This Current Awareness Bulletin is produced by the Yeovil Academy Library to provide staff with a range of infection control-related resources to support practice. It includes recently published guidelines and research articles, as well as news and policy items.

**Guidelines**

**NICE National Institute for Health and Care Excellence**

Low-fidelity simulation to enhance understanding of infection control among undergraduate medical students

National medical journal of india, 2017, 30(4), 215-218 | added to CENTRAL: 31 August 2018 | 2018 Issue 8

Embase

Emotional sensitization using low-fidelity simulation served as a catalyst in understanding infection control among medical undergraduate students.

Implementing a Pilot Trial of an Infection Control Program in Nursing Homes: results of a Matched Cluster Randomized Trial

KW McConeghy, R Baier, KP McGrath, CJ Baer, V Mor

Journal of the american medical directors association, 2017, 18(8), 707-712 | added to CENTRAL: 30 June 2018 | 2018 Issue 6

PubMed Embase

This multifaceted hand-washing and surface cleaning intervention was designed to reduce infection rates among NH residents. In our 10-facility randomized, matched pair pilot study, we observed program compliance and satisfaction along with reductions in surface bacterial counts, but did not observe a statistically significant reduction in infection rates, antimicrobial use, or hospitalizations.

Erratum: a comparison of the efficacy of 70% v/v isopropyl alcohol with either 0.5% w/v or 2% w/v chlorhexidine gluconate for skin preparation before harvest of the long saphenous vein used in coronary artery bypass grafting


American journal of infection control, 2018, 46(5), 599 | added to CENTRAL: 30 September 2018 | 2018 Issue 9

PubMed Embase

Whilst both solutions under test contained 70% alcohol and we consider there to be little evidence of any difference in bactericidal activity between these types of alcohol we acknowledge that it is possible that the difference in type of alcohol (as well as applicator) could have played a role in any differences observed during the study.
Infection control in the outpatient setting
Literature review current through: Nov 2018. | This topic last updated: May 21, 2018.
General principles of infection control include issues related to standard precautions (hand hygiene, use of gloves and masks) and isolation precautions. The principles of hand hygiene advocated in hospitals are applicable to outpatient settings. Personal protective equipment should be readily available for use (gowns, masks, respirators, gloves).

Principles of infection control in long-term care facilities
Literature review current through: Nov 2018. | This topic last updated: Sep 26, 2017.
Long-term care facilities (LTCFs) include nursing homes, skilled-nursing facilities providing postacute care, assisted living facilities, retirement homes, rehabilitation centers, long-term care hospitals, long-term psychiatric facilities, and institutions for individuals with intellectual disabilities. Residents of LTCFs are at risk for infections circulating in the community as well as healthcare-associated infections.

Infection control measures to prevent seasonal influenza in health care settings
Literature review current through: Nov 2018. | This topic last updated: Sep 26, 2017.
In order to optimally prevent or control influenza outbreaks, it is important to identify cases early and implement multiple infection control measures as soon as possible. Recommendations regarding infection control measures for seasonal influenza infection in health care settings have been provided by the United States Centers for Disease Control and Prevention (CDC).

Journal Articles
Please click on the blue link (where available) to access the full text. You may need an OpenAthens username and password. To register for an OpenAthens account click here.
If you would like help obtaining any of the articles, please contact the Library.

NICE Healthcare Databases

1. Infection control in the community.
   Author(s): Higginson, Ray
   Source: British Journal of Community Nursing; Dec 2018; vol. 23 (no. 12); p. 590-595
   Publication Date: Dec 2018
   Publication Type(s): Academic Journal
   Available at British Journal of Community Nursing - from EBSCO (CINAHL Plus with Full Text)
   Abstract:The article explores some of the specific infection risks linked with community-based care, along with effective infection control measures. Understanding direct and indirect modes of transmission is essential for effective infection control in any clinical environment. An unhygienic environment can harbour microorganisms and facilitate microbe contamination and spread. Curtains, carpets, and other soft furnishings can harbour bacterial pathogens if used in the clinical environment.
   Database: CINAHL

2. CDC Drafts Infection Control Guidelines for HCWs.
   Author(s): AHC MEDIA
   Source: Hospital Infection Control & Prevention; Dec 2018; vol. 45 (no. 12); p. 0-0

**Author(s):** BILLS, VICTORIA

**Source:** Access; Nov 2018; vol. 32 (no. 9); p. 12-14

**Abstract:** The article focuses on the measures to protect the medical care workers from the infection due to exposure to microbial pathogens. It mentions that the comprehensive infection control guidelines, from the U.S. Centers for Disease Control (CDC) have recommendations for personal protective equipment including gloves, masks, eyewear and protective clothing to protect oral health care workers.

**Database:** CINAHL

4. Factors for compliance with infection control practices in home healthcare: findings from a survey of nurses' knowledge and attitudes toward infection control.

