German Society of Hospital Hygiene (DGKH) European Network to promote infection prevention for patient safety (EUNETIPS)





International Symposium

DIFFERENCES AND SIMILARITIES IN INFECTION PREVENTION IN EUROPEAN COUNTRIES



Berlin Friday, 26 June 2015

Improving Infection **Control and Hospital** Hygiene in Europe: **Professional** Networks and European Programs

Silvio Brusaferro



Topics

issues influencing IC/HH in Europe

IC/HH prevention and control is in progress...

Possible areas for learning and improvement

Topics

Issues influencing IC/HH in Europe

Patient safety and HAI prevention and control is in progress...

Possible areas for learning and improvement

Issues influencing IC/HH in Europe - 1

- Demography and healthcare evolution
 - Increasing number of people > 65 (in some regions they are close to 25% of the population)
 - Increasing number of people affected by multi morbidity (i.e. frail elderly)
 - Increasing number of settings for healthcare
- Equity in health among and within Countries is an issue;
 - i.e. life expectancy at birth, access to healthcare services
- "Crisis" affects differently European Countries with different effects on health,, health services and patinet safety
 - i.e. Greece example

Issues influencing IC(HH in Europe- 2

- Different policies and rules in running the healthcare systems
 - Centralised / decentralised
 - Financing and reimbursement systems
 - Quality and safety standards (mostly defined at Country/Regional level)
 - Relevant role of
 - Primary care
 - Social services integrated with healthcare services

Issues influencing in Europe - 3

- Different histories / traditions in Infection Control and Hospital Hygiene (IC/HH) among countries
 - The case of "IC/HH"
- HAI prevention and control poorly coordinated with patient safety
- Many good practices at Country/Regional level in HAI prevention and control
 - Non homogeneously distributed
 - Few cases exported outside a single Country

Issues influencing IC/HH in Europe

- Differences in education and training systems
 - The case of nursing schools
 - Differences in training an recognition of Infection
 Control professionals
- Different languages
 - Many citizens have a limited knowledge of foreign languages
 - This is true also for Healthcare Professionals

Topics

Issues influencing IC/HH in Europe

 Patient safety and HAI prevention and control is in progress...

Possible areas for learning and improvement

8. Adopt and implement a strategy at the appropriate level for the prevention and control of healthcare associated infections, pursuing the following objectives:

RECOMMENDATIONS

COUNCIL

COUNCIL RECOMMENDATION

of 9 June 2009

on patient safety, including the prevention and control of healthcare associated infections (2009/C 151/01)

- a) implement prevention and control measures at national or regional level to support the containment of healthcare associated infections and in particular;
- b) enhance infection prevention and control at the level of the healthcare institutions in particular by encouraging healthcare institutions to have in place;
- c) establish or strengthen active surveillance systems;
- d) foster education and training of healthcare workers;
- e) improve the information to the patients by healthcare institutions;
- f) support research in fields such as epidemiology, the applications of nanotechnologies and nanomaterials, new preventive and therapeutic technologies and interventions and on the cost-effectiveness of infection prevention and control.

HAI in European Union

The point prevalence report²⁹ and the Commission's first implementation indicate that Member States should focus their efforts on ensure surveillance of HAI in surgical site infections, intensive care units a and other long-term care facilities.

Further measures by Member States are needed to improve ascertainment of HAI, through the development of national diagnostic guidelines, continued training of healthcare workers in applying case definitions of HAI and the reinforcement of laboratory and other diagnostic capacity in healthcare institutions.

More specifically, the Europe-wide point prevalence survey – highlighted the need to ensure:

- adequate numbers of specialised infection control staff in hospitals and other healthcare institutions
- sufficient isolation capacity for patients infected with clinically relevant microorganisms in acute care hospitals
- standardised surveillance of alcohol hand rub consumption.



