



Y PWYLLGOR ANSAWDD, DIOGELWCH A PHROFIAD QUALITY, SAFETY AND EXPERIENCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	08 February 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	Llwynhendy Tuberculosis (TB) Outbreak Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Ros Jervis, Director of Public Health
SWYDDOG ADRODD: REPORTING OFFICER:	Dr Jo McCarthy, Deputy Director of Public Health

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report is to update the Quality, Safety and Experience Committee (QSEC) on the Tuberculosis (TB) outbreak in Llwynhendy, Llanelli outlining recent findings and proposed actions, and providing assurance around the management of the outbreak and preparations around the planned external review.

Cefndir / Background

Tuberculosis (TB)

Tuberculosis (TB) is a bacterial infection caused by the tubercle bacillus *Mycobacterium tuberculosis* and usually affects the lungs (pulmonary TB, which is the contagious type), but can affect other parts of the body. Transmission occurs through breathing in air-borne droplets containing bacteria released when an infectious person coughs, talks or sneezes. The risk of becoming infected usually requires close and prolonged contact with someone with the illness such as living in the same household.

In most healthy people, the body's natural defense against infection and illness (the immune system) kills the bacteria and there are no symptoms. Sometimes, the immune system cannot kill the bacteria, but manages to prevent it spreading in the body. Although individuals will not have any symptoms, the bacteria remains in the body. This is known as 'latent TB' and individuals are not infectious. Although most individuals with latent TB never reactivate, if the immune system fails to kill or contain the infection, it can spread within the lungs or other parts of the body and symptoms will develop within a few weeks or months. This is known as 'active TB'. Latent TB can develop into an active TB disease at a later date, particularly if an individual's immune system becomes weakened, for example by receiving chemotherapy treatment.

The purpose of screening for TB is to:

- Identify cases of active TB before they present to clinical services. Early treatment will improve the outcome for patients, will reduce their period of infectivity and prevent transmission of TB to others, and
- Identify individuals with latent TB as treatment prevents both active TB in the patient and subsequent onward transmission of TB to others.

The Llwynhendy Tuberculosis (TB) Outbreak

The Llwynhendy TB outbreak was initially declared 12 years ago, with the outbreak closed three times and last reopened in 2018. The index case became ill in late 2009 and was diagnosed with active TB in 2010. Screening of household members revealed additional cases, and 14 social contacts of the index case also tested positive. Multiple cases were subsequently identified through onward transmission. There were no new cases between 2015 and early 2018, however the outbreak was re-opened for a final time in November 2018 when new cases of TB had been identified with the same strain linking them to the Llwynhendy TB outbreak, with a number of associated deaths.

The deaths of linked cases in 2018 resulted in a drive to ensure that all potential contacts, as far as physically possible, were identified and screened. The definition of a contact for the purposes of this outbreak was expanded to include all customers at the public house the outbreak centred around over several years. Phase 1 screening in June 2019 saw an extremely high demand and the team were unable to see everyone or complete screening for all those who attended at that time. Phase 2 screening clinics were held throughout late 2019 specifically to accommodate those not seen or only partially screened in phase 1. This was the last point at which updates on the response to the outbreak were reported to Board. Since 2019 an external review had been planned.

This update seeks to provide QSEC with a summary of events since the last report and provide assurance around the outbreak response and external review plans.

Asesiad / Assessment

In early 2020, the COVID-19 pandemic stalled work on a database being developed to link TB screening, patients medical records and epidemiology data. It also prevented a follow up of people who had not attended when invited for screening and meant two Bacillus Calmette-Guérin (BCG) clinics for children who had screened negative were cancelled. When the Outbreak Control Team met for the first time in 18 months in September 2021, there were over 600 individuals who had at some point been identified as contacts and had not been fully screened, or who required rescreening before a BCG due to the time lapse since their screen.

Following recommendations from the Outbreak Control Team:

- The Hywel Dda TB Operational Group was reformed. This group has met bi-weekly. It consists of members from the TB clinical team, Paediatrics, Estates, Emergency Planning, Public Health Wales and Finance. The group make operational decisions on the outbreak response.
- Screening and vaccination has resumed, with all children who were due to attend BCG clinics at the start of lockdown in March 2020 contacted for rescreening and BCG. Additionally, people who previously did not attend for screening have received further invites, and continue to do so.
- Work on the database has resumed. Unfortunately this is not yet complete, however the TB Operational Group is working closely with colleagues in the Digital Team on this.

- The Outbreak Control Team has resumed monthly meetings to check progress and monitor the situation.