**Author(s):** Russell, David; Dowding, Dawn W.; McDonald, Margaret V.; Adams, Victoria; Rosati, Robert J.; Larson, Elaine L.; Shang, Jingjing

**Source:** American Journal of Infection Control; Nov 2018; vol. 46 (no. 11); p. 1211-1217

**Abstract:** Highlights • Infection is a leading cause of hospitalization among home healthcare patients. • Few studies have explored home healthcare nurses' compliance with infection control practices. • Home healthcare nurses' level of compliance with infection control practices is associated with more favorable attitudes toward infection control. • Improving compliance with infection control practices in the home healthcare setting may require strategies to alter the attitudes and perceptions of nursing staff. Background Infection is a leading cause of hospitalization among home healthcare patients. Nurses play an important role in reducing infection among home healthcare patients by complying with infection control procedures. However, few studies have examined the compliance of home healthcare nurses with infection control practices or the range of sociocultural and organizational factors that may be associated with compliance. Methods This study analyzed survey responses from nurses at 2 large, certified home healthcare agencies (n = 359), to explore levels of compliance with infection control practices and identify associated demographic, knowledge, and attitudinal correlates. Results Nurses reported a high level of infection control compliance (mean = 0.89, standard deviation [SD] = 0.16), correct knowledge (mean = 0.85, SD = 0.09), and favorable attitudes (mean = 0.81, SD = 0.14). Multivariate mixed regression analyses revealed significant positive associations of attitudinal scores with reported level of compliance (P <.001). However, knowledge of infection control practices was not associated with compliance. Older (P <.05) and non-Hispanic black (P <.001) nurses reported higher compliance with infection control practices than younger and white non-Hispanic nurses. Conclusion These findings suggest that efforts to improve compliance with infection control practices in home healthcare should focus on strategies to alter perceptions about infection risk and other attitudinal factors.

**Database:** CINAHL

5. Optometric infection control guidelines assessing patients with methicillin-resistant Staphylococcus aureus.

**Author(s):** Labreche, Tammy; Maciver, Sarah; Furtado, Nadine M

**Source:** Clinical & Experimental Optometry; Nov 2018; vol. 101 (no. 6); p. 727-731

**Publication Date:** Nov 2018

**Publication Type(s):** Academic Journal

**PubMedID:** 29572957
Abstract: The purpose of this scoping review was to present the state of research regarding optometric infection control guidelines for the assessment of patients with methicillin-resistant Staphylococcus aureus (MRSA) and to identify any areas requiring further research. Twelve articles were carefully chosen for review. Data extracted included information regarding appropriate handwashing methods (five articles), indications for use of personal protective equipment (one article), management of surfaces that come in contact with an MRSA-infected person (three articles), recommendations for patient appointment scheduling/seating (three articles) and suggestions for staff training (three articles). The results of the review demonstrated that there exist many gaps in the literature regarding comprehensive optometric-specific infection control guidelines. Further research regarding appropriate handwashing methods, equipment disinfection techniques, extent and breadth of staff training and indications for use of personal protective equipment is required to better understand what precautions must be taken in an optometric setting when encountering patients with MRSA.

Database: CINAHL


Author(s): Grayson, M Lindsay; Stewardson, Andrew J; Russo, Philip L; Ryan, Kate E; Olsen, Karen L; Havers, Sally M; Greig, Susan; Cruickshank, Marilyn

Source: Lancet Infectious Diseases; Nov 2018; vol. 18 (no. 11); p. 1269-1277

Publication Date: Nov 2018

Publication Type(s): Academic Journal

PubMedID: 30274723

Available at The Lancet. Infectious diseases - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: Background: The National Hand Hygiene Initiative (NHHI) is a standardised culture-change programme based on the WHO My 5 Moments for Hand Hygiene approach to improve hand hygiene compliance among Australian health-care workers and reduce the risk of health-care-associated infections. We analysed its effectiveness.

Methods: In this longitudinal study, we assessed outcomes of the NHHI for the 8 years after implementation (between Jan 1, 2009, and June 30, 2017), including hospital participation, hand hygiene compliance (measured as the proportion of observed Moments) three times per year, educational engagement, cost, and association with the incidence of health-care-associated Staphylococcus aureus bacteraemia (HA-SAB).

Findings: Between 2009 and 2017, increases were observed in national health-care facility participation (105 hospitals [103 public and two private] in 2009 vs 937 hospitals [598 public and 339 private] in 2017) and overall hand hygiene compliance (36 213 [63.6%] of 56 978 Moments [95% CI 63·2·6-3·9] in 2009 vs 494 673 [84·3%] of 586 559 Moments [84·2·8-4·1] in 2017; p<0·0001). Compliance also increased for each Moment type and for each health-care worker occupational group, including for medical staff (4377 [50·5%] of 8669 Moments [95% CI 49·4·51·5] in 2009 vs 53 620 [71·7%] of 74 788 Moments [71·4·72·0]; p<0·0001). 1.989 713 NHHI online learning credential programmes were completed. The 2016 NHHI budget was equivalent to AUD50·06 per inpatient admission nationally. Among Australia’s major public hospitals (n=132), improved hand hygiene compliance was associated with declines in the incidence of HA-SAB (incidence rate ratio 0·85; 95% CI 0·79·0·93; p≤0·0001): for every 10% increase in hand hygiene compliance, the incidence of HA-SAB decreased by 15%. Interpretation: The NHHI has been associated with significant sustained improvement in hand hygiene compliance and a decline in the incidence of HA-SAB. Key features include sustained central coordination of a standardised approach and incorporation into hospital accreditation standards. The NHHI could be emulated in other national culture-change programmes. Funding: Australian Commission on Safety and Quality in Health Care.

