

Infection Prevention & Control Report to Trust Board

Meeting Date – 5th September 2019

1. Executive Summary

Reduction Targets

The Department of Health for Northern Ireland has not yet issued new healthcare-associated infection reduction targets for 2019/20. These targets relate to *Clostridium difficile* (*C. difficile*) associated disease, Meticillin-Resistant *Staphylococcus aureus* (MRSA) bacteraemia and gram-negative bacteraemia (GNB), specifically *Escherichia coli*, *Klebsiella species* and *Pseudomonas aeruginosa*.

Current *C. difficile* Performance

So far this year 32 cases of *C. difficile* have been reported. 17 of the cases are classified as healthcare-acquired or associated as they occurred more than 72 hours after admission to hospital (definition used by the Public Health Agency [PHA]). However, this is not always an accurate predictor of being healthcare-associated. The remainder (15) are classified as community-acquired as the patients presented with symptoms within a 72 hour period after admission.

Current MRSA Bacteraemia Performance

Since the beginning of April 2019 one MRSA bacteraemia case has been reported. It is categorised as community-associated as it occurred less than 48 hours after admission to hospital (definition used by the PHA).

As of 28th August 2019, the total number of days since the last Trust hospital-associated MRSA bacteraemia is:

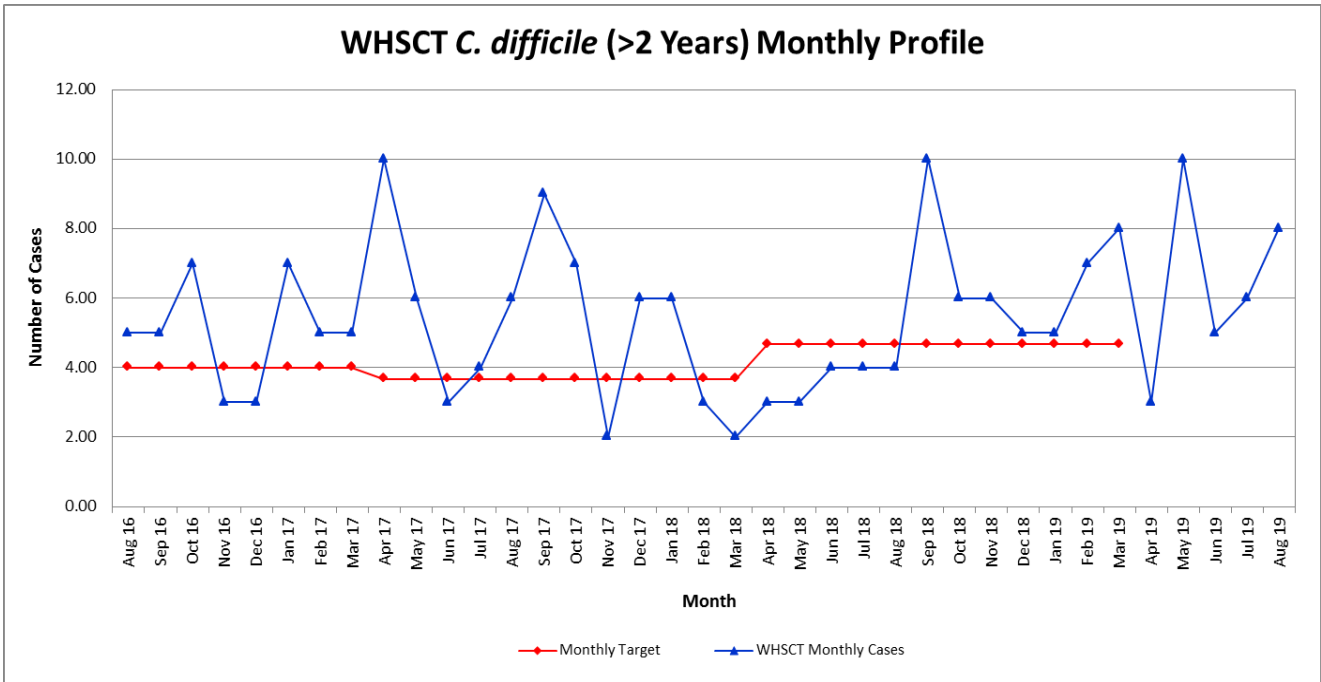
Altnagelvin – 296 days	(Last recorded case was in Ward 42)
South West Acute Hospital (SWAH) – 1292 days	(Last recorded case was in Ward 8)
Tyrone County Hospital/ Omagh Hospital & Primary Care Complex (OHPCC) – 1681 days	(Last recorded case was in the Rehab Unit)

Current GNB Performance

As of 28th August 2019, 29 healthcare-associated GNB cases have been reported.

