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Development and assessment of national performance indicators for infection prevention and control and antimicrobial stewardship in European long-term care facilities

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Source

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BACKGROUND

Healthcare-associated infections in long-term care facilities (LTCFs) are of increasing importance.

AIM

To develop consensus national performance indicators (NPIs) for infection control (ICPI) and antimicrobial stewardship (ASPI) in LTCFs, and assess the performance of 32 European countries against these NPIs.

METHODS

Previously established European standards were the basis for consensus and the same iterative approach with national representatives from the 32 countries. A World Health Organization scoring system recorded how close each country was to implementing each standard.

FINDINGS

The 42 agreed component indicators were grouped into six NPI categories: 'national programme', 'guidelines', 'expert advice', 'IC structure' (not present in the ASPI), 'surveillance' and 'composite'. 'Guidelines' scored the highest mean total possible score (60%, range 20-100%), followed by 'composite' (53%, range 30-100%), 'expert advice' (48%, range 20-100%), 'surveillance' (47%, range 20-83%), 'national programme' (42%, range 20-100%) and 'IC structure' (39%, range 20-100%). Although several scores were low, some countries were able to implement all NPIs, indicating that this was feasible. Most NPIs were very significantly related, indicating that they were considered to be important by the countries. 'Guidelines' and 'IC structure' were significantly related to European region ($P \le 0.05$). Accreditation/inspection was not evident in seven (22%) countries, nine (28%) countries had accreditation/inspection that included IC assessments, and seven (22%) countries had accreditation/inspection that included IC and antimicrobial stewardship assessments. Multi-variable analysis found that only the NPI and the ICPI 'expert advice' were associated with accreditation/inspection which included IC and antimicrobial stewardship.

CONCLUSION

The identified gaps represent significant potential patient safety issues. The NPIs should serve as a basis for monitoring improvements over the coming years.