

Infection Prevention & Control Report to Trust Board

Meeting Date – 5th December 2019

1. Executive Summary

Reduction Targets

The Department of Health for Northern Ireland (DoH NI) has issued healthcare-associated infection reduction targets for 2019/20.

For Meticillin-Resistant *Staphylococcus aureus* (MRSA) bacteraemia, the Trust's target is five cases. That is a reduction of two cases or 28.57% compared to 2018/19 (seven cases).

The Trust's reduction target for *Clostridium difficile* (*C. difficile*) associated disease is 56; a reduction of nine cases or 13.85% compared to last year.

With regard to healthcare-associated gram-negative bacteraemia (GNB), specifically *Escherichia coli*, *Klebsiella species* and *Pseudomonas aeruginosa*, the Trust is expected to maintain the reduction achieved in 2018/19 – a maximum of 49 cases.

Current *C. difficile* Performance

So far this year 45 cases of *C. difficile* have been reported. 24 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 (21) 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 two MRSA bacteraemia cases have been reported. They are both categorised as community-associated as they occurred less than 48 hours after admission to hospital (definition used by the PHA).

As of 26th November 2019, the total number of days since the last Trust hospital-associated MRSA bacteraemia is:

Altnagelvin Hospital – 386 days	(Last recorded case was in Ward 42)
South West Acute Hospital (SWAH) – 1382 days	(Last recorded case was in Ward 8)
Tyrone County Hospital/ Omagh Hospital & Primary Care Complex (OHPCC) – 1771 days	(Last recorded case was in the Rehab Unit)

Current GNB Performance

As of 26th November 2019, 47 healthcare-associated GNB cases have been reported. Therefore, the Trust is currently off profile to meet the target, with a cumulative increase of 43.86%.

Outbreaks

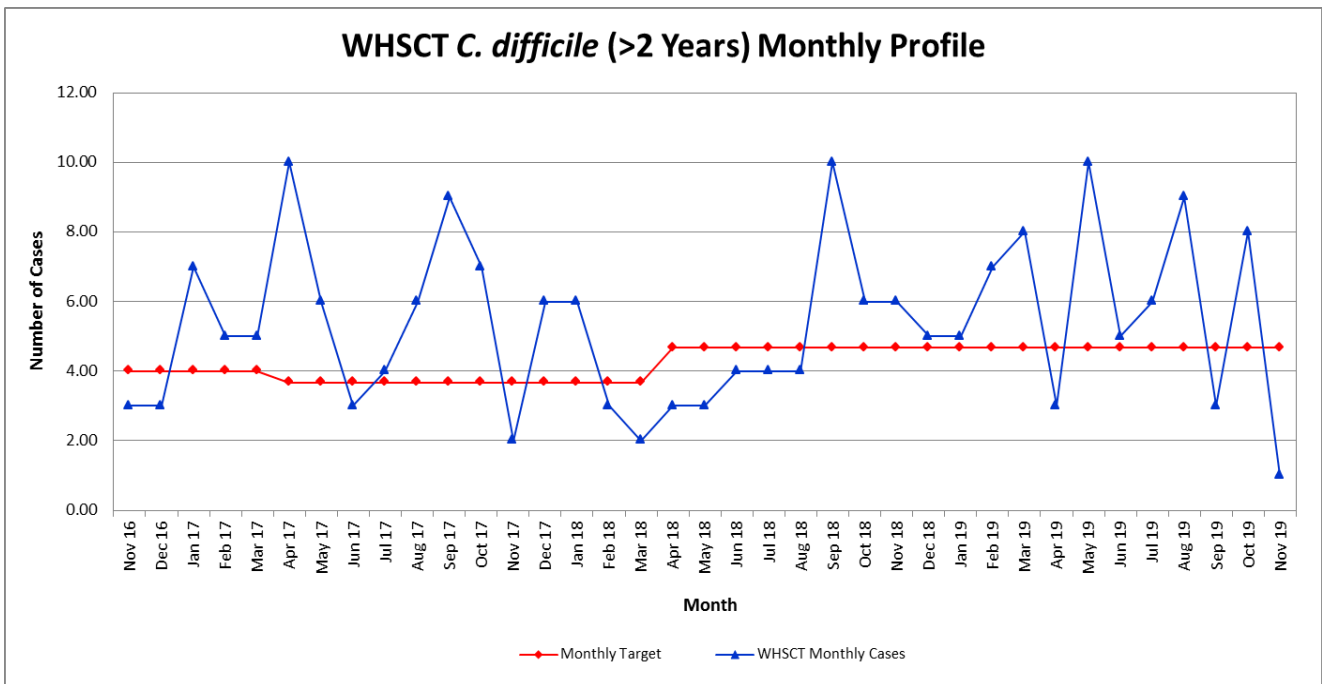
The Infection Prevention & Control (IP&C) Team is currently managing suspected/ confirmed Norovirus outbreaks in Wards 3 and 4, Waterside Hospital, and Seymour Gardens

Residential Home, Derry.

