



Healthcare-associated infections and antimicrobial use
in European long-term care facilities (HALT-4)

INSTITUTIONAL QUESTIONNAIRE

Remark: It is **essential** that each facility enrolled in HALT-4 completes this questionnaire as it collects vital data. We recommend that the person completing this questionnaire is the person in charge of the facility. If this person cannot answer some of the questions or locate the relevant information, they should request assistance from persons who are able to answer those questions. **This is especially relevant for questions relating to antimicrobial policy.**

A – GENERAL INFORMATION

DATE OF THE SURVEY IN YOUR FACILITY (dd/mm/yyyy)

FACILITY STUDY NUMBER (*allotted by your national HALT-4 coordinator*)

IN THE FACILITY:

Total number of RESIDENT ROOMS Rooms

Total number of SINGLE OCCUPANCY RESIDENT ROOMS Single occupancy rooms

B – DENOMINATOR DATA

This table when completed will summarize the data collected in each ward (ward list) for the total population

IN YOUR FACILITY, ON THE DAY OF THE SURVEY, TOTAL NUMBER OF:

BEDS IN THE FACILITY (*both occupied and non-occupied beds*)

OCCUPIED BEDS

ELIGIBLE RESIDENTS:

PRESENT AT 8 AM AND NOT DISCHARGED AT THE TIME OF THE SURVEY

AGE OVER 85 YEARS

MALE RESIDENTS

RESIDENTS WITH ANY URINARY CATHETER

RESIDENTS WITH ANY VASCULAR CATHETER

RESIDENTS WITH PRESSURE SORES

RESIDENTS WITH OTHER WOUNDS

RESIDENTS DISORIENTED IN TIME AND/OR SPACE

RESIDENTS USING A WHEELCHAIR OR BEDRIDDEN

RESIDENTS WITH SURGERY IN THE PREVIOUS 30 DAYS

RESIDENTS WITH URINARY AND/OR FAECAL INCONTINENCE

RESIDENTS RECEIVING AT LEAST ONE SYSTEMIC ANTIMICROBIAL AGENT

RESIDENTS WITH AT LEAST ONE ACTIVE HEALTHCARE-ASSOCIATED INFECTION

C – MEDICAL CARE AND COORDINATION

1. Is medical resident care, including antimicrobial prescribing, in the facility provided by the:
 - Personal general practitioners (GP) or group practice(s) only*
 - Medical staff, employed by the facility only*
 - Both personal GPs/group practice(s) and medical doctor(s) employed by the facility*

2. Are medical activities in the facility coordinated by a coordinating medical physician (CP)?
 - No, there is no internal or external coordination of the medical activity*
 - Yes, there is a physician from inside the facility (internal) who coordinates the medical activities*
 - Yes, there is a physician from outside the facility (external) who coordinates the medical activities*
 - Yes, there is both a physician from inside and outside the facility (internal and external) who coordinates the medical activities*

3. What percentage of the residents in the facility are fully vaccinated against COVID-19?

Estimated percentage (%) |_|_|_| %

4. What percentage of the healthcare workers in the facility are fully vaccinated against COVID-19?

Estimated percentage (%) |_|_|_| %

5. What percentage of the residents in the facility are vaccinated against seasonal influenza?

Estimated percentage (%) |_|_|_| %

6. What percentage of the healthcare workers in the facility are vaccinated against seasonal influenza?

Estimated percentage (%) |_|_|_| %

D – INFECTION PREVENTION AND CONTROL PRACTICE

1. Are there (internal and/or external) persons with training in infection prevention and control available to the staff of the facility?
 - Yes*
 - No*

2. If a person with training in infection control/prevention is available, is this person:
 - A nurse*
 - A doctor*
 - There is both a nurse and a doctor*

3. In the facility, is/are there:

(Please complete this question even if there is no person with training in infection prevention and control available in the facility)

 - Infection prevention and control training of the nursing and paramedical staff*
 - Appropriate training of general practitioners and medical staff in infection prevention and control*
 - Development of care protocols*
 - Registration of residents colonized/infected with multi-resistant microorganisms*
 - Designation of a person responsible for reporting and management of outbreaks*
 - Feedback on surveillance results to the nursing/medical staff of the facility*
 - Supervision of disinfection and sterilization of medical and care material*

12. Is there currently a policy of universal masking in place in the facility?

- No
- Yes, for routine care only
- Yes, for routine care and in all common areas (e.g. lunch/dining room, physiotherapy room)

E – ANTIMICROBIAL POLICY

1. Which of following elements of antimicrobial stewardship are present in the facility?

- An antimicrobial committee
- Annual regular training on appropriate antimicrobial prescribing
- Written guidelines for appropriate antimicrobial use (good practice) in the facility
- Data available on annual antimicrobial consumption by antimicrobial class
- A system to remind healthcare workers of the importance of microbiological samples to inform the best antimicrobial choice
- Local (i.e. for that region/locality or national if small country) antimicrobial resistance profile summaries available in the LTCF or in the local General Practitioner surgeries
- A system that requires permission from a designated person(s) for prescribing of restricted antimicrobial, not included in local formulary
- Advice from a pharmacist for antimicrobials not included in the formulary
- A therapeutic formulary, comprising a list of antibiotics
- Feedback to the local General Practitioner on antimicrobial consumption in the facility
- None of the above

2. If written therapeutic guidelines are present in the facility, are they on:

- Respiratory tract infections? Yes No
- Urinary tract infections? Yes No
- Wound and soft tissue infections? Yes No

3. Is a programme for surveillance of antimicrobial consumption in place in the facility?

- Yes No

4. Is a programme for surveillance of resistant microorganisms in place in the facility? (annual summary report for MRSA, Clostridium difficile, etc)

- Yes No

The HALT-4 team thanks you for your participation!