Database: CINAHL

7. Talk or walk: What to do about subpar safety and infection control in the practice.

Author(s): DAW, KAREN

Source: RDH; Nov 2018; vol. 38 (no. 11); p. 36-38

Publication Date: Nov 2018

Publication Type(s): Periodical

Abstract: The article discusses the ensuring of safety and infection control in a dental hygiene office. Topics covered include subpar occurrences like running the ultrasonic without the lid on, and team members’ exiting of rest rooms with unwashed hands, and the need for a practice to provide Occupational Safety and Health Administration (OSHA) infection control training to staff and to set expectations for employees. Also noted is the need for employees to contact OSHA in cases of a negligent employer.

Database: CINAHL

**Author(s):** Suh, Gina; Huddleston, James I 3rd; Si Young Song; Goodman, Stuart B.; Finlay, Andrea K.; Huddleston, James I.; Maloney, William J.; Gina Suh; Amanatullah, Derek F.; Song, Si Young

**Source:** Clinical Orthopaedics & Related Research; Oct 2018; vol. 476 (no. 10); p. 1995-2002

**Publication Date:** Oct 2018

**Publication Type(s):** Academic Journal

**PubMedID:** 30179927

**Abstract:** Background: Failure to control a periprosthetic joint infection (PJI) often leads to referral of the patient to a tertiary care institution. However, there are no data regarding the effect of prior surgical intervention for PJI on subsequent infection control. Questions/purposes: (1) Is the likelihood of 2-year infection-free survival worse if an initial surgery for PJI was performed before referral to a tertiary care center when compared with after referral for definitive treatment? (2) Is the likelihood of identifying a causal organism during PJI worse if the initial surgery for PJI was performed before referral to a tertiary care center when compared with after referral for definitive treatment? (3) We calculated how many patients are harmed by the practice of surgically attempting to treat PJI before referral to a tertiary care center when compared with treatment after referral to a tertiary care center for definitive treatment. Methods: Among 179 patients (182 TKAs) who were referred for PJI between 2004 and 2014, we retrospectively studied 160 patients (163 TKAs) who had a minimum of 2 years of followup after surgical treatment or had failure of treatment within 2 years. Nineteen TKAs (19 patients) were excluded from the study; 13 patients (7%) had < 2-year followup, three patients had infected periprosthetic fractures, and three patients had infected extensor mechanism reconstruction. Eighty-six patients (88 TKAs, two bilateral [54%]) had no surgical treatment before referral to our institution for PJI management, and 75 patients (75 TKAs [46%]) had PJI surgery before referral. The mean followup was 2.4 ± 1.2 years for patients with PJI surgery before referral and 2.8 ± 1.3 years for patients with no surgery before referral (p = 0.065). Infection-free survival was defined as prosthesis retention without further surgical intervention or antibiotic suppression. During the period, further surgical intervention generally was performed after failure of irrigation and débridement, a one- or two-stage procedure, or between stages of a two-stage reimplantation without documentation of an eradicated infection, and antibiotic suppression generally was used when patients were not medically sound for surgical intervention or definitive implants were placed after the second of a two-stage procedure with positive cultures; these criteria were applied similarly to all patients during this time period in both study groups. Endpoints were assessed using a longitudinally maintained institutional database, and the treating surgeons were not involved in data abstraction. Relative and absolute risk reductions with 95% confidence intervals (CIs) as well as a Kaplan-Meier survival curve with a Cox proportional hazard model were used to evaluate survival adjusting for significant covariates. The number needed to harm is calculated as the number needed to treat. It is the reciprocal of the absolute risk reduction or production by an intervention. Results: The cumulative infection-free survival rate of TKAs at 2 years or longer was worse when PJI surgery was performed before referral to a tertiary center (80%; 95% CI, 69%-87%) compared with when no PJI surgery was performed before referral (94%; 95% CI, 87%-98%; log-rank test p = 0.006). Additionally, PJI surgery before referral resulted in a lower likelihood of causative microorganism identification (52 of 75 [69%]) compared with patients having surgery at the tertiary center (77 of 88 [88%]; odds ratio, 2.71; 95% CI, 1.28-4.70; p = 0.006). With regard to the infection-free survival rate of TKAs, the number needed to harm was 7.0 (95% CI, 4.1-22.5), meaning the referral of less than seven patients to a tertiary care center for definitive surgical management of PJI before intervention at the referring hospital prevents one infection-related failure. With regard to the culture negativity in PJI, the number needed to harm was 5.5 (95% CI, 3.3-16.7), meaning the referral of less than six patients to a tertiary care institution for PJI before surgery at the outside hospital prevents the diagnosis of one culture-negative infection. Conclusions: Surgical treatment of a PJI before referral for subspecialty surgical management increases the risk of failure of subsequent surgical management. The prevalence of culture-negative PJI was much higher if surgery was attempted before referral to a tertiary care center when compared with referral before treatment. This suggests that surgical treatment of PJI before referral to a treating center with specialized expertise in PJI compromises the infection-free survival and impacts infecting organism isolation. Level Of Evidence: Level III, therapeutic study.

