

Infection Prevention & Control Report to Trust Board

Meeting Date – 8th July 2021

1. Executive Summary

COVID-19

The Infection Prevention & Control (IP&C) 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 IP&C 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 IP&C resources, there are challenges in attending to other routine work.

Reduction Targets

The Department of Health for Northern Ireland has not yet issued new reduction targets for healthcare-associated infections in 2021/22. 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 22 cases of *C. difficile* have been reported. 11 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 (11) 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 2021 two MRSA bacteraemia cases have been reported. One is categorised as community-associated as it 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 29th June 2021, eight healthcare-associated GNB cases have been reported.

2. Coronavirus (COVID-19)

Outbreak Management

The IP&C Team and/ or Occupational Health, as applicable, support the management of COVID-19 outbreaks in Trust wards, departments and facilities. The number of affected areas has greatly reduced over the last few months and the most recent COVID-19 outbreak occurred in April 2021.

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

The IP&C Team are also required to continue to support Independent Sector care homes in the event of any declared outbreaks. While the number of homes affected has reduced significantly in recent months, there are currently three within the Western Trust's geography, at follows:

Care Home	Date PHA Notified	Current Status of Outbreak
Knockmoyle Lodge, Omagh	09/06/2021	Over (recent)
Three Rivers Care Centre, Omagh	24/06/2021	Ongoing: Active
Edenvale Care Home, Limavady	26/06/2021	Ongoing: Active

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

COVID-19 Training

The IP&C 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 29th June 2021, 61 sessions have taken place and a total of 1698 staff have attended. That is 15.5% of the total number of staff who require training (approximately 10,953 people).

A further 12 sessions are planned up until the end of August 2021.

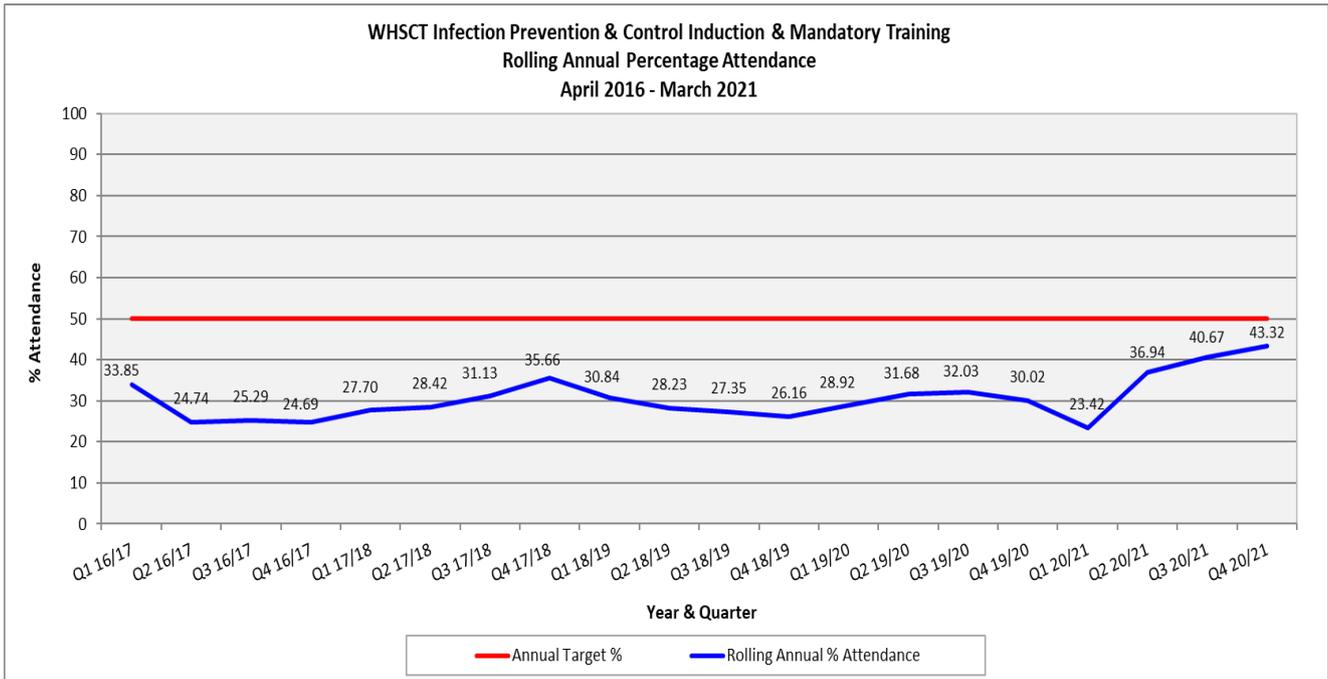
3. Infection Prevention & Control Induction and Mandatory Training