Official Journal

C 438

of the European Union



English edition

Information and Notices

Volume 57

6 December 2014

6.12.2014

EN

Official Journal of the European Union

C 438/7

Council conclusions on patient safety and quality of care, including the prevention and control of healthcare-associated infections and antimicrobial resistance

(2014/C 438/05)

28. INVITES THE MEMBER STATES TO:

- (d) Promote the education and training of healthcare staff on patient safety and healthcare-associated infections, taking into account the relevant work of the ECDC, including the ECDC's technical document 'Core competencies on infection control and hospital hygiene professionals in the European Union' (1), as well as relevant WHO recommendations, with a view to promoting the availability of appropriately trained staff, including specialised infection control staff, in healthcare settings;
- (e) Encourage health professional organisations to build an inter-professional patient safety culture which allows integrated and high-quality processes of care;

Council conclusions on patient safety and quality of care, including the prevention and control of healthcare-associated infections and antimicrobial resistance

(2014/C 438/05)

(l) Develop professional guidelines on the prudent use of antibiotics, including the monitoring of prescriptions;

(m) Continue to devote special attention to antimicrobial resistance as stated in the Council Conclusions of 22 June 2012, as well as monitor the consumption of antimicrobial agents and implement the surveillance of antimicrobial resistance, including participation in EU surveillance networks on these issues as coordinated by the European Centre for Disease Prevention and Control and the European Medicines Agency;



Brussels, 11.3.2015 SWD(2015) 59 final

COMMISSION STAFF WORKING DOCUMENT

Progress report on the Action plan against the rising threats from Antimicrobial Resistance

A. APPROPIATE USE OF ANTIMICROBIALS	5
Action 1: Strengthen the promotion of the appropriate use of antimicrobials in human medicine	5
B. PREVENT MICROBIAL INFECTIONS AND THEIR SPREAD	9
Action 4: Strengthen infection prevention and control in healthcare settings	9
E. MONITORING AND SURVEILLANCE	16
Action 9: Strengthen surveillance systems on AMR and antimicrobial consumpti	

P8_TA-PROV(2015)0197

Safer healthcare in Europe

European Parliament resolution of 19 May 2015 on safer healthcare in Europe: improving patient safety and fighting antimicrobial resistance (2014/2207(INI))

- Welcomes the improvement of the HAI surveillance system in the EU and the other recent measures put in place by certain Member States to improve general patient safety and reduce the incidence of HAIs, and more particularly the progress made by Member States in developing patient safety strategies and programmes, including patient safety in health legislation, and in developing reporting and learning systems;
- Notes, however, that the second implementation report still shows uneven progress among Member States on patient safety, and regrets the fact that some Member States have obviously slowed down implementation of the Council recommendations among others, possibly as a consequence of financial constraints resulting from the economic crisis;

European Parliament



DIRECTIVE 2011/24/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

of 9 March 2011

on the application of patients' rights in cross-horder healthcare

CHAPTER I

GENERAL PROVISIONS

Article 1

Subject matter and scope

 This Directive provides rules for facilitating the access to safe and high-quality cross-border healthcare and promotes cooperation on healthcare between Member States, in full respect of national competencies in organising and delivering healthcare. This Directive also aims at clarifying its relationship with the existing framework on the coordination of social security systems, Regulation (EC) No 883/2004, with a view to application of patients' rights.



European Centre for Disease Prevention and Control



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Publications

Data & Tools

Activities

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A por 80

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Healthcare-associated infections

News

Publications

Events

Eurosurveillance articles

HAI-Net Annual Reports

Point prevalence survey

PPS interactive database

Directory: Guidance on prevention and control

MRSA: Guidance on infection prevention and control

CDI: Guidance on infection prevention and control

CRE: Guidance on infection prevention and control

Guidance on organisation of

Healthcare-associated infections

Approximately 4 100 000 patients are estimated to acquire a healthcare-associated infection in the EU each year. The number of deaths occurring as a direct consequence of these infections is estimated to be at least 37 000 and these infections are thought to contribute to an additional 110 000 deaths each year.

The most frequent infections are urinary tract infections, followed by respiratory tract infections, infections after surgery, bloodstream infections, and others (including diarrhoea due

to Clostridium difficile). Meticillin-resistant Staphylococcus aureus (MRSA) is isolated in approximately 5% of all healthcare-associated infections.

