

7.4

LOTHIAN NHS BOARD

Board Meeting
23 May 2007

Director of Public Health & Health Policy

HEALTHCARE ASSOCIATED INFECTION

1 Purpose of the Report

- 1.1 The purpose of this report is to update the Board on the work to reduce Healthcare Associated Infection across NHS Lothian.

2 Recommendations

The Committee is recommended to:

- 2.1 Support the work to deliver the healthcare associated infection schedule required which will ensure:
- Compliance with Scottish Executive Health Department guidance and recommendations;
 - The risk of infection to patients, visitors and staff is minimised;
 - Continuing improvement in the quality and timeliness of routine surveillance and measurement of the effectiveness of specific efforts to reduce healthcare associated infection;
 - Support for staff implementing changes to clinical practice in line with best evidence.
- 2.2 Identify key topics / issues related to healthcare associated infection to be included in future Board briefs.
- 2.3 Consider the format of the Healthcare Associated Infection Board brief and recommend changes to meet the needs of the Board.

3 Summary of the Issues

This update reports current activity across NHS Lothian.

3.1 Education and Training

3.1.1 Cleanliness Champions Programme

The Cleanliness Champions Programme continues to be actively promoted amongst all disciplines of staff. A total of 445 staff have completed the course, this is an increase of 30 staff in the past two months. Although progress is being made, the pace is significantly influenced by two key issues:

- The restraints on releasing staff to undertake the programme to ensure patient care is not adversely affected
- The time commitment from the Infection Control Nurses to provide mentorship to staff undertaking the programme while maintaining an effective infection prevention and control service

The first of two study days planned for 2007 for the Cleanliness Champions scheduled for 23rd May is eagerly anticipated with over 170 delegates registered.

3.1.2 National Hand Hygiene Campaign

Campaign Strategy

The strategy has been developed, accepted and supported throughout NHS Lothian including the Public and Partnership Forum. Several multidisciplinary focus groups meetings have been lead by the Hand Hygiene Co-ordinator. Key messages from the groups include:

- Ownership of ensuring effective hand hygiene lies with individuals and local management
- Frequency and indications for hand hygiene should be based on risk assessment and monitored through an agreed audit tool
- Hand hygiene awareness, education and training should be addressed locally and corporately
- Hand hygiene is integral to the healthcare associated infection Continuing Professional Development requirements of all staff

Hand Hygiene Activities

The Hand Hygiene Co-ordinator is facilitating and participating in a range of activities to promote hand hygiene, which includes piloting innovative ways of increasing awareness amongst patients, visitors and staff across NHS Lothian.

3.1.3 Healthcare Associated Infection Educational Update: Board Away Day

A Healthcare Associated Infection educational update was provided by Dr Jorge Cepeda, Clinical Lead Infection Control, Rona Broom, Lead

Infection Control Nurse, University Hospitals Division and Dr David Swann, Consultant Anaesthetist for the Board on 25th April. The session was well received. A similar session was delivered to the Healthcare Governance and Risk Management Committee on 20th March.

3.1.4 Mandatory Healthcare Associated Infection Education

The mandatory Healthcare Associated Infection education programme for staff is being revised over the next four months. This is due to the current temporary reduction in Infection Control Nurses to deliver the programme and increase in staff leave over the summer months.

3.2 Code of Practice for the Local Management of Hygiene and Healthcare Associated Infection

3.2.1 The Code of Practice for the Local Management of Hygiene and Healthcare Associated Infection continues to be implemented through the Infection Control Annual Programmes. The Infection Control Team work with various disciplines across Lothian to raise awareness and ensure the programme is delivered. Progress is reviewed monthly and is monitored by the University Hospitals Division and Primary Care Organisation & Community Health Partnerships Infection Control Committees. The Lothian Infection Control Advisory Committee is maintaining an overview of progress.

3.3 Cleaning Services

3.3.1 The fourth national quarterly report (January – March 2007) on the monitoring of cleaning services against the NHS Scotland National Cleaning Services Specification will be published on 29th May. It is anticipated that the report will confirmed a pattern of continuous improvement in cleaning standards throughout NHS Lothian.

