Australian Commission on **Safety and Quality** in Health Care

Australian Guidelines for the Prevention and Control of Infection in Healthcare

Information for the third edition and the public consultation process

Background information

The *Australian Guidelines for the Prevention and Control of Infection in Healthcare* (the Guidelines) provide healthcare workers and health service organisations with the minimum standards for infection prevention and control in health care. The Guidelines support a risk-based approach to infection prevention and control, based on current evidence.

The Guidelines also support health service organisations develop tailored, local protocols and processes for infection prevention and control, and support health service organisations to meet the requirements of the National Safety and Quality Health Service Standards, particularly the Preventing and Controlling Infections Standard.

The Australian Commission on Safety and Quality in Healthcare (the Commission) are undertaking the revision of the Guidelines in stages. This first stage focuses on priority topics such as transmission-based precautions and waterless models of care.

The Commission will be following the National Health and Medical Research Council's (NHMRC) process for guideline development. The Commission will be seeking NHMRC endorsement of the third edition of the Guidelines.

Information included in this resource

- Frequently asked questions about the revision of the Australian Guidelines for the Prevention and Control of Infection in Healthcare
- Frequently asked questions about the National Health and Medical Research Council
- Frequently asked questions about the public consultation process
- A glossary.

Frequently asked questions

About the revision of the Guidelines

Why do the guidelines need to be updated?

The Guidelines were last reviewed in 2019. Best practice guideline development and maintenance seeks to review guidelines every 5 years.

So much has changed in health care since 2019. A revision of the Guidelines will ensure that it is current, evidence-based and remains relevant to healthcare workers, healthcare services, patients and consumers for now and into the future.

The update of the third edition of the Guidelines aims to:

- incorporate changes in evidence that have emerged because of COVID-19
- reflect contemporary infection prevention and control practices
- ensure alignment with the clinical governance and risk management requirements of National Safety and Quality Health Service Standards, National Safety and Quality Primary and Community Healthcare Standards and the National Model Clinical Governance Framework
- ensure the Guidelines will be applicable to acute and non-acute health settlings.

When will the third edition of the Guidelines be released?

The third edition of the Guidelines is due for release in August 2027.

Why isn't the Commission undertaking a full update of the Guidelines?

Most information in the Guidelines still remains current and does not require revision at this time. However, the Commission, in consultation with the Commission's Infection Prevention and Control Advisory Committee, has developed a list of priority topics for revision from the guideline. These topics are the focus of the updated content for the third edition of the Guidelines.

What topics are included in the priority list of topics for revision?

Two important topics for revision include transmission-based precautions and the use of waterless models of care. Systematic literature reviews have been completed on these topics and these studies found that there was enough evidence from current research to support the revision of the clinical practice recommendations related to the transmission-based precautions and the development of new good practice statements for respiratory precautions, and the appropriate use of waterless models of care in healthcare.

The Commission is updating the practical information on the following topics:

- revision of current clinical practice recommendations, including removing two recommendations that are no longer current
- development of new good practice statements to information clinical practice
- environmental cleaning including the appropriate use of disinfectant for environmental and equipment cleaning, discharge cleaning for transmission-based precautions
- governance and risk management for infection prevention and control

- the hierarchy of controls and infection prevention and control
- outbreak investigation and management
- reprocessing of implantable devices
- advice for remanufactured devices
- storage of sterile stock
- the appropriate use of alcohol-based hand scrub for pre-operative and pre-procedure hand hygiene
- the appropriate placement of handwashing basins in clinical settings
- information on mask and particulate filter respirators for transmission-based precautions.

These topics were identified by the Commission's Infection Prevention and Control Advisory Committee and feedback received on the Guidelines.

Where can I read the systematic reviews on transmission-based precautions and waterless models of care?

The Commission will publish each systematic literature review with the publication of the third edition of the Guidelines in August 2027.

Can I recommend other topics that I think need to be updated?

Yes, as part of the public consultation process, you will have an opportunity to suggest other topics for revision in the Guidelines.

The Commission will include those topics as part of the ongoing maintenance and updating of the Guidelines.

NHMRC process to develop the revised Guidelines

The Commission is following the National Health and Medical Research Council's (NHMRC) process for guideline development and will be seeking NHMRC approval for the third edition of the Guidelines.

Who is the National Health and Medical Research Council (NHMRC)?

The NHMRC is Australia's leading expert body in health and medical research. The NHMRC develop guidelines for health. They also support other organisations to develop high-quality health guidelines that are evidence-based and encourage best practice.

Why is NHMRC approval for clinical practice guidelines important?

NHMRC approval ensures that a guideline is of a high quality, is based on the best available scientific evidence and has been developed to rigorous standards. NHMRC approval also means the guidelines are recognised in Australia and internationally as representing current knowledge and best health practice.

The NHMRC's website has further information on guideline development, specifically processes for evidence to decision for developing clinical practice recommendations.

The consultation process

What is the purpose of public consultation?

The purpose of this round of public consultation is to seek feedback on the revised clinical practice recommendations and new good practice statements for the third edition of the Guidelines. The aim of the public consultation is to determine if:

- the revised clinical practice recommendations and new good practice statements are practical, easy to understand and reflect the needs of the Australian health system
- there is support to remove two current recommendations from the guideline
- there are other topics from the current edition of guideline that should be updated as part of future revisions of the guideline.

How can I provide feedback about the revised clinical practice recommendations and new good practice statements?

