

## Meeting with HELICS Czech Representatives during ESCMID Conference

Those present: HELICS – Jacques Fabry, Carl Suetens, Ian Russell.  
Czech Republic – Vlastimil Jindrak (Working Group on NI), Vladimir Bencko (General University Hospital Prague), Bohumir Kriz (National Institute of Public Health), Prof. Chytra (Czech Society for Anaesthesiology and Intensive Care).  
Nina Sorkness (Norway)

Date : Sunday, 2nd May, 2004.

The situation of NI surveillance in the Czech Republic was discussed;

Compulsory reporting of hospital infections started during the 1950's. The Czech Republic is composed of districts and regions (14). Reporting of data is carried out on a continuous basis and every week data is entered at the district level and reported to the National institute of Public Health. Although these structures have been in place for a long time, it is clear that reporting of NI is much less than the actual level of NI which exists, as a result of the mandatory aspect of the system.

An initiative is now being started to create a new system with the contribution of the National Institute of Public Health and supported by government policy. The proposal is currently at the development stage. The NI surveillance will be part of a 'quality management in healthcare programme' which will include healthcare quality indicators.

### SSI Surveillance

Funds have been allocated this year to prepare a protocol. The main task for this year will be to prepare a HELICS compatible protocol within the existing register of nosocomial infection (surveillance system) under the responsibility of the ministry of health. After the creation of the protocol, the general intention will be to pilot the protocol in 5/10 hospitals.

The proposed HELICS hospital software was demonstrated, which is being considered for use in Czech hospitals.

There are no current plans for post discharge surveillance. The HELICS/CDC methodology will be used to develop SSI surveillance.

### ICU Surveillance

ICU surveillance is already functioning in 10 hospitals. For the moment, the data is not based on the HELICS protocol. It is hoped to develop a HELICS compatible protocol at level 2 this year, however the availability of funds is uncertain and this will determine how soon data collection will start.

For the Register of Nosocomial Infections, a web-based IT system is under development. The data is collected by the hospitals and sent to an independent centre (Institute for Experimental Medicine Data Management Centre). Hospitals have access only to their own data in this system. The status of the development is as follows;

- Bloodstream Infection [project is prepared]
- SSI [project for this year – prepare protocol – above]
- ICU [uncertain – above]

The ways in which HELICS could assist NI surveillance activities in the Czech Republic was discussed. Firstly, the use of the HELICS hospital system could be a possibility. Secondly, the role of the HELICS Database Management System at European and national level was discussed. This will include the possibility of national data analysis, for which a licence in STATA would be required at the national level.

For support at the hospital level, a manual for the HELICS hospital system will be provided, an import routine to input already existing data will be a part of the system and, of course, the HELICS protocols will be widely available.

The current progress of the HELICS project was discussed;

The preliminary analysis carried out at the Brussels meeting in December following the retrospective data collection to the end of 2003 will be finalised soon and the Statistical Report will be issued.

Beyond the end of the current funding period (after December 2004), there will be three possible strands of activities. Firstly, it is hoped that the HELICS surveillance activity will continue, albeit perhaps in a reduced scale, with a view in due course to handing over management of the HELICS database depending on the requirements of the new ECDC. In addition, two new proposals for funding have been made to the EU. The first is ‘NosoVal’, submitted as a research project under the Sixth Framework Programme, which will concern the validity of data collected under the national NI surveillance programmes. The second is ‘IPSE’ (Improving Patient Safety in Europe), submitted under the DG SANCO Call for Proposals 2004, which is a broader programme than HELICS which will be oriented towards the prevention and control of infection. The possibility for the Czech Republic to participate in these future activities will exist should the requested funding become available.

#### Discipline of IC Nurse

The discipline of IC Nurse is not established or recognised in the Czech Republic and for that reason Nina Sorkness was attending the meeting to give information concerning the development of similar activities in the Baltic countries. It was also pointed out that part of the IPSE proposal also covered this aspect which might be of use in the future if the funding for this proposal was granted by DG SANCO.