3.3.2 To compliment the National Cleaning Specification and National Monitoring Framework, the Facilities Directorate in consultation with the Infection Control Nurses of the University Hospitals Division has developed a Cleaning Matrix. The matrix provides details of the roles and responsibilities of the various staff disciplines and cleaning frequencies. It also informs service users of the standard of cleaning service to be delivered. The matrix is currently being implemented across the University Hospitals Division and will be shortly introduced pan-Lothian.

3.4 Decontamination

3.4.1 Progress against the action plans developed under the auspices of the NHS Lothian Strategic Decontamination group continues to be monitored monthly.

3.4.2 Internal Audit

A self-assessment audit of the decontamination processes across NHS Lothian has been carried out, facilitated by Internal Audit. The report highlights that there are no areas rated as representing a major weakness. The NHS Lothian Strategic Decontamination Steering Group will review the report at the next meeting in July.

3.4.3 Primary Care Audit Tool

The audit of all decontamination facilities within independent general medical practices continues to be progressed. All directly managed services and 41% of independent services have been audited (Appendix 1).

3.4.4 Endoscopy

The procurement process for the purchase of High Efficiency Particulate Air filtered endoscope storage cabinets has been completed with the purchase of six cabinets. The purchase of further High Efficiency Particulate Air filtered endoscope storage cabinets is under consideration. This is being led by the NHS Lothian Decontamination Strategy Group.

A competency based education and training framework for staff involved in endoscopy has been developed by a pan-Lothian working group. The introduction of the framework will ensure staff receive the standard of education and training required to comply with SHTM 2030. The framework will be presented to the Lothian Infection Control Advisory Committee in May for ratification.

3.4.5 University Hospitals Division

The University Hospitals Division Operational Decontamination Group continues to monitor progress against the agreed decontamination action plan on a monthly basis. A more integrated and robust method of compliance feedback has been implemented. This requires Clinical Management Teams to report progress to the Operational Group, reinforcing the local ownership and promoting co-operative working relationships. The University Hospitals Division maintains an overview and report directly to the NHS Lothian Strategic Decontamination Steering Group.

3.4.6 Primary Care Organisation & Community Health Partnerships

The Primary Care Organisation & Community Health Partnerships and Dental Decontamination Steering Groups continue to monitor progress with the agreed decontamination plans in primary care settings. It is proposed that the Dental Institute will upgrade its decontamination facilities to provide a Central Decontamination Unit for dental services across Lothian. This is currently being reviewed in consultation with Health Protection Scotland.

3.5 Single System Working

3.5.1 The interview for the Nurse Consultant in Healthcare Associated Infection was held on 30th March, unfortunately no appointment was made. The recruitment process to appoint the Head of Service Infection Control continues to be progressed. It is intended that the Nurse Consultant in Healthcare Associated Infection post will be advertised along with the Head of Service Infection Control Post in the next month. Although these appointments are outstanding, the Nurse Consultant in Health Protection is supporting the process for the restructuring the Infection Control Service under single system working.

3.6 Outbreaks and Incidents

3.6.1 Outbreaks of Norovirus-like illness continue to be seen across NHS Lothian. These outbreaks reflect the seasonal trends and general incidence of norovirus-like illness in the community.

3.6.2 There have been 14 outbreaks, primarily due to Norovirus in the University Hospitals Division and 9 across the Community Health Partnerships and Royal Edinburgh and Associated Services in the past two months. These resulted in the wards affected being closed to admissions for up to a week.

3.6.3 Even although wards were closed to admissions, the impact on the continued delivery of healthcare was minimal.

3.7 Surveillance

3.7.1 Surveillance Programme

The NHS Lothian surveillance programme which includes mandatory and non-mandatory surveillance continues to be complied with across Lothian, with the requirements of HDL(2006)38 being met. In addition, a programme of non-mandatory surveillance continues.

