

Internationally Renowned Cancer Centre Upgrades to Leading-Edge Infection Surveillance Software

ICNET



Left to right – Joanne Chambers, Infection Prevention and Control Nurse; Samantha Bramley, ICNet Account Manager; Wayne Gilbert, Lead Infection Prevention and Control Nurse; Gary Thirkell, Senior Infection Prevention and Control Nurse.

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The Christie NHS Foundation Trust, honoured in March 2017 as the No.1 specialist hospital in the United Kingdom and one of the top three trusts overall by the national Care Quality Commission, has upgraded to the latest-generation **ICNet** Infection Prevention software. The change enables the renowned Manchester-based cancer centre to vastly improve surveillance of patients throughout its network and to reduce the spread of antimicrobial-resistant infections.

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The largest single-site cancer centre in Europe, The Christie treats more than 44,000 oncology patients every year. It is the lead provider for the Greater Manchester and Cheshire Cancer Network, covering a population of 3.2 million, and runs clinics at 16 other general hospitals. A quarter of its patients are referred from other sites across the U.K.

For more than a century, The Christie has been a pioneer in the care, treatment and research of cancer. It is where many of the world's major cancer treatment breakthroughs

were first achieved, including the use of X-rays for therapy (1901), the first clinical use of Tamoxifen for breast cancer (1970) and the first use of cultured bone marrow for leukaemia treatment (1986).

“This decision to reinvigorate the partnership with **ICNet** continues the long tradition of The Christie engaging with industry to adopt innovations that deliver the highest standards of cost effective care and patient safety,” said Chris Tilley, Partnership and Service Development Manager for Baxter Healthcare Ltd.

ICNet Infection Prevention, used by over 40% of all UK NHS Trusts and Health Boards, is a case management and clinical decision support surveillance system. It facilitates real time reconciliation of data from existing clinical information systems, monitoring relevant data and correlating patients' specific conditions and treatments to immediately inform the IPC and wider teams to critical infection control scenarios.

It also interfaces with theatre management systems, providing full automation of surgical site infection surveillance and an electronic upload for national reporting.

“Surveillance is an important aspect of infection prevention and control and as The Christie patients are particularly susceptible to infections it is important we use the latest software to assist in the management of our patients,” said Gary Thirkell, The Christie's Senior Infection Prevention and Control Nurse. “Having use of **ICNet** has allowed the Infection Prevention team to work in different ways increasing productivity

and efficiency in maintaining the safety of our patients.”

The Christie first adopted the **ICNet** software in 2008 and having reviewed the huge advances in surveillance technology and analytics, committed to upgrading to the latest edition of the software. This enables the Trust to take advantage of:-

- A real-time outbreak management tool, which will enable the team to react more quickly to the risk of cross-infection among patients and healthcare workers, thereby helping to minimise the impact and severity of an outbreak while also providing information to help users prevent and better manage the incidence of future similar outbreaks.
- Increased efficiencies in accessing results from the centre's three microbiology labs to identify at-risk patients, which allows infection control staff to meet national and local infection targets while spending more time on wards, where they can have a greater clinical impact.
- More effective monitoring of antibiotic use, by aggregating data from e-Prescribing, microbiology and infection control into a centralised infection control record.

Added Chris Tilley: “**ICNet** and The Christie are committed to work together to continuously improve patient monitoring and capture data that will help redesign care pathways and treatment protocols to improve the patient experience and reduce the burden of care through targeting the effective use of antibiotics.”