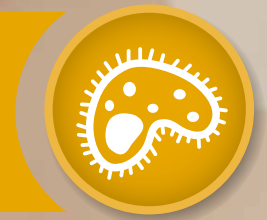


Preventing and Controlling Healthcare Associated Infections

Standard 3



FACTSHEET



Clinical leaders and senior managers of a health service organisation implement systems to prevent and manage healthcare associated infection and communicate these to the workforce to achieve appropriate outcomes. Clinicians and other members of the workforce use the healthcare associated infection prevention and control systems.

Healthcare associated infections are the most common complication affecting patients in hospitals. Each year, around 200,000 healthcare associated infections are contracted by patients in Australia.¹

At least half of healthcare associated infections are preventable. Successful infection control to minimise the risk of transmission requires a range of strategies across all levels of the healthcare system and a collaborative approach for successful implementation.

The aim of this Standard is to prevent patients acquiring preventable healthcare associated infections and to effectively manage infections when they occur using evidence-based strategies.

In brief, this Standard requires that:

- Effective governance and management systems for healthcare associated infections are implemented and maintained.
- Strategies for the prevention and control of healthcare associated infections are developed and implemented.
- Patients presenting with, or acquiring an infection or colonisation during their care are identified promptly and receive the necessary management and treatment.
- Safe and appropriate antimicrobial prescribing is a strategic goal of the clinical governance system.

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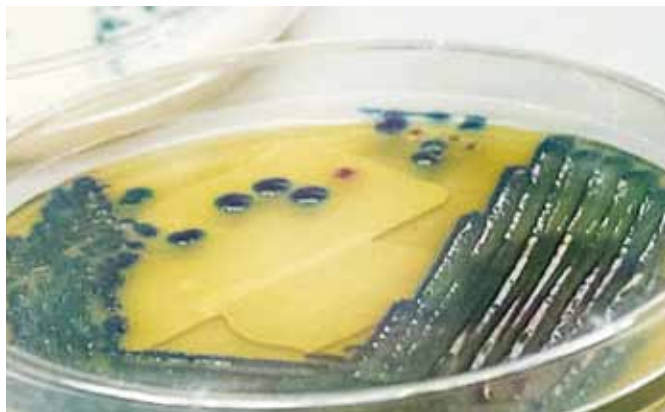
- Healthcare facilities and the associated environment are clean and hygienic. Reprocessing of equipment and instrumentation meets current best practice guidelines.
- Information on healthcare associated infection is provided to patients, carers, consumers and service providers.

Facts and Figures

It is estimated the excess length of stay due to a surgical site infection is between 3.5 and 23 hospital bed days, depending on the type of infection.

The total national number of bed days due to surgical site infections for a one year period was estimated to be 206,527 bed days.²

If there was optimal use of antimicrobials and containment of antimicrobial resistance, \$300 million of the Australian national healthcare budget could be redirected to more effective use every year.³



Resources and Tools

The Commission has the following tools and resources to assist with the implementation of this Standard:

- Antimicrobial Stewardship in Australian Hospitals
- Reducing harm to patients from healthcare associated infection: the role of surveillance
- Online Interactive Education Modules for Infection Prevention and Control
- Australian Guidelines for the Prevention and Control of Infection in Healthcare
- OSSIE toolkit for the implementation of the Australian Guidelines for the Prevention and Control of Infection in Health Care
- Guidebook for the Primary Care settings: A companion to the OSSIE toolkit for the implementation of the Australian Guidelines for the Prevention and Control of Infection in Health Care
- Clinical Educators Guide for the Prevention and Control of Infections in Health Care
- Consumer fact sheets to support the Guidelines for the Prevention and Control of Infection in Healthcare (Methicillin resistant *Staphylococcus aureus*, Vancomycin Resistant Enterococci and *Clostridium difficile*)
- World Health Organisation Poster – Your 5 moments for Hand Hygiene.

Further Information

A full copy of the Preventing and Controlling Healthcare Associated Infection Standard is contained in the *National Safety and Quality Health Service Standards*. It includes the criteria, items and actions required for health services to meet this Standard and is available on the Commission's website at www.safetyandquality.gov.au.

References

1. National Health and Medical Research Council. Australian Guidelines for the Prevention and Control of Infection in Healthcare. Canberra: NHMRC, 2010:260.
2. Graves N, Halton K, Robertus L. Costs of Health Care Associated Infection. In: Cruickshank M, Ferguson J, editors. *Reducing Harm to Patients from Health Care Associated Infection: The Role of Surveillance*. Sydney: Australian Commission on Safety and Quality in Health Care, 2008:307–335.
3. Australian Commission on Safety and Quality in Health Care. *Windows into safety and quality in health care 2009*. Sydney: Australian Commission on Safety and Quality in Health Care, 2009.

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