Overall there have been 245 cases of latent TB identified as part of the outbreak. 185 have been treated and the other 60 are on active monitoring, requiring a chest x-ray and symptom screen every six months. There have been 33 active cases of TB identified as part of the outbreak.

The external review of the Llwynhendy TB Outbreak is expected to take place during April 2022. This review is being jointly commissioned by Hywel Dda Executive Team and Public Health Wales Executive Team. The Hywel Dda Team is led by the Medical Director, Professor Philip Kloer and Assistant Director, Medical Directorate, Mr John Evans, preparing for the review. No issues which require escalation to QSEC have been identified in the preparation. There is also an oversight group coordinating actions and preparations between Public Health Wales and Hywel Dda UHB, and again there have been no issues of concern raised. It should be noted that the review was initially due in January 2022 and has been delayed, partly due to the Omicron wave of COVID-19, and partly to allow for preparation of contracts and digital access for the review team.

The review team has now been established and honorary contracts prepared; colleagues in the digital team are in the process of organising appropriate access to information the review team need, Hywel Dda communications team are engaged and aware of plans, and key staff who the review team need to speak with have been made aware that it is happening. All patients diagnosed with TB as a result of screening linked to the outbreak have been contacted via letter and informed of the review, and families of deceased patients have also been contacted by phone.

There is a new risk on the Corporate risk register around the external review and TB services in Hywel Dda. This risk will be assigned a number imminently:

'There is a risk of reputational harm if the health board is found to have not managed the TB outbreak in Llwynhendy as well as it could have. This is caused by the findings of the forthcoming HB and PHW commissioned external review into the outbreak and its management since 2010, and whether each stage was conducted in accordance with best practice guidance in place at the time of each phase of the outbreak. This could lead to an impact/affect on stakeholder confidence in the Health Board's ability to manage future outbreaks, local and national media interest, and additional scrutiny from key stakeholders such as WG.'

We are not anticipating any problems relating to the outbreak management, however there is a possibility that the service ability to respond to future outbreaks will be questioned, which has been escalated appropriately. This concern has focused around the imminent loss of the TB lead who is planning to retire in March 2022. A replacement for the TB lead has now been sourced with the requirements for a sustainable TB service going forward to be considered as part of the Integrated Medium Term Plan (IMTP). Further to this, we have secured a number of short term posts and assistance in the interim to ensure the safe and efficient completion of screening for the Llwynhendy TB outbreak and other TB outbreaks in Hywel Dda.

Argymhelliad / Recommendation

QSEC members are asked to:

- take assurance from the actions being undertaken to ensure the outbreak is responded to appropriately, and from information around the preparation for the external review.

- note that a further update will be presented to QSEC once the outbreak has been closed, the external review report received or in 6 months' time, whichever is soonest.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 Scrutinise, assess and see assurance in relation to the patient impact, quality and health outcomes of the services provided by the Board.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	This is a new risk- not yet assigned a number on the risk register – <i>'There is a risk of reputational harm if the health board is found to have not managed the TB outbreak in Llwynhendy as well as it could have. This is caused by the findings of the forthcoming HB and PHW commissioned external review into the outbreak and its management since 2010, and whether each stage was conducted in accordance with best practice guidance in place at the time of each phase of the outbreak. This could lead to an impact/affect on stakeholder confidence in the Health Board's ability to manage future outbreaks, local and national media interest, and additional scrutiny from key stakeholders such as WG.'</i>
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	1.1 Health Promotion, Protection and Improvement
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services 6. Sustainable use of resources
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Included within the report
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Phrofïod:	The Board of Hywel Dda was updated on the Llwynhendy TB outbreak response in 2019.

Parties / Committees consulted prior to Quality, Safety and Experience Committee:	The Executive Team has received updates around plans for the External Review
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	There is a financial ask around a sustainable TB service going forward, but not as part of the Llwynhendy outbreak response short term.
Ansawdd / Gofal Claf: Quality / Patient Care:	Included within the report
Gweithlu: Workforce:	For a sustainable TB service going forward, there are workforce implications. However for the response to this outbreak the workforce is currently sufficient.
Risg: Risk:	There is a risk that contacts who do not attend for screening will be unknowingly positive for TB, posing an individual and public health risk. This risk is considered and dealt with as part of the OCT decisions.
Cyfreithiol: Legal:	Any legal implications are being dealt with as part of the External Review discussions.
Enw Da: Reputational:	There is a reputational risk around the External Review, which may find failings in the outbreak response. This has been escalated to the Corporate risk register.
Gyfrinachedd: Privacy:	No Patient Identifiable Information included Note that the name of the public house where the outbreak initially centred on is in the public domain and was identified as part of the 2019 communications.
Cydraddoldeb: Equality:	Not applicable

