

ITEM: 10

**MEETING:** Trust Board 19 September 2007

**TITLE:** Infection Control update

**SUMMARY:** Attached is the updated infection control action plan, which is being overseen by the Infection Control Committee. The ICC next meets on 21 September 2007.

Steady progress is being made against most areas of the action plan, which the ICC reviews in detail at every meeting. The trust performance report also demonstrates a reduction in HCAI over the past two months. The Visible leadership programme has also been focussing on infection control over the past two months, as evidenced in the separate Board report.

A team from the DH MRSA improvement programme will be visiting the Whittington on 11 & 12 September. There will be between 6 and 12 reviewers present for the visit. An outline timetable has been received and meetings have been arranged for the staff identified by the reviewers.

Once the review is concluded, we will receive a report and recommendations. We will be expected to immediately develop and implement an action plan based on the key themes of the review, with a monthly performance report against the action plan sent to the SHA lead and the MRSA improvement programme team.

**ACTION:** For information

**REPORT FROM:** Deborah Wheeler, Director of Nursing & Clinical development

<b>Financial Validation</b> Lead: Director of Finance	N/a
<b>Compliance with statute, directions, policy, guidance</b> Lead: All directors	Saving Lives, national MRSA target reduction
<b>Compliance with Healthcare Commission Core/Developmental Standards</b> Lead: Director of Nursing & Clinical Development	<b>Reference:</b> C4a
<b>Compliance with Auditors' Local Evaluation standards (ALE)</b> Lead: Director of Finance	<b>Reference:</b>
<b>Compliance with requirements of FT application and monitoring regime</b> Lead: Director of Strategy & Performance	<b>Reference:</b>

**PRIORITIES FOR REDUCING HCAI 2007/8  
ACTION PLAN – updated Sept 2007**

PRIORITY	LEAD	ACTION	TIMESCALE/PROGRESS	LINKS TO
<b>1. Clostridium difficile management</b>				
1.1 Ensure all wards have access to adequate levels of core equipment for patients in isolation	Gretta O'Toole (infection Control Nurse) Camilla Wiley (Head of Nursing)	<ul style="list-style-type: none"> <li>▪ List of basic equipment to be agreed for every sideroom/patient on transmission precautions</li> <li>▪ Audit of equipment to be undertaken on every ward</li> </ul>	<p><i>May 2007</i> Jul07: both audits have been undertaken. Core equipment list not yet agreed. Awaiting costings</p>	
<b>MRSA management</b>				
1.2 Review MRSA screening protocols	Dr Mike Kelsey (DIPC)	<ul style="list-style-type: none"> <li>▪ Expand current screening programmes to include all elective patients</li> <li>▪ Consider options for screening all emergency admissions</li> </ul>	<p><i>July 2007</i> Commenced 2.7.07</p> <p><i>September 2007</i>- request for funding included in bid to SHA</p>	Saving Lives
1.3 Continue root cause analysis (RCA) of MRSA bacteraemia	Dr Julie Andrews (Consultant Microbiologist) Debbie Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>▪ RCA undertaken within 5 days of positive blood culture</li> <li>▪ 3 month follow up of action plans</li> <li>▪ Ward managers to be skilled in RCA to be able to complete process</li> <li>▪ Policy to be drafted on management of patients with MRSA in theatres</li> </ul>	<p><i>April 2007 &amp; ongoing</i> Jul07: RCA now undertaken on all MRSA bacteraemia by ward managers &amp; relevant clinicians. Reported to every ICC. <i>October 2007</i></p>	MRSA recovery plan

<b>2. Intravenous devices</b>				
2.1 Good management of peripheral cannulae	Dr Julie Andrews (Consultant Microbiologist) Debbie Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>▪ revised nursing documentation</li> <li>▪ audit of practice</li> </ul>	<i>April 2007</i> Jul07: completed and now in use <i>July 2007</i> Sept07: audit completed & reported to Sept ICC. Shows improvement in practice	MRSA recovery plan Winning Ways Saving Lives
2.2 Good management of intravenous feeding lines	Kyri Shiamtanis (Clinical Nutrition Manager)	<ul style="list-style-type: none"> <li>▪ project plan to be in place by June</li> </ul>	<i>June 2007</i> Jul07: no progress yet reported	Winning Ways
2.3 Review of central line management and insertion	Debbie Clatworthy (Asst Director of Nursing) Dr Tim Blackburn (consultant anaesthetist)	<ul style="list-style-type: none"> <li>▪ nursing documentation to be revised</li> <li>▪ detailed guidelines to be drafted on insertion of central lines</li> <li>▪ audit of central line placement and patient outcomes</li> </ul> <p><b>additional actions</b></p> <ul style="list-style-type: none"> <li>▪ procurement of standard central line insertion packs</li> <li>▪ policy on use of 2% alcohol chlorhexidine for skin wipes</li> </ul>	<i>July 2007</i> completed  <i>July 2007</i> Jul07: draft policy with Dr Andrews  <i>May 2007</i> Jul07: audit completed – report to go to ICC in Sept 07 Jul07: bid completed – awaiting financial assessment Jul07: draft to July ICC for agreement	Winning Ways Saving Lives
<b>3. Leadership</b>				
3.1 Focus audit work and practice reviews on identified high risk wards: <ul style="list-style-type: none"> <li>- Coyle</li> <li>- Victoria</li> <li>- Meyrick</li> <li>- Cloudesley</li> <li>- Cavell</li> </ul>	Dr Julie Andrews (Consultant Microbiologist) Debbie Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>▪ Targeted programme of training and audits to be agreed – to be led through Visible Leadership programme</li> <li>▪ Rapid feedback of audit results (within 1 week of audit)</li> </ul>	<i>May 2007</i> Jul07: targeted training and audits undertaken in June & July <ul style="list-style-type: none"> <li>▪ Hand hygiene</li> <li>▪ Transmission precautions</li> </ul> Sept07: further hand	

