VitalPAC® INFECTION CONTROL

The Health Protection Agency has highlighted "a lack of compliance with national screening policies" as a significant factor in increasing risk of acquiring MRSA[1].

The 2008/2009 NHS operating framework[2] lists a sustained reduction in the rates of MRSA and Clostridium difficile as one of five key national priorities for NHS trusts. It also requires MRSA screening of all elective and emergency admissions within 3 years.

Invasive devices, particularly peripheral cannulae and central venous cannulae, are the most frequently identified source of MRSA bacteraemias.

The Department of Health's publication *Going further faster*[3] quotes Guy's and St Thomas' NHS Foundation Trust estimate, that prevention of 100 MRSA bacteraemias and 360 surgical site infections resulted in savings of approximately 4,000 bed days and £1.4 million.

VitalPAC INFECTION CONTROL

VitalPAC INFECTION CONTROL is a natural extension of VitalPAC's real-time, point of care, patient safety role in reducing mortality, length of stay and ICU admissions.

Standard VitalPAC functionality already highlights patients at risk of infection[4] by issuing real-time SIRS (Systemic Inflammatory Response Syndrome) alerts.

VitalPAC INFECTION CONTROL ensures that in addition each patient is quickly screened for both **MRSA and Clostridium difficile**. It tracks the progress of microbiology testing, showing when swabs or samples were sent, when they were received by the lab and when results are due. It provides care staff with appropriate treatment plans for patients who are identified as high risk, or have tested positive for MRSA or Clostridium difficile.

The introduction of VitalPAC INFECTION CONTROL results in, on average, ***97% compliance with local hospital protocols*** *for the screening of emergency medical inpatients.*

VitalPAC INFECTION CONTROL includes VitalPAC CANNULA MANAGEMENT to track a patient's cannulae insertions and record the condition of each insertion site. Nurses are prompted to make regular inspections of each cannula site and record any signs of infection or deterioration. VitalPAC then automatically calculates the Visual Infusion Phlebitis (VIP) score. VitalPAC alerts show when cannulae are overdue for checking or removal. The system instructs nurses to remove a cannula if the VIP score exceeds the safe value identified in Trust protocol.

VitalPAC ensures all patients receive regular assessment of cannulae sites, when required, as part of routine nursing observations.

1) HEALTH PROTECTION AGENCY (NOVEMBER 2007), "National confidential study of deaths following Meticillin-resistant Staphylococcus aureus (MRSA) infection"
2) DEPARTMENT OF HEALTH (2007) "The operating framework for the NHS in England 2008-2009"
3) DEPARTMENT OF HEALTH – MRSA/ CLEANER HOSPITALS PROGRAMME (2006) "Going further faster: Implementing the Saving Lives delivery programme"
4) A combination of two or more of temperature, pulse, respiration and white cell count

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