

**TRUST BOARD MEETING – 28 January 2010**

<b>Title of the Paper:</b>	<b>Infection Control – Performance Report</b>		
<b>Agenda item:</b>	<b>09/10</b>		
<b>Author:</b>	<b>Colin Johnston, Medical Director</b>		
<b>Trust Objective:</b>	<b><i>Objective 1 – Patient Safety</i></b>		
<b>Key issues</b> Report on <ul style="list-style-type: none"> <li>Current rates of infection</li> <li>Practice issues</li> </ul> Purpose Reports on current performance			
<b>Risk Implications for the Trust</b> <i>(including any clinical and financial)</i>		<b>Mitigating Actions (Controls):</b>	
Failure to achieve compliance with agreed infection targets will affect the rating for the Trust		A framework exists within the Trust to manage the infection control agenda via the Infection Control Committee and the weekly Infection Control Review Meeting	
<b>Level of Assurance that can be given to the Trust Board from the report</b> [significant, sufficient, limited, none]:  Significant			
<b>Links to Key Line of Enquiry (KLOE 1 - 5)</b> N/A  <b>Legal Implications:</b> None noted at this time			
<b>Recommendation to the Trust Board:</b> The Trust Board members are asked to: <ul style="list-style-type: none"> <li>Note the current levels of reported MRSA and <i>C.diff</i> cases</li> </ul>			



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***Public Board Meeting, 28 January 2010***

**Infection Control – Performance Report**

Presented by: **Colin Johnston, Medical Director/Director of Infection and Prevention Control**

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## **1. Purpose**

This report updates the Board on the current performance with respect to both MRSA and *C. diff* infection rates. It invites the Board to comment on the current levels of infection and to seek assurance that everything that is required in relation to actions to reduce and prevent the opportunities for infection becoming a serious threat to patient safety are being taken.

## **2. Current Performance**

### **2.1 Surveillance**

#### **a) MRSA Bacteraemia**

No MRSA bacteraemias were reported in November however two were reported in December. One was hospital acquired but following discussion, the cause could not be identified. The second bacteraemia was community acquired and once again, the cause could not be identified. Learning points have been identified from both bacteraemias and appropriate actions have been taken. The current total is six, against the trajectory of 12.

#### **b) *Clostridium difficile***

The total number of *C.difficile* toxin positive isolates reported in November being classified as WHHT acquired was three, and in December, four. Root cause analyses are being conducted on all of these cases and there are currently no themes to report to the Board. The trajectory set for the year 2009-2010 is 160. The aspirational target had been set at 110, however this has recently been reviewed and reduced to 57. The total number of WHHT acquired cases until the end of December is 42 against the trajectory of 57.

Letchmore Ward continues to operate as the isolation unit for patients with both MRSA and/or *Clostridium difficile*.

### **2.2 Practice Performance**

#### **a) IV Report**

An IV nurse came into post in December and after induction will commence training and audit within the Trust.

### **b) Hand Hygiene Compliance – Lewisham Audits**

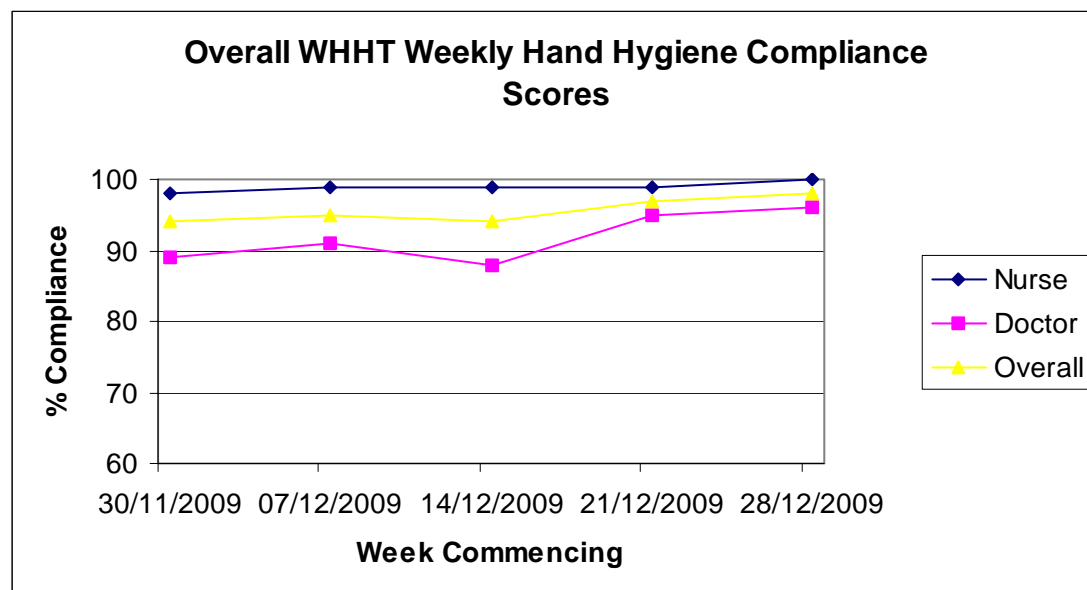
Weekly Hand Hygiene observations continue in all clinical areas, with results distributed and displayed on all Wards/Departments Infection Control Notice Boards for all members of staff, patients and visitors to view. The categories captured within the audit are:

- 'Nurses' - including Student Nurses and Health Care Support Workers
- 'Doctors' - including Medical Students

Figure 1. shows the percentage compliance score for each category each week for the month of December. Compliance for 'nurses' ranges between 98%-100% with an overall monthly average of 99% (the same as November), and 'Doctors' ranging between 88-96% with an overall monthly average of 92% (compared with 95% in November). The Trust's overall monthly average hand hygiene compliance score for December is 96%, a reduction of 1% from November. Where there is non-compliance, this is addressed at the time with the relevant staff, and the assistant DIPC or an infection control nurse will visit those areas achieving less than 90% compliance.

**Figure 1**

Lewisham audits of staff compliance with hand decontamination December '09



### **c) The Health Act 2006/Hygiene Code**

A self-assessment of the nine duties within the hygiene code has been undertaken. The Trust is still awaiting the revised self assessment tool for the nine duties, as the tool currently in use is for the 11 duties originally in place.

### **d) 'Saving Lives' Action plan/balanced scorecard**

These action plans/balanced scorecard reports help serve as an indicator/method of monitoring compliance & progress within the divisions in relation to 'Saving Lives' and also with the Hygiene code. The balanced scorecard based on the 11 duties continuous to be used for self-assessment as an up-dated scorecard relevant to nine duties is still not yet available from the DoH.

Divisions continue to provide the Trust's Infection Control Committee with monthly divisional HII 'Saving Lives' audit reports. These are discussed and action taken as appropriate.

<b>Band Month</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>Unknown</b>	<b>Total</b>
<b>November</b>	25	10	12	53	41	26	11	38	<b>216</b>
<b>December</b>	26	9	6	51	38	11	7	15	<b>163</b>
<b>Total</b>	<b>51</b>	<b>19</b>	<b>18</b>	<b>104</b>	<b>79</b>	<b>37</b>	<b>18</b>	<b>53</b>	<b>379</b>

## 2.3 Education and Training

During the month of December, a total of 163 healthcare workers received infection control training by the Infection Control Nurses. The sessions provided include corporate induction sessions for new staff and mandatory training updates for all staff.

**Table 1.** Total number of staff trained by ICN's November-December '09

	<b>Nurses/Midwives</b>	<b>HCA's</b>	<b>Doctors /Medical Students</b>	<b>Other</b>	<b>Total</b>
November	90	24	2	100	<b>216</b>
December	83	22	0	58	<b>163</b>
<b>Total</b>	<b>173</b>	<b>46</b>	<b>2</b>	<b>158</b>	<b>379</b>

**Table 2.** Bands of Staff Trained by ICN's November-December'09

	<b>Medicine</b>	<b>Surgery</b>	<b>Women/ Children's</b>	<b>Clinical Support</b>	<b>Other</b>	<b>Total</b>
<b>November</b>	50	34	41	27	64	<b>216</b>
<b>December</b>	45	28	21	19	50	<b>163</b>
<b>Total</b>	<b>95</b>	<b>62</b>	<b>62</b>	<b>46</b>	<b>114</b>	<b>379</b>

**Table 3.** Numbers of Staff Trained by ICN's by Division, November-December '09

## 3. Recommendation

4.1 The Board are therefore asked to:

- Note the current levels of reported MRSA and *C.diff* cases.

**Colin Johnston**  
Medical Director  
January 2010