

WELSH HEALTH CIRCULAR

Issue Date: 31 March 2017



Llywodraeth Cymru
Welsh Government

STATUS: ACTION & INFORMATION

CATEGORY: QUALITY & SAFETY

Title: THE 2017 European Centre for Disease Control (ECDC) NATIONAL HEALTHCARE ASSOCIATED INFECTION, DEVICE USAGE AND ANTIMICROBIAL USAGE POINT PREVALENCE SURVEY

Date of expiry/review: 31 March 2018

For Action by:

Chairs
Chief Executives
Board Secretaries
Secretary to the Board Secretary Group
Medical Directors
Nurse Directors
Directors of Public Health
Infection Control Doctors & Nurses
Hospital Chief Pharmacists
PHW HCAI & AMR Programme Leads
CCDCs

Welsh Government for information

DG/Chief Executive NHS Wales
Deputy Chief Exec NHS Wales
Professional & Policy Leads
DHSS Operations Team
DHSS Comms Team
DHSS Digital Team

For information

Welsh Ambulance Trust
WSSP for distribution to GP practices, community
pharmacies & General Dental Practices
NHS Direct Wales

Action required by:

See paragraph 3

Senders: Dr Frank Atherton, Chief Medical Officer/Medical Director, Professor Jean White, Chief Nursing Officer/Nurse Director, Andrew Evans, Chief Pharmaceutical Adviser

HSSG Welsh Government Contact:

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Enclosure(s): None

2017 WALES HEALTHCARE ASSOCIATED INFECTIONS (HCAIs), MEDICAL DEVICES USAGE AND ANTIMICROBIAL USAGE POINT PREVALENCE SURVEY

1. In 2011, the European Centre for Disease Control (ECDC) led and co-ordinated a Europe-wide point prevalence survey (PPS) of healthcare associated infections (HCAIs), medical device usage and antimicrobial usage in which NHS Wales participated¹. It is recommended that a PPS should be conducted at least every five years at a national level. ECDC announced the intention to repeat the survey between September 2016 and November 2017. The objectives will again focus on estimating the total burden of HCAIs, medical device usage and antimicrobial usage in acute care hospitals. The data gained will provide a better understanding at local, country and European levels to facilitate sharing of best practice.

2. The PPS Steering Group established by Public Health Wales and comprising representative health professionals from each health board/trust, agreed that the Wales PPS will be undertaken during June 2017 and include acute and community hospitals.

3. The ECDC requires data to be collected from acute sector hospitals and only this data will be entered into the European dataset. However, the arrangements enable countries to undertake surveys in a wider range of hospitals at local and national levels. NHS Wales will also collect data from community hospitals as previously carried out in the 2011 survey.

4. The survey will be undertaken using a web form specifically developed for this ECDC PPS and for future local and European surveys. The form can be accessed via the new Infection Prevention & Control case management system currently being rolled out across Wales (ICNet). Access will be available from mobile devices or a desktop computer. It is anticipated that some information will be pre-populated for the survey directly from ICNet. It is recommended that IP&C staff and ward pharmacists work in parallel to complete data collection. In addition Wales has committed to submit validation data to ECDC during the PPS (minimum of 250 patients across Wales). This will be collected by a validation team to be arranged via the PPS steering group.

5. In conjunction with the PPS Steering Group, the Public Health Wales Welsh Healthcare Associated Infection Programme (WHAIP) and Antimicrobial Resistance Programme (ARP) team will provide training and support for the survey using ECDC prepared protocols and materials. The PPS programme of work will be led by:

Dr. Wendy Harrison (HCAI programme) - wendy.harrison2@wales.nhs.uk

Dr. Maggie Heginbothom (ARP) - Margaret.heginbothom@wales.nhs.uk

who will provide further information via the PPS steering group.

6. The PPS will also be to assist hospitals in targeting reduction programmes for surgical site, respiratory, and device related infections (urinary catheters, central

¹ [2011 Wales PPS Report](#)

vascular catheters and peripheral vascular cannulae). It will also aid the continuing drive to reduce *C.difficile* disease, Gram negative bacteraemia (as part of the reduction expectations to be announced) and to improve antimicrobial prescribing. In addition to hospital acquired infections there will be an opportunity within this survey to determine the prevalence of community acquired infections, particularly relating to UTI, blood stream, gastrointestinal (including *C. difficile*) and pneumonia.

7. The Welsh Government has been able to support the provision of a small number of mobile devices per organisation to infection control staff in readiness for and as part of the programme to implement ICNet across Wales. The funding has been issued from the Efficiency through Technology Fund, to those organisations that have made a request, as an uplift to their revenue allocation.

8. It is very important that we have a full understanding of infections and antimicrobial usage and medical devices usage across Wales. We therefore expect all hospitals to participate in the 2017 PPS and your assistance in ensuring this will be appreciated. As data will be collected using the new infection prevention & control case management system currently being rolled out across Wales (ICNet), it is essential that IT resource and solutions are in place and made readily available to facilitate data capture. In addition, availability of IP&C and ward pharmacy staff should be considered in advance of the survey.