HEALTH & HOUSING SCRUTINY COMMITTEE
4 MARCH 2026

HEALTHCARE ASSOCIATED INFECTIONS UPDATE

SUMMARY REPORT

Purpose of the Report

1. This report, and the accompanying presentation, will explain what healthcare-associated infections (HCAIs) are, how they occur, and the key measures used to prevent them, including good hand hygiene, effective cleaning, safe procedures and responsible antibiotic use. It will describe how infections spread within healthcare environments and outline the essential steps needed to break the chain of infection.

2. It will also set out the roles of the organisations responsible for preventing and managing HCAIs, including NHS England, Integrated Care Boards (ICBs), the UK Health Security Agency (UKHSA) and the local authority. It will explain how each contributes through national guidance, surveillance, outbreak support, system leadership and regulation.

3. Finally, this report will outline some of the work taking place locally in relation to HCAIs, including collaborative efforts between the local authority, ICB and UKHSA to support care providers, respond to outbreaks, strengthen training, improve adherence to guidance and use surveillance data to identify risks and drive targeted action across the system.

Summary

4. Healthcare-associated infections (HCAIs) remain a preventable risk across health and care settings, arising from the spread of microorganisms in environments where patients are vulnerable. The report highlights that reducing these infections depends on consistent application of key infection-prevention measures such as hand hygiene, safe clinical practice, environmental cleanliness and effective antibiotic stewardship supported by early recognition of risks and rapid response to emerging issues.

5. Tackling HCAIs requires coordinated action across national, regional and local systems. While national bodies provide leadership and standards, local partners translate this into practical action through surveillance, provider support and targeted improvement work. Locally, joint efforts between the local authority, ICB and UKHSA have strengthened guidance implementation, enhanced training and improved outbreak response, contributing to safer care and more resilient infection-prevention systems.

Recommendation

6. It is recommended that members of Health and Housing Scrutiny Committee:-

(a) Note the contents of the report and the range of local and national responsibilities for preventing and managing HCAIs.

(b) Recognise the complex nature of HCAIs and the multi-layered system of organisations involved in their prevention and control.

(c) Acknowledge the significant work and actions already undertaken across the system, including by the local authority, ICB, UKHSA and County Durham and Darlington NHS Foundation Trust, to reduce HCAI risks.

(d) Continue to seek assurance through Quality Accounts, regular surveillance reports and routine updates from system partners on ongoing infection-prevention performance.

LORRAINE HUGHES
DIRECTOR OF PUBLIC HEALTH

Background Papers

Presentation to be tabled.

KEN ROSS
Extension: 6200

Council Plan	Supports the "Living Well and Staying Healthy" ambition and contributes to reducing health inequalities.
Addressing inequalities	Health inequalities such as: socioeconomic deprivation, ethnicity, and limited access to care, significantly increase the risk and burden of healthcare-associated infections.
Tackling Climate Change	None
Efficient and effective use of resources	Contributes to preventing people needing long term support from council services.
Health and Wellbeing	Preventing avoidable ill health.
S17 Crime and Disorder	None
Wards Affected	All Wards
Groups Affected	All groups in Darlington.
Budget and Policy Framework	None
Key Decision	None
Urgent Decision	None
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers.

MAIN REPORT

Information and Analysis

7. HCAIs are infections acquired during the provision of health or social care, including in hospitals, care homes, primary care and community services. These infections can occur when microorganisms are transferred between people, equipment, surfaces or through clinical procedures that breach the body's natural defences. Individuals receiving care are often more susceptible due to existing illness or reduced immunity, making infection-prevention measures critical to maintaining patient safety.

8. Preventing HCAIs requires consistently interrupting the chain of infection. Key measures include effective hand hygiene, appropriate use of personal protective equipment, safe waste handling, thorough environmental cleaning and correct sterilisation of instruments. Strong staff training, assurance processes and adherence to infection-control policies are essential. Early identification and isolation of infectious patients, alongside responsible use of antibiotics, also help reduce transmission and limit antimicrobial resistance, including organisms such as MRSA and *Clostridioides difficile*.

System Responsibilities

9. NHS England provides national leadership by setting infection-prevention and control (IPC) standards, monitoring provider performance and analysing surveillance data supplied through UKHSA's mandatory reporting systems. This includes publication of the HCAI Compendium and support for national reduction programmes, such as those targeting Gram-negative bloodstream infections. Integrated Care Boards (ICBs) hold system-level responsibility for ensuring commissioned services meet statutory IPC requirements, improving provider performance, supporting outbreak response and embedding antimicrobial stewardship.