The Intensive Care Unit of the Royal Infirmary of Edinburgh has participated in HELICS (Hospital in Europe Link for Infection Control through Surveillance) surveillance for the past two years. The second annual report has been published. This highlights that the incidence of central venous catheter line infection in Intensive Care has significantly reduced from 22 in 2005/06 to 7 in 2006/07. The main contributing factor to this success is the introduction of the central venous catheter education and care bundle approach to line management developed by the Intensive Care Unit staff. The HELICS programme is currently being implemented in the Western General Hospital and will be introduced in to St John's Hospital in the following months.

3.7.2 Meticillin Resistant Staphylococcus aureus (MRSA)

The number of episodes of MRSA bacteraemia continue to be collated monthly from the general laboratory data systems. The data demonstrates that there has been no significant increase in the number of MRSA bacteraemias across NHS Lothian.

3.7.3 Meticillin Sensitive Staphylococcus aureus (MSSA)

The number of episodes of MSSA bacteraemia continue to be collated monthly from the general laboratory data systems. The data demonstrates that there has been no significant increase in the number of MSSA bacteraemias across NHS Lothian.

3.7.4 Clostridium difficile (C.dif)

The number of episodes of C. dif continue to be collated monthly from the general laboratory data systems. The data demonstrates that there has been no significant increase in the incidence of C.dif across Lothian.

3.8 Reduction of Meticillin Resistant and Meticillin Sensitive Staphylococcus Aureus (MRSA & MSSA)

3.8.1 The incidence of MRSA and MSSA bacteraemias is under review by the Infection Control Team. A action plan detailing interventions to reduce the risk of MRSA and MSSA bacteraemias has been drafted and will be submitted to the Lothian Infection Control Advisory Committee for approval in May.

3.9 Antimicrobial Team

3.9.1 An Antimicrobial Team has been established. The team have met twice and have drafted a workplan for 2007/08. The workplan will be presented to the Lothian Infection Control Advisory Committee in May for discussion and approval.

3.9.2 Detailed funding for the team and proposed activities has still to be prioritised against the Healthcare Associated Infection action plan, which is currently under development.

4. Equality and Diversity Impact Assessment

4.1 Healthcare Associated Infections may impact to varying degrees on different population groups. The implications of this for surveillance and ways of monitoring will be considered at the next meeting of the Lothian Infection Control Advisory Committee in May 2007.

Carol Fraser
Nurse Consultant in Health Protection
15 May 2007

The following Appendices are attached:

Appendix 1: P-CAT Audit Status May 2007

NHS BOARD: LothianSTATUS: PCAT AUDITS AS AT May 2007

| NHS BOARD | DIRECTLY MANAGED | | | | | | | | INDEPENDANT | | | | | | | |
|----------------|------------------|--------|----------|-----------------|-----------|----------------|-------|------|-------------|---------------|----------|-----------------|-------------|----------------|-------|-----|
| | GP'S | DENTAL | PODIATRY | FAMILY PLANNING | OPTOMETRY | PRISON SERVICE | OTHER | | GP'S | DENTAL | PODIATRY | FAMILY PLANNING | OPTOMETRY | PRISON SERVICE | OTHER | |
| Completed | 5 | 44 | 63 | 12 | 0 | 0 | 0 | 100% | 53 (43%) | 0 | 0 | 0 | 90 (99%) | 2 | 0 | 41% |
| Uncompleted | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 70 (57%) | 142 (100%) | 0 | 0 | 1 (1%) | 0 | 0 | 59% |
| TOTAL: | 5 | 44 | 63 | 12 | 0 | 0 | 0 | | 123 | 142 | 0 | 0 | 91 | 2 | 0 | |
| REPORTS | | | | | | | | | | | | | | | | |
| Completed | 2 | 14 | 37 | 11 | 0 | 0 | 0 | | 52 (42%) | 0 | 0 | 0 | 75 (82%) | 2 | 0 | 36% |
| Uncompleted | 3 | 30 | 26 | 1 | 0 | 0 | 0 | | 71 (58%) | 142 (100%) | 0 | 0 | 16 (18%) | 0 | 0 | 64% |
| TOTAL: | 5 | 44 | 63 | 12 | 0 | 0 | 0 | | 123 | 142 | 0 | 0 | 91 | 2 | 0 | |