IP&C 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 NI.

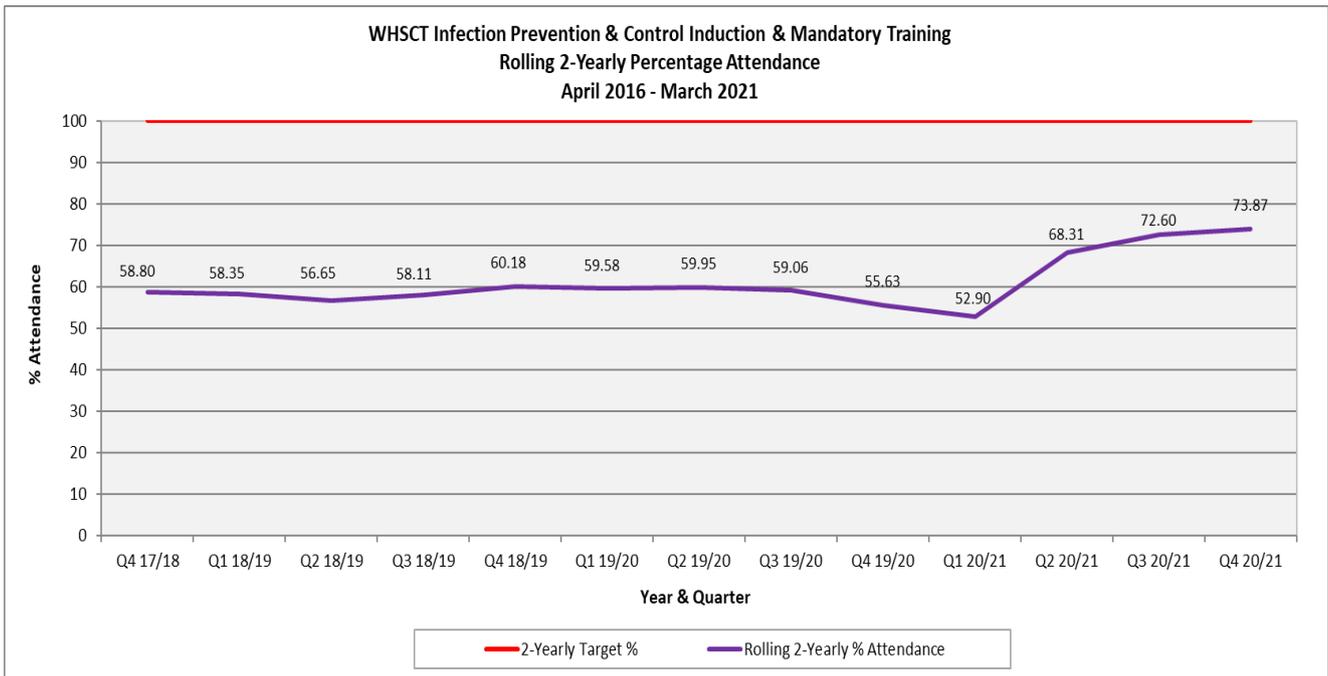
The e-learning programme comprises two tiers – Tier 1 and Tier 2. Staff only need to complete one of the tiers. Clarification on which tier each staff member should complete is provided via a Tier Matrix. The e-learning includes a short assessment to test understanding and awareness, with a certificate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

As of 31st March 2021, a total of 4745 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). For the year 2020/21 the percentage is 43.32%. That is 6.68% less than required, but it is an increase of 13.3% compared with the previous year.



