



Government of **Western Australia**
Department of **Health**



ACIPC National Summit – Surveillance in Westralia

Rebecca McCann

Program Manger

Infection Prevention Policy and Surveillance Unit

Communicable Disease Control Directorate

Department of Health Western Australia

HISWA – Healthcare Infection Surveillance WA

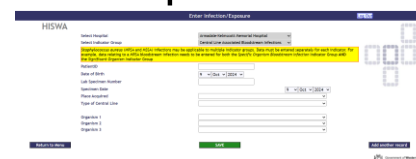
❑ Established 2005

- Voluntary collaboration - 11 metro / 20 regional / 8 private
- 5 indicators, DoH funded HISWA data base: web-based portal
- Definitions closely align to NHSN – CDC - USA



❑ Now

- 49 hospitals - 14 metro / 21 regional / 14 private
- 13 ICUs and 26 haemodialysis units (9 private)
- 12 indicators – 9 mandatory - 2009
- Performance monitoring
- Reporting – aggregate, state, public



❑ Multi-resistant organisms

- MRSA, VRE, CPO's [2012] *C.auris* [2019]

- ❑ SSI knee / hip arthroplasty + &
- ❑ SSI caesarean section
- ❑ *S. aureus* BSI (MSSA and MRSA) + &
- ❑ Central line associated BSI - ICU+, haematology, oncology
- ❑ Haemodialysis access associated BSI +
- ❑ Hospital-identified *Clostridium difficile* +
- ❑ MRSA HAI, VRE sterile site only
- ❑ Occupational exposures HCWs (blood / body fluid) +
- ❑ Multi-resistant organisms +
- MRSA VRE, CPO's* [2012] *C.auris* [2019]

+ Mandatory for public hospitals and private hospitals contracted for public patients

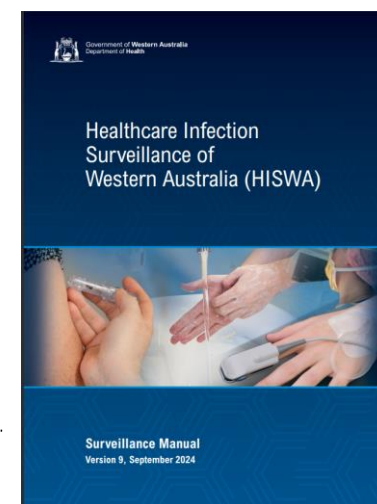
* Carbapenemase-producing *Enterobacteriales*, *Acinetobacter spp.*, *Pseudomonas spp.*

* Health Service Performance Monitoring

All MROs are listed as Notifiable under Public Health Act.

❑ IPPSU Enhanced Surveillance

- *C.auris*, CPO's – community onset, travel history, hospitalisation
- SABSI – all public hospital cases reviewed (50-60/month)



HISWA and ICNET

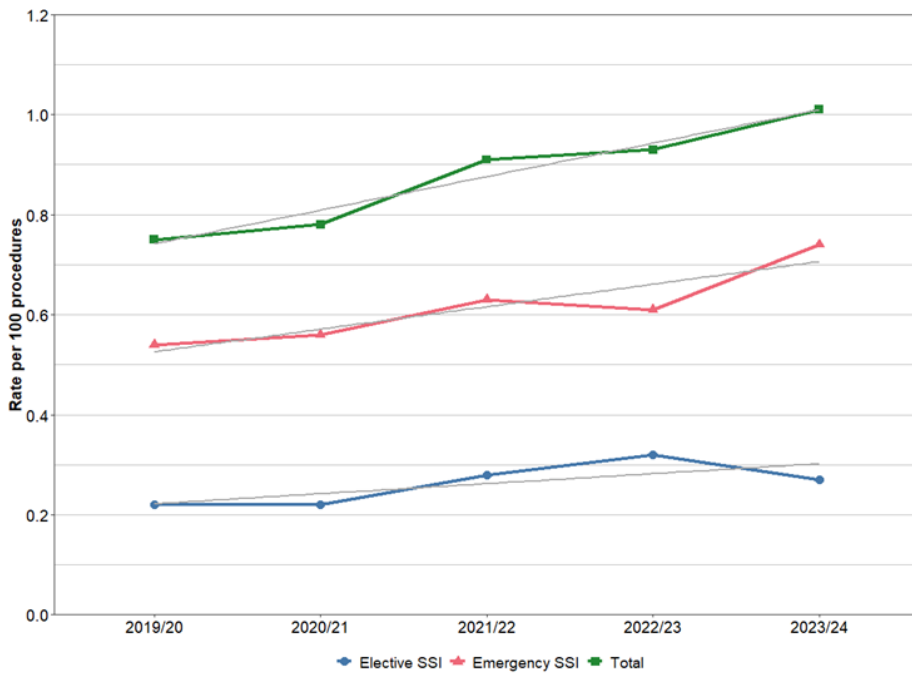
- ❑ ICNET rolled out 2019 -2020
- ❑ IPC management tool
- ❑ Interfaced with PAS, TMS, Radiology, Dialysis, Laboratory, Stork
- ❑ IPCs get real time notifications
- ❑ Supports HAI surveillance
 - improved case identification / decrease in missing cases
 - alerts IPC to readmissions post-surgery and positive microbiology *
 - all MRO notifications – linked to our PAS / micro-alert system
 - all lab results of importance e.g. *S.aureus* +ve BCs
 - extended properties mapped to our HISWA definitions
 - easy report functionality for sites to configure.