2. C. difficile Performance

The 2019/20 target for *C. difficile* (\geq two years) is 56 cases, which equates to a reduction of 13.85% on the baseline figure of 2018/19 (65 cases).

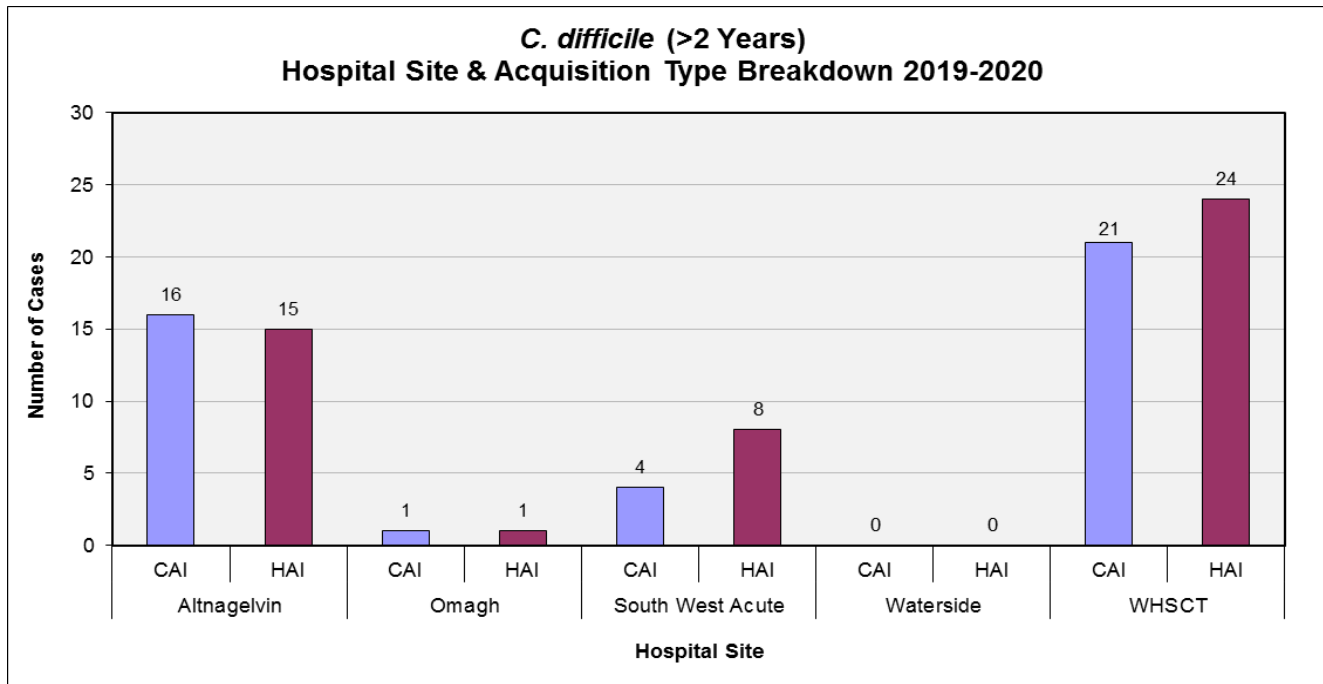
As of 26th November 2019, 45 cases have been reported, with 21 of those being categorised as community-associated. Therefore, the Trust is currently off profile, with a cumulative increase of 3.85% compared to 2018/19. This comprises an increase in healthcare-associated infection cases of 2.87% versus an increase in community-acquired infection cases of 5%.



* The value for Nov 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 31st October 2019, there has been one new case of *C. difficile* (breakdown below). This is a repeat positive case. Previously positive *C. difficile* cases that are re-tested 28 or more days after the initial positive episode are classed as new cases by the PHA and must be reported as such. A root cause analysis (RCA) was performed in relation to the previous result.

