A JOINT CALL

TO SHAPE FUTURE POLICY ON PATIENT SAFETY AND HEALTHCARE-ASSOCIATED INFECTION PREVENTION AND CONTROL

"Every infection prevented is an antibiotic treatment avoided. Prevention and control actions can save millions of lives every year"

World Health Organization 2016

NOVEMBER 2019























JOINT CALL

HEALTHCARE-ASSOCIATED INFECTIONS (HAIS) ARE AMONG THE MOST SERIOUS PUBLIC HEALTH THREATS BOTH IN EUROPE AND WORLDWIDE

A Healthcare-Associated Infection (HAI) is an infection occurring in a patient during the process of care in a hospital or in another healthcare facility which was not present or incubating at the time of admission. HAIs can affect patients in any type of health care setting in both hospital and long-term care facilities while receiving care, and can also appear after discharge, thus increasing the risk of spreading the infection within the community. Common HAIs include:

- Catheter-associated urinary tract infections (CAUTIs)
- Central line-associated bloodstream infections (CLABSIs)
- Surgical site infections (SSIs)
- Ventilator-associated pneumonia (VAP)

5 REASONS TO ACT NOW

- HAIs are the most frequent adverse event during care delivery and a threat to patient safety. Despite all the efforts put in place by European hospitals to prevent HAIs, on any given day, about 80,000 patients have at least one HAI, i.e. one in 18 patients in a European hospital has a HAI. The ECDC estimates that approximately 8.9 million infections occur each year in EU healthcare settings [2]. In its 2017 Resolution, the World Health Assembly highlighted that HAIs represent a common pathway that often leads to sepsis, which in turn contributes to approximately 37,000 deaths directly resulting from HAIs [3].
- 2 HAIs are preventable: Effective infection prevention and control programmes (i.e. hand hygiene, rapid diagnostic, screening, isolation, etc.) can lead to more than 30% reduction in HAIs rate worldwide [4]. At the hospital level, current measures, including the availability of local infection prevention and control teams with dedicated trained staff; training of health workers; use of evidence-based guidelines; HAI surveillance and feedback; as well as rigorous maintenance of environmental hygiene, have proven to be not only cost-effective but have also led in recent years to a considerable reduction in the incidence of HAIs [5].
- HAI prevention and control is a key action to tackle anti-microbial resistance (AMR): The issues of AMR, HAIs and sepsis are part of the same vicious circle. HAIs are often caused by antibiotic-resistant organisms. Patients who are infected with drug- resistant infections are more likely to develop complications and are up to three times more likely to die from the infection [6]. About two thirds of the 671,689 infections with antibiotic-resistant bacteria in Europe are HAIs. Treating HAIs requires extensive use of antimicrobials which contributes to increasing AMR in healthcare settings. Therefore, it is critical to focus on HAI prevention which includes the implementation of comprehensive programmes and simple interventions, easy to comply with by healthcare professionals, patients and citizens.
- HAIs result in human suffering and economic burden: Every day, HAIs result in prolonged and unnecessary patient's hospital stays with massive additional costs for health systems, patients and their families as well, and with indirect social costs reflected in loss of productivity from long-term disability. For example, the annual financial losses due to unsafe care and HAIs are estimated at approximately €21 billion or 1.5 percent of health expenditure in Europe [7], reflecting 16 million extra days of hospital stays [8]. Furthermore, the prevention and control of the spread of antimicrobial-resistant microorganisms and HAIs implies additional workload on the healthcare staff, which is already overburdened.
- HAI prevention and control measures contribute to ensure healthy lives and promoting well-being for all, at all ages, which is essential for a sustainable development. Infection prevention and control is a pre-requisite for effective patient safety and quality of care, and a universal and integral component of every health care interaction. Without effective infection prevention and control it is not possible to achieve Universal Health Coverage of excellent quality.

OUR MESSAGE TO EU POLICYMAKERS

We applaud and welcome the Council Conclusions on the next steps towards making the EU a best practice region in combatting antimicrobial resistance, adopted on 14 June 2019 thanks to the commitment of the Romanian Presidency of the Council of the EU[9].

Following these Council Conclusions and the resulting engagement of the EU institutions and Member States, we call on the European Commission to adopt a broad and coherent pan-European Infection Management Strategy addressing the health, social, economic and environment determinants, which influences infection diseases and considers the intrinsic links between antimicrobial resistance, prevention of HAIs and sepsis.

Our Joint Call aims at:

• Creating a European Framework on HAI prevention and control

A European Framework on infection prevention and control encompassing both hospital and community healthcare settings should be adopted by the European Commission. This Framework should include:

- Evidence-based guidelines to prevent and reduce the incidence of the most common infections, with highest mortality, morbidity and antimicrobial consumption rates, such as catheter-associated urinary tract infections (CAUTIs) central line-associated bloodstream infections (CLABSIs), surgical site infections (SSIs) and ventilator-associated pneumonia (VAP).
- Common guidelines to prevent the transmission of infections in healthcare settings by active screening programmes to quickly identify patients with drug-resistant organism (e.g. carbapenem-resistant Enterobacteriaceae (CRE), Acinetobacter baumannii (CRAB) and Pseudomonas aeruginosa (CRPsA) and put in place appropriately resourced infection control measures (e.g. patient isolation, cohorting and reinforced hygiene measures) and the use of innovative technologies to help avoid risk for cross-contamination and HAI.

