

POSTER PRESENTATION

Open Access

P381: Legionella priority control: development of a comprehensive tool for healthcare settings

P Del Giudice^{1*}, L Arnoldo¹, D Goi¹, R Cocconi², B Casini³, G Gurnari¹, U Moscato⁴, ML Cristina⁵, S Brusaferrò¹

From 2nd International Conference on Prevention and Infection Control (ICPIC 2013)
Geneva, Switzerland. 25-28 June 2013

Introduction

Despite scientific and technological advances, Legionella continues to be a major threat to patients in healthcare settings. To be effective the control of Legionella need a competent attention based on a correct risk assessment and on consequent operative choices.

Objectives

A tool called Legionella Priority Control [LPC], was designed to be comprehensive, easily implementable and able to define intervention priorities in the healthcare setting.

Methods

LPC was developed within a project funded by the Italian Ministry of University through the following stages:

- Review of literature to identify all the possible critical points in Legionella control;
- Classification of all selected critical points in three independent areas of interest: management, water distribution system and patient susceptibility;
- Identification of several critical points for each area;
- Split of each critical point into items to be answered in form of questionnaire;
- Classification of items through a multidisciplinary consensus into 4 risk categories (1 - best practice/low to no risk, 2 - possible Legionella presence (not evidence based)/medium risk, 3 - probable Legionella presence (evidence based)/high risk, 4 - demonstrated Legionella presence/very high risk);
- Analysis of the 3 areas scores in order to define a general risk score and a structure related risk score;
- Use of a risk matrix (including a feasibility score to be assigned by local practitioners linked to the setting) to define final priorities.

Results

LPC includes:

- A check list of items which, once filled in, allows the definition of existing problems (3 areas of interest, 15 critical points and 76 items);
- A risk matrix which allows definition of an initial list of priorities;
- A subjective feasibility score which allows definition of priorities tailored to the local setting.

Conclusion

LPC offers to the infection control practitioner an easier yet comprehensive way to define priorities for Legionella control tailored to the local healthcare setting.

Disclosure of interest

None declared.

Author details

¹University of Udine, Italy. ²Azienda Ospedaliero-Universitaria Santa Maria della Misericordia, Udine, Italy. ³University of Pisa, Pisa, Italy. ⁴Catholic University of the Sacred Heart, Rome, Italy. ⁵University of Genoa, Genoa, Italy.

Published: 20 June 2013

doi:10.1186/2047-2994-2-S1-P381

Cite this article as: Del Giudice et al.: P381: Legionella priority control: development of a comprehensive tool for healthcare settings. *Antimicrobial Resistance and Infection Control* 2013 **2**(Suppl 1):P381.

¹University of Udine, Italy

Full list of author information is available at the end of the article