**Database:** CINAHL


**Author(s):** Suda, Arnold J.

**Source:** Clinical Orthopaedics & Related Research; Oct 2018; vol. 476 (no. 10); p. 2003-2004

**Publication Date:** Oct 2018
The article discusses the failure to control a periprosthetic joint infection (PJI) which results in patient referral to a tertiary care institution, but with lack of data with regard to the effect of prior surgical intervention for PJI on subsequent infection control. It discusses a study where it was found that almost half of the patients with PJI after total knee arthroplasty (TKA) received surgical treatment before being admitted to a tertiary care center specialized in PJI treatment.

**Database:** CINAHL

### 10. Multidrug-resistant Klebsiella pneumoniae: challenges for treatment, prevention and infection control.

**Author(s):** Bassetti, Matteo; Righi, Elda; Carnelutti, Alessia; Graziano, Elena; Russo, Alessandro  
**Source:** Expert Review of Anti-infective Therapy; Oct 2018; vol. 16 (no. 10); p. 749-761

**Publication Date:** Oct 2018  
**Publication Type(s):** Academic Journal  
**PubMedID:** 30207815

**Abstract:** Introduction: Management of antimicrobial resistance in multi-drug-resistant-Klebsiella pneumoniae (MDR-KP) is a major challenge for clinicians. The optimal treatment option for MDR-KP infections is still not well established. Combination therapies including high-dose meropenem, colistin, fosfomycin, tigecycline, and aminoglycosides are widely used, with suboptimal results. New antimicrobials targeting MDR-KP have been developed during the last decades and are now at various stages of clinical research. Areas covered: The PubMed database was searched to review the most significant literature on the topic, with a special consideration for articles coming from endemic countries. Expert commentary: We reviewed the currently available treatment options, discussing the characteristics of new antibiotics with activity against MDR Gram-negative bacteria and the strategies for preventing the spread of MDR-KP. While we wait for real-world data from novel compounds, coordinated strategies and common efforts in infection control and stewardship programs remain the cornerstone for limiting, or potentially reversing, conditions that favor the spread of MDR-KP.

**Database:** CINAHL

### 10. The CDC and Joint Commission release free new infection control resources.

**Author(s):**  
**Source:** Healthcare Purchasing News; Oct 2018; vol. 42 (no. 10); p. 8-8

**Publication Date:** Oct 2018  
**Publication Type(s):** Trade Publication  
**PubMedID:**  
**Abstract:** The article reports on the issuance by the U.S. Centers for Disease Control and Prevention (CDC) and The Joint Commission of new infection control resources for podiatry and orthopedic, as well as pain management settings as of October 2018.

**Database:** CINAHL

### 11. Antibiotic stewardship and horizontal infection control are more effective than screening, isolation and eradication.

**Author(s):** Lemmen, S. W.; Lewalter, K.  
**Source:** Infection; Oct 2018; vol. 46 (no. 5); p. 581-590

**Publication Date:** Oct 2018  
**Publication Type(s):** Academic Journal  
**Available at Infection** from Unpaywall

**Abstract:** Purpose: The global rise of multidrug resistant organisms (MDROs) is of major concern since infections by these pathogens are difficult, and in some cases, even impossible to treat. This review will discuss the effectiveness of a pathogen-independent alternative approach consisting of the implementation of antibiotic stewardship (ABS) programs, improvement of hand hygiene compliance, and daily antiseptic body washings instead of "screening, isolation and eradication" as recommended by many infection control guidelines today. Methods: A review of the literature. Results: The classical approach composed of screening, isolation and eradication has many limitations, including lack of standardization of the screening methods, risk of medical errors for patients in isolation and failure to eradicate resistant bacteria. Notably, concrete evidence that this current infection control approach actually prevents transmission is still lacking. We found that a novel approach with the training of
Infectious diseases specialists can reduce the usage of antimicrobials, thereby significantly decreasing the emergence of new MDROs. Moreover, increased hand hygiene compliance not only reduces transmission of MDROs, but also that of sensitive organisms causing the majority of nosocomial infections. Further, instruments, such as continuing education, bedside observation, and the use of new tools, e.g. electronic wearables and Wi-Fi-equipped dispensers, are all options that can also improve the current low hand hygiene compliance levels. In addition, daily antiseptic body washes were observed to reduce the transmission of MDROs, especially those deriving from the body surface-like MRSA and VRE in specific settings. Finally, antiseptic body washes were seen to have similar effects on reducing transmission rates as screening and isolation measures.

Conclusions: In summary, this review describes a novel evidence-based approach to counteract the growing medical challenge of increasing numbers of MDROs.

Database: CINAHL

12. Incident command structure using a daily management system and the Centers for Disease Control and Prevention's Patient Notification Toolkit drives effective response to an infection control breach.