- Reckitt			hygiene & infection control audits show improvement in practice. High risk wards doing additional hand hygiene audits.	
3.2 Role of infection control link practitioners	Dr Julie Andrews (Consultant Microbiologist) Debbie Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>▪ Reinforce key elements of role</li> <li>▪ Formalise the role with all ward managers</li> <li>▪ Bi-monthly meetings of all link practitioners with infection control nurses</li> </ul>	<i>June 2007</i> Jul07: Role description revised and agreed with ward managers in June. Programme in place for IC link nurses meetings – next meeting July Sept07: attendance at link workers study days has improved. Now undertake hand hygiene audits in own areas.	
3.3 Project support for “Saving Lives” implementation	Debbie Clatworthy (Asst Director of Nursing) Dr Julie Andrews (Consultant Microbiologist)	<ul style="list-style-type: none"> <li>▪ Outline specification for the role</li> <li>▪ Initial 12 month appointment to test effectiveness</li> <li>▪ Key leads identified for all High Impact Interventions</li> </ul>	<i>June 2007</i> completed  <i>July 2007</i> Awaiting return from maternity leave of IC senior practitioner in September	Saving Lives FT Action Plan
<b>4. Isolation policies</b>				
4.1 Review surgical bed base	Gethin Hughes (General Manager for Surgery)	<ul style="list-style-type: none"> <li>▪ Review configuration of surgical beds to separate all elective activity from emergency</li> <li>▪ Reduce bed numbers (in line</li> </ul>	<i>June 2007</i> Completed for orthopaedics  <i>June 2007</i> achieved	

		with planned projections) by reducing beds in each bay from 6 to 4		
4.2 Review of bed management policy	Julie Teahan (Matron for Acute Care) Matthew Boazman (General Manager)	<ul style="list-style-type: none"> <li>Ensure specific reference to management of infected patients on admission</li> </ul>	<i>Tbc</i> Jul07: no progress reported	Winning Ways
4.3 Increase isolation rooms	Phil lent (Director of Facilities)	<ul style="list-style-type: none"> <li>Progress capital scheme to convert ward area into additional single rooms</li> </ul>	Jul07: no progress reported Sept07: revised plan agreed at July ICC – to be updated on progress at Sept ICC	Winning Ways
4.4 Review and update all infection control policies	Julie Andrews (Consultant Microbiologist) Deborah Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>Produce central list of all IC policies with review dates</li> <li>Review &amp; update all those that are out of time</li> </ul>	Sept07: all policies reviewed – 70% updated. Remainder in final draft awaiting approval at ICC	
<b>5. Cleaning</b>				
5.1 Review cleaning procedures in all wards	Steven Packer (Asst Director of Facilities) Shaun Harrison (Matron for Medicine)	<ul style="list-style-type: none"> <li>Implementation of new cleaning directives using hypochlorite agents</li> <li>Introduce steam cleaning of large patient equipment, e.g. commodes</li> <li>Review policy on ward curtains: frequency of changing/washing; consider use of disposable curtains</li> </ul>	<i>July 2007</i> Jul07: product trial began on JKU in June <i>July 2007</i> Sept07: bid for funding to SHA  <i>July 2007</i> Jul07: no progress reported	