Approximately 20–30% of healthcare-associated infections are considered to be preventable by intensive hygiene and control programmes.

IN FOCUS

Supporting the WHO "SAVE LIVES: Clean Your Hands" campaign, 5 May 2015



To support the WHO "SAVE LIVES: Clean your Hands" campaign, ECDC launches two directories with online resources: Guidance on hand hygiene in healthcare and Guidance on healthcare-associated and ventilator-associated pneumonia. HAI Net - the ECDC network on HAI surveillance releases new tools

INTERACTIVE DATABASES



Antimicrobial resistance interactive database (EARS-Net)



Antimicrobial consumption interactive database (ESAC-Net)

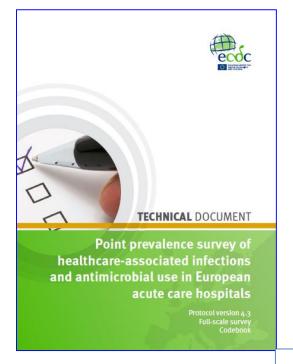


Point prevalence survey interactive database (HAI-Net PPS)

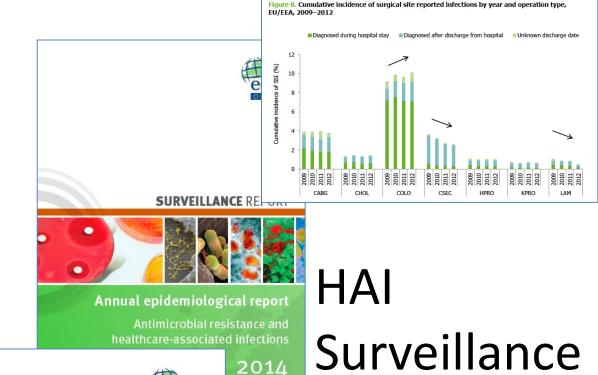
GUIDANCE



Online recourses:



European HAI definition



IC/HH training

TECHNICAL DOCUMENT

Core competencies for infection control and hospital hygiene professionals in the European Union

RESEARCH ARTICLES

Euro Surveill. 2014;19(49):pii=20985.

Training infection control and hospital hygiene professionals in Europe, 2010: agreed core competencies among 33 European countries

S Brusaferro¹, B Cookson², S Kalenic³, T Cooper⁴, J Fabry⁵, R Gallagher⁶, P Hartemann⁷, K Mannerquist⁶, W Popp⁹, G Privitera¹⁰, C Ruef¹¹, P Viale¹², F Coiz¹, E Fabbro (elisa.fabbro@uniud.it)¹, C Suetens¹³, C Varela Santos¹⁴, National representatives of the Training in Infection Control in Europe (TRICE) project¹⁵

Area	Domain	number or competencies
Programme management	Elaborating and advocating an infection control programme	7
Programme management	Management of an infection control programme, workplan and projects	
Quality improvement	Contributing to quality management	4
	Contributing to risk management	2
	Performing audits of professional practices and evaluating performance	9
	Infection control training of employees	5
	Contributing to research	2
Surveillance and Investigation of healthcare-associated infections	Designing a surveillance system	8
	Managing (implementation, follow-up, evaluation) a surveillance system	9
	Identifying, investigating and managing outbreaks	7
	Elaborating infection control interventions	14
Infection control activities	Implementing infection control procedures in healthcare	5
	Contributing to reducing antimicrobial resistance	8
	Advising appropriate laboratory testing and use of laboratory data	3
	Decontamination and sterilisation of medical devices	4
	Controlling environmental sources of infections	2



