



2019 surveillance of Healthcare-associated infections: prevention and control (NICE quality improvement guide PH36)

Surveillance report

Published: 13 November 2019

www.nice.org.uk

Contents

Surveillance decision	3
Reasons for the decision	3
Overview of 2019 surveillance methods	5
Intelligence gathered during surveillance	5
Equalities	10
Overall decision	10

Surveillance decision

We will not update the quality improvement guide on [healthcare-associated infections: prevention and control](#) (PH36).

Reasons for the decision

PH36 is a quality improvement guide produced by NICE, in partnership with the Health Protection Agency (HPA). The guide includes quality improvement statements (QIS) on prevention and control of healthcare-associated infections (HCAI) aiming to improve the quality of care and practice over and above current standards as set out in the Department of Health's the Health and Social Care Act 2008.

Since PH36 was developed, Public Health England and the Department of Health and Social Care have published more recent policy documents covering the prevention and control of HCAI. Additionally, the Health and Social Care Act 2008 covers a code of practice for infection prevention and control and NHS Improvement has produced more recent EPIC 3 guidelines for preventing HCAI (2017).

In light of the additional policy and guidance in this area, we investigated whether the QIS within PH36 have been superseded by alternative, existing documents. The aim of the surveillance review was to determine whether the content within PH36 had been sufficiently covered elsewhere and therefore could be stood down. Topic experts completed a questionnaire with a focus as to whether or not quality improvement guide PH36 should be stood down. Topic experts felt that the guide should be retained as it was a concise source of information for HCAI. A mapping exercise (see [appendix A: summary of evidence from surveillance](#)) confirmed this, highlighting that PH36 had some unique content compared with other guidance, policy and legislation.

Stakeholder feedback suggested that PH36 should include a detailed definition of what effective hand hygiene auditing is. However, we didn't identify any evidence through this surveillance review to indicate what would be the most effective method of hand hygiene auditing and other policy or legislative documents include detail on hand hygiene auditing, therefore we do not feel an update of PH36 in this area is warranted.

Overall, we have decided not to update PH36 as no evidence or intelligence was identified

through the surveillance review to indicate the QIS are out of date. There are a number of other relevant products covering the prevention and control of HCAI. A mapping exercise conducted as part of the surveillance review indicated that PH36 had some unique content compared with other available guidance, policy and legislation. Therefore, we feel there is value to the system in retaining this quality improvement guide.

For further details and a summary of the surveillance mapping exercise, see [appendix A](#).

Overview of 2019 surveillance methods

NICE's surveillance team checked whether the QIS in [healthcare-associated infections: prevention and control](#) (NICE quality improvement guide PH36) remain up to date, with a focus as to whether the quality improvement guide should be retained or withdrawn.

The surveillance process consisted of:

- Feedback from topic experts via a questionnaire.
- Examining related NICE guidance and quality standards.
- A mapping exercise to identify relevant guidance, policy and legislation on the prevention and control of HCAI.
- Consulting on the proposal with stakeholders.
- Considering comments received during consultation and making any necessary changes to the proposal.

For further details about the process and the possible update decisions that are available, see [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual.

Intelligence gathered during surveillance

Views of topic experts

We considered the views of topic experts who were recruited to the NICE Centre for Guidelines Expert Advisers Panel to represent their specialty. For this surveillance review, topic experts completed a questionnaire about developments in evidence, policy and services related to the quality improvement guide.

We sent questionnaires to 30 topic experts and received 11 responses from the following professions: senior clinical research fellow, consultant medical director, infection control lecturer, consultant medical microbiologist, consultant epidemiologist and consultant in communicable disease control.

The aim of the questionnaire was to seek advice on whether PH36 should be retained or not. The majority of topic experts felt it was important to retain this guide, adding that it was a valuable source of information in 1 location rather than having to seek out individual guidance and policy documents for different areas of HCAI. Based on the feedback from topic experts, we undertook a mapping exercise to see if there would be any gaps in guidance if PH36 was to be stood down. The mapping exercise found that between 3 and 8 documents were needed to cover each quality improvement statement within PH36, with gaps identified in the majority of these. As such, the mapping exercise supports the views of topic experts, that PH36 provides a good overall source of guidance in this area. Several topic experts highlighted that some terminology is out of date, such as referring to organisations that are no longer in existence (for example, the Health Protection Agency). This will be addressed through editorial amendments.

Topic experts also highlighted current issues in HCAI such as the emergence of multi-drug-resistant Gram-negative bacteria. However, control of individual infections and microorganisms such as carbapenemase-producing Enterobacteriaceae (CPE) are outside the scope of this quality improvement guide. Other areas of concern included:

- Hand hygiene audits
 - One topic expert felt that compliance with hand hygiene audits could be added to QIS 2 as an evidence of achievement. Audit of hand hygiene practice is currently included in the 'practical examples' section of QIS 2. Hand hygiene audits are a continuous improvement cycle, with the aim of improving knowledge in this area. As such, QIS 2 provides sufficient advice on learning culture and hand hygiene.
- HCAI research
 - Topic experts felt that QIS 11 focused on new technologies rather than research as a whole, and that more emphasis on infection prevention and control (IPC) teams being involved in research could be added. This appears to be largely covered by evidence of achievement (EoA) statement 4 which includes examples of research funding and evidence of local arrangements to help individuals conduct relevant research.

