The white paper offers infection control nurses new opportunities

Infection control nurses have a key role in delivering improved patient outcomes, and the recent white paper challenges them to take this opportunity, says Gladys Xavier

Although major developments have improved the overall health and wellbeing of many people, healthcare can harm patients – notably through healthcare associated infections. These cause 5,000 deaths every year, costing the NHS £1bn in additional bed stays alone (Davis, 2009).

The white paper Equity and Excellence: Liberating the NHS (Department of Health, 2010a) is intended to make the NHS more responsive to patients and improve outcomes. Delivery of its objectives will depend on expertise from different disciplines, including nursing.

The consultation on transparency in outcomes (DH, 2010b) outlines proposed changes to the performance regime, with separate frameworks for outcomes. The intention is that the NHS will embrace effectiveness of care, patient experience and safety based on five outcome domains. These range from preventing people from dying prematurely (the first outcome domain) to treating and caring for people in a safe environment and protecting them from avoidable harm (the fifth).

The challenge for infection control nurses relates to this fifth domain. Keeping patients safe means ensuring that the care environment – whether it is a hospital, GP practice, care home or other setting – is safe and clean, and reducing rates of HCAIs. This is an area where nurses can improve clinical quality through good clinical practice and evaluation. Infection control nurses have extensive skills in change management that are fundamental to quality improvement; they are experienced in interpreting and implementing evidence based guidelines along with service evaluation and audits, and are involved in the education and training of multidisciplinary teams.

One of the positive changes for nurses in the white paper regards empowerment to use their professional judgement about what is right for patients. Infection control nurses should embrace the existing quality, innovation, productivity and prevention (QIPP) initiatives in delivering quality, increasing prevention and promoting innovation that will improve patient outcomes.

The key is to get patients and clinical staff to lead the process. This is an opportunity for infection control nurses to promote the role of patients in preventing HCAIs. Research suggests that most patients realise they can play a part in improving healthcare professionals’ hand hygiene and they should be encouraged to ask them whether they have washed their hands.

The white paper’s central feature is to devolve commissioning responsibilities and budgets as far as possible to GP consortia. The role of the Care Quality Commission will be strengthened to ensure that all those services that are commissioned incorporate infection prevention requirements into their commissioning intentions. This means organisations that provide care need to:

- Effectively operate systems to assess infection risks and to prevent, detect and control infection;
- Maintain appropriate standards of design, cleanliness and hygiene for premises and equipment.

This provides infection control nurses with a great opportunity to influence GP consortia to commission services that will continue to reduce the risk of HCAIs through partnership working.

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REFERENCES

10 RESEARCH
Using the lived experiences of patients with Clostridium difficile infection to improve care interviews were conducted with older people who have C difficile infection to understand their needs and experiences from their own perspective

14 PRACTICE REVIEW
How to reduce the negative psychological impact of MRSA isolation on patients. Patient isolation is necessary to prevent MRSA cross infection but steps must be taken to minimise the psychological impact of this infection control measure.

17 INNOVATION
Developing satellite roles within infection prevention teams to fulfil responsibilities. A number of new satellite roles in the infection prevention team support clinical specialist nurses, improve practice and increase patients’ confidence in their care

20 PRACTICE REVIEW
Using the Waterlow tool to predict Clostridium difficile infection risk in hospital settings. Tackling the spread of Clostridium difficile is a priority for the NHS. A team explain how they adapted and tested the Waterlow tool to assess hospital patients at risk of infection.

24 SAFETY IN PRACTICE
Pregnancy checks before surgery. An NPSA Rapid Response Report outlines how to ensure women do not undergo surgical procedures when they are unaware they are pregnant.