Journal of Hospital Infection



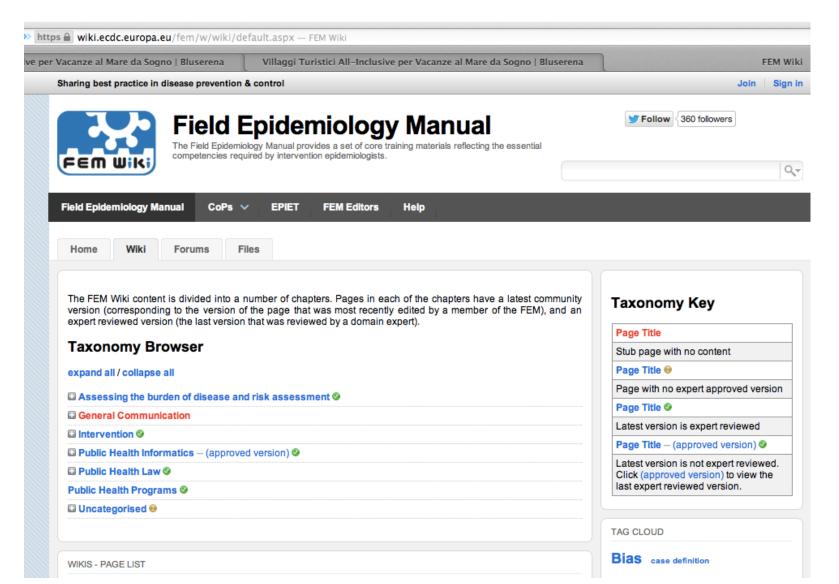
journal homepage: www.elsevierhealth.com/journals/jhin

Harmonizing and supporting infection control training in Europe

- S. Brusaferro^{a,*}, L. Arnoldo^a, G. Cattani^a, E. Fabbro^a, B. Cookson^b, R. Gallagher^c, P. Hartemann^d, J. Holt^e, S. Kalenic^f, W. Popp^g,
- G. Privitera^h, V. Prikazskyⁱ, C. Velascoⁱ, C. Suetensⁱ, C. Varela Santosⁱ

training strategy for infection control in the European Union' (TRICE-IS)] that aimed to: define an agreed methodology and standards for the evaluation of IC/HH courses and training programmes; develop a flexible IC/HH taxonomy; and implement an easily accessible web tool in 'Wiki' format for IC/HH professionals. This paper reviews several

ECDC Infection Control / Hospital Hygiene WIKI (in progress)





THE EU SINGLE MARKET

European Commission > The EU Single Market > Free movement of professionals



Free movement of professionals

News

Directive 2005/36/EC policy developments

Directive 2005/36/EC in practice

Database of regulated professions...

Other directives

Infringements and Case law

External studies

Links

Need help?

Free movement of professionals

Do you want to practise your profession or provide services in another EU country? Do you need to declare your professional qualifications or have them recognised?

On this site, you will find the EU law governing recognition of professional qualifications, including the directives regulating certain professions.



The site gives detailed explanations of EU legislation covering:

- temporary mobility (temporary provision of services)
- automatic recognition of professional qualifications
- recognition of professional experience in certain activities
- the "general system"

Contact points

There are contact points in every EU country that can give you information on the recognition of your professional qualifications (national law, procedures to be followed) and guide you through the administrative formalities you need to complete. You can also use the onestop shop provided for by the "Services directive".

Cooperation

National authorities may need to cooperate with each other when considering your application for recognition. They may also use the IMI system to facilitate cooperation.











Ouick links

- · Database of regulated professions in the EU
- Contact points information and advice on laws and procedures
- User Guide explanation of professional qualifications systems
- SOLVIT network free solutions within 10 weeks
- Your Europe practical information on your rights as a migrant worker
- Single Market Act 12 proposals to make the single market work better for growth, competitiveness and social progress.

"The systematic maintenance, improvement and continuous acquisition and/or reinforcement of the lifelong knowledge, skills and competences of health professionals. It is pivotal to meeting patient, health service delivery and individual professional learning needs. The term acknowledges not only the wide ranging competences needed to practise high quality care delivery but also the multi-disciplinary context of patient care."