2. *C. difficile* Performance

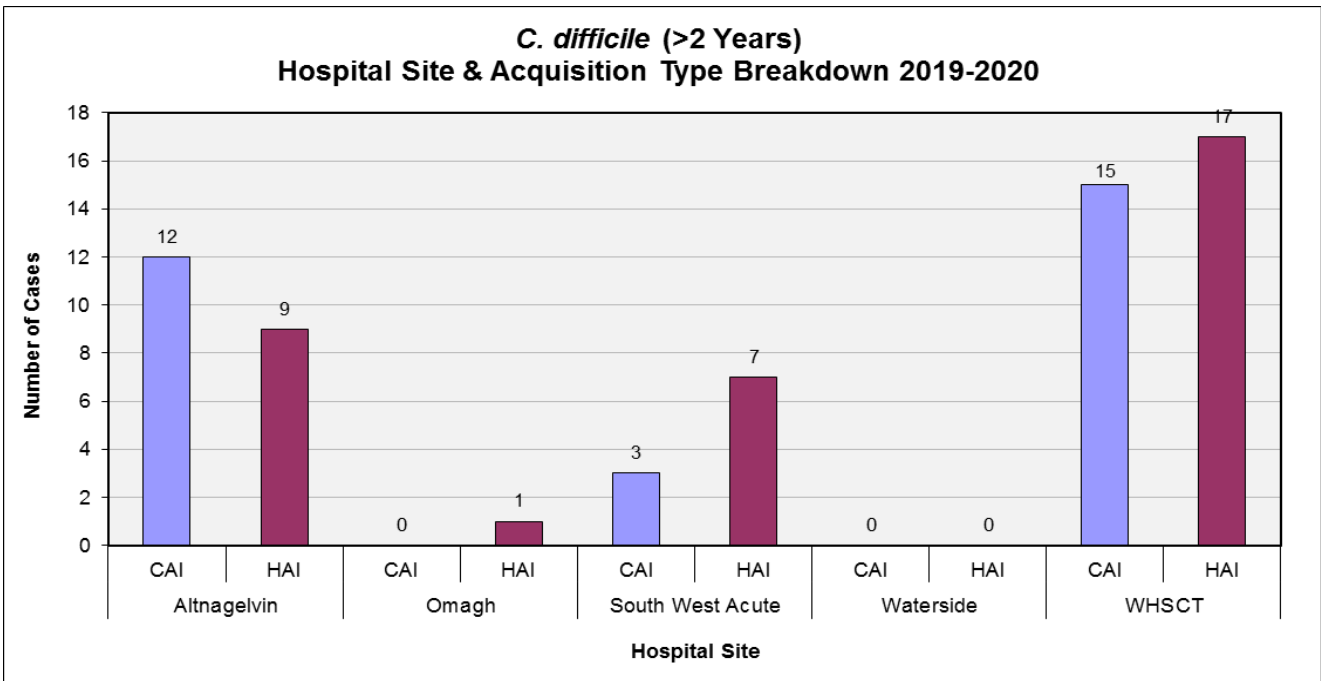
The new 2019/20 reduction target for *C. difficile* (≥ 2 years) has not yet been issued. To date the Trust has reported 32 cases, with 15 of those being categorised as community-associated.



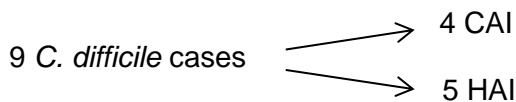
* The value for Aug 19 is subject to change as the report was compiled prior to the end of the month.

A breakdown of the cases by hospital site and acquisition type is given in the chart below.

Key:
CAI Community-associated infection
HAI Hospital-associated infection



Since the last Report to Trust Board, which contained figures as at 24th July 2019, there have been 9 new cases of *C. difficile* (breakdown below). Root cause analyses (RCAs) are required for six of these cases – one has been completed and five are pending.



