



Infection Control Nurses Association

www.icna.co.uk

4th May 2005

In a recent survey of over 120 senior Infection Control Professionals by the Infection Control Nurses Association (ICNA) over 62% of the respondents reported that they had to make decisions such as admitting patients to wards that had been closed due to infection or other circumstances that could have compromised patient safety. At this time the role of infection control professionals within healthcare trusts is an advisory position, unlike those countries where Healthcare Associated Infections (HAI) have remained controlled and which have been hailed as role models for the UK, such as the Netherlands.

In the same survey Infection control nurses suggested that MRSA is not always the most pressing clinical priority for infection control teams and other equally virulent pathogens such as *Clostridium difficile* can be more dangerous to patients.

Other results from the survey revealed that although the majority of Infection control nurses feel empowered to close wards if there was a risk of infection and challenge bad clinical practice a small but significant proportion of these senior Healthcare Professionals felt disempowered. The ICNA believes that trained infection control professionals should have mandatory powers to both challenge and act when patients are at risk of infection.

Without the powers described above and actions such as making infection prevention training for all staff compulsory and implementing national surveillance systems so infection control resources can be targeted more effectively, most Infection Control Professionals do not believe the government set target of an 50% reduction in MRSA rates by 2008 is realistic.

With many of the political parties stressing the need to empower the “modern matron”, a view supported by the ICNA, all of the respondents to the questionnaire expressed doubt whether the modern matrons had sufficient specific Infection Control expertise to make decisions on ward closures due to actual or potential disease outbreaks

NB:

The above article and the survey results are due to be published on the ICNA website (www.icna.co.uk) on Wednesday 4th May 2005

The full results of the survey can be found below and for more details on the work of the ICNA please contact:

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Jean Lawrence
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Infection Control Nurses Association (ICNA)

Q1 In the last 6 months have you had to make a decision(s) that could have compromised patient safety e.g. admitted patients to a closed ward?

Responses	Yes	%	No	%
120	74	62%	46	38%

Q2 Do you believe MRSA is the most important **CLINICAL** priority for Infection Control professionals?

Responses	Yes	%	No	%
120	13	11%	107	89%

Q3 If No what is the most important **CLINICAL** priority

	Responses	107
All HAI / C Diff / ESBL / Antibiotic Resistance / Isolation / Surveillance	65	61%
Compliance with basic infection control procedures and practice	32	30%
Decontamination	3	3%
Education / training/ staffing / resources	7	7%

Q4a Do you feel empowered to close wards if there is Infection risk?

Responses	Yes	%	No	%
119	99	83%	20	17%

Q4b Do you feel empowered challenge poor Infection Prevention Practice?

Responses	Yes	%	No	%
120	115	96%	5	4%

Q5 Do you think a target of 50% reduction in MRSA rates by 2008 is realistic?

Responses	Yes	%	No	%
118	18	15%	100	85%

Q6 How confident are you that Infection Control will remain a political priority after the election (May 2005)?

	Responses	120
Very likely	51	43%
Unsure	40	33%
Unlikely	28	23%
Definitely Not	1	1%

Q7 Do you believe Modern Matrons have sufficient Infection Control expertise to make decisions on ward closures?

Responses	Yes	%	No	%
113	0	0	113	100%

Notes to Editors

- The Infection Control Nurses Association (ICNA) is a professional body that represents the interests of over 1500 Infection Control Professionals, staff and patients across the UK and Republic of Ireland. Further information about the ICNA is available on their website www.icna.co.uk