The screenshot displays the ICNET Infection Prevention dashboard. At the top, there is a navigation bar with the ICNET logo, a notification for 4 triggered alerts, and links for Alerts, Reports, and Utilities. Below the navigation bar, the main content area is divided into three sections:

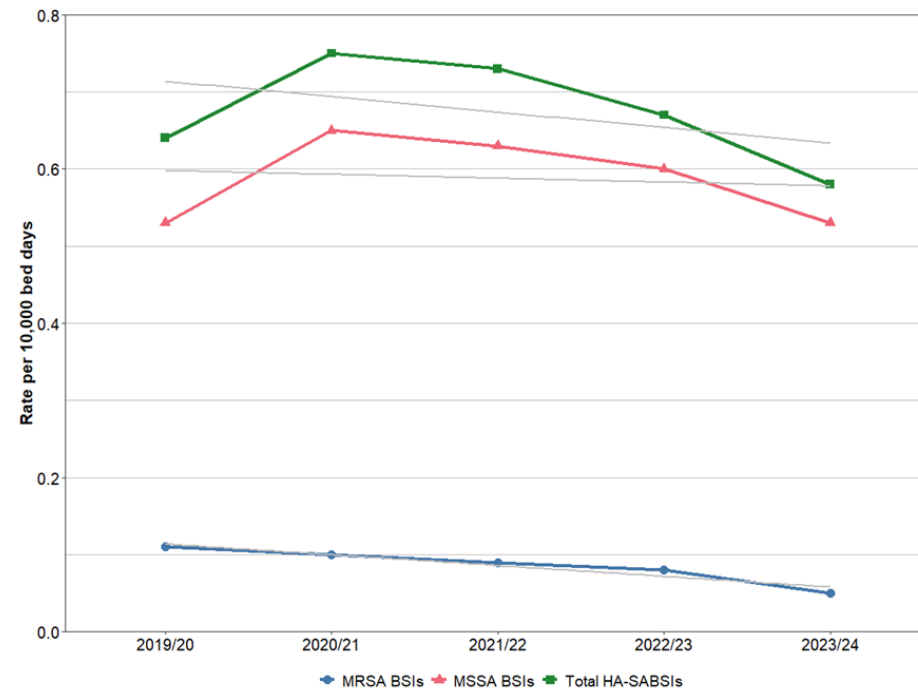
- Alerts:** A table showing 4 unreviewed alerts. Each alert includes a name, date triggered, and a link to view details.
- Latest imports:** A table showing the last import date and time for various systems, along with a link to view logs.
- Pinned reports:** A list of reports that have been pinned to the dashboard, including reports on Caesarean Section Infection, COVID-19 FLUA RSV, HISWA blood culture, HISWA C.diff toxin, HISWA VRE Sterile Site specimens, Hospitalised outside Australia Tag report, and Open Cases.

