

Welcome to our October newsletter!

This month, we will delve into the importance of understanding Carbapenemase-Producing Enterobacteriaceae (CPE) and the impact has on our healthcare system. We will also emphasize the critical role of hand hygiene in preventing infections, a fundamental practice that can save lives. Additionally, we will provide insights into the functions of our Health Protection Team (HPT) and how they contribute to maintaining public health.

As we kick off International Infection Prevention and Control (IPC) Week, running from October 13 to 19, we are excited to focus on key topics that are crucial for enhancing our infection prevention efforts. This year's theme is "Moving the Needle", which symbolises our collective efforts to drive positive changes and improvement across all care settings.

Each day this week, we will send you an email which will spotlight a different theme, offering insights, tips and resources.

Together, let's reinforce our commitment to infection prevention and make a positive impact in our communities!

International Infection, Prevention & Control Week

Moving the Needle on Infection Prevention



Monday, October 14 – Theme: "Moving the Needle on the Profession's Development"

Tuesday, October 15 – Theme: "Moving the Needle on Healthcare Worker Safety"

Wednesday, October 16 – Theme: "Moving the Needle on Patient Safety"

Thursday, October 17 – Theme: "Moving the Needle on Public Health Preparedness"

Friday, October 18 – Theme: "Moving the Needle Across the Continuum of Care"

For more information please access:
<https://infectionpreventionandyou.org/iipw/>

Understanding CPE: What You Need to Know

What is CPE?

CPE or Carbapenemase-Producing Enterobacteriaceae refers to a group of bacteria that usually lives harmlessly in the intestines of humans; this is known as colonisation. Individuals carrying these bacteria without experiencing any adverse effects are referred to as carriers. While CPE contributes to maintaining gut health, they pose significant risks when they migrate to other parts of the body.

Potential for Infection:

CPE can lead to serious infections if it enters sites such as the bladder or bloodstream, manifesting as Urinary Tract Infection (UTIs), Bloodstream infections (BSIs), and Pneumonia among others.

How does CPE enter the Bloodstream?:

CPE can enter the bloodstream through several routes, particularly in vulnerable patients. Invasive medical devices such as urinary catheters and open wounds provide direct access for bacteria. People with a weakened immune system, including those with chronic illnesses like diabetes or cancer are at higher risk. Additionally, CPE can spread in healthcare settings through direct contact, particularly through poor hand hygiene among staff and visitors. Given their resistance to some of the strongest antibiotics, controlling the spread of CPE is vital to preventing difficult-to-treat infections.

Risk Factors:

While most individuals carry CPE without any issues, certain groups are at heightened risk. Vulnerable patients, especially those who are immunocompromised, receive complex care and have frequent hospital admissions, require particular attention. For the majority of the population, the likelihood of developing an infection from CPE is relatively low. However, awareness and management are crucial in protecting those at-risk residents. As care home managers and IPC leads, it is imperative to implement robust infection control measures.



Managing CPE in Community Settings and Care Homes

While the risk of spreading CPE in community settings is generally low, it remains vital to implement effective strategies to minimise potential transmission. Consider the following strategies:

- Promoting Hand Hygiene - Actively encourage or assist affected individuals to practice good hand hygiene, especially after using the toilet, as this is critical in preventing the spread of CPE.
- Infection Control Standards - Implement strict IPC practices, particularly when managing:
 - Diarrhoea
 - Leaking wounds
- Notification During Transfers: Ensure the receiving care setting is promptly informed about the patient's CPE status when transferring an affected individual. This proactive approach enables the care setting take appropriate precautions.
- Admission Policies: As care home managers, do not refuse admission or readmission of residents colonised with CPE.
- Accommodation Recommendations: If possible, accommodate CPE patients in a single room with ensuite facilities to minimise potential spread. This arrangement helps minimise the risk of bacterial spread.
- Risk Assessment: Conduct a risk assessment that considers the care environment and the patient's overall health status to determine whether the patient poses a high risk of infecting others.
- Expert Guidance: The UKHSA or NHS ICB IPC specialists can provide advice on managing CPE patients and determining isolation needs.

Hand Hygiene: Key Considerations for Care Settings

Hand hygiene is a crucial practice in preventing the spread of infections in healthcare settings. Proper hand hygiene significantly reduces the risk of healthcare-associated infections (HCAs), ensuring the safety of both staff and residents. The preferred method for maintaining hand hygiene is thorough handwashing with soap and water for at least 20 seconds. While alcohol-based hand sanitiser is primarily used when soap and water are not available, it is important to note that alcohol-based hand sanitiser does not eliminate all types of germs and is not effective when hands are visibly soiled.

Nail Polish and Artificial Nails: Key Considerations

It is vital to prioritise effective hand hygiene. Here are the essential points care settings should be aware of regarding nail polish and artificial nails.