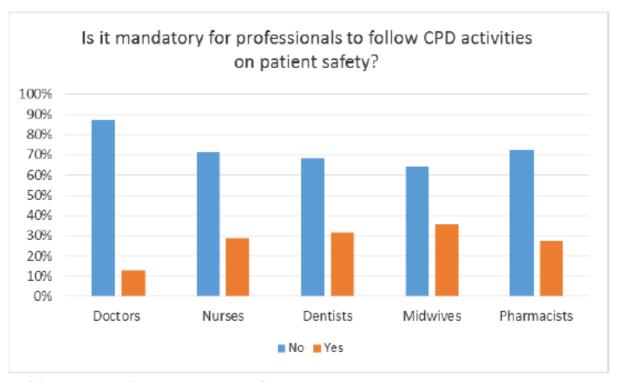
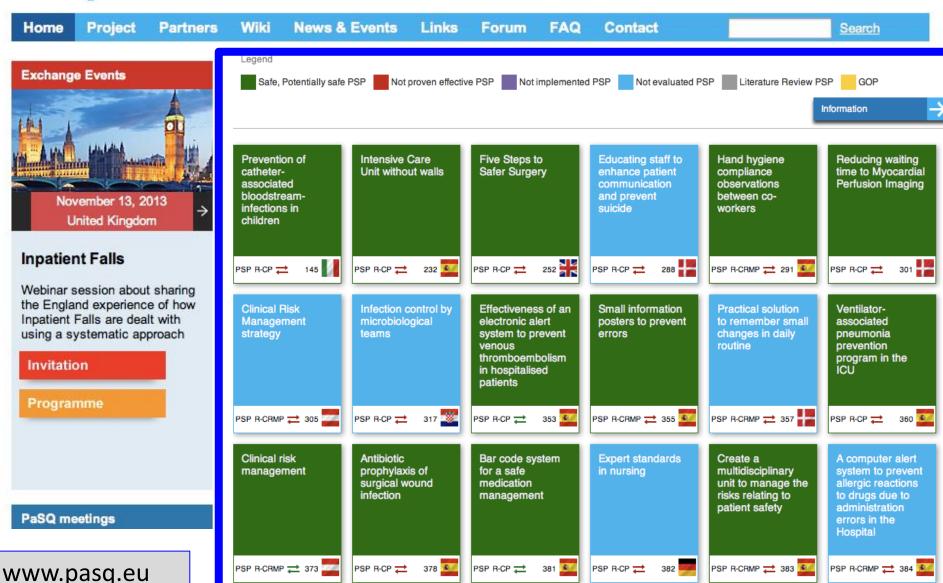


Table 36: Mandatory Patient Safety





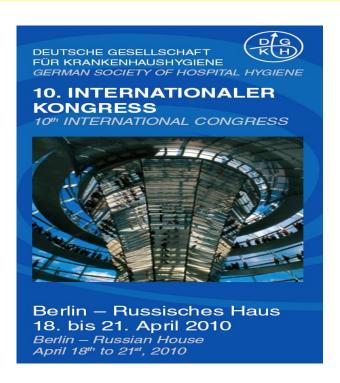


EUNETIPS

The beginning

European network to promote infection prevention for patient safety

Berlin November 2008





EUNETIPS European network to promote infection prevention for patient safety

Welcome

History

Members

Documents

Team

Networking

Links

Contact

WELCOME

Towards a European network to promote infection prevention for patient safety

In the last years there have been some important EU institutional initiatives that impact on patient safety and specifically on Healthcare Associated Infections (HAI):

- The European Centre for Disease Control and Prevention (ECDC) set a specific team on Healthcare Associated Infections (HAI),
- in 2009 European Commission published a "Council Recommendation on Patient Safety, including the prevention and control of Health-Care Associated Infections" where HAI risk and ways to control it are mentioned specifically,
- in April 2011 European Parliament and the Council formally adopted a Directive on the application of patients' rights in crossborder healthcare, which provides more clarity about possibilities to seek healthcare in another Member State and clarifies who is responsible for quality and safety of care in cross-border settings.
- The European Commission adopted last November 2011 a legislative "Proposal for a new Health Growth Programme" where one of the objectives is increasing access tomedical expertise and information for specific conditions also beyond national bordersand developing shared solutions and guidelines to improve healthcare quality and patient safety.