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 March 2021, it is 73.87%. That is the highest attendance rate since this figure began to be monitored in January 2018.

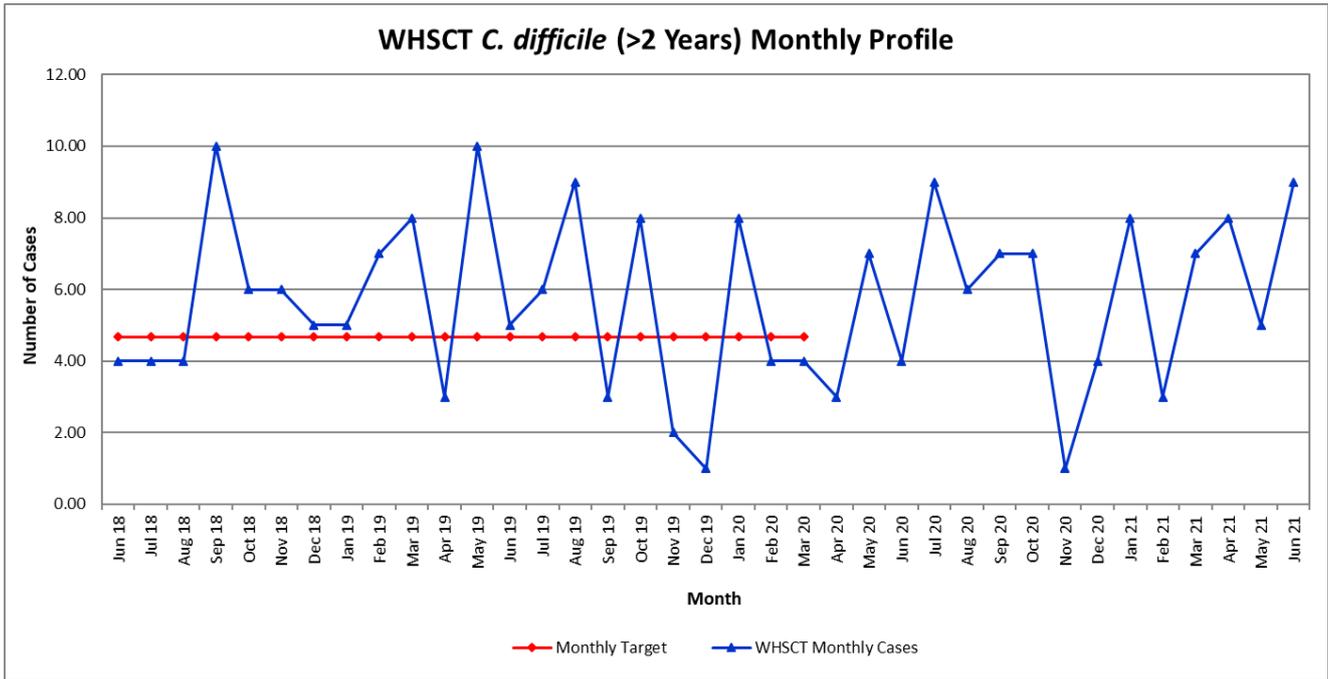


The Tier matrix, agreed regionally, did identify another Tier 1B for “healthcare staff with minimal or no patient/ client contact or healthcare staff with patient contact who require role specific training”. The method of delivery for this is face-to-face training. Commencing in July 2021 this will be delivered by an IP&C Nurse on a virtual platform (Zoom).

4. **C. difficile Performance**

The new 2021/22 reduction target for *C. difficile* (≥ 2 years) has not yet been issued.