Preventable/ Non-Preventable

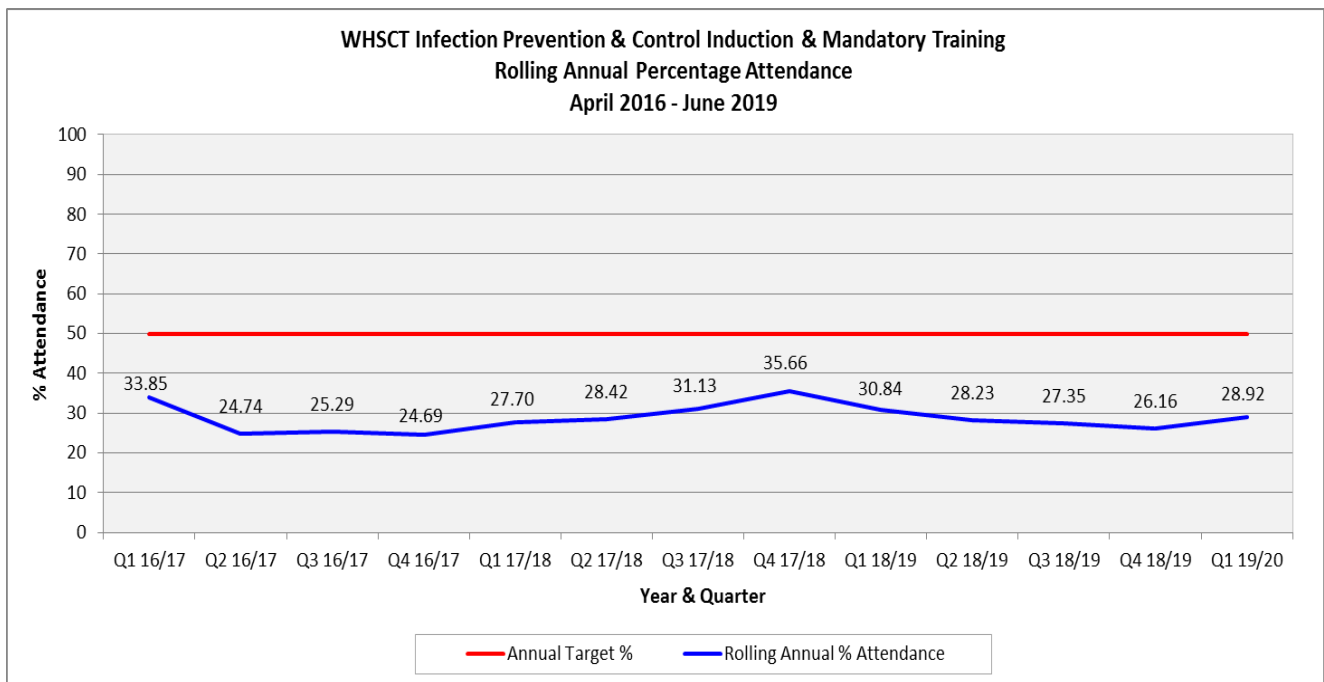
In respect of *C. difficile* cases occurring during 2019/20 a total of 14 RCAs have been conducted. The RCAs found that two of the cases were preventable, ten were non-preventable and two were difficult to determine.