A number of European scientific and professional societies involved in HAI prevention are convinced that the present epidemiological situation, the frequency of HAI, and cross-border movements of citizens, patients and healthcare staff needs international initiatives particularly at a European

EUNETIPS is representing 8,000 healthcare workers all over Europe

NEWS



WHO SAVE LIVES: Clean Your Hands

SL: CYH Newsletter

16 June 2015

Pierre Parneix, member of EUNETIPS board, was elected new president of SF2H!

Congratulations!

A Swedish e-learning program to prevent healthcare associated infections: Standard precautions

www.eunetips.eu

MEMBER SOCIETIES select cour 24 scientific and institution member profile Links to: professional Belgium Belgian Infection Control Society societies National HAI Reference Centre, National Centre Infection & Parasitic Bulgaria Bulgarian Association For Patients' Defense More than 8.000 **BULNOSO** Bulgarian Association For Prevention and Infection Control Croatian Society for Medical Microbiology and Parasitology, Croatia IC/HH Section for HCAI Prevention and Control professionals Denmark FSFH Danish Society for Infection Control Nurses Danish Society of Clinical Microbiology DSKM SF2H French Society of Hospital Hygiene France **DGKH** German Society of Hospital Hygiene Germany Hungary Hungarian Society for Infection Control SIMPIOS Italian Multidisciplinary Society for the Prevention of Infections in Healthcare Organizations Italy SOCIETÀ ITALIANA DI IGIENE Medicina Preventiva e Sanità Pubblica NIPH National Institute of Public Health Kosova Kosovo Malta MALTA College of pathologists Netherlands Dutch Society of Infection Prevention and Control in the Health Care Setting Associação Portuguesa de Infecção Hospitalar Portugal Romania Romania Society of Microbiology Serbia SAPIC Serbian Association of Prevention and Infection Control SEMPSPH Spanish Society for Prevention Medicine, Public Health and Hospital Hygiene Spain Sweden SAIC Swedish Association for Infection Control United Kingdom **BIA** British Infection Association European network to promote infection prevention for patient safety **HIS** Healthcare Infection Society EUNETIPS IPS Infektion Prevention Society

RCN

Royal College of Nursing

Undergraduate level/Post	European Credit Transfer	Timing	
graduate level/Continuous Professional Development	System (ECTS)		
and Continuing Learning			
Medicine and Surgery,	- at least 1 ECTS on prevention	- at the very beginning of field	
Dental Medicine	and control of infectious risk	attachment to healthcare organizations	
	and hospital hygiene;		
	- at least 1 ECTS on patient safety	- at the last term before graduation	
Bachelor and Master of	1	- at the very beginning of field	
Health Professions	and control of infectious risk and hospital hygiene;	attachment to healthcare organizations	
	- at least 1 ECTS on patient safety	- at the last term before graduation	
Bachelor and Master in:	- at least 1 ECTS on prevention	- at the last term before graduation	
- Biological sciences	and control of infectious risk		
- Biotechnology	and hospital hygiene;		
- Pharmaceutical sciences and technologies	E	EUNETIPS draft proposal to	
- Pharmacy and Industrial	European Countries for IC/HH		
Pharmacy		training	

Post graduate level – Public Health Specialization/Master degree	- at least 3 ECTS on patient safety and on prevention and control of infectious risk and hospital hygiene	- to be in accordance with specific curricula
Post graduate level – other medical and non-medical Schools of Specialization /Master degrees	- at least 3 ECTS on patient safety and on prevention and control of infectious risk and hospital hygiene, to be in accordance with specific curricula	- to be in accordance with specific curricula
Continuous Professional Education / Continuing Learning	- at least 1 ECTS	- every 3 years

EUNETIPS draft proposal to European Countries for IC/HH training



Plans and activities

Promotion of shared positions

Web site www.eunetips.eu

EUNETIPS European network to promote infection prevention for patient safety

Lobbying at international level

Shared knowledge about societies

Sharing documents, video, etc

Promotion of studies, training initiatives, etc.

