

**ITEM: 09/131**  
**Doc: 12**

**Meeting:** Trust board  
**Date:** 16<sup>th</sup> September 2009

**Title:** Infection Prevention and Control update

**Executive Summary:** Current progress with Trustwide Healthcare associated infection (HCAI) plan for 2009/10 is included for discussion, appendix A.

There have been 4 MRSA bacteraemia episodes so far in 2009/10, all in April. There has not been an MRSA bacteraemia episode since 22<sup>nd</sup> April (140 days as of 8<sup>th</sup> September 2009).

*C. difficile* cases are below trajectory with 18 cases year to date against a trajectory of 35 as of 1<sup>st</sup> September 2009.

Repair of fractured neck of femur surgical site infection rates from the last quarter (April-June 2009) were 2.7% (down from 9.6% in last quarter) and below national benchmark for the first time since Q2 2006/7.

MRSA screening of elective patients has decreased from 72% in May 2009 to 57.9% in August 2009. MRSA screening of emergency patients was 88.9% in August (down from 91.7% in August).

There was a decline in compliance with antimicrobial prescribing policies demonstrated in the Trustwide audits carried out in May. These have been presented to the junior doctors and pharmacists.

Audits on hand hygiene, environmental scores and High impact Saving lives audits have been presented to all ward managers from September 2009 as part of a ward balanced scorecard. An example of a IPC balanced scorecard is shown in the papers.

Refresher hand hygiene training has been incorporated into clinical and new non-clinical yearly mandatory updates. Progress with other IPC training and assessment projects is discussed in the papers. Over 450 staff have received blood culture training and competency assessment and in future this will be included in IV study day. There has been over 50% reduction in blood culture contamination rates.

The trust has swapped to non-ported safety peripheral cannulae and needlefree access devices in July 2009. Training is ongoing and implementation has been successful apart from supply issues on some wards.

**Action:** For discussion and information

<b>Report from:</b> Julie Andrews, Director of Infection Prevention and Control
---

<b>Compliance with statute, directions, policy, guidance</b>	<b>Reference:</b> Saving Lives National MRSA & <i>Clostridium difficile</i> target reduction Health Act 2006 Hygiene Code
--	--

Lead: All directors

<b>Compliance with Healthcare Commission Core/Developmental Standards</b>	<b>Reference:</b> C4a, C21, 8 NHS LA 4.6 and 2.8
---	--

Lead: Director of Nursing & Clinical Development

<b>Evidence for self-certification under the Monitor compliance regime</b>	<b>Compliance framework reference:</b> Risk rating for quality
--	---

Lead: All directors