

Subject:	Prevention of Healthcare Associated Infection in Surgery	Ref. No.	FES-PST-009
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BACKGROUND

This position paper outlines key principles with regard to the prevention of healthcare associated infection in surgery. Supporting these principles are links to documents that the College has endorsed.

The Royal Australasian College of Surgeons (RACS) is committed to ensuring the highest standard of safe and comprehensive surgical care for the community. Prevention of healthcare associated infections is an essential part of good healthcare practice and requires regular monitoring and review. A coordinated approach from all stakeholders in prevention and control of health care associated infections is essential for improving patient safety.

Healthcare associated infections (HAI) are those which are acquired in the hospital setting and are a major cause of preventable and sometimes serious harm to patients. The College has a role to engage with government and external organisations on healthcare associated infections to actively promote principles of infection control and to ensure that patient care standards and work place practices are maintained by surgeons, trainees and support staff.

ENDORSEMENT OF GUIDELINES

The College endorses the following infection guideline documents which have been developed and evidenced by reputable national academic bodies:

National Health and Medical Research Council – Australian Guideline for the Prevention and Control of Infection in Healthcare.

Note: College endorsement of this document is qualified because the College does not support the concept that healthcare workers be subject to regular mandatory testing for blood-borne viruses (BBV) (see Section 6 below). However the College strongly advises that any surgeon who has reason to believe that he or she may have been exposed to a BBV either occupationally or socially should seek testing and adhere to the recommendations of the NHMRC.

Available at: <http://www.nhmrc.gov.au/guidelines/publications/cd33>

Royal Australian College of General Practitioners' (RACGP) 'Infection Control Standards for Office Based Practices'.

This publication provides detailed guidelines regarding cleaning of the practice environment and sterilisation of equipment. Surgeons undertaking office based procedures should be familiar with these guidelines. Many surgeons undertake minor procedures in their rooms and it is vital that the general principles of infection control are complied with in all instances. It is recommended that each practice should have a manual outlining protocols regarding infection control.

Available at: <http://www.racgp.org.au/your-practice/standards/infectioncontrol/>

ANTIMICROBIAL STEWARDSHIP

In relation to antimicrobial stewardship, the College is cognisant of the global issue of increasing antimicrobial resistance and endorses the principles and practice of prudent prescribing outlined in the *Therapeutic Guidelines: Antibiotic Version 15* as a source of comprehensive information and guidelines on the subject.

Available at: <http://www.tg.org.au/index.php?sectionid=41>

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The College encourages Fellows to both participate in the development of policies and protocols appropriate to their local practice, and to comply with guidelines in the prescription of antibiotics both for prophylaxis and therapy.

The evolution of antimicrobial management of disease requires data collection and management at regional, national and international levels. The dynamic nature of infectious disease management necessitates an active approach embracing the following principles of antibiotic stewardship:

- The collection of data identifying local and regional nature of, rates of and patterns of infectious disease,
- Comparison of this data to other regions and relating to national trends,
- Using this data to formulate advice regarding emerging patterns of antibiotic resistance and alternate antibiotic utilisation,
- Supporting local and regional data collection and the use of derived data to adjust antibiotic management.

SURVEILLANCE

The College supports surveillance of Hospital Acquired Infections. Surveillance has been proven to reduce infection rates when local data collection results in timely feedback. The College supports publication of infection rates in a de-identified manner and recognises that comparing data between hospitals can have a positive effect, but it does not support publication of infection rates of individual hospitals or surgeons.

In the surgical context surveillance should cover surgical site infections of selected procedures, bloodstream infections, hand hygiene and antimicrobial usage. The College supports the Australian Commission on Safety and Quality in Health Care (ACSQHC) Paper on this topic:

Available at: http://www.safetyandquality.gov.au/media_releases/reducing-harm-to-patients-from-healthcare-associated-infections/

HAND HYGIENE

Hand hygiene in health-care workers is an effective intervention to reduce the risk of HAI. The College endorses the National Hand Hygiene initiative and in particular supports the World Health

Organisation '5 Moments' program and the use of alcohol based hand rubs. The College recommends all surgeons and trainees play a leadership role in advocating hand hygiene practices.

SURGEONS WITH BLOOD BORNE VIRUSES

The College fully endorses the principle that medical practitioners have a professional responsibility to practise medicine safely and that patients need to be protected from the transmission of infections from professionals who are themselves infected with a blood-borne virus (BBV). However the College is also mindful of the fact that medical practitioners have a right to manage their own health and well-being and that infected practitioners have the same rights of confidentiality as other patients. It is also important that they receive expert specialist advice in the event they do contract an infectious blood-borne virus.

It is also acknowledged that testing for blood-borne viruses can be associated with significant false-positive rates, and for these various reasons the College does not support the concept of regular mandatory testing for BBVs for health care workers.

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TEACHING AND TRAINING

The College believes that Infection Control matters should be included in the syllabus of all specialties. Training and educational material should also be provided to all Fellows.

Approver: Director, Fellowship and Standards
Authoriser: Professional Development and Standards Board