Chief Nursing Officer Directorate Fiona McQueen, Chief Nursing Officer



T: 0131-244 2314

E: fiona.mcqueen@gov.scot

Dear Colleague

<u>Carbapenemase-producing Enterobacteriaceae (CPE)</u> <u>Policy Requirement</u>

The purpose of this letter is to reinforce the <u>mandatory</u> policy requirement for CPE screening in NHS Boards across Scotland.

We initially wrote to you in 2013¹, to request that NHS Boards should have CPE action plans in place and that all patients admitted to acute hospitals should be screened for CPE using an initial clinical risk assessment (CRA). We reiterated this message again in our HAI and AMR Policy Requirements DL 2015 (19)².

As you are aware, infections caused by CPE are extremely difficult to treat and have potential to proliferate and spread in environments and populations both inside and outside healthcare settings. The number of CPE isolates in Scotland has significantly increased since reporting began in 2003³. The 2016 European 'EuSCAPE' study reports that these multidrug resistant bacteria now affect most parts of the UK. A significant proportion of isolates are from patients with community onset-infections and 'previous hospital stay in the past 6 months' is a common characteristic among infected patients⁴.

Across NHSScotland, compliance and implementation of admission screening in order to identify CPE positive patients is less than optimal and variable. As a result, the lack of consistent data presents a very limited picture of CPE within NHSScotland. The variable practice for CPE screening presents a risk to patient safety in addition to risk of containment of this organism within Scotland.

In conclusion, recent Scottish, UK and European findings highlight the sustained need for CPE screening and we therefore request that NHS Boards implement screening requirements immediately as per the Health Protection Scotland CPE Toolkit⁵.

DL (2017) 2 Date 14 March 2017

Addresses

For action

Chief Executives

For information
Consultant Microbiologists
HAI Executive Leads,
Infection Prevention Control Teams
Directors for Public Health
Senior Charge Nurses,
Clinical Governance and Risk

Enquires to:

Abigail Mullings, HAI Professional Adviser Alistair Leanord, HAI Medical Adviser

Management committees

Tel: 0131 244 2490/3007

We are currently exploring how we will measure and monitor compliance with CPE screening and expect to develop and test approaches as part of the Excellence in Care Framework in the coming months.

We greatly appreciate your support and cooperation in ensuring that this mandatory requirement is put into effect within your NHS Board.

Yours sincerely

France (William

Fiona McQueen Chief Nursing Officer

References

- (1) Scottish Government. Antimicrobial Resistance- CMO/SGHD(2013)14. Scottish Government; 7-8-2013.
- (2) Scottish Government. Healthcare Associated Infection (HAI) and Antimicrobial Resistance (AMR) Policy Requirements- CNO/SGHSCD(2015)19. Scottish Government, 14-7-2015.
- (3) Health Protection Scotland and Information Services Division. Scottish Antimicrobial Use and Resistance in Humans in 2015. Health Protection Scotland and Information Services Division. 2016 [Report]
- (4) Grundmann H, Glasner C, Albiger B et al. Occurrence of carbapenemase-producing Klebsiella pneumoniae and Escherichia coli in the European survey of carbapenemase-producing Enterobacteriaceae (EuSCAPE): a prospective, multinational study. Lancet Infectious Diseases. [Preprint] 2016.

Available from: http://www.sciencedirect.com/science/article/pii/S1473309916302572 (accessed 21 November 2016).

(5) Health Protection Scotland. Toolkit for the early detection, management and control of carbapenemase-producing Enterobacteriaceae in Scotlish acute settings. Health Protection Scotland. 2016.

Available from: http://www.hps.scot.nhs.uk/resourcedocument.aspx?id=4129