

ITEM: 8

**MEETING:** Trust Board 16 January 2008

**TITLE:** Infection Control update

**SUMMARY:** This report contains a summary of recent performance against the key infection control indicators. Performance against the two national targets for reducing MRSA bacteraemia and *Clostridium difficile* infections is attached.

Progress against the key areas of hand hygiene compliance and ward cleanliness is included for information.

The action plan from the report on the visit by the Department of Health MRSA improvement support team is attached. The Chief Executive monitors progress against the indicators weekly.

The Healthcare Commission has informed the trust that they will be undertaking an unannounced one day random inspection of compliance with the Hygiene Code between January and March 2008.

**ACTION:** For information

**REPORT FROM:** Deborah Wheeler, Director of Nursing & Clinical Development / Acting Director of Infection Prevention and Control

<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 Health Act 2006 Hygiene Code
<b>Compliance with Healthcare Commission Core/Developmental Standards</b> Lead: Director of Nursing & Clinical Development	<b>Reference: C4a</b>
<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> integrated business plan; risk rating for quality

## **1. Infection control performance**

Steady progress is being made against most areas of the infection control action plan, which the Infection Control Committee (ICC) reviews in detail at every meeting. The ICC next meets on 18 January 2008. The trust performance report shows a small rise in HCAI (MRSA bacteraemia and *Clostridium difficile* infections) over the past two months (Appendix A). The MRSA bacteraemia three month rolling total is now above trajectory for the first time in four months, and the twelve month rolling total is static. December also saw a rise in *Clostridium difficile* infections, which may be associated with increased antibiotic usage during the winter. These figures are monitored weekly by the executive team.

To date, the hospital has not experienced an outbreak of norovirus this winter.

## **2. Hand hygiene**

The visible leadership programme has continued to focus on infection control over the past two months, and was reinforced at the November Chief Executive's briefing for all staff. Hand hygiene audits have continued to be done monthly, and are showing a slow improvement (Appendix B). The audits were repeated over the Christmas period and again on 7 January – the collated results are awaited, but first indications suggest a significant improvement on previous scores. The results are fed back to every ward and to all consultants, who are asked to reinforce the message with their junior staff. Individual staff who are observed not to comply with hand hygiene policy also now receive a letter from the Medical Director and Director of Nursing, reminding them of their responsibilities.

From 8 January, the visible leadership team will be providing training sessions in hand hygiene every day. These have been made compulsory for all staff across the hospital. The sessions will run for the next seven weeks, and are designed to ensure there is a consistent message to all staff within the hospital, whether or not they regularly visit the clinical areas. The executive directors have already attended a training session; non-executive directors will be very welcome to attend one of the hour long sessions.

## **3. Environment and cleaning**

Ward environment and cleaning audits were undertaken in September, October and November (Appendix C) using the NHS national cleaning standards. Scores for wards are increasing, as ward managers take greater ownership of their clinical areas. The audits were repeated over the Christmas period, and the results are currently being collated.

Action plans have been implemented in ED and maternity, following the poor scores in September, with an increase in night time cleaning for ED, and the introduction of housekeepers for ED and maternity. Wards which scored below 70% in November produced action plans to respond to the audit findings. A proposal has also been agreed to purchase new curtains, to allow all ward curtains to be changed three times every year, in addition to the individual changes that take place in response to demand.

A programme for scheduled deep cleans in every ward and clinical area is also in place; the dates have been brought forward for some areas, following the national

directive from the Department of Health (DH); every area will have been deep cleaned by the end of March.

#### **4. MRSA Improvement Support Team visit**

Board members will recall that the trust was visited by the DH MRSA improvement support team on 11 September. The report from the visit has been agreed with the DH, and the trust is now being monitored against the action plan (Appendix D). The DH team will be undertaking a follow up visit to assess the trust's progress on 11 February 2008.

The Chief Executive meets weekly with the Director of Nursing and Director of Facilities to assess progress against the plan and monitor the headline HCAI (healthcare associated infection) indicators. Good progress is being made against all areas, as evidence by the earlier sections of this report. The key areas of focus remain:

- Hand hygiene
- Ward cleanliness
- Peripheral cannulae management
- Antibiotic management

#### **5. Hygiene Code**

The Health Act 2006 introduced the Hygiene Code to the NHS; Chief Executives are held accountable for compliance with the Code.

In 2007, the Healthcare Commission announced that it would be randomly inspecting 120 trusts annually, to assess their compliance with the Code. The Whittington has been informed that they will be undertaking an unannounced visit to the trust on one day between January and March 2008.

Further detail on the content of the Code can be found at

[www.healthcarecommission.org.uk/nationalfindings/healthcareassociatedinfection/hygienecode.cfm](http://www.healthcarecommission.org.uk/nationalfindings/healthcareassociatedinfection/hygienecode.cfm)

The trust has already assessed its compliance against the Code in November 2006 and May 2007; the Infection Control Committee will review a further update on 18 January.