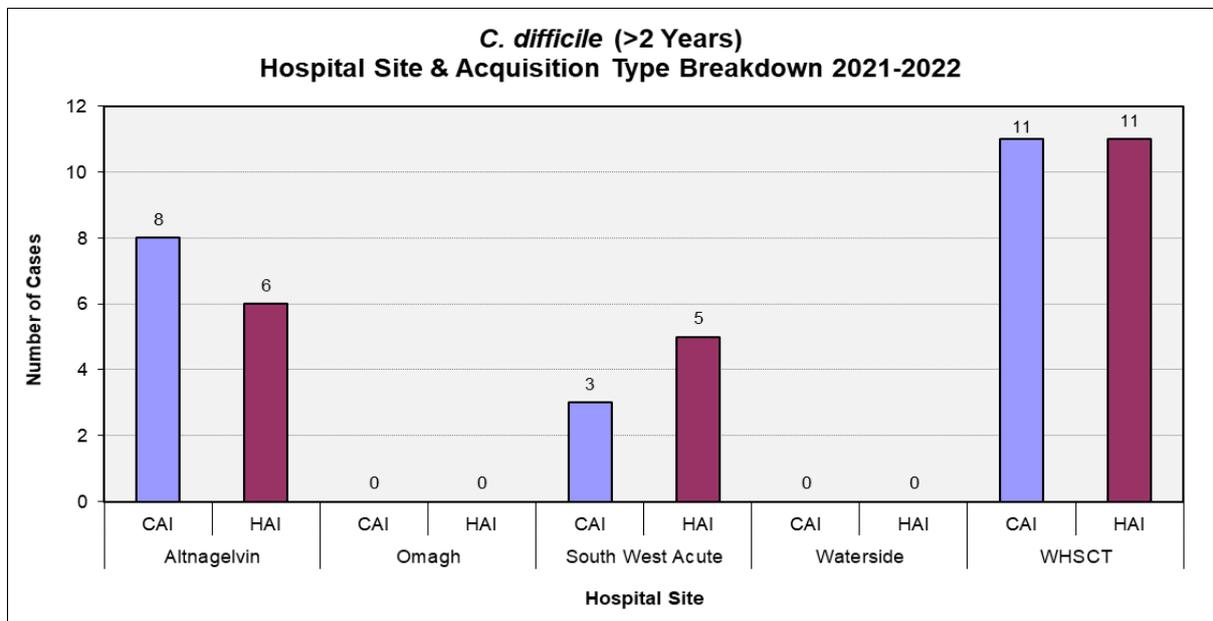
Since the beginning of April 2021 22 cases have been reported, with 11 of those being categorised as community-associated.



* The value for Jun 21 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



Preventable/ Non-Preventable

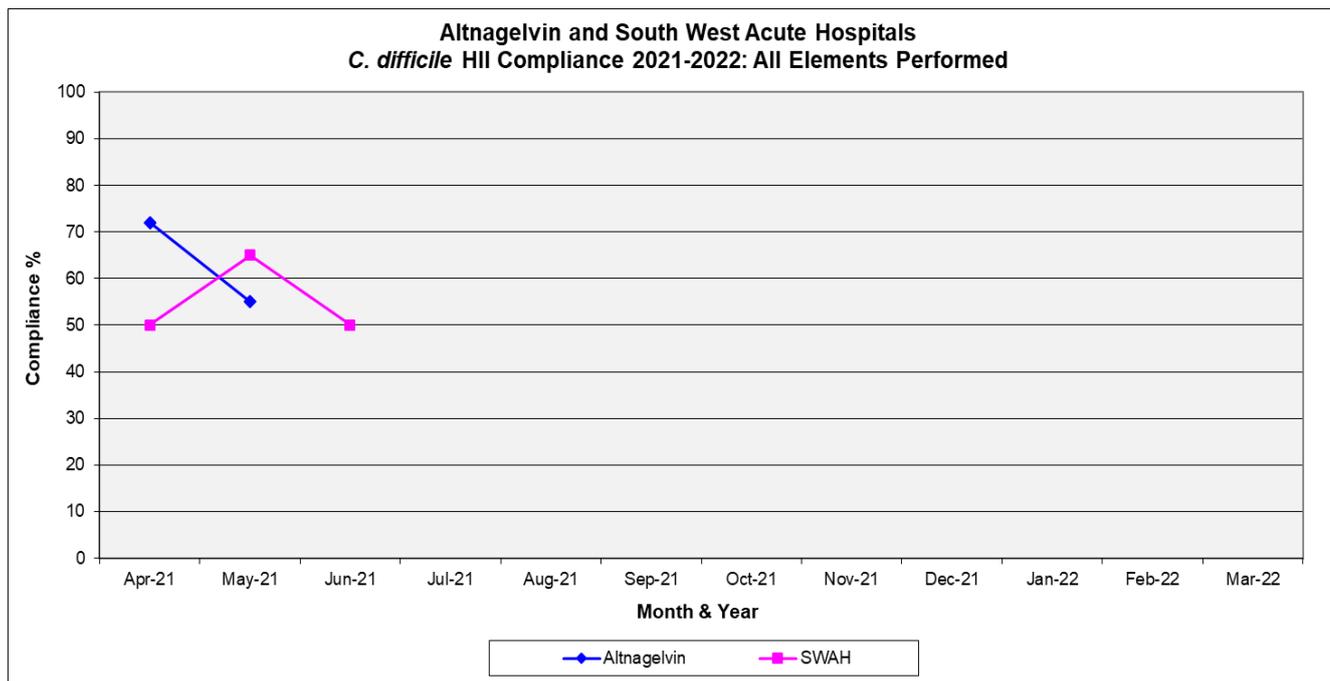
In respect of *C. difficile* cases occurring during 2021/22 a total of 10 post-infection reviews (PIRs) have been conducted. These found that none of the cases were preventable and 10 were non-preventable.

