

30 March 2006

**REPORTING MRSA DATA: OVERVIEW
OF ARRANGEMENTS, INCLUDING;**

- (i) **NEW SCHEDULES FOR DATA
SUBMISSIONS**
- (ii) **OVERVIEW OF
RESPONSIBILITIES: DATA
CHECKS**

Dear Colleague

This letter sets out forthcoming changes to arrangements for the collection and checking of the MRSA data returns submitted by acute Trusts. MRSA data for April-September 2005 was published on 6/2/06 and this letter sets out what happens to data after that date. Its contents are for action by Directors of Infection Prevention Control, Infection Control Teams and Medical Microbiologists. Please note that it is the Chief Executive's responsibility to ensure timeliness and accuracy of the returns.

Background

Over the last year we have made a number of changes to the mandatory surveillance scheme for reporting MRSA bacteraemias, including monthly reporting from April 2005 and 'real-time' reporting to the new website: <http://nww.hcai.nhs.uk/>. The website facilitates the collection of enhanced information in a timely and efficient manner. These changes have been introduced successfully and we appreciate the efforts of Trusts and of the HPA in delivering data-flow that facilitates regular monitoring of Trust performance towards individual MRSA targets. In addition, the enhanced website is beginning to generate genuinely new insights into the incidence of MRSA bacteraemias and we will soon be in a position to share these with you.



**From the Chief
Medical Officer and
the Chief Nursing
Officer**

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PL/CMO/2006/2, PL/CNO/2006/2

For action

- Chief Executives of NHS acute hospital Trusts and NHS Foundation Trusts for circulation to all Medical Microbiologists, Directors of Infection Prevention and Control and Infection Control Teams.
- Chief Executives of Strategic Health Authorities to circulate to SHA Performance Improvement and Nursing leads

For information

- Chief Executives of PCTs
- Medical and Nursing Directors of NHS acute hospital Trusts and NHS Foundation Trusts
- Regional Directors of Public Health
- HPA – Chief Executive
- HPA - Director of CDSC
- HPA - Director of Local and Regional Services to circulate to Regional Epidemiologists, Regional Microbiologists and CCDCs
- HPA – Director of Specialist and Reference Laboratories
- Duncan Selbie, Programmes and Performance Directorate, DH
- Richard Gleave, Recovery and Support Unit, DH

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The drivers for improved reporting

We need to build upon the above success by ensuring that monthly reporting is as reliable as possible. **From April 2006 the enhanced MRSA website will be the only source of mandatory MRSA data. All other former routes of mandatory MRSA reporting will be halted.** Voluntary reporting of MRSA bacteraemia through CoSurv should continue as usual.

Since April 2005, several hundred cases have been reported *after* the monthly deadline. This highlights the need for a Trust to take responsibility for entering and checking the accuracy of its own data on a regular basis. This means entering cases at least weekly, if the system is to operate at the intended level of maximum benefit for all its users.

Trusts' responsibilities in the data checking process

It will be the responsibility of Trusts to ensure this process is completed each month and that data entered by the 15th of the following month is as accurate as it can be given the clinical background.

It will be the personal responsibility of the Chief Executive to ensure that this timetable is followed and that data returns are accurate.

Data for **October to December 2005** has now been checked by Trusts and sent to the HPA. Any further changes to these data can only be made with the agreement of the Department of Health and the HPA. Once any amendments have been agreed, Trusts must enter these updates onto the website **by 15th April 2006**. After this time the dataset for October to December 2005 will be locked by the HPA.

Similarly, data for **January to March 2006** must be entered by the agreed monthly deadline of the 15 April 2006, and any subsequent changes agreed by the DH and HPA. There should be a finalised dataset on the website **by 30 April 2006**, after which time this dataset will be locked and no further changes will be possible. This shorter timescale has been put in place because these data will be supplied by the HPA to the Healthcare Commission for annual 'healthchecks'. Consequently, it is vital that the data are checked and agreed by the end of April 2006.

Arrangements from April 2006 onwards:

- from April 2006 quarterly data checking will no longer take place. Instead data will be checked monthly.
- each month's data must be entered by the **15th of the following month**.
- these records will then be checked against other available data sources by the HPA, and any inconsistencies fed back to Trusts via the Regional HPA offices.
- a finalised dataset for each month should be agreed with regional HPA offices, updated onto the website, and signed-off by the CEO of each Trust two months after the initial data entry deadline, in accordance with the timetable below. After this time, the dataset for will be locked by the HPA.

The data checking timetable from April onwards will be:

Data for	To be entered by	HPA checks data & reports back to Trusts	Data to be finalised by
April	15 May		15 July
May	15 June		15 August
June	15 July		15 September

Exception-based amendments to data

Any subsequent amendments to that month's data must be requested by application, with appropriate substantiation to the HPA. Any amendments will require the agreement of DH and the HPA before any change can be made to the finalised dataset.

This note reinforces the importance of reporting timely accurate data that complies with the CNO/CMO letter of July 2005 (see link below). The HPA have also produced a set of FAQs (frequently asked questions), which are available on the first page of the website and address the reporting requirements regarding which data should be entered on to the website.

Further Information

For further information on the surveillance system, contact: Andrew Pearson at the HPA on andrew.pearson@hpa.org.uk.

For further information on the national target and policy initiatives, contact: Patrick Hennessy at the DH on patrick.hennessy@dh.gsi.org.uk.

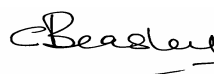
Links to previous MRSA bacteraemia reporting guidance

CMO/CNO letter. Requirements for mandatory *Staphylococcus aureus* reporting scheme: July 2005
<http://www.dh.gov.uk/assetRoot/04/11/25/90/04112590.pdf>

Letter from Inspector of Microbiology and infection control: 16th December 2005
<http://www.dh.gov.uk/assetRoot/04/12/53/76/04125376.pdf>



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For further information, please contact:

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Further copies of resources including this letter can be ordered via:

Department of Health Publications:
Email: doh@prolog.uk.com
Telephone: 08701 555 455
Or write to Department of Health
PO Box 777, London SE1 6XH

This letter is also available at:

<http://www.dh.gov.uk/AboutUs/HeadsOfProfession/ChiefMedicalOfficer/CMOletters/fs/en>