

Enw'r Grŵp: Name of Group:	Exception Report from Infection Prevention Operational Group
Cadeirydd y Grŵp: Chair of Group:	Sharon Daniel, Assistant Director of Nursing Professional Development and Workforce
Cyfnod Adrodd: Reporting Period:	12 th May 2020
Materion Ansawdd, Diogelwch a Phrofiad: Quality, Safety & Experience Matters:	
<p>The Infection Prevention Operational Group reviewed Health Board performance for the previous financial year 1st April 2019 to 31st March 2020. Reduction was seen in three of the five targets; as yet targets have not been set by the Delivery Unit (DU) for 2020/21.</p> <p><i>Clostridioides difficile</i> Infection (CDI) achieved a reduction of 1% (1 case) compared to 2018/19 figures; there have been no periods of increased incidence during the last 6 months and changes introduced in the year should continue to show improvement. Whilst the Faecal Microbiota Transplant (FMT) service has successfully transplanted three patients, this is currently on hold due to the Covid-19 pandemic, however consideration is being given to when this service will be able to resume.</p> <p><i>Escherichia coli</i> (<i>E.coli</i>) Blood Stream Infection (BSI) saw an increase of 10% (34 cases) in comparison to the previous year. The reduction of 25% experienced at the end of last year was going to be challenging to maintain however, the Health Board has not reverted to the high numbers seen in 2017/18. The report on age standardisation of <i>E. coli</i> BSI has been submitted to Public Health Wales and is awaiting approval. Age is recognised as an independent risk factor and should be considered to benchmark equitably against other Health Boards in Wales.</p> <p><i>Staphylococcus aureus</i> (<i>S. aureus</i>) BSI numbers showed a reduction of 7% (9 cases); this has been supported by work undertaken in the community in Leg Ulcer Clinics, roll out in Primary Care and Community of Aseptic Non Touch Technique and purchase on the acute sites of Vascular Access Trolleys for all ward areas.</p> <p><i>Klebsiella</i> sp. BSI saw an increase in the previous quarter of the year resulting in a 14% increase (11 cases) on the previous year.</p> <p><i>Pseudomonas aeruginosa</i> BSI saw a decrease in numbers in the previous quarter resulting in a 35% reduction (14 cases) with the final number of 26 cases, 1 above the DU reduction target of 25. This is in part related to the work being undertaken in Withybush General Hospital (WGH) around the removal of redundant pipework.</p> <p>Acute and Community have seen a change to COVID-19 pandemic work since January 2020 with the Infection Prevention Team (IPT) being instrumental in initiating the community screening and then establishing the Community Testing Units and Drive Through COVID-19 testing units. This has generated an additional workload for the Occupational Health Team in providing results and supporting staff back to work.</p> <p>The focus from the Community IPT has now transferred to screening in care homes with 10 reported outbreaks currently. The IPT have been working collaboratively with the Local Authority and Long Term Care Team and have seen some exceptional examples of standards of care and dignity. This has been a difficult time for the team as there had been 11 changes to the Personal Protective Equipment (PPE) guidance; the numerous changes had caused some frustration and anxiety with staff.</p>	

Work around the Isolation Room requirements will recommence and a Task and Finish Group will be established to take this forward.

It was noted that following a review by the Health Board Chair, the IPSC would become an operational level steering group and report on its work to QSEAC on a biannual basis. Terms of reference and group membership will be reviewed to reflect this change.

It was agreed that due to the current situation, the Group will have short, monthly meetings.

Risgiau:

Risks (include Reference to Risk Register reference):

- The Risk Register was not reviewed on this occasion however will be a priority for the next meeting.
- Risks associated with PPE supply and usage were discussed and will be added to the risk register.
- Replacement of the endoscope decontamination equipment has been delayed until autumn 2020; capital funding has been agreed for this work. Contingencies are in place with Glangwili General Hospital (GGH), should the Prince Philip Hospital (PPH) decontamination unit fail.

Gwella Ansawdd:

Quality Improvement:

- Improvements to the Hospital Sterilisation and Decontamination Unit in GG H was completed in April 2020 and has been recertified by the Medical Devices Directive (MDD).
- The Antimicrobial Guideline App had been updated with the National Institute for Health and Care Excellence (NICE) guidance on Community Acquired Pneumonia during COVID-19 pandemic and this has been promoted with GP's and Pharmacies

Argymhelliad:

Recommendation:

QSEAC is asked to note the content of this report and recognise the requirement to amend the Terms of Reference and membership to reflect the change from a Sub-Committee to an Operational Group.

Dyddiad Cyfarfod Nesaf y Grŵp Gweithredol:

Date of Next Operational Group Meeting:

11th June 2020