Author(s): Schoonover, Heather; Haydon, Kristin
Source: Journal of Healthcare Risk Management; Oct 2018; vol. 38 (no. 2); p. 19-26
Publication Date: Oct 2018
Publication Type(s): Academic Journal
Abstract: When breaches in infection control occur, it is imperative that organizations respond in a manner that is effective, efficient, and rebuilds trust with patients. Readers will learn how the incident command structure, daily management system, and the Centers for Disease Control and Prevention's Patient Notification Toolkit were used to drive an effective response to an infection control breach—resulting in 92% of affected patients completing the recommended testing for hepatitis B, hepatitis C, and human immunodeficiency virus.

Database: CINAHL

13. FOCUS: WOUND/INFECTION CONTROL. USING EXPERIENTIAL LEARNING TO RATIONALISE THE ORDER OF REMOVING PERSONAL PROTECTION EQUIPMENT (PPE).

Author(s): Plowman, Evan; Lambert, Krishna; Magee, Deborah
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 35-35
Publication Date: Sep 2018
Publication Type(s): Periodical
Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version
Abstract: The article focuses on a learning activity designed to teach nursing students the proper way of removing personal protection equipment (PPE). Topics discussed include the correct order of PPE removal as described in the activity, the reasons the learning activity is considered an effective teaching tool for nursing students and the advantages of using experiential learning in helping nursing students develop their skills.

Database: CINAHL

14. FOCUS: WOUND/INFECTION CONTROL. NURSES URGED TO SEEK WOUND CARE TRAINING TO DEAL WITH 'HIDDEN AFFLICTION'.

Author(s):
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 36-36
Publication Date: Sep 2018
Publication Type(s): Periodical
Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version
Abstract: The article reports that the organization Wounds Australia has called on nurses to undergo evidence-based training to be able to help patients manage chronic wounds.

Database: CINAHL
15. FOCUS: WOUND/INFECTION CONTROL. UNDERGRADUATE NURSING STUDENTS KNOWLEDGE AND ATTITUDES TOWARDS PRESSURE INJURY PREVENTION.

Author(s): Mather, Carey; Miller, Andrea; Saunders, Annette

Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 36-36

Publication Date: Sep 2018

Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports on a study which shows that nursing students in Tasmania have positive attitudes towards preventing pressure injuries but their knowledge about managing pressure injuries requires improvement.

Database: CINAHL

16. FOCUS: WOUND/INFECTION CONTROL. WOUND INFECTION: A BRIEF OVERVIEW OF THE LATEST EVIDENCE-BASED PRACTICE.

Author(s): Waird, Allyson

Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 38-38

Publication Date: Sep 2018

Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article discusses the factors that clinicians and nurses should consider when dealing with chronic non-healing wounds. Topics discussed include infection identified as the most widespread impediment to wound healing, the complications associated with biofilms and the studies showing that the antibiotic povidone iodine is effective in inhibiting biofilm formation in wounds. Also discussed are the stages of wound infection as described by the International Wound Infection Institute.

Database: CINAHL

17. FOCUS: WOUND/INFECTION CONTROL. BUILDING CAPACITY IN A NURSE-LED REGIONAL WOUND CLINIC.

Author(s): Munro, Gabrielle

Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 39-39

Publication Date: Sep 2018

Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports that the Goulburn Valley Health regional health service in Victoria is opening a nurse-led wound clinic to improve wound care in the West Hume Region. Topics discussed include the percentage of acute inpatients at Goulburn who have wounds, the wound management-related services that will be provided at the wound clinic and the components of the TIME framework for assessing and managing wounds.

Database: CINAHL

18. FOCUS: WOUND/INFECTION CONTROL. INFECTION PREVENTION AND CONTROL IN HEALTHCARE SETTINGS: RECOMMENDATIONS FOR PRACTICE CHANGE.

Author(s): Madan, Diva

Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 40-40

Publication Date: Sep 2018

Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports that healthcare-associated infection (HAI) has been identified as the most common and serious complication that affects vulnerable people in hospitals and other healthcare facilities in Australia. Topics discussed include the most common multi-resistant organisms (MRO) found in hospitals and other healthcare settings in the country, the factors that hinder the implementation of an effective infection control in healthcare settings and the steps for reducing HAIs.

Database: CINAHL
19. FOCUS: WOUND/INFECTION CONTROL. CONSUMER ENGAGEMENT IN WOUND CARE GUIDELINE DEVELOPMENT: AN INTERNATIONAL APPROACH.

Author(s): Haesler, Emily; Cuddigan, Janet; Carville, Keryln; Kottner, Jan
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 42-42
Publication Date: Sep 2018
Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports that the International Pressure Injury Clinical Guideline is undergoing a revision. Topics discussed include the function of the guideline as a resource for preventing pressure injuries that nurses and other healthcare professionals can use, the international pressure injury-related health organizations leading the revision of the guideline and the ways in which the developers of the guideline are trying to get patients involved in the revision work.