1 *C. difficile* case

- 0 CAI
- 1 HAI

Preventable/ Non-Preventable

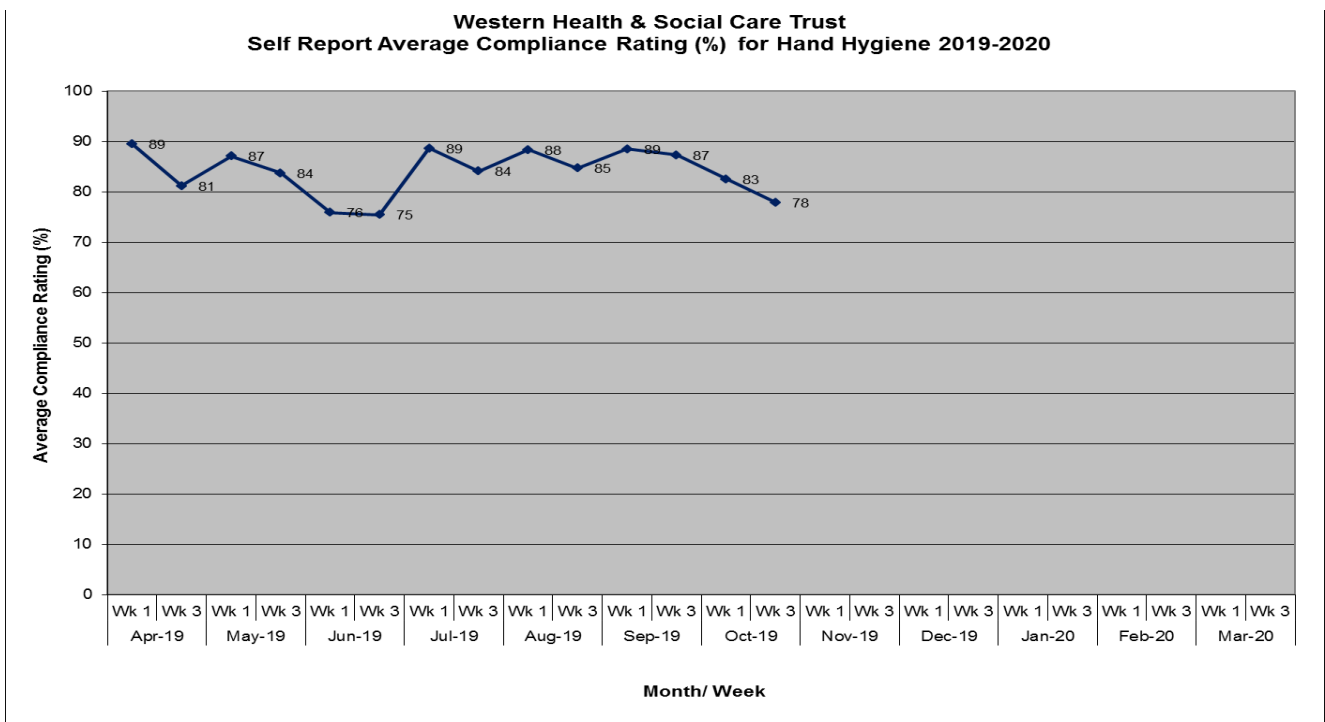
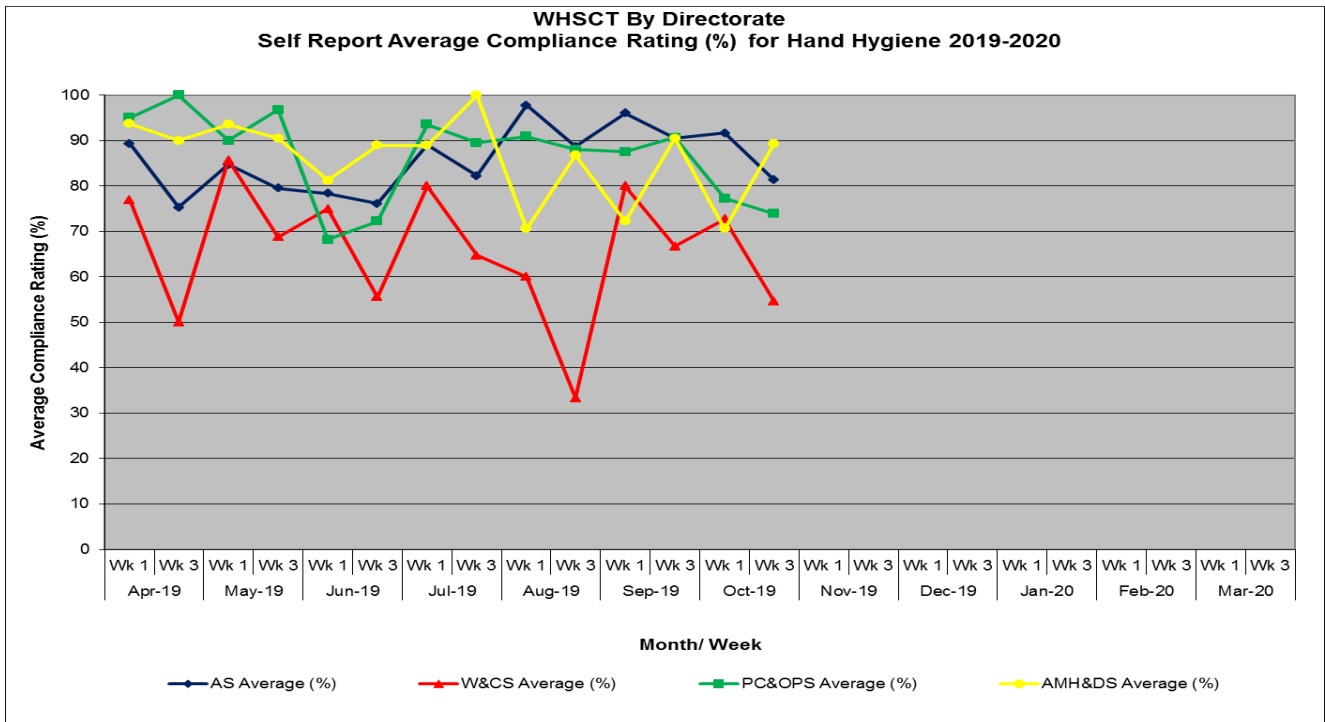
In respect of *C. difficile* cases occurring during 2019/20 a total of 26 RCAs have been conducted. The RCAs found that three of the cases were preventable, 18 were non-preventable and five were difficult to determine.