10. The UK Health Security Agency (UKHSA) has a central role in the prevention and control of healthcare-associated infections (HCAIs) across England. UKHSA undertakes comprehensive national surveillance, collecting and analysing data on key organisms such as *Clostridioides difficile*, *E. coli*, *Klebsiella*, *Pseudomonas aeruginosa* and *Staphylococcus aureus* through mandatory reporting systems. The information captured through the HCAI Data Capture System provides insight into where infections are occurring, how incidence is changing over time and the factors influencing these trends. This surveillance underpins national epidemiological reporting and supports the development of policies and interventions across the health system.

11. In addition to surveillance, UKHSA produces evidence-based guidance for preventing and managing HCAIs in hospitals, social care settings and community services. The agency also monitors antimicrobial resistance trends and supports responsible antibiotic use, recognising antimicrobial resistance as a significant and growing risk to effective healthcare.

12. UKHSA also advances scientific understanding of infection transmission through research into environmental and behavioural factors that influence the spread of pathogens. This includes work undertaken in controlled settings, such as a modular ward that simulates a

hospital environment and allows safe study of infection pathways. Findings from this research inform national guidance and contribute to improvements in infection-prevention practice and healthcare design.

13. At a local level the UKHSA provides direct support to NHS trusts and local authority public health teams through the North East Health Protection Team. Through close partnership working, UKHSA offers expert input on outbreak management, risk assessment and targeted actions where infection trends cause concern.

14. The North East Health Protection Team supports frontline services with timely, practical advice that enables them to respond effectively to increased infection pressures and implement appropriate control measures. This collaborative approach strengthens the overall resilience of local systems and contributes to improved patient safety.

15. County Durham and Darlington NHS Foundation Trust (CDDFT) has an agreed framework for preventing and managing healthcare-associated infections, which shapes the way care is delivered across its hospital sites every day.

16. The Trust sets clear infection-prevention priorities in its Quality Accounts, focusing on reducing infections such as MRSA and Clostridioides difficile through measures including routine hand-hygiene auditing, enhanced environmental cleanliness, antimicrobial stewardship, and consistent staff training.

17. The Trust has in place governance arrangements, including regular reporting to the Trust Board, and works closely in collaboration with partners across the wider health and care system. This joint working helps ensure that infection-prevention activity is aligned across organisations and that emerging issues are identified and addressed promptly. This approach aims to create a responsive framework that enables the Trust to detect, investigate and act on infection risks in a timely and coordinated way.

18. This robust framework enables the Trust to respond effectively whenever infection-prevention concerns arise. In recent years the Trust has strengthened monitoring, enhanced clinical practice and worked closely with partners to ensure appropriate, proportionate actions are taken in response to emerging risks. Where specific issues have been identified, whether related to environmental factors, patient pathways or staff practice, the Trust has implemented targeted measures such as increased auditing, additional staff competency work, focused cleaning regimes and improved communication with patients and partners. These actions all support early detection and prompt intervention while maintaining safe, high-quality care.

19. The local authority has a statutory responsibility to protect and improve the health of its population, which includes contributing to the prevention and management of HCAIs. Through the Director of Public Health, the authority maintains oversight of local health-protection arrangements and ensures that appropriate systems are in place across community settings, including care homes. This work is undertaken in close partnership with the UKHSA, which monitors infection patterns and provides expert advice, enabling the local authority to respond promptly to emerging risks and coordinate action with NHS and system partners.

20. Within the care-home sector, the local authority provides an important supportive and advisory function alongside the regulatory activity of the Care Quality Commission (CQC). While CQC inspections assess hygiene, staff practice and the effectiveness of infection-prevention measures, the local authority complements this by helping providers understand and implement national guidance, facilitating staff training and offering practical advice during outbreaks or areas of concern.

21. To maintain oversight of infection-prevention standards, the local authority draws on a range of intelligence, including CQC inspection outcomes, local surveillance data, outbreak reports and feedback from providers, residents and the public. Where issues are identified, the authority works closely with UKHSA, the NHS, Commissioning and Contracting teams and care homes to agree and monitor improvement actions, ensuring that key practices, such as hand hygiene, environmental cleaning and appropriate use of personal protective equipment, are consistently applied. Through this coordinated partnership approach, the local authority contributes to sustaining high standards of infection prevention and supporting safe, high-quality care across local services.

22. The prevention and control of healthcare-associated infections depends on effective collaboration across the whole health and care system. National bodies such as NHS England and UKHSA set standards, carry out surveillance and provide guidance and expertise, while local partners, including CDDFT, the ICB and the local authority, work within these standards to deliver a coordinated approach.

23. Through application of infection-prevention and control measures, effective outbreak identification and management, guidance and advice and ongoing quality improvement, this approach aims to collectively to reduce infection risks, for patients, across all care settings.