

Infection Prevention and Control of Healthcare Associated Infections in 11th Guideline Development Group (GDG) Meeting

Primary and Community Care

National Clinical Guideline Centre for Acute and Chronic Conditions (NCGC)

Date and Time: 7th April 2011, 10.30 – 16.00

Place: National Clinical Guideline Centre, 5th Floor, 180 Great Portland

Street

GDG Present: Carol Pellowe (Chair) (CP) (Present for agenda items 1-7)

Elizabeth Gibbs (EG)

Zara Head (ZH)

Michael Nevill (MN)

Brian Pullen (BP)

Julian Spinks (JS)

Graham Tanner (GT)

Sue Wright (SW)

(Present for agenda items 1- 7)

(Present for agenda items 2- 7)

NCGC Present: Sarah Bermingham (SB) (Present for agenda items 1-7)

Caroline Blaine (CB) (Present for agenda items 1-7)
Lee-Yee Chong (LYC) (Present for agenda items 1-7)
Sue Latchem (SL) (Present for agenda items 1-7)
Smita Padhi (SP) (Present for agenda items 1-3)
Sarah Riley (SR) (Present for agenda items 1-7)

In attendance:

NICE Staff: Sarah Dunsdon (SD) (Present for agenda items 4-7)

Lyn Knott (LN) (Present for agenda items 3-7)

Agenda Item:

1. Introductions and Apologies:

CP welcomed the group to the eleventh GDG meeting. The group acknowledged apologies from GDG members Ellie Hayter, Sally Stucke and Eugenia Lee.

Minutes of last meeting: The minutes of the last meeting were reviewed by the group and accepted to be an accurate record.

Declarations of Interest: CP asked for each GDG member to declare their interests verbally and asked them to complete their forms. Each attending GDG member declared his/her interests in front of all those present.

No conflicts of interest were declared arising since the last GDG meeting.

Agenda Item:

2. Update searches – Patient information:

SP gave a presentation about patient information and presented the update searches. Additional studies were included that supported the themes already identified and the GDG agreed that the recommendation would remain the same.

3. Review of recommendations – Standard principles:

SR gave an introductory presentation to outline key considerations for the GDG when finalising recommendations, including consistency and equality issues. The GDG considered the wording of the standard precautions general and hand hygiene recommendations and made consensus decisions.

4. Review of recommendations – Standard principles continued:

The GDG continued to finalise recommendations and discussed the sharps and personal protective equipment recommendations.

5. Review of recommendations – Devices:

The GDG finalised the recommendations for the devices section, covering vascular access devices, long term urinary catheters and percutaneous endoscopic gastrostomy.

6. Key priorities for implementation and the next steps:

SR discussed how to select the key priorities for implementation. These prioritised recommendations are those that are likely to have the biggest impact on patient care and patient outcomes in the NHS as a whole. SR explained the process to the GDG and will send the voting information after the meeting. In addition the research recommendations agreed at the last meeting will be sent to the group with instructions on voting for the top priorities.

SR asked the GDG to review the write up chapters and add text where required or make comments to ensure that the chapters read well, focussing on the introductions and linking evidence to recommendations. SR presented the timeline for the guideline and the dates and content of the forthcoming meetings. Last date for GDG comments 6th June.

7. Any Other Business and Close of meeting:

CP thanked everyone for attending and closed the meeting.

Date of the next meeting:

12th GDG – Tuesday 10th May 2011, 10.30 – 16.00, at National Clinical Guideline Centre, 5th Floor, 180 Great Portland Street