Database: CINAHL

20. FOCUS: WOUND/INFECTION CONTROL. NATURE AND SCIENCE JOIN FORCES TO FIGHT SURGICAL INFECTIONS.

Author(s):
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 43-43
Publication Date: Sep 2018
Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports that researchers from the University of Adelaide in South Australia and the University of South Australia (UniSA) are conducting a medical research project which aims to manufacture medical implants with antimicrobial surfaces that will reduce the risk of post-surgical infection. Topics discussed include the scientists using nano-modification technology based on dragonflies' wing structure, the organizations funding the project and the estimated cost of the project.

Database: CINAHL

21. FOCUS: WOUND/INFECTION CONTROL. ANTIBIOTICS NOT ALWAYS NEEDED FOR MOST COMMON EYE INFECTIONS.

Author(s):
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 44-44
Publication Date: Sep 2018
Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports that researchers from Save Sight Institute in the University of Sydney in New South Wales have warned that majority of adult eye infections are viral conjunctivitis, a condition which does not require the use of antibiotics.

Database: CINAHL

22. FOCUS: WOUND/INFECTION CONTROL. BLOOD INFECTIONS.

Author(s):
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 44-44
Publication Date: Sep 2018
Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports on a study from the University of Queensland (UQ) which claims that certain antibodies in the human bloodstream may enable bacterial infections to spread, with the finding seen as a potential key to treating sepsis.

Database: CINAHL

23. FOCUS: WOUND/INFECTION CONTROL. NEW SOLUTIONS FOR WOUND HEALING.

Author(s):
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 45-45
Publication Date: Sep 2018
Abstract:
The article reports that three-dimensional (3D) printing techniques are being used by researchers in Australia to manufacture human tissue-like products for wound healing. Topics discussed include the disadvantages of using skin graft treatments for skin tissue damage, the cost advantages offered by 3D printing tools to wound management specialists and to patients and the researchers also developing bio-inks from seaweed for medical implants and tissue engineering.

Database: CINAHL

24. FOCUS: WOUND/INFECTION CONTROL. ASSISTANTS IN NURSING: SCOPE OF PRACTICE AND PRESSURE INJURY PREVENTION.

Author(s): McNally, Bernadette; Blay, Nicole
Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 46-46
Publication Date: Sep 2018
Publication Type(s): Periodical
Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)
Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version
Abstract:
The article reports that Assistants in Nursing (AIN) have been introduced in New South Wales as part of the nursing skill mix scheme. Topics discussed include the clinical role of AINs, the factors that prompted the need for AINs in the area and the courses and non-mandatory qualifications for becoming an AIN. Also discussed are the ways in which AINs affect health outcomes.

Database: CINAHL

25. Update on infection control practices in cancer hospitals.

Author(s): Ariza-Heredia, Ella J.; Chemaly, Roy F.
Source: CA: A Cancer Journal for Clinicians; Sep 2018; vol. 68 (no. 5); p. 340-355
Publication Date: Sep 2018
Publication Type(s): Academic Journal
PubMedID: 29985544
Available at CA: a cancer journal for clinicians - from ProQuest (Hospital Premium Collection) - NHS Version
Available at CA: a cancer journal for clinicians - from IngentaConnect - Open Access
Available at CA: a cancer journal for clinicians - from Wiley Online Library Free Content - NHS
Abstract:
Therapies in oncology have evolved rapidly over the last years. At the same pace, supportive care for patients receiving cancer therapy has also evolved, allowing patients to safely receive the newest advances in treatment in both an inpatient and outpatient basis. The recognition of the role of infection control and prevention (ICP) in the outcomes of patients living with cancer has been such that it is now a requirement for hospitals and involves multidisciplinary groups. Some unique aspects of ICP for patients with cancer that have gained momentum over the past few decades include catheter-related infections, multidrug-resistant organisms, community-acquired viral infections, and the impact of the health care environment on the horizontal transmission of organisms. Furthermore, as the potential for infections to cross international borders has increased, alertness for outbreaks or new infections that occur outside the area have become constant. As the future approaches, ICP in immunocompromised hosts will continue to integrate emerging disciplines, such as antibiotic stewardship and the microbiome, and new techniques for environmental cleaning and for controlling the spread of infections, such as whole-genome sequencing.

Database: CINAHL


Author(s): Rump, Babette; Timen, Aura; Hulscher, Marlies; Verweij, Marcel
Source: Emerging Infectious Diseases; Sep 2018; vol. 24 (no. 9); p. 1609-1616
Publication Date: Sep 2018
Publication Type(s): Academic Journal
PubMedID: 30124192
Available at Emerging infectious diseases - from Europe PubMed Central - Open Access
Abstract: Many countries have implemented infection control measures directed at carriers of multidrug-resistant organisms. To explore the ethical implications of these measures, we analyzed 227 consultations about multidrug resistance and compared them with the literature on communicable disease in general. We found that control measures aimed at carriers have a range of negative implications. Although moral dilemmas seem similar to those encountered while implementing control measures for other infectious diseases, 4 distinct features stand out for carriage of multidrug-resistant organisms: carriage presents itself as a state of being; carriage has limited relevance for the health of the carrier; carriage has little relevance outside healthcare settings; and antimicrobial resistance is a slowly evolving threat on which individual carriers have limited effect. These features are of ethical relevance because they influence the way we traditionally think about infectious disease control and urge us to pay more attention to the personal experience of the individual carrier.