3. Attendance at Infection Prevention & Control Training

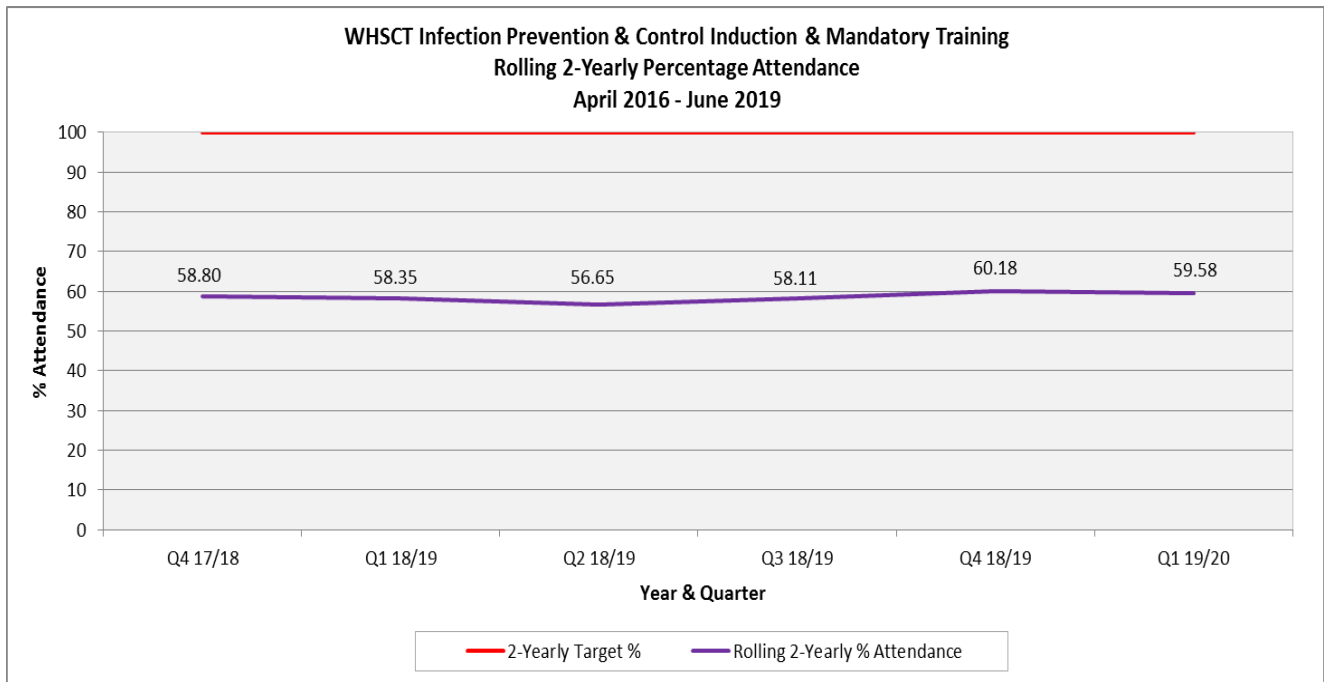
Induction/ Mandatory Training

31 Induction and Mandatory Training sessions were delivered by the Infection Prevention & Control (IP&C) Team during the period April to June 2019. That is an average of 2.38 sessions per week across the Trust. As of the end of June, 1212 staff had attended the training (813 in the Northern Sector and 399 in the Southern Sector).

The attendance target for each year is 50% of the total number of staff who require training. The actual attendance rate is 28.92% for the 12 months ending June 2019 – well below the required target. Development of the regional e-learning programme is progressing well and this will support a new tiered structure for Mandatory IP&C Training with anticipated launch in early 2020.



As attendance at IP&C Training is required on a biennial basis, the attendance rate over a 24 month period has also been calculated. As of the end of June 2019 it is 59.85%.



Target attendance at IP&C Mandatory Training is included in Directorate IP&C Annual Improvement Plans and should be monitored through the Directorate Governance arrangements, as well as through the Chief Executive HCAI Accountability Forum.

4. Antimicrobial Management Team

The Antimicrobial Management Team met on 7th August 2019. The following items were discussed:

- **Augmented Care Audits** – The Regulation & Quality Improvement Authority has asked for evidence of antimicrobial audits in augmented care wards – ICU/ HDU, Renal, NNICU and Oncology/ Haematology. The plan is to set up stewardship teams in each area involving nursing, medical and pharmacy staff.
- **Target Monitoring Report** – Reports have been issued for April to July 2019. To date there are no targets attached to the report.

5. Legionella

Water testing continues throughout key Trust owned facilities. A range of mitigating actions are in place, ranging from increased flushing, chlorination and placement of PAL filters to the removal of dead legs and replacement of pipework.

A planned Legionella and *Pseudomonas* testing programme is also in place for PFI buildings, including the SWAH and the Labs & Pharmacy Building, Altnagelvin. The process is managed by Interserve FM and Integral FM respectively. All positive results and proposed actions are reported to core members of the Trust’s Water Safety Group (WSG) on an ongoing basis. Exceptions are discussed at the WSG meetings.

Nucleus Building, Altnagelvin

Although some progress has been made on the reduction of positive Legionella water sampling in the Nucleus Building, Altnagelvin, it continues to be a challenge to manage by

normal water safety measures. Work was completed on the new cold water storage tanks in February. The tender for decentralisation of the hot water supply is awaiting outcome, which has been delayed.

Tower Block, Altnagelvin

Significant improvement installation works were actioned in year 2018/19. The Tower Block's 60 year old water system has been fully decommissioned and replaced with a new plumbing installation, which has significantly reduced the number of Legionella positives the Trust is currently managing. Ward 1 and Ward 3 in the Tower Block, Altnagelvin, have moved to the new North Wing and Ward 7 has moved to Ward 4. Contractors are responsible for the flushing of the vacant areas and outlets testing positive for Legionella are managed as per the Trust's Water Safety Plan.

Community Facilities

Greenfield RHE – Alterations carried out to the hot water system, installation of a supplementary biocide system and a daily flushing regime have made significant improvements in the levels of Legionella positive samples.

Avoca Lodge & Carnhill Hostel – There is a plan in place for 2019/20 to replace the plumbing installation in Avoca Lodge and Carnhill Hostel due to Legionella positives.

Water Safety Plans

The Trust, Integral FM and Interserve FM Water Safety Plans have been reviewed. This has included the development of a *Pseudomonas aeruginosa* multi-disciplinary risk assessment for augmented care areas, which provides an assessment on all aspects of water safety in these facilities. This has been tested and is being carried out in all augmented care facilities.

Increasing Compliance

The Trust Estates water safety team continues to build compliance and demonstrate this via the Zetasafe compliance database tool. The Trust's compliance position is risk based and, although not 100 % compliant, is currently stable and high risks are being managed appropriately.