

National Institute for Health and Clinical Excellence

**Infection Control (update)
Stakeholder Comments – Draft scope**

<p>Please enter the name of your registered stakeholder organisation below.</p> <p>NICE is unable to accept comments from non-registered organisation or individuals. If you wish your comments to be considered please register via the NICE website or contact the registered stakeholder organisation that most closely represents your interests and pass your comments to them.</p>		
Stakeholder organisation:		MRSA Action UK
Name of commentator:		Derek Butler
Comment No.	Section number <small>Or write 'general' if your comment relates to the whole document</small>	Comments Please insert each new comment in a new row. Please do not paste other tables into this table, as your comments could get lost – type directly into this table
<p>Proformas that are not correctly submitted as detailed in the line above may be returned to you</p>		
1	4.1.1	<p>MRSA Action UK are concerned that no specific equalities issues have been identified. People with long-term disabilities will be affected with issues of dexterity in handling catheters and invasive devices. We believe therefore that an equalities impact assessment would identify this as an issue and as such one should be carried out.</p> <p>Language and other communication barriers need to be addressed as healthcare workers will need to understand the guideline and be able to communicate effectively with patients and carers; simple pictorial guides or video clips can be beneficial for this purpose. An equalities impact assessment should identify this as an issue.</p> <p>The 2003 guideline provides guidance to non-professional carers, patients and their families; we believe informal carers should be included in the scope to meet the needs of patients with long-term conditions and their families.</p>
2	4.2	<p>MRSA Action UK believes the healthcare setting should also include the patients' home. Care Homes are patients' homes for example. District nursing teams, community dentists and informal carers all need to be included in the scope and they provide care in the patients' home.</p>

3	4.3.1	<p>With regard to key clinical issues that will be covered. There is no mention of phlebotomy or vaccination. A repeated concern that has been raised by patients to MRSA Action UK is the lack of proper infection control procedures carried out in the primary care setting when blood is taken for sampling or vaccinations are carried out, concerns on the lack of hand-hygiene, cleaning of the patients' skin and failure to observe keeping equipment sheathed and wrapped prior to these procedures has been raised frequently. We would therefore wish to see the scope of the guideline covering these issues. Venepuncture policies are not always in place in GP practices and health centres and should be included in the scope.</p> <p>The blood-transfusion service should also be covered in the scope.</p>
4	4.3.2	<p>MRSA Action UK believe the following should be included in the scope:</p> <p>4.3.2 b) Procedures for the insertion of urinary catheters</p> <p>4.3.2 c) Infection prevention measures for invasive procedures conducted by ambulance services</p> <p>4.3.2 d) Decontamination or cleaning of the healthcare environment and equipment</p>
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Please add extra rows as needed

Please email this form to: infectioncontrol@nice.org.uk

Closing date: 5pm on 23 December 2009

PLEASE NOTE: The Institute reserves the right to summarise and edit comments received during consultations, or not to publish them at all, where in the reasonable opinion of the Institute, the comments are voluminous, publication would be unlawful or publication would be otherwise inappropriate.