

Infection Prevention & Control Report to Trust Board

Meeting Date – 1st April 2021

1. Executive Summary

COVID-19

The Infection Prevention & Control (IPC) Team continue to be significantly involved with the management of any suspected or confirmed cases of COVID-19, the continued development of COVID-19 pathways, contact tracing and processes and outbreak management. The IPC Team are also required to continue to support Independent Sector care homes in the event of any declared outbreaks. As a result of the increased demands upon the Team and within the current IPC resources, there are challenges in attending to other routine work.

Reduction Targets

The Department of Health for Northern Ireland (NI) has not yet issued new healthcare-associated infection reduction targets for 2020/21. 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 62 cases of *C. difficile* have been reported. 29 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 (33) 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 2020 seven MRSA bacteraemia cases have been reported. Six are categorised as community-associated as they occurred less than 48 hours after admission to hospital and one is categorised as healthcare-associated as it occurred more than 48 hours after admission to hospital (definition used by the PHA).

Current GNB Performance

As of 22nd March 2021, 35 healthcare-associated GNB cases have been reported.

2. Coronavirus (COVID-19)

Outbreak Management

COVID-19 outbreaks continue to be declared in Trust wards, departments and facilities, although the number has greatly reduced over the last few weeks. The IPC Team and/ or Occupational Health are supporting the management of these incidents as applicable. Incident meetings are taking place and all IPC measures have been instigated. Recently affected areas include:

NB: Closure of an outbreak is deemed to be 28 days from the last positive case.

| Ward/ Department/ Facility | Date of Commencement | Date of Closure | People Affected |
|---|----------------------|-----------------|------------------|
| Rehab Unit, Omagh Hospital & Primary Care Complex (OHPCC) | 19/01/2021 | 04/03/2021 | Patients & Staff |
| Renal Unit, OHPCC | 27/01/2021 | 03/03/2021 | Staff |
| Ward 3, Waterside | 10/02/2021 | Ongoing | Patients & Staff |
| Benbradagh Day Centre, Limavady | 24/02/2021 | Ongoing | Staff |

The key learning themes arising from these outbreaks are shared for wider learning across the Trust via the Working Safely Together Daily Safety Messages and governance arrangements. They are also incorporated into the ECHO Programme.

The IPC Team are also required to continue to support Independent Sector care homes in the event of any declared outbreaks. The number of homes affected has reduced significantly in recent weeks. Most remaining outbreaks are now over, with only one home still affected at present.

| Care Home | Date Public Health Agency Notified | Current Status of Outbreak |
|----------------------------|------------------------------------|--------------------------------|
| Slieve Na Mon, Omagh | 31/12/2020 | Over |
| Rush Hall, Limavady | 06/01/2021 | Over |
| Sisters of Mercy, Strabane | 07/02/2021 | Over |
| Hillcrest, Omagh | 16/02/2021 | Ongoing: Terminal cleaning now |

Support to these homes requires an on-site visit by a Senior IPC Nurse. The IPC Team are challenged to provide this due to other workload commitments, as well as the limited availability of Senior IPC Nurses. Independent Sector visits will, therefore, continue to be risk assessed as they occur and will be organised as capacity allows.

COVID-19 Training

The IPC Team launched a programme of COVID-19 Training sessions commencing in mid-September 2020. Originally the training was delivered through a combination of face-to-face and virtual sessions. The face-to-face sessions were restricted to small groups in order to comply with social distancing requirements. The training is now fully virtual.

As of 22nd March 2021, 51 sessions have taken place and a total of 1372 staff have attended. That is 12.53% of the total number of staff who require training (approximately 10,953 people).

A further four sessions are planned up until the end of April 2021. There was initially very high demand for this training, with many sessions being fully booked. Over the last few weeks, however, demand has reduced. This may be a reflection of the increased workload on the wards and the limited capacity to release staff to attend training.