PIRs are pending for a further 11 cases.

C. difficile Care Bundle and Care Pathway Audits

Evidence based care bundles are effective when all elements of care are performed consistently. Therefore, scores are represented as either Pass (100%) or Fail (anything less than 100%). Consistent compliance with the *C. difficile* care bundle remains a challenge and is currently poor across both acute sites. The findings indicate issues around antibiotic prescribing, environmental decontamination and isolation/ cohort nursing.

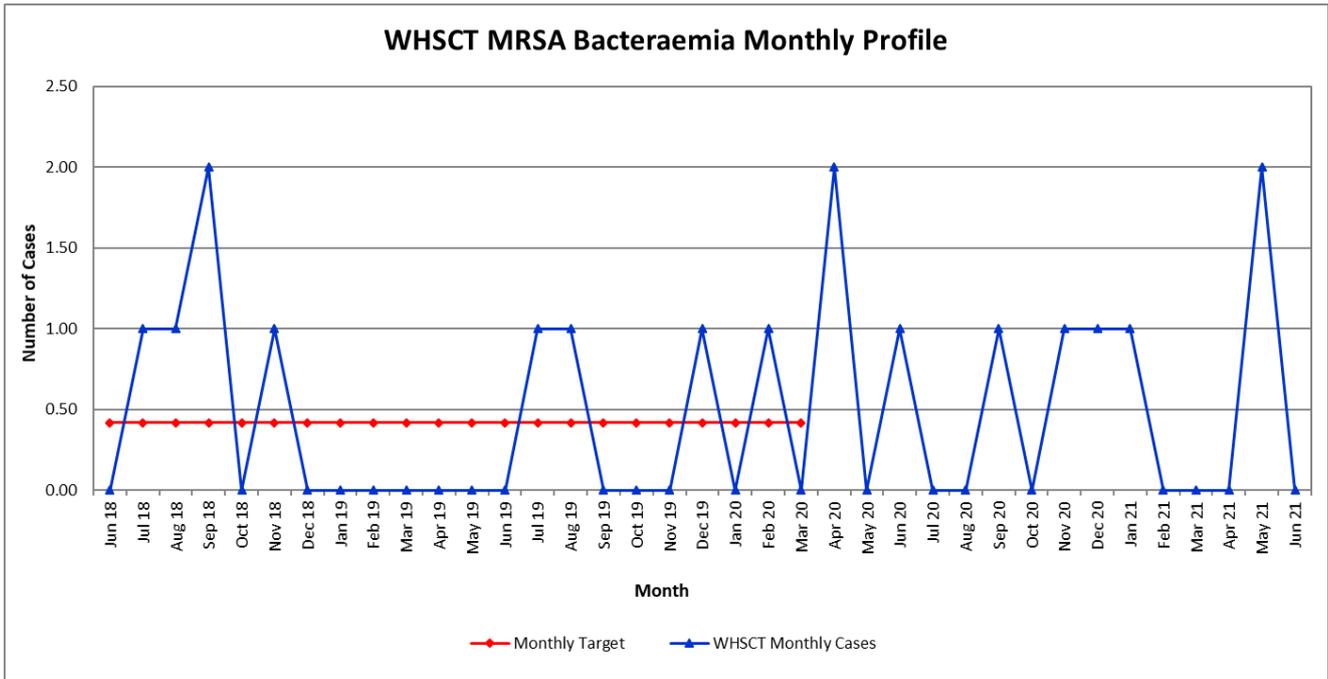
The graph below illustrates the overall compliance with all of the elements of the *C. difficile* high impact intervention (HII) care bundle for Altnagelvin and the South West Acute Hospital (SWAH).



