

HEALTHCARE ASSOCIATED INFECTION: UPDATE REPORT

1. PURPOSE

The paper aims to provide an update on the organisation's position regarding Healthcare Associated Infection.

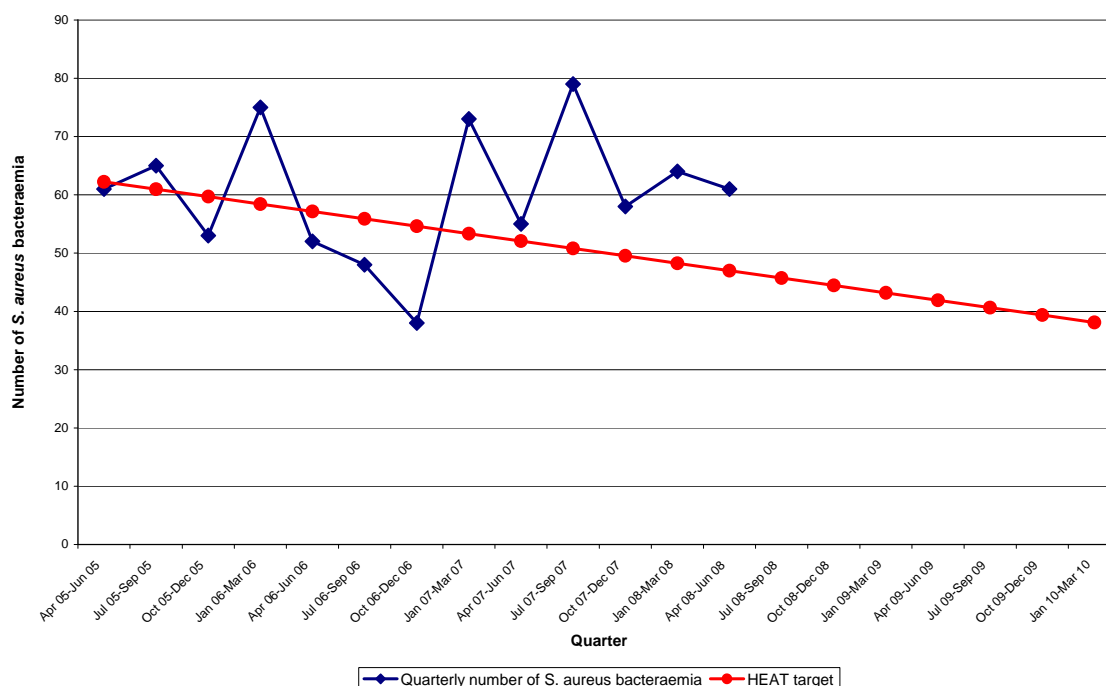
2. SUMMARY OF KEY ISSUES

Meet the Health Efficiency Access and Treatment target to achieve a 30% reduction in Staphylococcus aureus bacteraemias by 2010.

As outlined in the last report current performance against a trajectory of 48.26 cases for the period April to June 2008 is 61 cases. Although a slight reduction on the previous quarters figures the incidence was, 23% (13 cases) higher than predicted.

However, whilst the trajectory has not been achieved the rates remain within the acceptable control limits set nationally. It is important to note that the performance target does not account for normal or seasonal variations.

In reviewing the internal Laboratory data for the period July to September 2008 a



further reduction has been identified. This requires to be confirmed with Health Protection Scotland via the national quarterly report.