HISWA Snapshot – SSIs and HA-SABSIs

C-section SSI

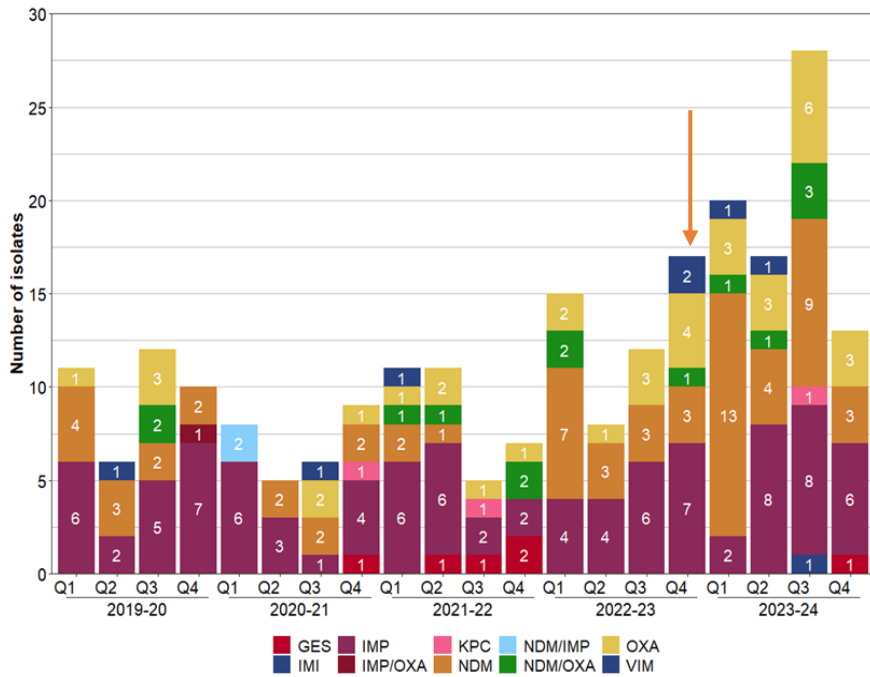


HA-SABSIs

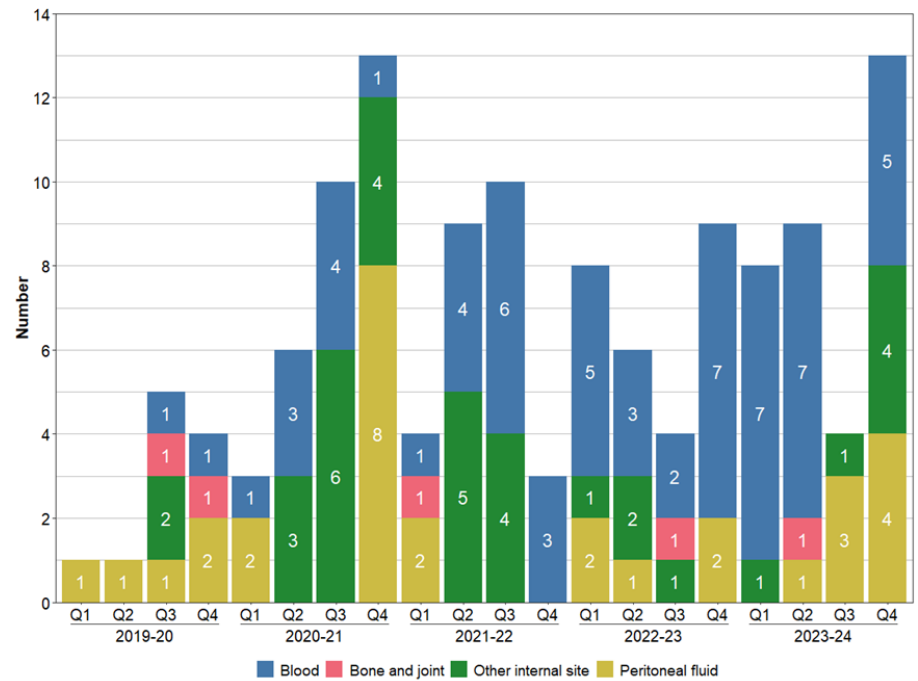


HISWA Snapshots - MROs

CPEs by enzyme type



VRE by sterile site



HISWA Snapshots - Reports



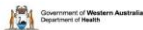
Healthcare Infection Surveillance Western Australia (HISWA)

Aggregate Report

Quarter 4, April – June 2024

Infection Prevention, Policy and Surveillance Unit,
Communicable Disease Control Directorate
12 August 2024

health.wa.gov.au



Hospital-identified Clostridioides difficile Infection

Quarter 4, 2023-24
Data for April to June 2024 data

Infection Prevention, Policy and Surveillance Unit,
Communicable Disease Control Directorate
8 August 2024

health.wa.gov.au



Vancomycin-resistant Enterococci Sterile Site Infections

Quarter 4, 2023-24
Data for April to June 2024

Infection Prevention, Policy and Surveillance Unit,
Communicable Disease Control Directorate
29 July 2024

health.wa.gov.au



Carbapenemase-producing organisms (CPO)