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• Encouraging Member States to implement HAI prevention and control programmes

The European Commission should encourage Member States to implement effective programmes in HAI prevention and control together with patient safety protocols. It is important to provide Member States with clear information about the EU resources available to tackle HAIs and to make more dedicated funding available for this purpose. Also, the Commission and the Member States should join their effort to develop new incentive models and promote alternative reimbursement systems to foster the implementation of HAI prevention measures.

• Monitoring the level of implementation of the European Framework on infection prevention and control

Assessing the level of implementation of European guidelines is critical to understand the impact of the guidelines in healthcare settings. The European Commission should develop and propose appropriate procedures to track the status of implementation of the Framework. Within this frame, defining evidence-based targets and quality indicators for the reduction of HAIs/AMR at national level is crucial for setting up an effective evaluation system. The ECDC should receive adequate resources to fulfil its role in implementing and monitoring the strategies proposed to support optimal infection prevention and ontrol in Europe.

• Implementing European and national mandatory surveillance systems

Surveillance is a key component of any infection prevention and control strategy for HAIs and AMR. Without regular HAI surveillance, as part of an infection prevention and control programme, it is impossible to estimate the health burden of HAIs, at the local and national level, and to prioritise the necessary course of action. The EU should support Member States in the implementation of standardised and centralised electronic surveillance to tackle AMR and HAIs in more than 8,000 European acute care hospitals.

OUR MESSAGE TO EU POLICYMAKERS

· Facilitating the creation of antimicrobial stewardship teams

Antimicrobial stewardship programmes have been shown to improve patient outcomes and reduce antimicrobial consumption and consequently AMR. Collaboration between all healthcare professionals to share knowledge and good practices is essential for the functioning of antimicrobial stewardship teams. Also, implementing diagnostic stewardship should be considered an integral part of antibiotic stewardship programmes.

· Harmonising training and education for healthcare professionals

HAIs are a key concern for healthcare professionals and patients. Thus, awareness campaigns, training and education about infection prevention and control should be part of the curricula of all healthcare professionals. The European Commission should support member states in developing harmonised education and training standards on infection prevention and control as part of the national healthcare professional curricula. Those training standards should consider the current learning tools developed by ECDC and WHO (e.g. the WHO surgical checklist and guidelines on the prevention of surgical site infections) [10].

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- 11 https://www.who.int/infection-prevention/publications/ipc-role/en/
- [2] https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2018.23.46.1800516
- [3] https://ecdc.europa.eu/sites/portal/files/documents/Cost-effectiveness-of-interventions-to-prevent-and-control-HAIs-2017.pdf
- [4] https://www.who.int/infection-prevention/tools/core-components/facility-manual.pdf
- [5] Council of the European Union's Recommendation on Patient Safety, including the Prevention and Control of Healthcare-Associated Infections (2009/C 151/01)

https://www.ecdc.europa.eu/sites/portal/files/documents/Cost-effectiveness-of-interventions-to-prevent-and-control-HAIs-2017.pdf

https://www.oecd.org/health/stemming-the-superbug-tide-9789264307599-en.htm

https://www.oecd.org/health/health-systems/AMR-Tackling-the-Burden-in-the-EU-OECD-ECDC-Briefing-Note-2019.pdf

- [6] ECDC Policy Briefing Last-line antibiotics are failing: options to address this urgent threat to patients and healthcare systems, 2016
- [7]https://ec.europa.eu/health/sites/health/files/systems_performance_assessment/docs/2 016_costs_psp_en.pdf
- [8] https://www.who.int/gpsc/country_work/gpsc_ccisc_fact_sheet_en.pdf
- [9] https://data.consilium.europa.eu/doc/document/ST-9765-2019-INIT/en/pdf
- [10] https://www.who.int/gpsc/ssi-prevention-guidelines/en/

JOINT CALL





HFE

Health First Europe



EHMA

European Health Management Association



ESA

European Sepsis Alliance



GAIS

Global Alliance for Infections in Surgery



IAPO

International Alliance of Patient's Organizations



UEHP

European Union of Private Hospitals



ENSH

European Network for Safer Care



EPHA

European Public Health Alliance



ESNO

European Nurses Specialist Organisation



GSA

Global Sepsis Alliance



EUNETIPS

European Network to Promote Infection Protection for Patient Safety

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HFE as Coordinator of the Joint Call on Patient Safety and Healthcare-Associated Infection Prevention and Control, thanks all the Associations that contributed to the development of this document.

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