SC2 Paper No.: A116

Monitoring and feedback of SARS Precaution Activities in Hospitals

An infection control hierarchy spanning the HA Head Office, all HA hospitals and departments down to individual workplaces was established in the second week of April. In each hospital, a senior staff was to be the Infection Control Officer (ICO) and assigned the responsibility to support the Infection Control Nurses (ICNs) and to help implementing SARS precaution measures as recommended by HAHO and regularly updated in the SARS web-page.

On April 26, the Central Working Group on Infection Control on SARS met with the ICOs and ICNs from all Hospital Clusters to discuss on further strengthening of the monitoring and feedback system and ways and means to heighten awareness in SARS precaution measures.

It was agreed to carry out systematic audit/inspection activities to monitor the implementation and compliance of infection control practices and feedback to hospitals Infection Control Teams with a view to achieving further improvement.

In view of different level and intensity of pre-existing auditing activities in different cluster hospitals, a flexible approach was adopted. Hospitals may (1) conduct their own audit under a format agreed by HAHO and submit reports, (2) incorporate HAHO's inspection requirement into their audit, or (3) HAHO would organize independent inspection by volunteer staff from the frontline.

Inspection

The exercise attempts to cover as many workplaces as possible. Its objective is not fault finding, but rather help speeding up culture change and feeding information to the hospital IC teams and HAHO so that they can respond quickly to possible deficiency. It is more akin to Continuous Quality Improvement (CQI) initiative with pre-agreed standards available. A simple inspection tool consisting of 26 questions requiring a 'yes' or 'no' response and 6 others requiring qualitative answer was developed by May 6, 2003 (Appendix 1). Any observed episode of non-compliance in any inspection exercise to a workplace will lead to a 'no' score.

CCEs and HCEs were informed of the exercise and asked to relieve the voluntary inspectors an hour each day to perform inspection. A briefing session was held for the inspectors before the commencement of the exercise. The objective and mode of operation was explained and inspectors were asked not to intervene with the daily operation except for obvious deviations from basic infection control practices that could cause serious harm to patients or staff. To enhance transparency and a wider participation, the inspection teams consist of volunteered frontline staff from different disciplines apart from infection control personnel. Inspection commenced in the second week of May 2003.

Inspection records were sent back to HAHO for analysis. Data and special observations were sent to the respective ICOs/ICNs for review and actions. Remedial actions taken by hospitals were documented.

Inspections were conducted for units which have not been audited or inspected within the last four weeks so that clinical units will not be overloaded by too frequent inspection activities.

Audit

Infection Control Team of some hospitals already have pre-existing plan for more formal audits. Their formats were either agreed by the HAHO or incorporated HAHO's inspection requirements. Audit reports were submitted to the Central Working Group on Infection Control on SARS after completion of their follow-up actions. Throughout May and June 2003, all 16 hospitals (which have participated in the management of SARS patients) have conducted inspection/audit on SARS infection control measures and results of these monitoring and feedback as well as remedial actions taken, have been reported to the Directors and the Cluster Chief Executives.

Inspection/Audit Reports

Report No	Hospitals	Date of Inspection	Type of Inspection/ Audit
1	Alice Ho Miu Ling Nethersole Hospital	12 - 19 May 03	Audit (HO inspection checklist incorporated)
2	Caritas Medical Centre	20 May – 7 June 03	Inspection
3	Cheshire Home, Shatin	19 – 21 May 03	Inspection
4	Kwong Wah Hospital	7 – 21 May 03	Inspection
. 5	North District Hospital	19 – 21 May 03	Audit (HO inspection checklist incorporated)
6	Pamela Youde Nethersole Eastern Hospital	19 – 27 May 03	Inspection
7	Princes of Wales Hospital	19 21 May 03	Audit (HO inspection checklist incorporated)
8	Princess Margaret Hospital	7 May 03	Inspection
9	Queen Elizabeth Hospital	16, 19 & 20 May 03	Audit (HO inspection checklist incorporated)
10	Queen Mary Hospital	6, 17, 9, 13 May, 6 June 03	Audit (self designed)
11,	Ruttonjee & Tang Shiu Kin Hospitals	7 – 31 May 03	Inspection
12	Tseung Kwan O Hospital	26 – 31 May 03	Inspection
13	Tuen Mun Hospital	May 03	Audit
14	TWGH Wong Tai Sin Hospital	19 May - 2 June 03	Audit (self designed)
15	United Christian Hospital	13 May – 17 June 03	Inspection
16	Yan Chai Hospital	17, 22, 23 April & 2, 29 May 03	Inspection (self designed)