3. Hand Hygiene Compliance

The Trust’s overall self-reported hand hygiene scores are 81% when non-submission areas are included. These areas score an automatic 0%. 26 areas out of 194 applicable areas failed to submit scores for October 2019. They are as follows:

- Altnagelvin – Ward 42, HDU, Emergency Department, Cardiac Investigations, OPALS South Wing Clinics, Main Theatre 4, Main Theatre Paediatric Recovery and GUM Clinic
- SWAH – Ward 1 MSAU, Ward 6, Ward 7, Emergency Department, Women’s Health Centre, Cardiac Investigations and Theatre 3
- OHPCC – Outpatients Department
- Tyrone & Fermanagh Hospital – Elm Villa
- Grangewood – Carrick and Evisk
- Residential Homes – Thackeray Place Residential Home
- Day Care – Glen Oaks, Drumcoo Day Centre and Gortin Day Centre
- Other Community – The Cottages Children’s Respite, Avalon House and Crannog Intensive Treatment Team

OPALS South Wing Clinics, Altnagelvin Emergency Department, Main Theatre 4, GUM Clinic, Ward 1 MSAU, SWAH Emergency Department, Women's Health Centre, SWAH Cardiac Investigations, Outpatients Department, Elm Villa, Carrick, Evish, Thackeray Place Residential Home, Glen Oaks, Drumcoo Day Centre, Gortin Day Centre, The Cottages Children's Respite, Avalon House and Crannog Intensive Treatment Team also did not submit scores for the previous month.



However, when adjusted for non-submission areas, the Trust's overall self-reported hand hygiene scores improve to 100%.

The hand hygiene dashboard has been circulated to Directors for action through their governance arrangements.

It is important to note that scores from independent audits conducted by the IP&C Team and Lead Nurses tend to be lower than self-reported scores.

4. Antimicrobial Management Team

The Antimicrobial Management Team met on 6th November 2019. The following items were discussed:

- **Terms of Reference and Structure** – This was last reviewed in 2014. This will be reviewed and updated.
- **Internal Audit of Antimicrobial Stewardship by Business Services Organisation** – Internal Audit are to carry out an audit regarding antimicrobial stewardship.
- **Global One Day Cross-Sectional Point Prevalence Survey** – 42% prevalence in SWAH and 45% in Altnagelvin. Documentation: 96% in Altnagelvin and 88% in SWAH. Adherence: 76% in Altnagelvin and 67% in SWAH. Stop dates: 41% in Altnagelvin and 22% in SWAH.
- **Target Monitoring Report (DoH NI Targets)** – To date, per 1000 admissions, the Western Trust is not meeting the reduction targets for total antimicrobial consumption or piperacillin-tazobactam consumption. The Western Trust is currently meeting the targets for carbapenem reduction and World Health Organization Access Aware category consumption.