A survey is provided on the Commission's public consultation page for the revision of the third edition of the Guidelines.

There are two options for providing feedback on the revised recommendations and new good practice statements.

Option 1: You can fill out a separate survey for each recommendation/good practice statement – this option allows you to select only the recommendations/good practice statements you are interested in. You do not need to complete all the surveys.

Option 2: You can complete one survey which includes feedback on all the revised recommendations and good new practice statements.

Feedback must be submitted via the online survey

Only feedback submitted via the online survey will be reviewed.

What if I want to provide feedback about other information in Guidelines?

Additional questions about the second edition of the Guidelines are included in all surveys (options 1 and 2). These are general questions about what you think is working well in the Guidelines, what information you think should be reviewed and what information is missing?

Information from these questions will be used to inform ongoing maintenance and future revisions of the Guidelines.

How will my feedback be used?

The Commission will review all feedback submitted via public consultation. Feedback about the draft recommendations and good practice statements will be reviewed and used to update the wording of the draft recommendations and good practice statements.

General feedback will be used to help inform future revisions of the guidelines.

No personal details will be collected; the Commission will only collect general demographic information to help us understand who is using the Guidelines and help ensure that scope of the Guidelines is appropriate for the user base.

Glossary

This glossary has been prepared to assist you when you are reviewing the revised recommendations and new good practice statements.

Clinical practice recommendation. Are recommendations based on one or more systematic reviews of research evidence and developed using the GRADE approach to assessing certainty of the body of evidence and a structured process for formulating recommendations

- **Recommendations** are used when there is a high or moderate level of evidence to support the recommendation. A person would feel confident that the benefits of the recommendation would clearly outweigh any potential harm, and there would be little variability in how the recommendation would be valued by healthcare workers, patients and health service organisations. All or almost all informed people would choose the recommended option.
- **Conditional recommendations** are used when there is a close balance between desirable and undesirable effects of the options, low or very low certainty of evidence or variable values. Most informed people would choose the recommended option, but a substantial number would not.
- **A Good Practice Statement** are recommendations that guideline panels feel are important but are not appropriate for formal ratings of quality of evidence because it is sufficiently obvious that desirable effects outweigh undesirable effects.

De-escalation (in the context of transmission-based precautions) is a reduction in the infection prevention and control interventions used to reduce the risk of infections transmission. For example, you may choose to use airborne precautions for a patient with suspected tuberculosis (TB), however if the patient's test results are negative for TB you would de-escalate the precautions to droplet and standard precautions only until the patient's symptoms resolve.

Evidence (in the context of guidelines) is the findings from research used to support the development of the clinical practice recommendations.

Evidence to Decision (EtD) frameworks provide a summary of criteria and issues the Guideline Development Group considered when developing the clinical practice recommendations and good practice statements.

Terminology used the evidence to decision frameworks includes

- **Benefits and harms:** this section considers whether the balance between desirable outcome of the recommendation outweighs any potential harm from the recommendation.
- **Certainty of evidence:** the quality of the evidence from the systematic review (low/moderate/high). This section is supported by the GRADE process.
- **Values and preferences:** this section considers whether the recommendation is generalisable to most clinical settings and if it would be acceptable to most healthcare workers and patients.
- **Resources and other considerations:** this section considers the resources and other factors, such as economic and environmental sustainability that might affect how a healthcare service will implement the recommendation.

GRADE: Grading of Recommendations Assessment, Development and Evaluation (GRADE). A process used to rate the quality of evidence and the strength of a guideline recommendation.

Guideline Development Group is a multidisciplinary group that includes representatives from relevant disciplines, clinical experts, end users, and consumers. This group is responsible for reviewing the findings of the systematic reviews to determine if there is enough evidence to support the development of new or revision of current clinical practice recommendations.

Respiratory precautions are a set of practices used for people known or suspected to be infected with agents transmitted from person to person by the airborne or droplet route. Respiratory transmission can occur when an infected person coughs, sneezes, talks or sings, or during aerosol generating procedures (AGPs). (source: The Aged Care Infection Prevention and Control Guide)

Standard precautions are the work practices that constitute the first-line approach to infection prevention and control in the healthcare environment. These are recommended for the treatment and care of all patients.

Transmission-based precautions are extra work practices in situations where standard precautions alone may be insufficient to prevent infection (e.g. for patients known or suspected to be infected or colonised with infectious agents that may not be contained with standard precautions alone).

- **Contact precautions**: A set of practices used to prevent transmission of infectious agents that are spread by direct or indirect contact with the patient or the patient's environment.
- **Droplet precautions:** A set of practices used for patients known or suspected to be infected with agents transmitted by respiratory droplets.
- **Airborne precautions**: A set of practices used for patients known or suspected to be infected with agents transmitted person-to-person by the airborne route.

Waterless models of care the "targeted avoidance of sinks and reduction of tap-water-related activities such as handwashing with disinfectant soap or solution prior to patient care" (Buvaneswarran et al. 2024)**.**

Additional resources

Australian Guidelines for the Prevention and Control of Infection in Healthcare (2nd Edition)

National Health and Medical Research Council Guidelines for Guidelines Handbook

National Safety and Quality Health Service Standards

National Model Clinical Governance Framework

The Commission's work on Infection Prevention and Control

For more information

Please visit: Consultation on IPC guidelines | Australian Commission on Safety and Quality in Health Care