5. MRSA Bacteraemia Performance

The new MRSA bacteraemia reduction target for 2021/22 has not yet been issued.

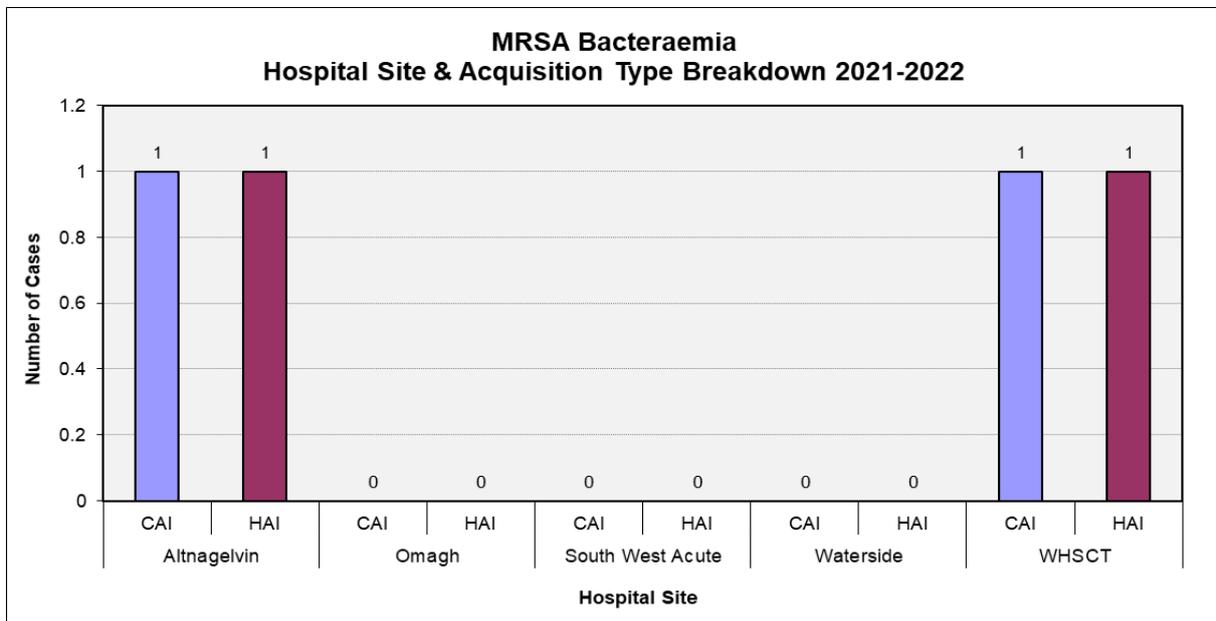
Since the beginning of April 2021 two cases have been reported, with one of those being categorised as healthcare-associated.



