



Department  
of Health &  
Social Care



The  
Queen's  
Nursing  
Institute

Infection Prevention and Control (IPC)

Champion Network meeting

SUMMARY

*'Parasitic Infections, including  
scabies and bed bugs'*

Thursday 11 April 2024

2-3.30pm, via Zoom



# 1. Chair's Welcome

Charlotte Fry, RN, DN, QN, Expert Lead Nurse, IPC Champions Network; @cfry\_

- Welcome to everyone, good to see you all.
- As you know the IPC Champions Network is for nurses and colleagues working in adult social care settings - we now have 1862 members of the IPC Network, if you would like to join, please go to: <https://qni.org.uk/nursing-in-the-community/infection-prevention-and-control-champions/>
- For IPC resources visit: <https://qni.org.uk/news-and-events/events/infection-prevention-and-control-ipc-champions-meeting/>
- We have an excellent agenda today, we will hear from two experts on scabies and bedbugs, I think the challenge today will be to hear the sessions without itching!
- We will also be hearing an Adult Social Care update from Deborah Sturdy CBE, Chief Nurse for Social Care
- If you have any ideas or requests for themes for future meetings, please don't hesitate to email me at [charlotte.fry@qni.org.uk](mailto:charlotte.fry@qni.org.uk)



## 2. Scabies

Professor Jackie Cassell, National Lead for Adult Social Care, UKHSA

- Scabies is a disease without a home, it's not gastrointestinal, not zoonosis, it's more health protection people's bag

### History

- The scabies mite was discovered in 1687 - it's reversed zoonosis, meaning it started in humans and now affects 104 mammalian hosts as of 2015
- Skin to skin transmission
- The most knowledge we have on the transmission of scabies took place during WW2 amongst 'volunteer' conscientious objectors (healthy male young adults)
- The scabies mite lays eggs inside skin which can make you unbelievably itchy
- WHO estimates 300 million cases worldwide - incidence in UK is unknown
- Because of stigma, it's often under-reported

### Typical signs

- Key burrowing location is between the fingers
- It creates rashes and intense itching - especially at night
- There's an asymptomatic incubation period of up to 6 weeks (for the first episode - if there's been a previous infection, symptoms will occur 24-48 hrs later)
- Crusted scabies: a very bad infestation, with 1000 of mites





## 2. Scabies

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### Treatment

- Usually treated with permethrin (topical lotion), occasionally ivermectin (oral tablet)

### Guidance

- UKHSA guidance on management of outbreaks of scabies first came out in 2022, it was updated in January 2023: <https://tinyurl.com/dk7k7uh7>

### Management of single cases:

- Refer to GP for treatment, then identify close contacts (up to 8 weeks prior) and refer contacts for treatment; co ordinate treatment of case and contacts to break cycle of transmission; provide hygiene and exclusion advice and avoid transfers to other settings during treatment; advise on PPE for staff and visitors.

### Management of outbreaks:

- Same as above
- And also consider isolation of residents or exclusion of staff until mass treatment completed
- Warn and inform visitors until mass treatment completed

### Scabies in the elderly:

- An infestation can explode very quickly and can cause huge issues in these very vulnerable populations - very distressing and stigmatised
- Scabies can look different in elderly, for eg some don't itch so it can often get missed. Or the elderly people can't tell you they're itchy because of dementia

## 2. Scabies

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- A long delayed diagnosis of scabies is the biggest challenge for health protection team.

### Resources:

- 'Mafia Mites - they ain't going nowhere' animation as well as 'Love at First Mite' animation, both (and more) available to view here:  
<https://blogs.brighton.ac.uk/textilesandscabies/resources-animations/>

### Work studies:

- Some of the questions being asked: why are outbreaks in care homes recognised so late? What is the best way to manage outbreaks?
- Study 1: talking to care homes just after an outbreak: evaluated 7 care homes after an outbreak in Surrey and Sussex. Telephone survey of 26 specialist dementia homes experiencing outbreaks.
- Study 2: prospective detailed description of outbreaks in Kent, Surrey and Sussex: went to 10 homes during an outbreak
- Clinical visits included: undertaking MCA capacity assessment, clinical examinations including dermatoscopy, skin scrapings, photos, blood samples; recorded clinical findings, repeat visit approx 6 weeks later
- 230 residents examined - median resident age 87, 76% female, 68% with dementia, 61 (26.5%) had scabies



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### **Key findings: dementia & scabies:**

- Not significantly associated with scabies diagnosis at the initial visit: age, restricted mobility, gender, restricted continence, any immunosuppressive condition
- Odds of positive scabies diagnosis increased 2.37 fold with residents with dementia
- Staff reported 60.8% of residents with scabies had NOT complained of symptoms
- We're not great at thinking about infections beyond transmission
- Typically an outbreak is delayed by 8 weeks: it's difficult to diagnose. You might need two visits from GPs with specialist training or a dermatologist. People can die from sepsis from the itching from the scabies.
- Skin scraping isn't particularly helpful - they will be negative on most people most of the time. Same with burrowing: if you don't find any burrows (tracks) doesn't mean it's negative.

### **Future & call to action:**

- ICBs should be asked, what are you doing about this? What is the structure? Getting it right isn't expensive, getting it wrong is terrible for end of life care and our most vulnerable residents.
- The challenge to all of you: find out what the commission pathway is in your ICB.