Database: CINAHL

27. Infection control in aesthetic medicine and the consequences of inaction.

Author(s): Collier, Helena

Source: Journal of Aesthetic Nursing; Sep 2018; vol. 7 (no. 7); p. 352-361

Publication Date: Sep 2018

Publication Type(s): Academic Journal

Available at Journal of Aesthetic Nursing - from MAG Online Library

Abstract: Microbiology is the study of microbes—living organisms so small they can only be seen through a microscope. They are considered the smallest form of life and include bacteria, viruses, fungi, archaea and protozoa. Microbes that can cause disease are referred to as pathogens. The relationship between the human body and the microbial world is dynamic; however, despite this lifelong partnership and the undeniable value these organisms bring to both the human body and the earth’s ecology, some pathogens are capable of destroying human life. The skin and mucous membranes are the body’s protective barriers and if they are breached by pathogens, they can reach subcutaneous tissue, muscle, bone and body cavities. In the field of aesthetic medicine, the injection of a dermal filler into the soft tissues is one of the most sought after treatments. This procedure can incorporate multiple injection passes from skin to bone. There is therefore a risk of an infectious complication arising if all traces of make-up are not removed and the skin disinfected, if there is inadequate hand antisepsis or environmental disinfection, and if aseptic technique is not executed during the delivery of these injections.

Database: CINAHL

28. Revisiting the Association for Professionals in Infection Control and Epidemiology Competency Model for the Infection Preventionist: An evolving conceptual framework.

Author(s): Davis, James; Billings, Corianne; Malik, Charu

Source: American Journal of Infection Control; Aug 2018; vol. 46 (no. 8); p. 921-927

Publication Date: Aug 2018

Publication Type(s): Academic Journal

Abstract: This article reviews 2 models of skill acquisition, 1 from nursing and the other from aviation, and compares them to the Association for Professionals in Infection Control and Epidemiology Competency Model for the Infection Preventionist (IP). The authors explore the mental activity associated with competence and provide usable examples for IPs to further assess their own competence, and competence of IPs in their charge. This was done for the purpose of advancing and expanding upon the career stages within the field of infection prevention. Further, we suggest a mechanism for expansion of the current Association for Professionals in Infection Control and Epidemiology Competency Model for the IP, as well as explore career stages and the evolution of professional practice self-assessment and recertification. The authors believe an expansion would better match the needs of current and future IPs in terms of career development and competency.

Database: CINAHL

29. EDUCATION. INFECTION CONTROL.

Author(s):

Source: Australian Nursing & Midwifery Journal; Aug 2018; vol. 26 (no. 2); p. 32-34

Publication Date: Aug 2018

Publication Type(s): Periodical

Available at Australian Nursing & Midwifery Journal - from EBSCO (CINAHL Plus with Full Text)

Available at Australian Nursing & Midwifery Journal - from ProQuest (Hospital Premium Collection) - NHS Version
Abstract: The article discusses infection control and its importance in the best practice care of nurses and midwives in Australia in 2018. Topics covered include what an infection is, its involving microorganisms, the human body's defence mechanisms against them, the resulting inflammatory response once they gain entry, and the state of immunity against them. Also noted are infection prevention and control, and the possible demonstration of leadership in them by nurses and midwives.

Database: CINAHL

Library Resources

The books listed below are a selection of those that can be found at the library. To search the library catalogue in full, visit swims.nhs.uk.

- **Infection prevention and control : perceptions and perspectives (2016)**
  *Elliott, Paul; Storr, Julie; Jeanes, Annette*

- **Infection prevention and control at a glance (2017)**
  *Weston, Debbie; Burgess, Alison; Roberts, Sue; Peate, Ian*

- **Microbiology and infection prevention and control for nursing students (2016)**
  *Ward, Deborah*

- **Wound care at a glance (2015)**
  *Peate, Ian (Author) WO196 Book*

  *Baranoski, Sharon (Editor) WO196 Book*
In the News

**Influenza-like illness (ILI): managing outbreaks in care homes**
15 October 2018
Guidance for managing seasonal influenza, identifying pathogens and transmission routes for acute respiratory disease in care homes.

**'Half of airport security trays' contaminated with traces of cold or flu ...**
5 Sep 2018 - ... glass security screens at passport control, and on the chip-and-pin machine in ... which isn't the same as finding live viruses capable of causing an infection.