Infection Risks Associated with Nail Hygiene:

- **Bacteria and Germs:** Artificial nails can serve as breeding grounds for bacteria, particularly in areas underneath the nails where debris can accumulate. Additionally, nail polish and artificial nails can trap moisture, creating an environment that is conducive to bacterial growth.
- **Transference of Bacteria:** Contaminated nails can lead to the transference of bacteria to patients, during direct contact or procedures such as personal care and wound care. This transference increases the likelihood of HCAs.



Best Practices for Care Staff:

Natural Nails: Care settings should encourage staff to maintain short, clean, natural nails. Short nails are generally defined as those that do not extend beyond the fingertip. This is the most effective way to promote hand hygiene and minimise infection risks. Shorter nails reduce the likelihood of harbouring bacteria and make thorough handwashing more effective.

Training and Education: All staff should receive comprehensive training on hand hygiene protocols, ideally on an annual basis. However, it is also beneficial to incorporate regular staff training during staff meetings. This ongoing education helps ensure that all staff are up-to-date with the best practices in IPC.

Visual Reminders: Posting hand hygiene posters (such as those from the WHO or NHS) and reminders in key areas (e.g., near sinks, in staff rooms) can encourage hand hygiene practices.



Encouraging Good Hand Hygiene Among Residents

Residents should be encouraged to wash their hands:

- After using the toilet.
- Before eating or drinking.

Promoting hand hygiene among residents helps protect their health and that of others in the care setting.



Health Protection Team (HPT)

What HPTs do?

Local HPTs lead the UK Health Security Agency (UKHSA)'s response to all health-related incidents. They provide specialist support to prevent and reduce the impact of:

- infectious diseases
- chemical and radiation hazards
- major emergencies

They support with:

- local disease surveillance
- maintaining alert systems
- investigating and managing health protection incidents and outbreaks
- implementing and monitoring national action plans for infectious diseases at local level



The Crucial Role of HPTs in Outbreak Management and Collaboration with Care Homes

HPTs play a vital role in supporting IPC measures. Their expertise is essential in managing outbreaks of infectious diseases, offering guidance on best practices for IPC.

Care homes may experience unique challenges due to the vulnerable populations they serve, making collaboration with HPTs critical for safeguarding residents and staff.

Prompt reporting allows for timely intervention and containment of potential health threats.

In the event of a major health emergency or outbreak, care homes must collaborate closely with HPTs. This partnership can facilitate effective communication, resource allocation, and strategic response efforts.



Email address:

- london.region@ukhsa.gov.uk
- phe.london.region@nhs.net for notifications and enquiries of infectious diseases that contain Patient Identifiable Information.

Phone number:

Urgent out of hours advice for health professionals 0300 303 0450

Use the find your local HPT in England postcode lookup if you're a health professional needing expert local health protection advice.



IPC Team contact details

Generic email for advice: nelondonicb.ipc@nhs.net

Outbreak Management:

Care homes must report any suspected or confirmed outbreaks of infectious diseases. This includes two or more residents or staff members with similar symptoms within a short timeframe, or a single case of serious infectious diseases.

How to Report an Outbreak:

1. **Contact UKHSA** at london.region@ukhsa.gov.uk for general queries, or use phe.london.region@nhs.net for sending patient identifiable information (PII).
2. **Copy the NEL ICB IPC Team:** Be sure to copy (CC) the IPC team email (nelondonicb.ipc@nhs.net).
3. **Follow up support:** Our team will follow up with you promptly to provide further assistance.

Gyanu Adhikari
IPC Clinical Nurse
Specialist
Tel: 07551 564659

Luca Comisi
IPC Clinical Nurse
Specialist
Tel: 07551 593253

Sarah Hamed
IPC Clinical Nurse
Specialist
Tel: 077412379825

Sandra Smith
Deputy Director of
Infection Prevention
and Control
Tel: 07769 382399

Loredana Nechita
IPC Support
Officer
Tel: 07939 196461

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- Hospital discharge and community support guidance - GOV.UK (www.gov.uk)
- <http://www.infectionpreventioncontrol.co.uk/wp-content/uploads/2020/07/CH-08-Hand-hygiene-July-2020-Version-2.00.pdf>
- [https://cdn.who.int/media/docs/default-source/integrated-health-services-\(ihs\)/infection-prevention-and-control/hand-hygiene/your-5-moments-for-hand-hygiene-residential-care.pdf?sfvrsn=cc985f67_8](https://cdn.who.int/media/docs/default-source/integrated-health-services-(ihs)/infection-prevention-and-control/hand-hygiene/your-5-moments-for-hand-hygiene-residential-care.pdf?sfvrsn=cc985f67_8)
- <https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-settings/infection-prevention-and-control-quick-guide-for-care-workers>.