- Water systems
 - One topic expert suggested expanding the guidance on water systems in QIS 10 to add further information on management and also aspergillus control due building works. As this is organism specific it is outside the scope of this quality improvement guide.
- Use of hydrogen peroxide vapour and ultraviolet decontamination systems
 - This is related to specific infections/organisms such as CPE, which is covered in detail in the Public Health England (PHE) CPE toolkit, and is therefore outside the scope of this quality improvement guide.

Implementation of the guideline

Mixed feedback was received from topic experts on implementation of the quality improvement guide. Some experts felt that NHS Improvement supported and encouraged the use of this guide whereas some topic experts stated that other products were used in their organisations such as EPIC 3 and the Health and Social Care Act 2008.

Mapping exercise

We conducted a mapping exercise to identify guidance, policy and legislation from other sources and compared these to the QIS in PH36 to determine if the content has been superseded by alternative, existing documents. Although PH36 published in 2011, the mapping exercise identified all UK guidance, policy and legislation on HCAI to provide a broad picture of all relevant published content in this area. Sources used:

- Guidance:
 - [HCAI: prevention and control in primary and community care](#) (2012, reviewed 2017) NICE guideline CG139
 - [Surgical site infections: prevention and treatment](#) (2019) NICE guideline 125
 - [Antimicrobial stewardship: systems and processes for effective antimicrobial medicine use](#) (2015, reviewed 2018) NICE guideline 15
 - [Surgical site infection](#) (2013, updated 2019) NICE quality standard 49
 - [EPIC 3 guidance](#) (2014), Department of Health (DH) commissioned, produced by University of West London
 - [Health matters: preventing antimicrobial resistance document](#) (2017), PHE guidance
 - [Infection control in building projects guidance – HFN 30](#) (2002), government guidance
- Legislation:
 - [The Health and Social Care Act \(2008\) – IPC code of practice](#) – DH
 - [The Health Protection \(Notification\) Regulations](#) (2010), government legislation
 - [Health protection unit operation guidance](#) (2012), health protection notification regulations 2010
- Policy:
 - [Reducing healthcare-associated infections: from trust board to ward](#) (2008), DH best practice summary
 - [Clean, safe care](#) (2007), DH
 - [The national specifications for cleanliness in the NHS](#) (2007), NHS
 - [Patient-led assessments of the care environment \(PLACE assessments\)](#) (reviewed 2019), NHS digital
 - [Mandatory healthcare associated infection \(HCAI\) surveillance: data quality statement](#) (updated 2018), PHE

The search initially began by looking for guidelines in this area, from which, 2 were identified: NICE guideline CG139 [HCAI: prevention and control in primary and community care](#) and the EPIC 3 guidance. However, a number of the statements could not be fully met by these products alone. A Google search for key words found 10 further policy documents and legislation developed by PHE, UK government and Department of Health and Social Care covering various aspects of HCAI from broad input to specific guidance on IPC. One example is the Health and Social Care Act 2008, which provided detailed information on HCAI prevention. Key aspects from these documents were mapped to the EoA statements in PH36, however a few areas remained where alternative guidance could not be found. The process of mapping also supported topic expert comments which stated that PH36 was particularly useful due in having all the guidance in 1 place, as finding even small sections of information from alternative sources was a lengthy process involving several documents.

Views of stakeholders

Stakeholders are consulted on all surveillance reviews except if the whole guideline will be updated and replaced. Because this surveillance proposal was to not update the quality improvement guide, we consulted with stakeholders.

Overall, 2 stakeholders commented, 1 agreed with the proposal to not update PH36 and 1 disagreed. Stakeholders were a professional society and a manufacturer.

The stakeholder that disagreed with the no update proposal suggested that PH36 should include a detailed definition of what effective hand hygiene auditing is. The evidence highlighted by the stakeholder was considered in detail however, the results of the studies did not indicate what would be the most effective method of hand hygiene auditing. Results of our mapping exercise highlighted that other policy or legislative documents include detail on hand hygiene auditing, therefore we do not feel an update of PH36 in this area is warranted.

See [appendix B](#) for full details of stakeholders' comments and our responses.

See [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual for more details on our consultation processes.

Equalities

No equalities issues were identified during the surveillance process.

Overall decision

After considering all evidence and other intelligence and the impact on the quality improvement guide, we decided that no update is necessary.

ISBN: 978-1-4731-3593-2