	/9

Alert and Response	yes	
Do you have a suitable outbreak detection system?	<input type="radio"/>	
Do you investigate every signal produced by this system?	<input type="radio"/>	/2

Education	yes	
Do you provide educational sessions for nurses concerning IC practices?	<input type="radio"/>	
Is this training mandatory for nurses?	<input type="radio"/>	
Do you provide educational sessions for doctors concerning IC practices?	<input type="radio"/>	
Is this training mandatory for doctors?	<input type="radio"/>	
Do you have regularly regular and continuous staff education on antibiotic use and resistance?	<input type="radio"/>	/5

Collaboration	yes	
Do you have criteria to send isolates to a national reference laboratory, when it exists?	<input type="radio"/>	
Do you develop your IC activities in cooperation with other hospitals/institutions?	<input type="radio"/>	
Do you report outbreaks to public health authorities?	<input type="radio"/>	/3

Local PI Tool Progress: Spider's Web Chart



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Proposed practice

National Recommendations and Indicators on HCAI and AMR

1. Organisation of the control of HCAI and AMR
2. Prevention and control Policies
3. Surveillance policies
4. Education and training
5. Resources for the control of HCAI and AMR

138 Recommended Practices



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SPI Results from 29 Countries

Topic	Agree	Modify	Neutral	Disagree
Organisation	85%	9%	4%	1%
Control	79%	7%	2%	2%
Surveillance	79%	11%	1%	2%
Education	79%	14%	1%	3%
Resources	79%	15%	2%	5%
Overall Average	80%	11%	2%	3%

Three countries accounted for three quarters of the disagreements



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Results for Recommended Practices from 29 Countries

Topic	Agree	Modify	Neutral	Disagree
Organisation	80%	7%	5%	5%
Control	85%	4%	6%	4%
Surveillance	92%	4%	1%	2%
Education	79%	10%	4%	3%
Resources	84%	4%	6%	1%
Overall Average	84%	6%	4%	3%

Ten countries accounted for 95% of these disagreements



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Proposed practice

National Recommendations and Indicators on HCAI and AMR

- **Consensus**
 - 13 national and 13 international PIs: further harmonisation underway
 - Has to be reviewed regarding how best to score them
 - Some of these should be “core”;
 - Some revisited regularly
 - Some added and followed for shorter periods of time
- **The system would need to be piloted and “validated”**
- **Sharing information (European information)**
 - Wherever possible they should take information currently gathered by MS



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WHO/EURO future activities on HCAI and AMR

- **Standards & Indicators for public health surveillance and technical guidelines for the control of HCAI in Non European Union (EU) Countries in the European Region**
 - Based on IPSE experience
 - WHO CC (HPA)
- **National Survey on AMR in Non EU Countries**
- **Pilot testing new WHO IC guideline ARD (feasibility of implementation)**



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IPSE National Focal Points

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Thank you !



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