3. Infection Prevention & Control Induction and Mandatory Training

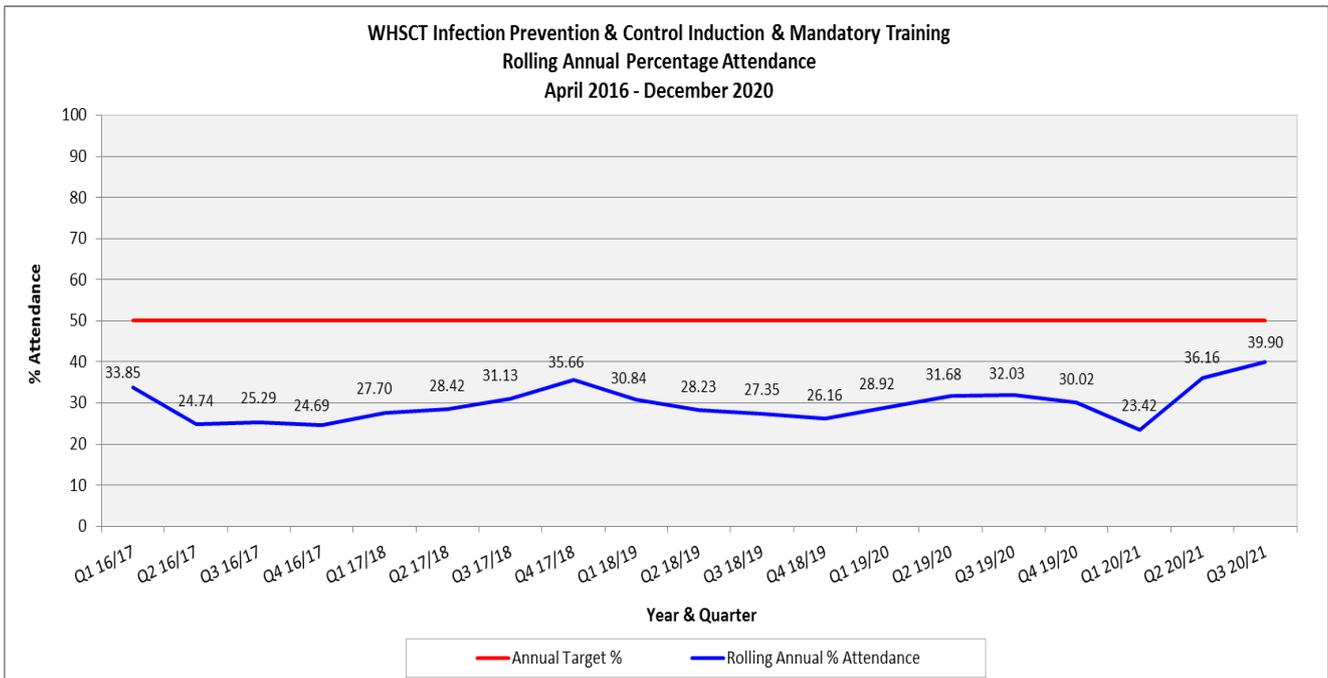
IPC Induction and Mandatory Training has moved online and a new e-learning programme was launched across the Trust in late June 2020. This was developed regionally for use by all health and social care organisations in Northern Ireland.

The e-learning programme comprises two tiers – Tier 1 and Tier 2. Staff only need to complete one of the tiers. Clarification on which tier each staff member should complete is provided via a Tier Matrix. The e-learning includes a short assessment to test understanding and awareness, with a