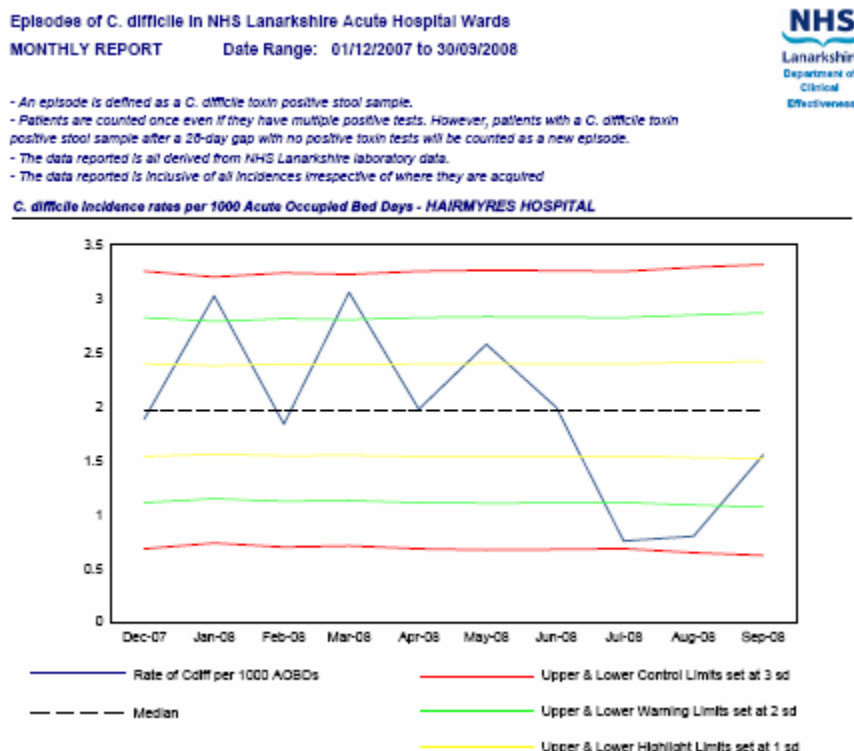
A sub group of the Lanarkshire Infection Control Committee has recently been established, chaired by the Medical Director, Executive Lead for Healthcare Associated Infection. The group aims to ensure the Health Efficiency Access and Treatment target is achieved by 2010. Continued implementation of the new NHS Lanarkshire Antimicrobial Policy, effective hand hygiene and roll out of the Scottish Patient Safety Programme Care Bundles, are key alongside the implementation of the Scottish Management of Antimicrobial Resistance Action Plan (SCOTMARAP). Antimicrobial Pharmacists are currently being recruited to support this. The interview date: 22 October 2008.

Prevention and Management of Clostridium Difficile

The Healthcare Associated Infection Executive Action Group continues to focus on the prevention and management of clostridium difficile across the organisation. The action plan continues to be implemented timeously. In addition monthly reports are provided to Scottish Government regarding key issues arising from the Independent Review into the outbreak of Clostridium difficile at the Vale of Leven Hospital.

Clostridium difficile weekly and monthly reports continue to be provided to all operational units. This includes a short synopsis of the findings and any actions which require to be taken. To date the weekly reports have remained in the Watt Matrix (appendix 1) green zone therefore no additional action has been required.

Monthly run charts for the 3 Acute Hospitals to 31 September 2008 are outlined below and highlight new cases. These fall within national limits. Further work is underway to establish local threshold levels for the organisation.

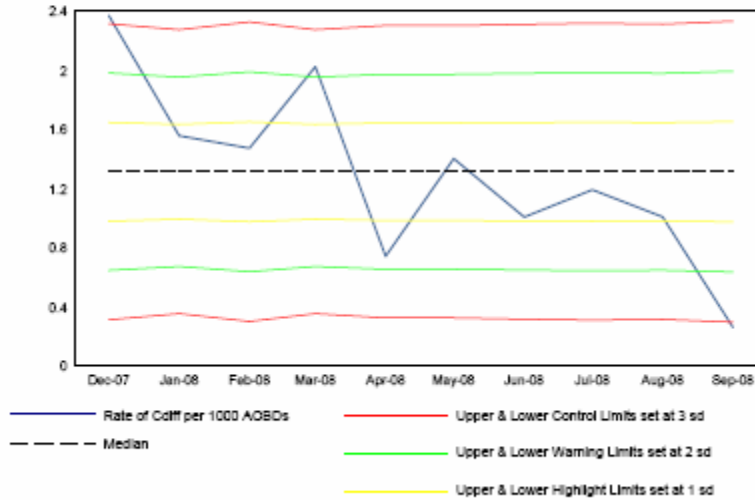


Epidemiology of *C. difficile* In NHS Lanarkshire Acute Hospital Wards
 MONTHLY REPORT Date Range: 01/12/2007 to 30/09/2008