5.2 Renew and refresh ward cleaning SLAs in association with matrons and infection control	Steven Packer (Asst Director of Facilities)	<ul style="list-style-type: none"> <li>Plan to be in place by June 2007</li> </ul>	<i>July 2007</i> Jul07: no progress reported	FT action plan
5.3 Review role of ward housekeepers	Philip Ient (Director of Facilities)	<ul style="list-style-type: none"> <li>audit role of current housekeepers</li> <li>consider whether to extend role to other wards</li> </ul>	<i>September 2007</i>	Winning Ways Saving Lives
<b>6. Antimicrobial prescribing</b>				
6.1 Continued enforcement of antimicrobial policies	Dr Mike Kelsey (DIPC) Dr Julie Andrews (Consultant Microbiologist)	<ul style="list-style-type: none"> <li>Enforce good prescribing practice of maximum of 7 days prescriptions</li> <li>Continue restricted prescribing of cephalosporins &amp; quinolones</li> <li>Work with ward pharmacists to empower them to challenge prescribing practice</li> <li>Re-establish antimicrobial pharmacist role (DS to lead)</li> <li>Enforce single dose prophylaxis in orthopaedics</li> <li>Additional education for junior doctors – rolling programme</li> </ul>	<i>May 2007 &amp; ongoing</i> Jul07: summary cards for all staff who prescribe <i>Ongoing</i>  <i>Ongoing</i> Jul07: needs further work – Dr Andrews leading <i>June 2007</i> achieved part time <i>Sept 2007</i> Jul07: agreed with orthopaedics <i>Ongoing</i> Jul07: further prescribing sessions introduced for ED, surgery & FY1/2 doctors	MRSA recovery plan Winning Ways Saving Lives
<b>7. Training</b>				
7.1 Review infection control training provided for all staff	Dr Julie Andrews (Consultant Microbiologist) Debbie	<ul style="list-style-type: none"> <li>Review content of training updates run by infection control nurses</li> </ul>	<i>July 2007</i> Jul07: completed in June	FT action plan Winning Ways

	Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>Target training at high risk wards</li> <li>Cascade training programme to high risk wards led by senior nurses as part of weekly clinical practice</li> </ul>	<i>June 2007</i> Jul07: specific programmes now run on high risk wards Jul 07: underway (see 3.1)	
7.2 Review use of Dept of Health e-learning tool	Lisa Smith (Asst Director of Education)	<ul style="list-style-type: none"> <li>Clarify potential for further roll out across the Trust</li> <li>Decide whether to use for high risk groups of staff</li> </ul>	<i>July 2007</i> Sept07 report to ICC	MRSA recovery plan FT action plan
7.3 Infection control handbook for facilities staff	Steven Packer (Asst Director of Facilities) Lisa Smith (Asst Director of Education) Debbie Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>Revise current handbook for facilities staff</li> <li>Ensure annual updating sessions provided</li> </ul>	<i>July 2007</i> Sept07: report to ICC	MRSA recovery plan Winning Ways
<b>8. Aseptic technique</b>				
8.1 Review of aseptic technique policy and practice of all clinical staff	Jane Preece (Tissue Viability Nurse Specialist)	<ul style="list-style-type: none"> <li>Policy to be reviewed</li> </ul>	<i>July 2007</i> Sept07: policy in final draft awaiting ratification	MRSA recovery plan Winning Ways Saving Lives
<b>9. Hand hygiene</b>				
9.1 Hand hygiene audits	Debbie Clatworthy (Asst Director of nursing)	<ul style="list-style-type: none"> <li>Monthly hand hygiene audits on all acute wards</li> <li>Fortnightly audits on high risk wards</li> </ul>	<i>April 2007</i> Sept07: undertaken as part of Visible Leadership programme in July & Sept. Next audit 8.10.07. Report to Sept/ICC Infection control link nurses trained to undertake audits on high	

			risk wards, starting July.	
9.2 Clean your hands campaign	Julie Teahan (Matron for Acute Care)	<ul style="list-style-type: none"> <li>▪ Posters on wards</li> <li>▪ Review provision of alcohol hand rub by each bed &amp; in other clinical departments</li> </ul>	<i>All year Jul07: in place</i> <i>June 2007 Jul07: in place</i>	Winning Ways Saving Lives FT action plan
<b>10. Information management</b>				
10.1 Agree core infection control indicators for all clinical areas	Dr Mike Kelsey (DIPC) Debbie Clatworthy (Asst Director of Nursing)	<ul style="list-style-type: none"> <li>▪ Ward accreditation programme</li> <li>▪ Agree on information for clinical teams</li> </ul>	<i>Sept 2007: proposal on ward accreditation scheme to Sept ICC</i>	MRSA recovery plan FT action plan
10.2 Infection control outcome indicators to be agreed	Dr Mike Kelsey (DIPC) Deborah Wheeler (Director of Nursing)	<ul style="list-style-type: none"> <li>▪ Outcomes to be measured and reported on mortality and reducing length of stay of infected patients</li> </ul>	<i>November 2007</i>	FT action plan
10.3 Implementation of new IT system	Dr Mike Kelsey (DIPC)	<ul style="list-style-type: none"> <li>▪</li> </ul>	? <i>September 2007</i> Jul07: PID agreed. Awaiting implementation	FT action plan