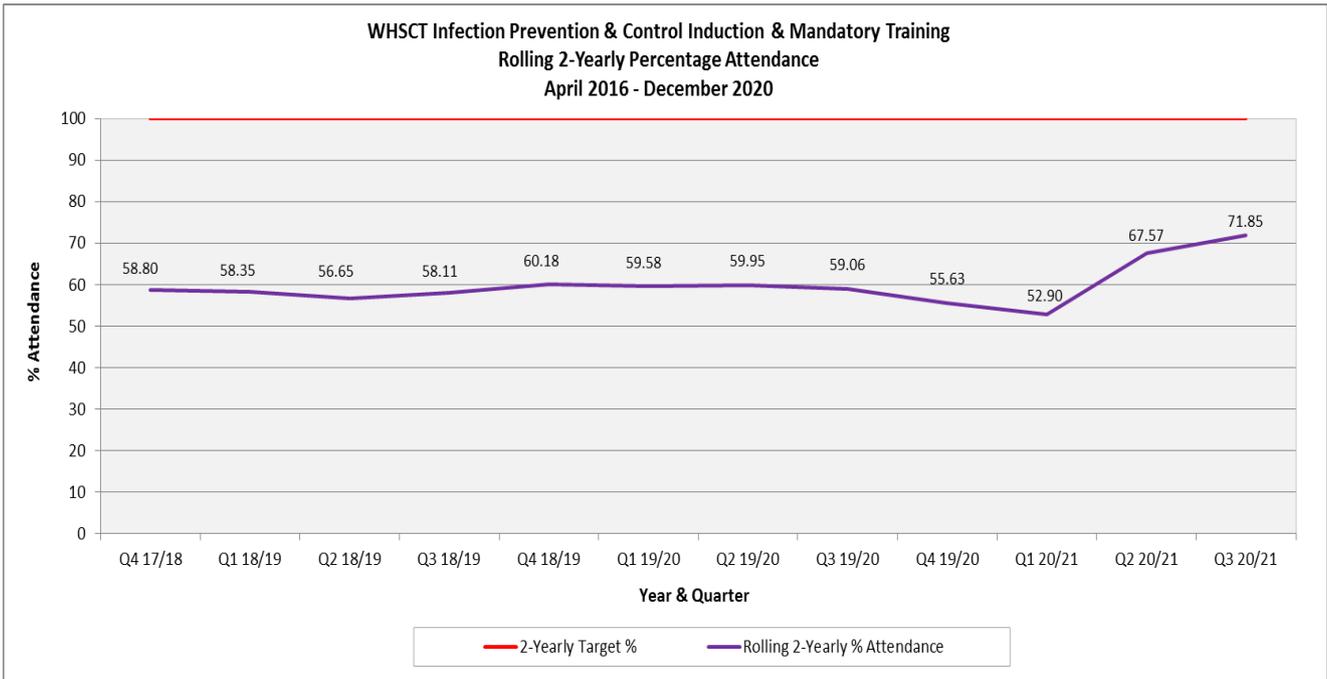
certificate available to be printed after successful completion. Access to the e-learning is through the HSC Learning website (www.hsclearning.com) which is available to all Western Trust staff. The website can be accessed from any internet-enabled Trust or personal device (PC/ laptop/ mobile phone/ tablet). The training must be completed every two years as with the former face-to-face format.

In the period April to December 2020, a total of 3738 staff completed the training.

The attendance target for each year is 50% of the total number of staff who require training (i.e. 5476.5 out of 10,953 applicable staff). As of the end of December, the percentage stands at 39.9%. That is 10.1% less than required, but it is an increase of 7.87% compared with the same period in the previous year.



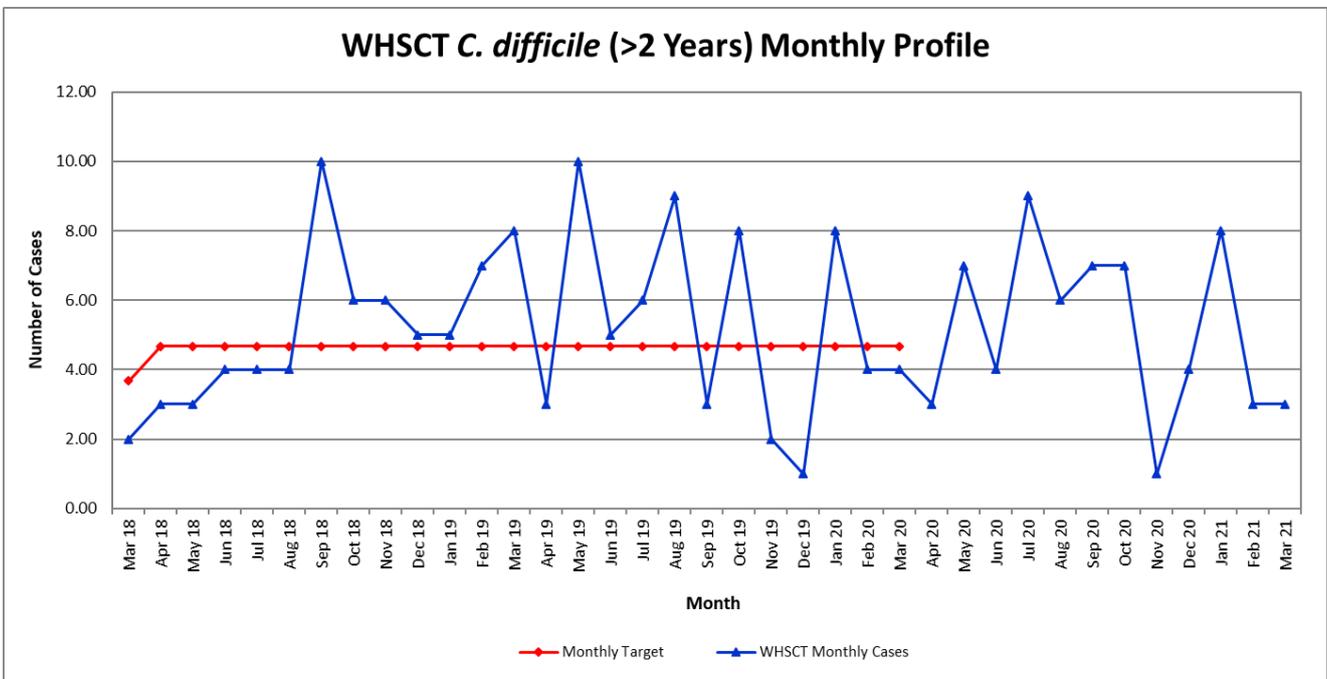
As attendance at IPC Training is required on a biennial basis, the attendance rate over a 24-month period has also been calculated. As of 31st December 2020, it is 71.85%. That is the highest attendance rate since this figure began to be monitored in January 2018.