Topics

Issues influencing IC/HH in Europe

Patient safety and HAI prevention and control is in progress...

 Possible areas for learning and improvement

Are		Domain	Need for EU
	Area		Cooperation/Support
	Area		n=30
	T		rank by frequency
D	R 1. Programme	Elaborating and advocating an infection control	5. 23.3% (7)
K		programme.	31 20:070 (77
	management	Management of an infection control	3. 33.3% (10)
•		programme, work plan and project.	
		Contributing to quality management	4. 26.6% (8)
		Contributing to risk management	2. 36.7% (11)
E	2. Quality improvement	Performing audits of professional practices and	2. 36.7% (11)
		evaluating performance	
-		Infection control training of employees	4. 26.6% (8)
		Contributing to research	1. 10.0% (12)
	3. Surveillance and	Designing a surveillance system	6. 16.7% (5)
C		Managing (implementation, follow up,	2,36.7% (11)
3	Investigation of	evaluation) a surveillance system	
	HAIs	Identifying, investigating and managing	3. 33.3% (10)
•	1000	outbreaks	
2		Elaborating Infection Control Interventions	5. 23.3% (7)
	4. Infection Control Activities	Implementing Infection Control Healthcare	4. 26.6% (8)
0		procedures	
4		Contributing to reducing antimicrobial	3. 33.3% (10)
T		resistance (AMR)	
1		Advising appropriate laboratory testing and use	6. 16.7% (5)
4		of laboratory data	
		Decontamination and sterilization of medical	5. 23.3% (7)
		devices	
		Controlling environmental sources of infections	5. 23.3% (7)

Coordination and synergy at European, national and regional level

- Among different stakeholders
 - EU
 - Member states
 - Regions
 - European and national agencies
 - Scientific and professional societies
 - Academic institutions
- With other sectors
 - Insurances
 - professionals and patients cross border movement
 - Etc.

Safety is one:

- Building bridges between the "two worlds"
 - Patient safety
 - HAI prevention and control

- Sharing of Best Practices
 - i.e. BPs Repository

"cross contamination" of methods and tools

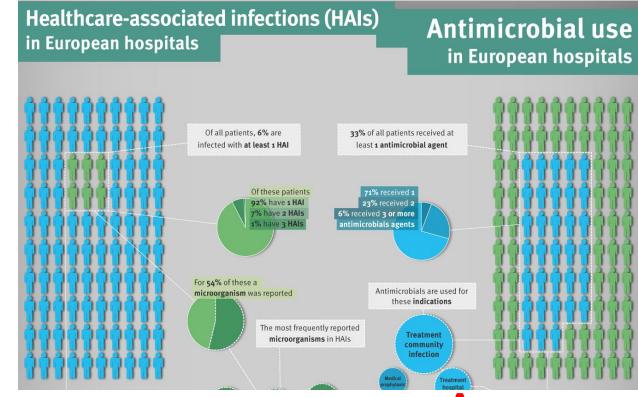
We should move towards shared standards in Europe

- Development and endorsement of "basic" standards" for
 - Patient safety
 - HAI prevention and control
 - Quality of care
- Engaging stake holders
 - Professional bodies
 - Scientific and professional societies
 - Insurances
 - Public and private organizations
 - Etc.

Training healthcare professionals

- Infection Control /Hospital Hygiene training for professionals
 - ECTS (European Credit Transfer and Accumulation System) adoption
 - All HCWs
 - Minimum credits amount for all HCWs
 - Pre graduation
 - Post graduation
 - Continuous Professional Education
 - IC/HH Professional (ECDC Core Competencies)
 - Standardized training
 - Core Competencies recognition

- Complexity
- Standardization
- Measurement
- Action
- Education / Training



- Awareness
 - Alliance
- Involvement
- Empowerment

EUNETIPS European network to promote infection prevention for patient safety

Thank you for your attention!