

<b>Enw'r Pwyllgor: Name of Sub-Committee:</b>	Exception Report from Infection Prevention Strategic Steering Group (IPSSG)
<b>Cadeirydd y Pwyllgor: Chair of Sub-Committee:</b>	Tracey Gauci
<b>Cyfnod Adrodd: Reporting Period:</b>	22 June 2023

**Materion Ansawdd, Diogelwch a Phrofiad:  
Quality, Safety & Experience Matters:**

**Healthcare Acquired Infection (HCAI) Performance Updates:**

- The *Clostridioides difficile* (*C.diff*) figures remain on course to meet 20% reduction trajectory.
- Community acquired infection (CAI) Gram negative cases have increased – potentially due to higher temperatures and an increase in holiday traffic
- An increase in contaminant rates noted in blood cultures – Aseptic Non-Touch Technique (ANTT) training and competency assessments are being undertaken in emergency departments.

**Environmental Cleaning:**

The All Wales Cleaning Standards are awaited to inform the Health Board's Environmental Cleaning Policy – an agreement has been made to update the Health Board's local policy and amend when All Wales policy is available.

A Quality Assurance Facilities Manager will be appointed with close alliance to the Infection Prevention Team (IPT).

Trials of a new disinfectant are continuing - the current product has been used for last ten years. This will potentially reduce costs without impact on efficacy.

**Antimicrobial Resistance (AMR):**

Despite a reduction of 25% in Primary Care prescribing over the last ten years, there has been an increase over the last year – potentially due to Group A Streptococcus (GAS) infections.

Proton pump inhibitor (PPI) stickers currently used as part of a pilot in Prince Philip Hospital (PPH) now planned to roll out across all sites.

Start Smart Then Focus (SSTF) audits have improved compliance in Withybush Hospital (WGH) and Bronglais Hospital (BGH) but further work is needed on other sites

**Public Health:**

A total of 241 Asylum seekers are expected to arrive in Llanelli mid July 2023 and the provision of onsite health screening is being developed

### **Water Safety Group:**

Issues have been identified with high Legionella counts in both the Day Surgery Unit (DSU) and Physiotherapy area in WGH, remedial work has been undertaken to rectify situation – issue potentially lies with poor run-off compliance. Reminders to staff to run off water in taps is regularly put on the Health Board's Global email.

### **Ventilation Safety Group:**

A number of issues identified with ventilation in theatres:

- **PPH – DSU** issues occurred with ventilation, poor humidity control and flooding. Issues with excess condensate/flooding required remedial work to air handling plant. Theatres are now back in use
- **WGH – Main theatres:** ongoing issues with air handling plant. Theatre 4 is no longer viable as an ultra-clean theatre and 'obsolete' plant needs bespoke solution to support compliant use (work in progress)
- **Glangwili Hospital (GGH) – DSU:** ongoing issues with ventilation – failure of air handling plant to deliver required number of air changes per hour

### **Decontamination Group:**

Orthopaedic Robot Concerns – decontamination instructions for this equipment are compatible with United States (US) methodologies but are not compliant with British standards, which was highlighted after purchase. The Assistant Director of Operations is reviewing the failure to complete the pre purchase questionnaire to avoid reoccurrence and this is being highlighted with Procurement Services.

Welsh Health Circular (WHC) regarding single use laryngoscopes – a further meeting will be held towards the end of June 2023 following an internal audit.

### **All Wales Surveillance - ICNET:**

Detailed plans are in place nationally to ensure the continued use of an All Wales electronic case management and surveillance tool.

### **Risgiau:**

#### **Risks (include Reference to Risk Register reference):**

##### **Current Risks:**

**Risk Reference 1490:** Increased risk of patient harm due to escalating rates of *C.diff*

Risk level- High Target Risk – High Current Risk score = 12

Mitigation and control measures as identified within the HCAI Implementation Plan and Enhanced Monitoring detail provide assurance that the reduction rates are currently being sustained.

**Risk Reference 1640:** Airborne Isolation Room Requirements

Risk level – Extreme Target Risk – High Current Risk score 15

Without capital funding this risk remains, recommendation is that this risk is moved to a capital rather than and Infection Prevention & Control risk. SBAR presented to provide further detail

1640	NQPE: Infection Prevention and Control	13/04/2023	Airborne Isolation Room Requirements	Extreme	15	High	Safety - Patient, Staff or Public	Quality, Safety and Experience Committee	23/06/2023	24/07/2023	Service or Department Level Risk
1490	NQPE: Infection Prevention and Control	22/08/2022	Increased risk of patient harm due to escalating rates of Clostridioides difficile Infection (CDI)	High	12	High	Safety - Patient, Staff or Public	Operational Quality, Safety and Experience Sub Committee	23/06/2023	23/08/2023	Service or Department Level Risk

**Gwella Ansawdd:  
Quality Improvement:**

Improvement measures including medical engagement have resulted in a reduction in our *C.diff* numbers and we are currently meeting and sustaining our 20% reduction trajectory

The IP&C team are involved in an Enabling Quality Improvement in Practice (EQIIP) project to develop a Nurse led faecal microbiota transplant (FMT) service; whilst this is still in progress we are seeing an increase in the number of successful FMT procedures for those patients with recurrent *C.diff*. One of the objectives of the project is to ensure equitable access for this service to Primary care and community patients.

**Argymhelliad:  
Recommendation:**

It is recommended that capital investment is sourced to ensure compliance with the Welsh Health Circular (WHC) Airborne Isolation requirements.

**Dyddiad y Cyfarfod Pwyllgor Nesaf:  
Date of Next Sub- Committee Meeting:**

To be confirmed.