4. C. difficile Performance

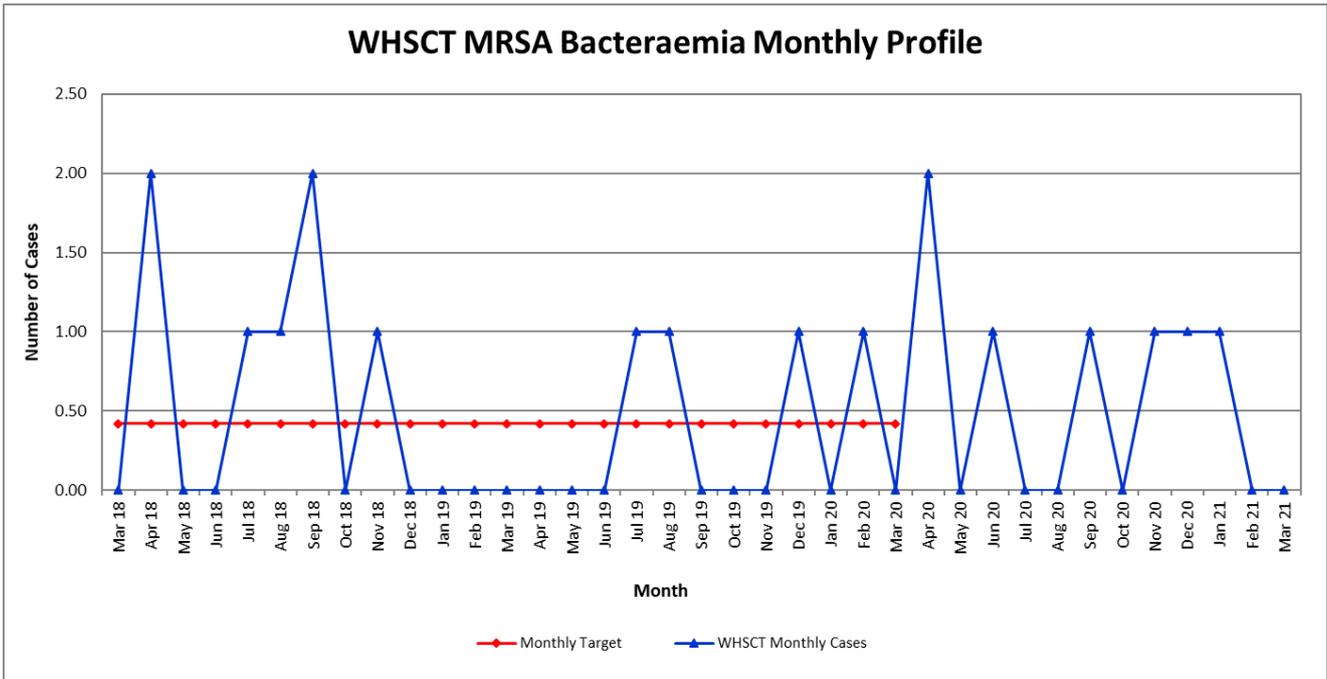
The new 2020/21 reduction target for *C. difficile* (≥ 2 years) has not yet been issued.

Since the beginning of April 2020 62 cases have been reported, with 33 of those being categorised as community-associated.