5. New and Updated Infection Prevention & Control Guidance

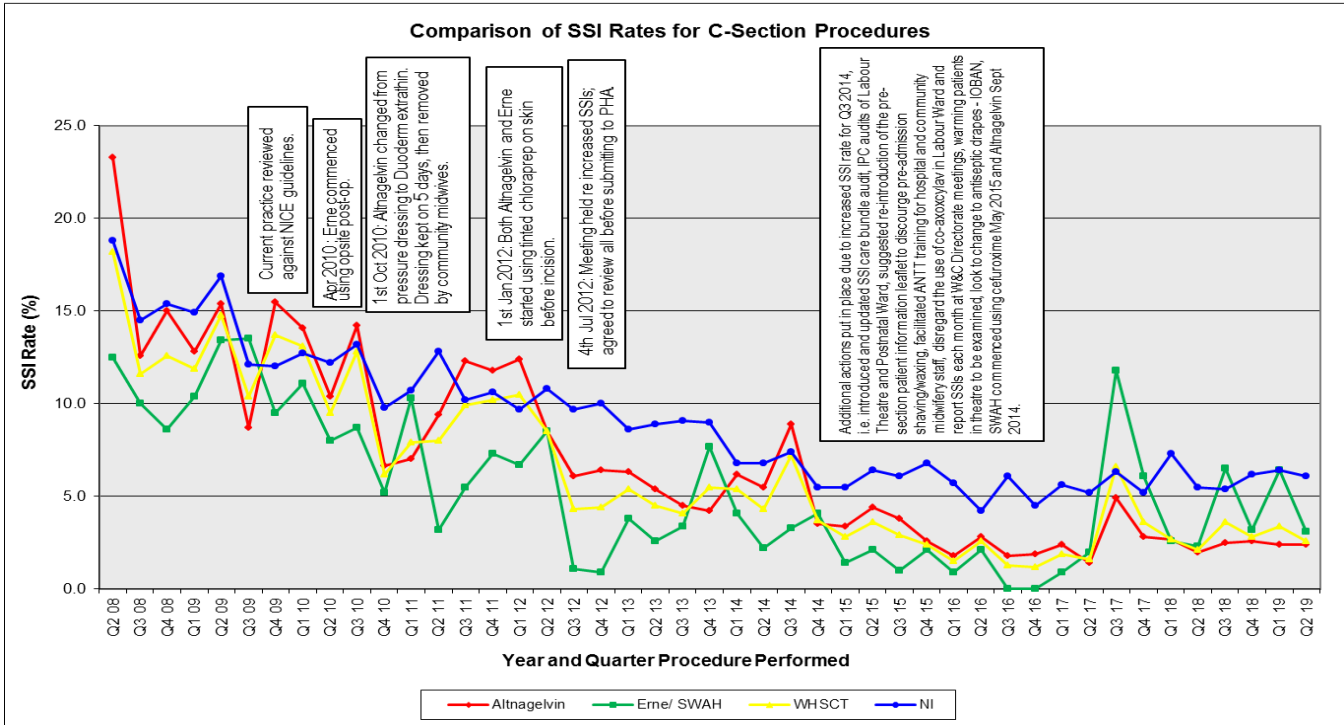
The following guidance was approved by the Chief Executive HCAI Accountability Forum in November 2019. This was an update of an existing document.

- Infection Control Precautions to Minimise Transmission of Influenza (Flu)/ Flu-Like Illness (FLI) in Healthcare Settings

6. Caesarean Section Surgical Site Infection (SSI) Surveillance

During quarter two of 2019 the Trust achieved a high compliance with surveillance related documentation (94.4%), compared to an 84.4% average compliance rate in NI as a whole.

The surveillance information below demonstrates an ongoing reduction in infection rates over time and a lower rate for the Trust than the rest of the region; 2.6% and 6.1% respectively.



7. Orthopaedic Surgical Site Infection Surveillance

The SSI rate remains less than 1% of all surgery with Altnagelvin below the NI rate. Evidence based care bundles are in place for orthopaedic surgery