- An episode is defined as a *C. difficile* toxin positive stool sample.
- Patients are counted once even if they have multiple positive tests. However, patients with a *C. difficile* toxin positive stool sample after a 28-day gap with no positive toxin tests will be counted as a new episode.
- The data reported is all derived from NHS Lanarkshire laboratory data.
- The data reported is inclusive of all incidences irrespective of where they are acquired

***C. difficile* Incidence rates per 1000 Acute Occupied Bed Days - MONKLANDS HOSPITAL**

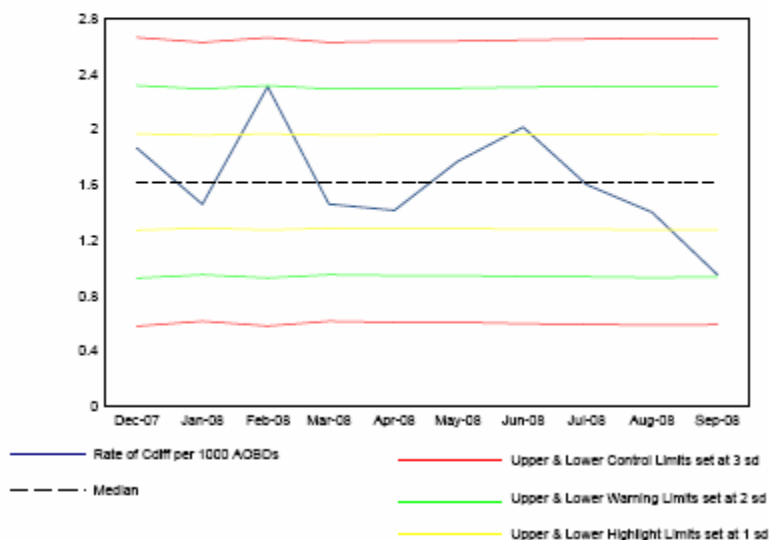


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***C. difficile* Incidence rates per 1000 Acute Occupied Bed Days - WISHAW GENERAL HOSPITAL**



Improve hand hygiene compliance amongst NHS staff by meeting the target of at least 90% compliance by November 2008

As outlined in the previous report NHS Lanarkshire quarterly audit identified a compliance level of 91% as outlined below. This has now been confirmed by Health Protection Scotland in the recently published national report.

Hand Hygiene National Audit: August 2008

Nurses	Medics	AHP	Ancillary	Compliance
92%	83%	93%	91%	91%

Preparation is underway for the next round of national audit due to commence week beginning 3rd of November for a 2 week period. The Hand Hygiene Co-ordinator continues to work closely with senior managers and frontline staff to support the ongoing focus on this issue. This has included the further roll out of the Hand Hygiene Care Bundle (Self Audit), trial of new hand hygiene products and ongoing training and development for staff.

The independent Review into the outbreak of Clostridium difficile at the Vale of Leven Hospital recommended the implementation of a zero tolerance Hand Hygiene Policy by January 2009 across NHS Scotland. A short life working group is charged with reviewing the current policy and undertaking an awareness campaign to launch it.

Scottish Patient Safety Programme

The Scottish Patient Safety Programme has strong links to and supports the organisation in the endeavour to reduce Healthcare Associated Infection. The Programme utilises improvement methodology and rapid cycle change. This enables staff to monitor compliance with clinical guidance, providing feedback, so that compliance levels can improve consistently until 95% compliance is achieved under a variety of conditions. This ensures practice and compliance is embedded and confidence is achieved in all processes.

To support this methodology, care bundles have been developed in some areas. These will be utilised to integrate priority areas such as Healthcare Associated Infection with the Scottish Patient Safety Programme. Care bundles are high-impact interventions which, when joined together provide a 'toolkit' to ensure staff undertake clinical procedures correctly every time. Liaison is continuing with key stakeholders to ensure that tests of change to support evidence based practice are being conducted.