Quarter 4, 2023-24
Data for April to June 2024

1st West Coast-negative Reference Laboratory, QSR Medicine
Infection Prevention, Policy and Surveillance Unit, Communicable Disease Control Directorate

8 August 2024

1



Healthcare Infection Surveillance Western Australia (HISWA)

Haemodialysis access-associated bloodstream infection

Quarter 4, April-June 2024

Confidential – Not for Further Distribution

Infection Prevention, Policy and Surveillance Unit,
Communicable Disease Control Directorate
15 August 2024

health.wa.gov.au

HISWA Hospital Executive Report - xx Hospital

Reporting Period: Quarter 4 2023-24, April to June 2024

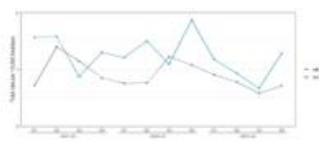
The purpose of this report is to highlight concerns, best practices, address critical issues (BIC) and provide data that other facilities can learn from. This report is intended for internal use only. It is not intended to be used for public reporting. For more information on HISWA, please visit the HISWA website. For more information on HISWA, please visit the HISWA website. For more information on HISWA, please visit the HISWA website.

Key findings:

- Healthcare-associated Staphylococcus aureus bloodstream infection (HA-SABSI):** The HA-SABSI rate remained stable compared to the previous quarter, with a slight increase in the number of cases. The HA-SABSI rate was 0.48 per 10,000 occupied bed days (OBDs) in Q4 2023-24, compared to 0.51 per 10,000 OBDs in Q3 2023-24.
- Healthcare-associated Staphylococcus aureus bloodstream infection (HA-SABSI) - Critical Issues (BIC):** There were no BIC identified for HA-SABSI in Q4 2023-24.
- Healthcare-associated Staphylococcus aureus bloodstream infection (HA-SABSI) - Best Practices:** The hospital achieved a 100% compliance rate for HA-SABSI best practices in Q4 2023-24.

Healthcare-associated Staphylococcus aureus bloodstream infections Quarter 4, 2023-24

Facility	Q4 2023-24	Q3 2023-24	Q4 2022-23	Q3 2022-23	Q4 2021-22	Q3 2021-22	Q4 2020-21	Q3 2020-21
xx Hospital	0.48	0.51	0.45	0.42	0.40	0.38	0.35	0.32



Facility	Q4 2023-24	Q3 2023-24	Q4 2022-23	Q3 2022-23	Q4 2021-22	Q3 2021-22	Q4 2020-21	Q3 2020-21
xx Hospital	0.48	0.51	0.45	0.42	0.40	0.38	0.35	0.32

health.wa.gov.au

P2-4 Healthcare-associated Staphylococcus aureus bloodstream infection (HA-SABSI) per 10,000 occupied bed days

September 2019

BACK TO HEALTH SERVICE SUMMARY

SUMMARY | NOTES | DATA QUALITY STATEMENT | DEFINITION | SUMMARY PDF

South Metropolitan Health Service Summary

P2-4
Healthcare-associated Staphylococcus aureus bloodstream infection (HA-SABSI) per 10,000 occupied bed days

Q4-18/19: 0.48
PREV: 0.54
Q4-17/18: 0.51

NEW DATA THIS MONTH: Q4-18/19
FREQUENCY: Quarterly (FY)

Q4-17/18	Q4-17/18	Q4-17/18	Q4-17/18	Q4-18/19	Q4-18/19	Q4-18/19	Q4-18/19
0.50	1.14	0.67	0.64	0.55	0.56	0.54	0.48

PERFORMANCE RATINGS
PERFORMING UNDERPERFORMING NOT PERFORMING



Healthcare Infection Surveillance Western Australia (HISWA)

Fresenius haemodialysis access-associated bloodstream infection report

Quarter 4, April-June 2024

Confidential – Not for Further Distribution

Infection Prevention, Policy, and Surveillance Unit,
Communicable Disease Control Directorate
15 August 2024

health.wa.gov.au

HISWA Future Plans

❑ Replacement HISWA database

- manual data entry - legacy system - not supported - no upgrades - end of life .

❑ Increased surveillance indicators

- cardiothoracic, colorectal, something paediatric
- increased use of ICNET for compliance monitoring prevention strategies.

❑ Increased use of genomics in HAI surveillance

❑ National surveillance

- enhance current national surveillance e.g. attributable cause for HA-SABSI
- national definitions
- focus on HAIs with sig morbidity / mortality and are preventable
- increase benchmark opportunities
- timely reporting.