



Healthcare surveillance

Reading a CPD article helped to enhance Helen Degnan's knowledge of infection prevention and control

The importance of surveillance became apparent to me as a new member of the community infection prevention and control team. As healthcare professionals, we have a responsibility to demonstrate sound infection prevention and control measures.

The CPD article helped me to develop my knowledge and understanding of the theory behind surveillance, its purpose in the service we deliver and the different surveillance approaches that may be used.

An accurate surveillance programme is integral to effective infection prevention and control. This CPD emphasised the importance of collecting, analysing and interpreting data and disseminating the results to the relevant bodies.

Quality survey data can be used in a monitoring and information system to alert us to specific clusters of infection, assist with identification and enable us to put preventive

measures in place. Surveillance is an effective way to monitor whether these measures are reducing the incidence of healthcare-associated infections.

The targeted surveillance of *Clostridium difficile* and methicillin-resistant *Staphylococcus aureus* (MRSA) infections is relevant to my role. MRSA can cause increased infection risk in people with open wounds or urinary or intravenous catheters. Patients are routinely screened for MRSA during hospital admission; however, surveillance is also essential in the community.

This reflective account is based on NS779 Mitchell BG, Russo PL (2015) Preventing healthcare-associated infections: the role of surveillance. *Nursing Standard*. 29, 23, 52-58.

Accurate surveillance will identify any areas of concern to the community infection control team, for example a high incidence of MRSA infection. The team can investigate possible reasons for this, working with staff members to examine the environment, explore infection prevention and control practices, identify lapses or poor practice, and provide training as necessary.

Hand hygiene training

C. difficile is mainly associated with the use of antibiotic treatment and occurs frequently in hospital. It is essential that accurate surveillance of information including recent antibiotic treatment, hospital admissions and outpatient appointments is carried out, so that any clusters can be investigated and action taken.

As a direct result of surveillance, areas of concern were identified in our community. This prompted the community infection control team to offer hand hygiene training to all care homes in the area. The aim was to promote awareness among care workers of how easily infection can be spread and to emphasise the importance of good hand hygiene practice.

Targeted surveillance of the incidence and prevalence of infections will be used to measure the effect of this approach **NS**

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