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

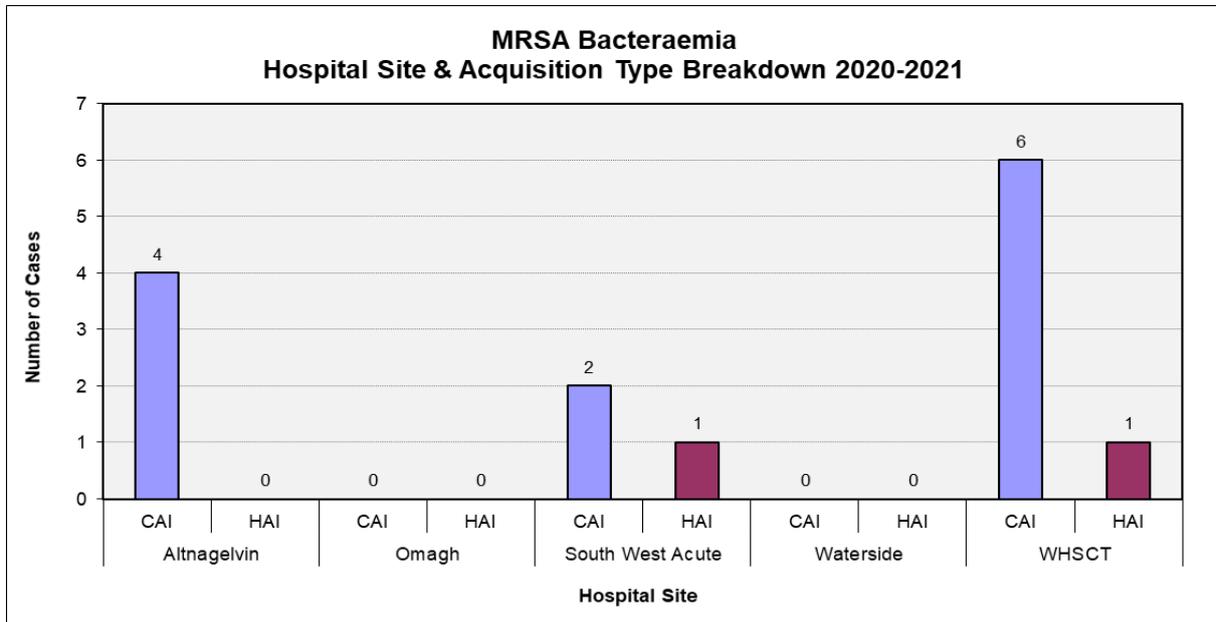
- Key:**
 CAI Community-associated infection
 HAI Hospital-associated infection



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



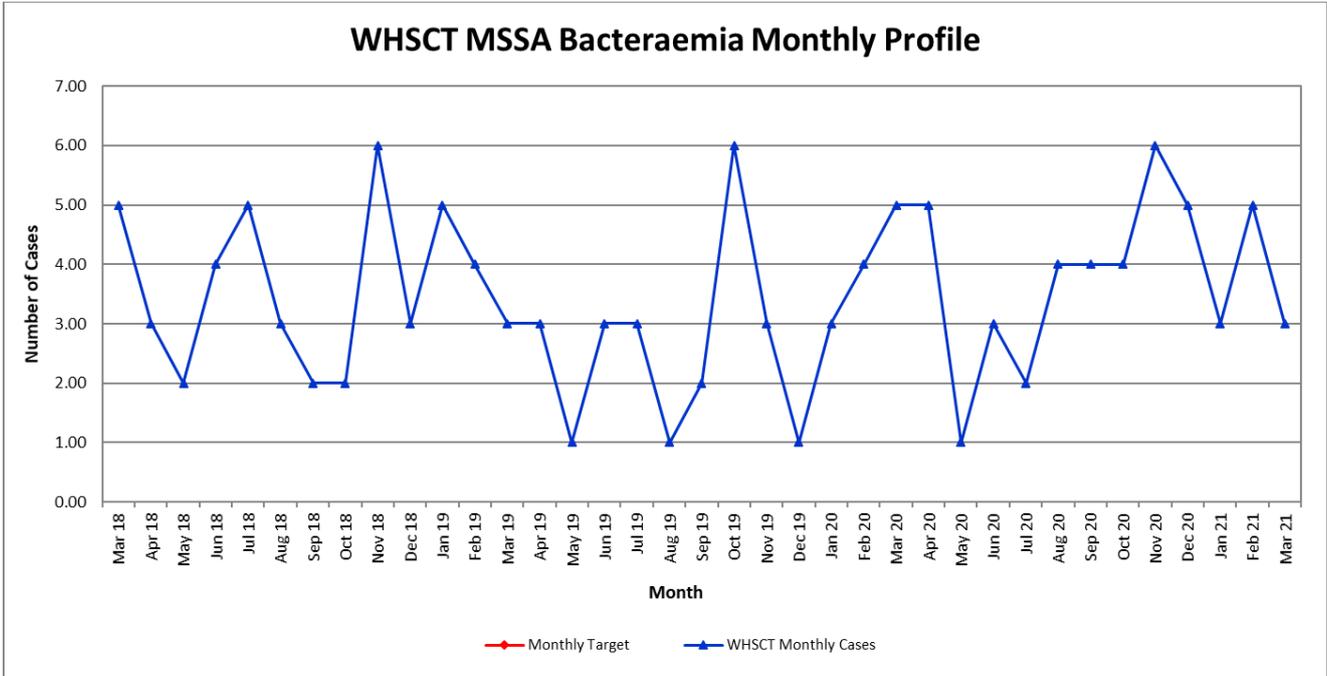
As of 22nd March 2021, the total number of days since the last Trust hospital-associated MRSA bacteraemia is:

- Altnagelvin – 868 days (Last recorded case was in Ward 42)
- SWAH – 281 days (Last recorded case was in Ward 8)
- Tyrone County Hospital/ OHPCC – 2253 days (Last recorded case was in the Rehab Unit)

Meticillin-Sensitive Staphylococcus aureus (MSSA) Bacteraemia

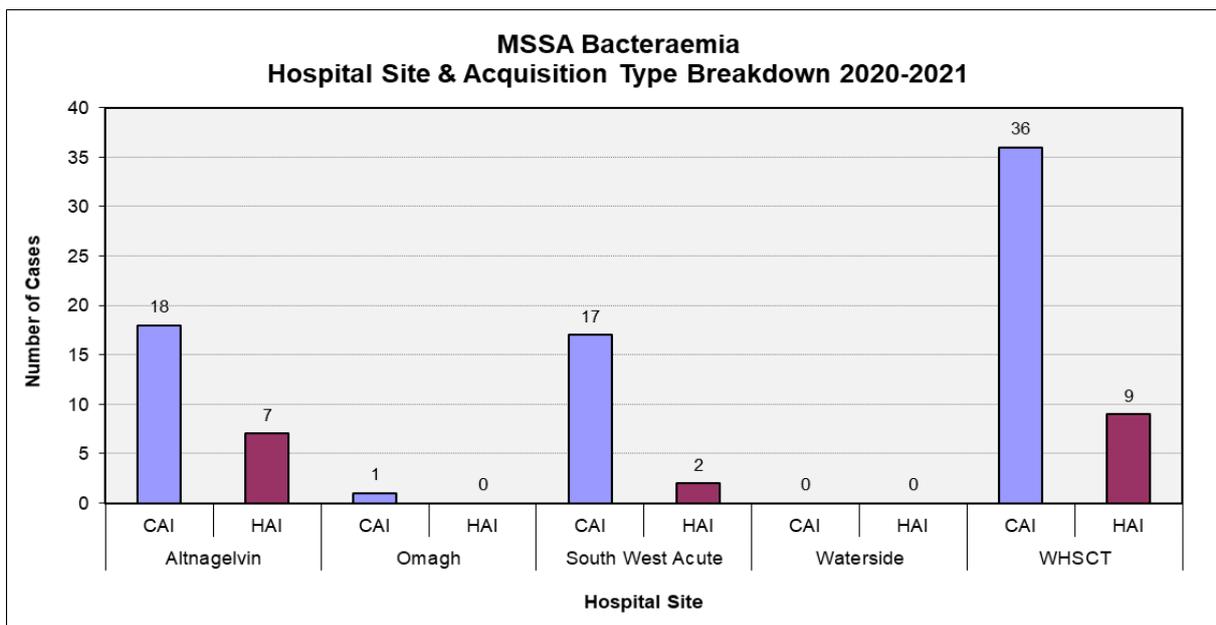
There is no reduction target associated with MSSA bacteraemia for 2020/21, however surveillance remains mandatory. MSSA is part of the skin normal flora of approximately 25-30% of the well population. It is, therefore, more difficult to control endogenous (self) exposure, which is the reason for removing the target associated with this organism. The controls in place for MRSA will go some way to protect patients, but do not provide the same level of safeguard because of the ubiquitous nature of the organism.