**Elsewhere in the News...**

**Halifax healthcare firm's £5m HSBC funding boost to open high tech lab**
Leading infection control specialists and NHS supplier, GAMA Healthcare, has built a new Research and Development (R&D) laboratory, thanks to support from ... Halifax Evening Courier

**Hospital trust nurses celebrate 'year free' of MRSA for first time**
Nursing staff at a hospital trust in Yorkshire are celebrating being a year free of the superbug MRSA for the first time. Nursing Times

**Red rating as superbug found in Worcestershire Royal Hospital**
Twenty-four patients, including one with blood poisoning, have been affected by the outbreak. BBC News

**Bed shortages fear as vomiting bug strikes NHS**
Outbreaks of the winter vomiting bug have closed hospital wards across Scotland and led to concerns about bed shortages. Health officials have asked members ... The Times

**Bedford Hospital still 'requires improvement'**
An NHS hospital’s urgent and emergency care *service* has gone from "good to "requires improvement" in a latest inspectors’ report. A visit to Bedford Hospital by ... BBC News

**Hospital Privacy Curtains and Bed Sheets**
healthcare textiles and other soft surfaces can fly under the radar in terms of the role they may play in the transmission of infectious agents. Infection Control Today

**Infection prevention and control: An HSJ and Gama Healthcare roundtable**
Experts from the frontline of infection prevention and control, regulatory bodies and industry talked about what has been achieved – and what still needs to be ...
Ward shuts at Hull Royal Infirmary as staff tackle Norovirus outbreak
Read the latest Calendar stories, Ward shuts at Hull Royal Infirmary as staff tackle Norovirus outbreak on ITV News, videos, stories and all the latest Calendar ...
ITV News

Faecal transplants, 'robotic guts' and the fight against deadly gut bugs | Imperial News
TIPPING POINT - A simple compound found in our gut could help to stop dangerous bacteria behind severe, and sometimes fatal, hospital infections.
Imperial College London

New approaches to infection prevention and control | Features
As the nature of the infection prevention and control challenge evolves, so too must the approaches to meeting it – but solutions must focus on ease of use for ...
Nursing Times

Community infection control nurse named Welsh 'nurse of year'
A community infection prevention nurse has been named Wales Nurse of the Year at an annual Royal College of Nursing event.
Nursing Times

Infection control boost when managers regularly meet frontline
Regular “leadership rounds” where senior hospital managers meet frontline nursing staff to discuss infection control, can help improve practice and boost patient ...
Nursing Times

Environmental decontamination 1: what is it and why is it important?
Ensuring that surfaces are clean and adequately disinfected is vital for patient safety and is a legal requirement.
Nursing Times

'Taking control of infection prevention must be a high priority'
Infection prevention is a vital part of our healthcare infrastructure.
Nursing Times

Enhancing leadership in infection prevention through training | Clinical
Nuffield Health trains hospital matrons to be effective leaders in infection prevention and control. This initiative won the Infection Prevention and Control category ...
Nursing Times

Glasgow's health board has cancelled almost 600 operations
A PATIENT whose operation was cancelled as a result of the closure of a surgical cleaning unit has criticised the lack of contingency planning by...
Evening Times

Communal thermometers blamed for deadly Japanese fungus outbreak in NHS hospitals
Sharing equipment in hospitals could be spreading deadly superbugs, experts have concluded, after finding most patients carrying a Japanese fungal infection ...
Telegraph.co.uk
'Safety concerns remain' at Isle of Wight NHS Trust
There are still "significant concerns" about patient safety at a health trust placed in special measures last year, the health watchdog has found. The Isle of Wight ...

BBC News

MERS-CoV case in England
Public Health England (PHE) confirm that an individual has been diagnosed with Middle East Respiratory Syndrome (MERS) in England.

GOV.UK

Stray cat causes infection scare at Epsom hospital
A cat caused an infection scare after it entered a hospital site and was "found lying in a linen cupboard" by bosses. A report in The Sun said a deep clean was ...

BBC News

NHS is ignoring smoking at great cost, says Royal College of Physicians
The NHS needs a culture change to put smoking on a par with infection control and sepsis, reports Nigel Hawkes.

BMJ 2018; 361 doi: https://doi.org/10.1136/bmj.k2769 (Published 25 June 2018)

The BMJ

Nurse and bed shortages 'risk reversing infection prevention progress'
Crowded NHS hospitals with too few nurses are increasing the risk of bacteria outbreaks and threatening to reverse the progress made by infection control ...

Nursing Times

Domestic laundering of nurses' uniforms: what are the risks?
How safe is the laundering of uniforms by staff at home? What can be done to reduce the risk of bacterial survival and contamination? This article comes with a ...

Nursing Times

Free-to-access online CPD on key principles of infection control
Healthcare-associated infections can have devastating consequences for patients and be costly for providers. A new Nursing Times Learning unit, funded by ...

Nursing Times

Hospital curtains may harbour dangerous pathogens | News
Privacy curtains in hospitals can become breeding grounds for resistant bacteria, posing a threat to patient safety, according to a small study from Canada.

Nursing Times

East and North Hertfordshire NHS Trust 'requires improvement'
A health trust which manages four Hertfordshire hospitals has been told by inspectors it must improve. The East and North Hertfordshire NHS Trust was given a ...

BBC News

Environmental decontamination 3: auditing cleaning and disinfection | Clinical
Nurses play a vital role in the auditing of cleaning and disinfection in healthcare settings, as well as in using audit results to improve patient safety.

Nursing Times
**Infectious diarrhea spores survive high temperatures of hospital laundering: Hospital bedsheets could be source of C. difficile contamination**

Washing contaminated hospital bedsheets in a commercial washing machine with industrial detergent at high disinfecting temperatures failed to remove all ...

Science Daily