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

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As of 29th June 2021, the total number of days since the last Trust hospital-associated MRSA bacteraemia is:

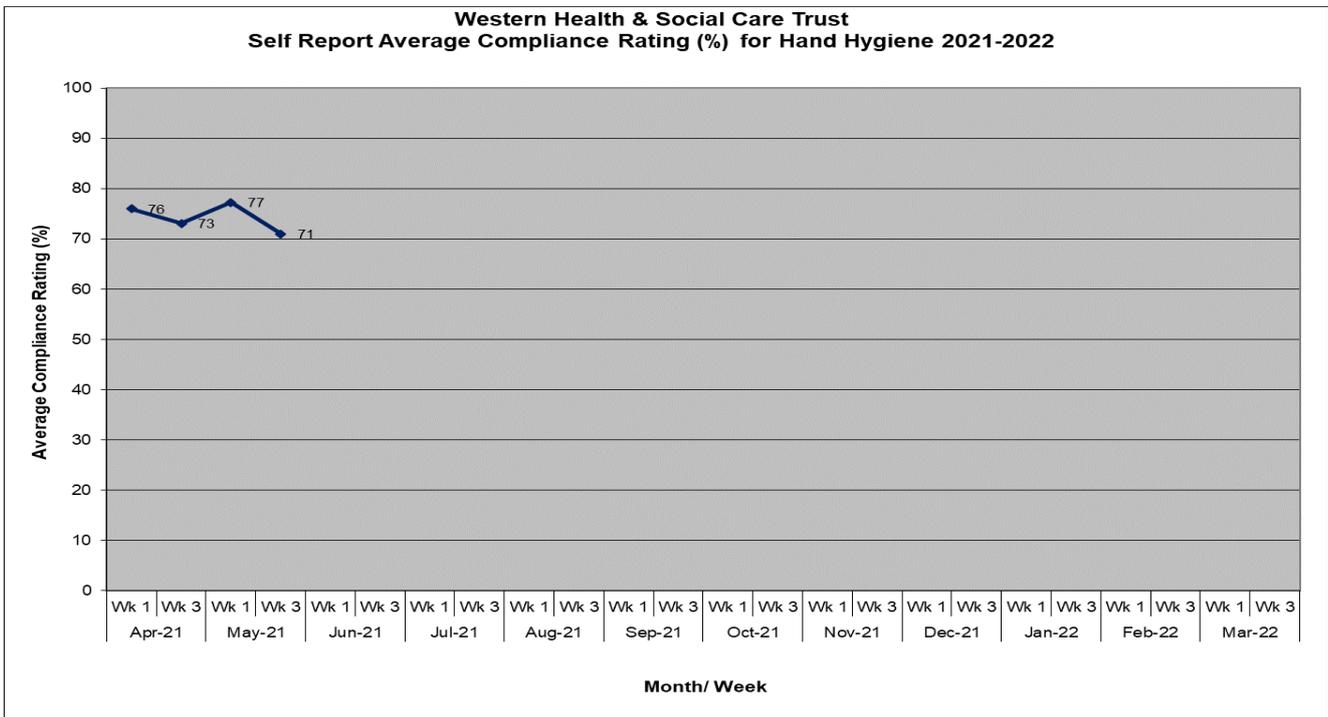
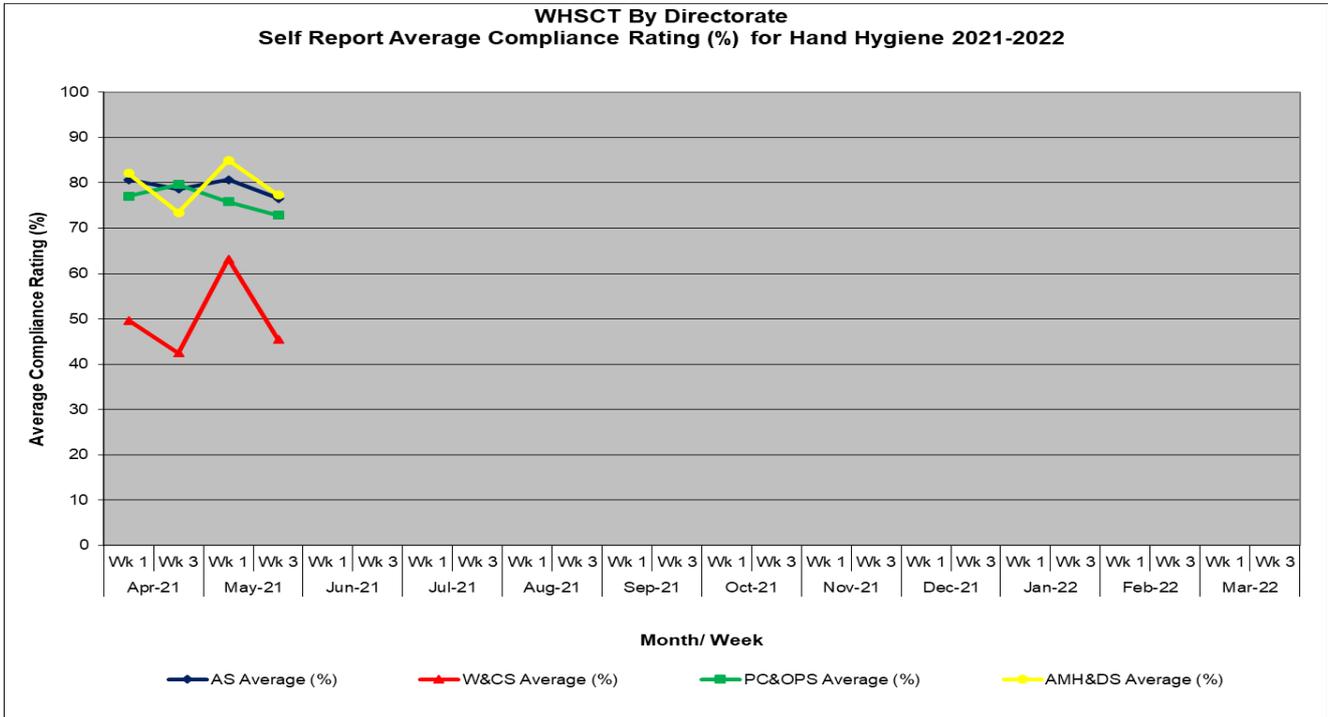
Altnagelvin – 29 days	(Last recorded case was in Ward 50)
SWAH – 380 days	(Last recorded case was in Ward 8)
Tyrone County Hospital/ Omagh Hospital & Primary Care Complex (OHPCC) – 2352 days	(Last recorded case was in the Rehab Unit)

