Key Issues in Infection Prevention and Control in the Asia Pacific Region - Malaysia

Submitted by: Malaysia
APEC GHSA forum

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Malaysia population density
What are some of the main HAI issues confronting your economy?

- Increasing number of Carbapenem Resistant Enterobacteriaceae cases; outbreaks in a few major hospitals
- High endemicity of
  - multi-resistant Acinetobacter baumanii, mainly in intensive care units. Main causative pathogen of HCAIs
  - extended spectrum beta lactamase enterobacteriaceae
  - methicillin resistant Staphylococcus aureus, though rate reducing
- Rate of increase of TB among HCW exceeding the rate of increase of TB among general population since 2012 till present
- Surveillance system still incomprehensive – limited representation from private hospitals

In which areas in HAI has your economy made progress in the past 5 years?

1) Surveillance
2) Improvements in rates of HAI for site specific infections and MRSA
3) Guidelines and training on Antimicrobial Stewardship Program in healthcare facilities involving both acute care and primary care
4) Awareness, training and education on prevention and control of infection for all HCW
5) Formalized training of Infection Control Nurse
POINT PREVALENCE SURVEY ON HEALTHCARE ASSOCIATED INFECTION
MARCH AND SEPTEMBER 2014

Infection Control Unit, Medical Care Quality Section, Medical Development Division, MOH
Trending of HCAI Prevalence By Type Of Infection, 2008-2014

Infection Control Unit, Medical Care Quality Section, Medical Development Division, MOH

2014

PROTOCOL on ANTIMICROBIAL STEWARDSHIP PROGRAM In Healthcare Facilities
In which areas in HAI does your economy need improvement?

1) Administrative and structural improvement of hospitals to prepare against diseases with epidemic potential. Increased need for ventilation and isolation room and enforcement on proper PPE use when handling contagious respiratory diseases those requiring strict contract precautions.

2) Infection Control Nurse (ICN) not being utilised full-time leading to inadequate ICN to hospital bed ratio.

Does your economy have a national and/or institutional-level HAI surveillance systems?

- National Surveillance on Healthcare Associated Infection involving MOH hospitals (tertiary hospitals) and University hospitals (Director’s KPI)
- State level surveillance for HCAI involving all MOH hospitals (i.e. secondary & tertiary)
- National Surveillance on selected Multidrug Resistant Organism i.e, MRSA, ESBL-Kleb pneumo, ESBL-E.Coli, Acinetobacter Baumannii and CRE in 28 MOH tertiary hospitals and 3 university hospitals
- Surveillance on MRSA, ESBL in MOH, university and private hospitals (Malaysia Patient Safety Goals)
- Surveillance on Hand hygiene compliance in MOH, university and private hospitals (Malaysia Patient Safety Goals)
Are HAI data published in academic literature?

- Published in English. A chapter in Annual Infection Control Report and distributed to all MOH and University hospitals.
- Not publicly available

Are there policy incentives that are driving improvements in HAI prevention and control?

- Accreditation - Malaysian Society for Quality in Health (MSQH) Service Standard No. 5, Prevention and Control of Infection
- KPIs
  - For all hospital directors – rates of HH, HCAI
  - For state directors and DG of Health – blood stream infections
MALAYSIAN PATIENT SAFETY GOALS

1) *To implement Clinical Governance
2) To implement WHO’s 1st Global Patient Safety Challenge: “Clean Care is Safer Care”
3) To implement WHO’s 2nd Global Patient Safety Challenge: “Safe Surgery Saves Lives”
4) To implement WHO’s 3rd Global Patient Safety Challenge: “Tackling Antimicrobial Resistance”
5) To improve the accuracy of patient identification
6) To ensure the safety of transfusions of blood and blood products
7) *To improve medication safety
8) To improve clinical communication by implementing a critical value program
9) *To reduce patient fall
10) To reduce the incidence of healthcare-associated pressure ulcer
11) To reduce Catheter-Related Bloodstream Infection (CRBSI)
12) To reduce Ventilator Associated Pneumonia (VAP)
13) *To implement the Patient Safety Incident Reporting and Learning System

*Applicable for clinics

MPSG REPORTING BY TYPE OF HOSPITAL (2014)

- State Hospital: 100% reported, 15/15
- Specialist Hospital: 100% reported, 53/53
- District Hospital: 100% reported, 66/66
- MoH Institutions: 100% reported, 7/7
- University: 100% reported, 3/3
- Military: 40% reported, 2/5
- Private: 21.49% reported, 46/214

Reported | Not Reported
Thank you