

1.

**PURPOSE** 

Lanarkshire NHS Board Kirklands Bothwell G71 8BB



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SUBJECT: Healthcare Associated Infection (HCAI) Reporting Template

This paper is coming to the	e NHS	Lanarkshire (NHSL) Boar	d:						
For approval		For endorsement	$\boxtimes$	To note					
The purpose of this paper is to provide NHSL Board members with a progress of work of the Infection Prevention and Control Team (IPCT) and NHS Lanarkshire Infection Control Committee.									
2. ROUTE TO THE B	OARD								
This paper has been:									
Prepared		Reviewed		Endorsed	$\boxtimes$				
By the Head of Infection P	reventi	on and Control (IPC)							
3. SUMMARY OF KE	Y ISSI	JES							
A summary of the IPCT progress with key issues are noted on page 4.									
4. STRATEGIC CON	TEXT								
This paper links to the follo	owing:								
Corporate Objectives		LDP		Government Policy					
Government Directive		Statutory Requirement		AHF/Local Policy					
Urgent Operational Issue		Other							
5. CONTRIBUTION	ro QU	ALITY							
This paper aligns to the fo	llowing	elements of safety and qu	uality imp	rovement:					
Three Quality Ambitions	:								
Safe		Effective		Person Centred	$\boxtimes$				
Six Quality Outcomes:									
Everyone has the best sta									
People are able to live we				·					
Everyone has a positive e	•	• ,	Centred)	<u> </u>					
Staff feel supported and e Healthcare is safe for ever									
Best use is made of availa	-								

## 6. MEASURES FOR IMPROVEMENT

- LDP Targets for Staphylococcus aureus bacteraemias (SABs)
- LDP Targets for Clostridium difficile Infections (CDIs)
- Key Performance Indicators for Meticillin Resistant *Staphylococcus Aureus* (MRSA) Screening and Carbapenemase producing Enterobacteriaceae (CPE)
- Surveillance, Education, Engagement and Device (SEED) Monitoring Programme
- LICC Sub-Group updates on progress.

## 7. FINANCIAL IMPLICATIONS

The outcomes of healthcare associated infection (HCAI) include extended length of patient stay and extended length of treatment. There is currently a lack of robust information in relation to the financial cost of healthcare associated infections within NHS Scotland.

In a bid to establish a cost specific to NHSL the IPCT have been working in collaboration with colleagues from Finance to calculated the financial cost for cases of healthcare associated infection specifically SABs and CDIs to the NHS Lanarkshire Board. This work should be concluded and available to share at the NHS Board Meeting in May 2018.

#### 8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

- NHSL is working to achieve the LDP target for SABs and CDIs by 31 March 2018.
- There has been no change to the SAB and CDI HEAT Targets 2017/2018 and therefore the organisation will continue to work to achieve the current targets.

## 9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	Effective partnerships	Governance and accountability	
		accountability	
Use of resources	Performance	Equality	
	 management		
Sustainability			

#### 10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

An	Equality	and	Diversity	Impact	Assessment	has b	een (	completed	

Yes 

Please say where a copy can be obtained No 

Please say why not

There has been no requirement to date to complete an Equality and Diversity Impact Assessment.

## 11. CONSULTATION AND ENGAGEMENT

Consultation and contributions have been devised from the following departments/personnel across acute and partnership services:

- Infection Prevention and Control Team (IPCT)
- Property and Support Services Division (PSSD)
- Antimicrobial Management Team (AMT)
- Healthcare Quality Assurance Improvement Committee (HQAIC)
- Lanarkshire Infection Control Committee (LICC) and Sub-groups

## 12. ACTIONS FOR THE BOARD

The NHS Board is asked to:

Approval		Endorsement	Identify further actions	
Note	$\boxtimes$	Accept the risk identified		

The NHS Board is asked to note this progress report and highlight any areas where further clarification or assurance is required.

The NHS Board is also asked to confirm whether the progress report provides sufficient assurance about the organisational performance on HCAI, and the arrangements in place for managing and monitoring HCAI.

Please note that this progress report does not include national validated data against LDP Targets or other IPC performance. This is as a result of reporting timescales from Health Protection Scotland (HPS) who work 3 months in arrears. Therefore the validation of the October to December 2017 data will be provided in the week beginning 2 April 2018. In order therefore to realign the reporting schedules of the NHS Board and HPS, a general update report is provided to NHS Board members at this time.

#### 13. FURTHER INFORMATION

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

- Irene Barkby, Executive Director of Nursing, Midwifery and Allied Health Professionals (NMAHPs) (Telephone number: 01698 858089)
- Emer Shepherd, Head of Infection Prevention and Control (Telephone number: 01698 361100)

Prepared by Emer Shepherd, Head of Infection Prevention and Control Presented by Irene Barkby, Executive Director of NMAHPs

23 March 2018

## **Infection Prevention and Control Team Update Report**

- In January 2018, the IPCT experienced a significant increase in the number of patients referred to the service with confirmed or suspected Influenza. Between October 2017 and January 2018, the IPCT dealt with 316 positive influenza cases in comparison to 60 confirmed cases for the same time period in 2016/17. In addition, the service received over 100 referrals for suspected Influenza cases.
- All referrals both suspected and confirmed were assessed by the IPCT and advice given to clinicians and front line staff in relation to patient placement and treatment.
- The organisation is currently sitting above the trajectory levels expected at this time of the year to achieve the LDP target for SAB to achieve the LDP the NHS Board must have no more than 106 SAB cases per year. The organisational objective for 2017/18 aimed to reduce the numbers of HCAI SABs by 25% at the time of writing this report, the IPCT can confirm an overall reduction of 8% to end December 2017 as demonstrated in Appendix 1.
- Against the LDP HEAT Target for CDI, the organisation is showing significant improvement on performance from 2016/17 and is likely not only to achieve the target for the second consecutive year but to further improve performance as demonstrated in Appendix 1 which shows a 22% reduction in ALL CDI cases (HCAI and community associated infection (CAI) against last year's performance until end December 2017.

# Appendix 1 – LDP Performance (Unvalidated Nationally)