So far this year the Trust has reported 45 cases.



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



As of 22nd March 2021, the total number of days since the last Trust hospital-associated MSSA bacteraemia is as follows:

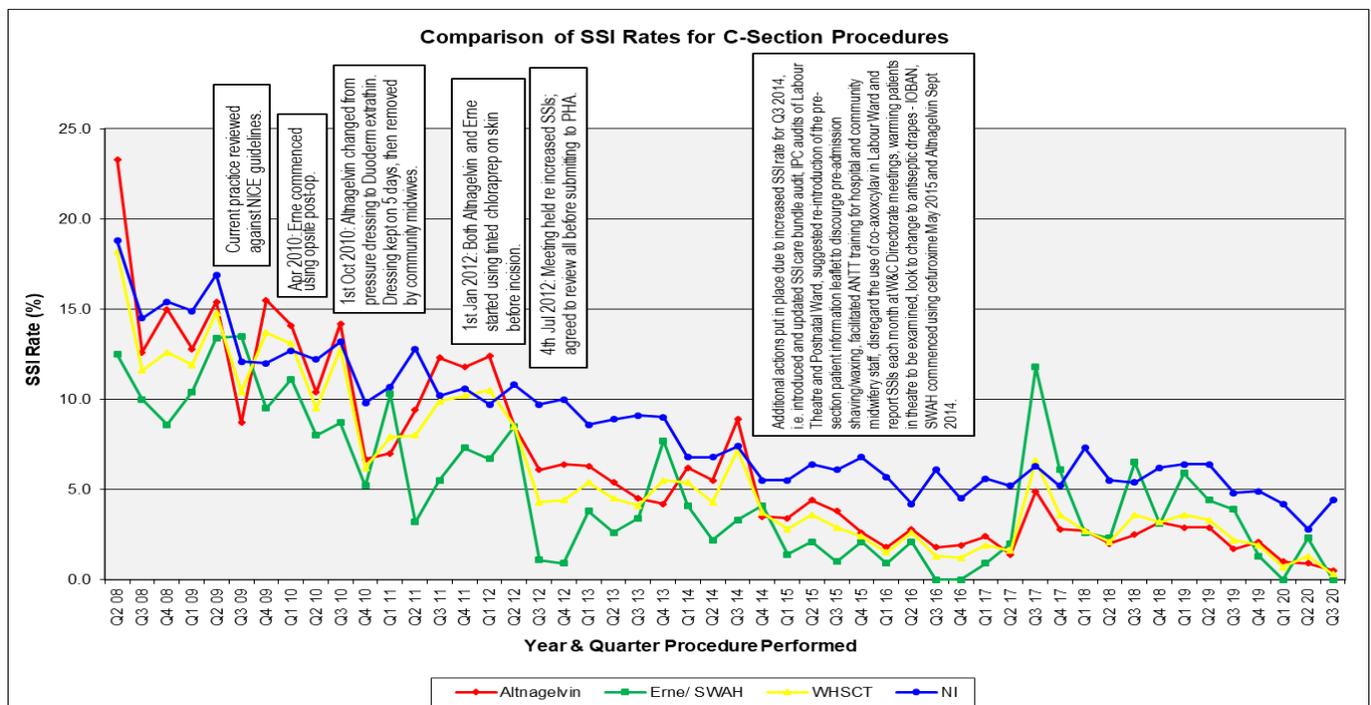
Altnagelvin – 48 days
SWAH – 138 days
OHPCC – 1253 days

(Last recorded case was in Ward 50)
(Last recorded case was in Ward 2)
(Last recorded case was in the Rehab Unit)

6. Caesarean Section Surgical Site Infection (SSI) Surveillance

During quarter three of 2020 the Trust achieved 95.1% compliance with surveillance related documentation, compared to an 84.3% 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; 0.3% and 4.4% respectively.



7. Orthopaedic Surgical Site Infection Surveillance

The SSI rate remains less than 0.7% of all surgery. Evidence based care bundles are in place for orthopaedic surgery.