The Scottish Patient Safety Programme has five workstreams: critical care; general ward; perioperative; leadership and medicines management. Most have elements of Healthcare Associated Infection and utilise care bundles where available. Progress to date includes:

- Testing and implementation, as appropriate, of the Central Venous Catheter, Peripheral Vascular Catheter and Hand Hygiene Care Bundles in all 3 Intensive Care Units. Spread is planned.
- Peripheral Vascular Catheter and Hand Hygiene care bundles being tested within General Wards. Spread is planned.
- Perioperative care is testing the antibiotic prophylaxis care bundle and has spread the skin preparation / hair clipping bundle.
- Safety briefings are being implemented to alert all staff to issues which may directly impact on patient safety, such as Healthcare Associated Infection. Spread is planned.
- Leadership Safety Walk rounds have commenced and are scheduled until the calendar year end. These provide the opportunity for Board members to visit all clinical areas to demonstrate commitment and focus organisational culture on patient safety issues. This includes Healthcare Associated Infection

The Clostridium Difficile Care Bundle will be launched in November 2008 in all inpatient wards and departments across NHS Lanarkshire. The purpose of this bundle is to minimise cross transmission when positive cases have been identified. It will not be launched using the standard Scottish Patient Safety Programme improvement methodology previously outlined due to its priority status. Instead, compliance will be monitored electronically in the event of cases arising, providing the opportunity to establish and monitor correlations between laboratory data and compliance at ward and department level. High profile events are scheduled for November 2008. These are aimed at all Hospital staff both within acute and geographically aligned inpatient areas. The opportunity will be taken to integrate this approach with other Healthcare Associated Infection related issues such as hand hygiene and education.

Full implementation of the Clostridium Difficile, Central Venous Catheter, Peripheral Vascular Catheter and Hand Hygiene Care Bundles will greatly assist the organisation to meet the Health Efficiency Access and Treatment target to achieve a 30% reduction in Staphylococcus aureus bacteraemias by 2010 as well as reducing prevalence of Clostridium difficile.

3. NATIONAL REPORTS

There have been two recent publications on the issue of healthcare acquired infection as outlined below:

Guidance on Prevention and Control of Clostridium difficile Associated Disease (CDAD) in Healthcare Settings in Scotland was published earlier this month by Health Protection Scotland. The aim of the guidance is to provide standardised, easily accessible evidence based advice covering key aspects of the prevention and control of Clostridium difficile Associated Disease.

It is intended to be used in all healthcare settings in Scotland including primary care and community health facilities such as community hospitals, General Practice and

Dentistry as well as the independent and voluntary sector. The Healthcare Associated Infection Team will review the document to ensure key issues have been included in the organization's Clostridium difficile Action Plan. In addition they will work in partnership with Public Health to consider the implications regarding relevant infection control policies.

Implementation of the Electronic Communication of Surveillance in Scotland (ECOSS) Website: Pre-Roll out Communication and Participation.

This electronic surveillance system has been developed by Health Protection Scotland with a view to improving the quality of the surveillance programme. The overall objective of the system is to make NHS Boards' own laboratory data readily available to Health Protection Teams, Infection Control Teams and Diagnostic Laboratories via a restricted access ECOSS website. This allows users of the website to identify where they need to focus activity to reduce locally emerging resistance and infection problems and will complement local surveillance work already being undertaken in the organisation. Access will be monitored with strict access criteria being enacted. NHS Lanarkshire will work alongside Health Protection Scotland to ensure it is implemented timeously within the organisation.

4. CONCLUSION

Whilst good progress is being made, significant work is required to ensure the organisation is fully compliant with the national Healthcare Associated Infection agenda over the next 3 years. The NHS Lanarkshire Board is therefore asked to:-

- Note the report.
- Continue to receive a monthly progress report.

5. FURTHER INFORMATION

For further information or clarification of any issues in this paper please contact:
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