6. Hand Hygiene Compliance

The Trust's overall self-reported hand hygiene scores are 74% when non-submission areas are included. These areas score an automatic 0%. 49 areas out of 196 applicable areas failed to submit scores for May 2021. They are as follows:

Site	Ward/ Department/ Facility
Altnagelvin	Ward 3 Head & Neck Ward 24 AMU Ward 40 Ward 42 Ward 43 Antenatal Clinic Breast Screening Unit Butterfly Lodge Cardiac Investigations Emergency Department GUM Clinic HDU Main Theatre 1 Main Theatre 2 Main Theatre 3 Main Theatre 4 Main Theatre 5 Main Theatres Recovery OPALS South Wing Clinics
SWAH	Ward 1 MSAU Ward 2 Ward 5 Ward 6 Ward 7 Ward 9 Cardiac Investigations Emergency Department Labour Ward Women's Health Centre
OHPCC	Cardiac Assessment Unit Cardiac Investigations Children's Centre Women's Centre
Tyrone & Fermanagh Hospital	Elm Villa Lime Villa
Lakeview Hospital	Berryburn Centre
Grangewood Hospital	Carrick Ward Evisch Ward
Day Care	Drumcoo Day Centre Gortin Day Centre Strabane Day Centre Tempo Road Day Centre
Other Community	Avalon House Children's Community Nursing Team The Cottages Children's Respite Crannog Intensive Treatment Team Drumclay Transitional Care Facility Rapid Response Team, Omagh Rapid Response Team, Fermanagh

A number of areas also did not submit scores for the previous month. These are highlighted in yellow on the above table.



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.