

Policy Frameworks

MP 0108/19

Effective from: 13 May 2022

Healthcare Associated Infection Surveillance Policy

1. Purpose

The purpose of this mandatory policy is to describe the mandatory healthcare associated infection (HAI) surveillance and reporting requirements.

Infections resulting from the provision of healthcare are one of the most common causes of unintended harm suffered by health consumers. They can cause patients' pain and suffering, often result in readmissions, re-operations and antibiotic use, prolong hospital admissions and are associated with significant morbidity and mortality. As such, HAIs lead to the use of significant human and financial resources and can be associated with adverse publicity and litigation.

Undertaking HAI surveillance is an essential component of effective infection prevention and allows for evaluation of prevention programs, thereby improving patient outcomes.

The HAI surveillance indicators have been developed to enable standardised and meaningful surveillance to be performed. They have been selected by a process of review and consultation and are applicable to a variety of healthcare settings within Western Australia. The indicators incorporate the requirements under the Commonwealth Healthcare Agreement and the requirements of the National Safety and Quality Health Service Standards.

This Policy is a mandatory requirement under the *Public and Aboriginal Health Policy Framework* pursuant to section 26(2)(c) of the *Health Services Act* 2016.

2. Applicability

This Policy is only applicable to the following Health Service Providers:

- North Metropolitan Health Service
- South Metropolitan Health Service
- East Metropolitan Health Service
- Child and Adolescent Health Service
- Western Australia Country Health Service

The requirements contained within this Policy are applicable to the services purchased from contracted health entities where it is explicitly stated in the contract between the contracted health entity and the State of Western Australia or Health Service Provider. The State of Western Australia or Health Service Provider is

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responsible for ensuring that any obligation to comply with this Policy by the contracted health entity is accurately reflected in the relevant contract and managed accordingly.

3. Policy Requirements

Health Service Providers must:

- 3.1. Ensure and enable staff who conduct HAI surveillance to be appropriately trained to perform HAI surveillance.
- 3.2. Have a local HAI surveillance program that incorporates the mandatory reporting, the methodology, definitions and data validation processes as described in the *Healthcare Infection Surveillance Western Australia* (*HISWA*) *Surveillance Manual* to ensure the continued validity of data submitted to HISWA.
- 3.3. Integrate HAI surveillance data into clinical governance structures, including reporting results to governing bodies, key stakeholders and consumers.
- 3.4. Report *Staphylococcus aureus* bloodstream infection and surgical site infection following primary hip and knee arthroplasty indicators (when applicable) as part of the Health Service Performance Reporting.

4. Compliance Monitoring

Health Service Providers' HAI surveillance program must meet the requirements described in this mandatory policy.

The Infection Prevention Policy and Surveillance Unit (IPPSU), within the Department of Health will monitor compliance by Health Service Providers with policy requirements (section 3) at the end of each reporting month.

The IPPSU will also undertake monthly data validation to ensure reliable data are being submitted by the Health Service Providers.

5. Related Documents

The following documents are mandatory pursuant to this Policy:

• Healthcare Infection Surveillance in Western Australia – Surveillance Manual

6. Supporting Information

The following information is not mandatory but informs and/or supports the implementation of this Policy:

- National Safety and Quality Health Service Standards
- Implementation Guide for the Surveillance of Staphylococcus aureus Bloodstream Infection 2021
- Surveillance Validation Guide for Healthcare Associated Staphylococcus aureus Bloodstream Infection 2014

- Implementation Guide for Surveillance of Central-line Associated Bloodstream Infection 2019
- Approaches to Surgical Site Infection Surveillance 2017
- National Healthcare Safety Network (NHSN) Surveillance Manual

7. Definitions

The following definition(s) are relevant to this Policy.

Term	Definition
Healthcare	An infection acquired by a patient as a result of the provision of
associated	healthcare and there is no evidence it was present prior to
infection	commencement of treatment.

8. Policy Contact

Enquiries relating to this Policy may be directed to:

Title: Program Manager Infection Prevention Policy and Surveillance Unit

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9. Document Control

Version	Published	Effective	Review	Effective	Amendment(s)
V G1 31011	date	from	date	to	
MP	10 June	10 June	June 2022	13 May	Original version
0108/19	2019	2019		2022	
MP	13 May	13 May	June 2025	Current	Policy review and see
0108/19	2022	2022			amendments below:
v.2.0					

- Transferred to the new mandatory policy template.
- Updated purpose section to remove information contained in the related document.
- Updated policy requirements to link to the related document and to ensure they are measurable.
- Updated supporting information.

10. Approval

Approval by	Angela Kelly, A/Director General, Department of Health
Approval date	31 May 2019

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