### 3. Bedbugs

Alexia Naylor, Business Manager, BedBug Foundation

- Identifying the problem is key to solving it: often people think they have bedbugs but might not be a bed bug that's bitten you
- Sniffer dogs: don't have many UK bed bug sniffer dogs, partly due to reliability, it's a different discipline to bomb and drug dogs, but they are used to identify a bed bug infestation (we have Bed Bug Foundation Certified Canine Teams for example)

#### **Life cycle of the bed bug + key facts:**

- 6-8 week generation time
- Feed once per week
- Females lay 15-25 eggs per week
- They stop producing under 13 degrees and can lay dormant for a long time
- Bed bugs prefer warm temperatures, they are quite like flightless mosquitoes
- Bed bugs search for food when they detect CO2 from a host and they use body heat to locate the host.
- They are photophobic and only forage at night
- In an occupied room they move around a lot - the infestation spreads to where the person spends most of their time, for eg from the bed to the sofa if the person moves there.
- Bed bugs are good at crawling on rough surfaces and they can travel on clothing and in/on footwear



## 3. Bedbugs

Alexia Naylor, Business Manager, BedBug Foundation

### **Bites:**

- Usually bite exposed skin, but will feed without walking across the skin (to avoid detection), which is why the bites are often in a line (they're also looking for a capillary to feed on)
- Not always possible to look at a bite and know it's a bed bug bite, looks like mosquito bite too

### **Identification**

- You may not always be able to spot live bed bugs, but you can find evidence: faecal spots are common and are usually black or yellowish brown, ink splotchy stains are common on sheets. Spiders sometimes make those marks though so not always clear.
- They're messy, they shed skin, 1mm generally, lots of different sizes. Adult bed bug the size of an apple seed.
- They like wooden beds, don't like shiny metal surfaces. They like dark areas, and squeeze into tiny areas of bed frame as well as mattresses.

### **Current state**

- Not as dramatic as press suggests
- Zurich did a survey and found there was a big surge in 2016, but since then it has gone down, and there's not been much change in number of cases for 2022-2023  
Part of the increase is the resistance to insecticide - early detection very important.



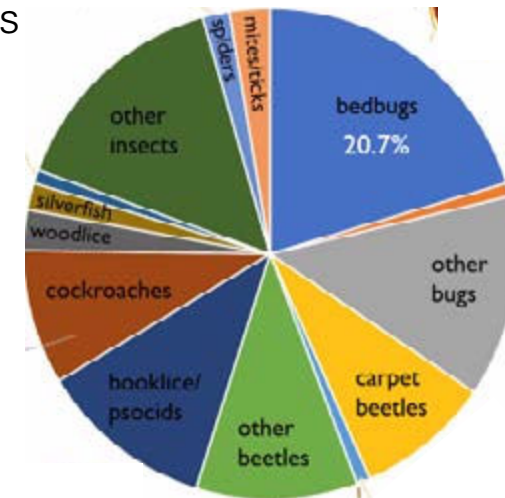
### 3. Bedbugs

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- Care homes are ideal places for bed bugs as they are kept warmer and the residents don't always react to bites

#### Tools

- Diatomaceous earth (DE); Insectosec Barrier Tape; Amorphous Silicar Dioxide; Interceptors; Mattress and bed encasements
- There are other invertebrates in homes, see pie chart below, only 20% turned out to be bed bugs
- Wash clothes at 60 degrees, that will kill eggs and all life stages, dry cleaning also works as does putting things in the freezer for 48 hours. Steam cleaning is very effective
- We do an identification service, it's free, send a photo of the bug and we can identify it: [help@bedbugfoundation.org](mailto:help@bedbugfoundation.org)
- If you do have an infestation, use a pest control service that specialises in bed bugs
- Most importantly: report it immediately if you see signs of an infestation, if you have someone who is immobile (for eg in a care home) that infestation will grow quickly.



## 4. Adult Social Care update

Deborah Sturdy CBE, Chief Nurse for Social Care

- Good to see everyone and so many people on this call - this network is very important for colleagues learning and sharing
- We've got lots going on at the moment: in terms of big things we have £11 million for apprenticeship nurses
- We're going to be setting budgets for the next 3 years
- We've recently discussed CPD with the workforce advisory group, so you'll soon need to think about what you'd like to do with that budget
- I recently had a meeting with Professor Nicola Ranger from the RCN and it just reminded me that 40% of the membership are nurses working outside the NHS and I said it would be good to see representation of that.
- We are trying to appoint a social care nursing chair, we've got interviews on Monday for that.
- Skills for Care are doing a lot of great work supporting the adult social care sector <https://www.skillsforcare.org.uk/Home.aspx>
- I was recently at a Nuffield Trust Summit, there were very few nurses, lots of doctors and NHS managers, but there was a narrative happening around social care, so I feel we're infiltrating all sorts of places  
There are positive things happening: thank you for all you do, you make a difference to people's lives.



Thank you to all 126 delegates who attended today's IPC meeting.

**The next meeting will take place on Thursday 6 June, 2pm-4pm, theme and speakers to be confirmed.**

More information will be available here:

<https://qni.org.uk/news-and-events/events/infection-prevention-and-control-ipc-champions-meeting/>



## Comments from delegates:

Thank you, very interesting session.

Thank you for another great sets of presentations

thank you - very interesting presentations today :)

Thank you excellent session

Really interesting and informative

I cant stop itching !!! such an interesting presentation

Thank you so much. Very interesting.

