



NOT PROTECTIVELY MARKED

Public Board Meeting

29 September 2021 Item 12

THIS PAPER IS FOR DISCUSSION

PATIENT AND STAFF SAFETY – HEALTHCARE-ASSOCIATED INFECTION (HAI) UPDATE REPORT

Lead Director Author	Professor Frances Dodd, Director of Care Quality and Professional Development Sarah Freeman, Head of Infection Prevention and Control			
Action required	The Board is asked to note this report.			
Key points	 The Annual Infection Prevention and Control Report for 2020/2021 was approved by the Clinical Governance Committee (CGC) on 16 August 2021 (page 3). As requested at the Board meeting on 28 July, a report was provided to CGC highlighting the outstanding deliverables in more detail, including progress and, where applicable, mitigations (page 3). 			
	• The COVID-19 workload within the Infection Prevention and Control teams has increased in the second quarter. An ease in social restrictions in public life has not been reflected in health and care working settings and has resulted in increases in enquiries about COVID-19 related control measures from staff and managers (page 3).			
	 The audit programme was a priority for the Service. The monitoring of standard infection control precautions, knowledge and practice commenced in August 2021 and should be completed by the end of December 2021 (page 3 & 4). Overall compliance with the PVC insertion care bundle is being consistently sustained above the quality indicator aim of 95% (page 4). 			
Timing	This paper is presented to the Board bi-monthly in the Scottish Government's prescribed template.			
Link to Corporate Objectives	2.1 A patient safety work programme must include ongoing work to prevent and reduce the risk of HAI for patients, staff and the public.			
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Contribution to the 2020 vision for Health and Social Care	The work and information referred to in this report supports the Service in its contribution to the 2020 Vision for Health and Social Care in relation to safe and effective care.
Benefit to Patients	Safe clinical practices, a clean environment and patient care equipment protect patients from the risk of healthcare-associated infection (HAI).
Equality and Diversity	Healthcare-associated infection (HAI) policies apply to all staff and patient groups. These are based on NHS Scotland HAI policy and guidance. Health Protection Scotland (HPS) and Healthcare Improvement Scotland (HIS) conduct equality impact assessments on all HAI national guidance, policy and standards. The hand hygiene, Standard Infection Control Precautions (SICPs) and cleanliness audit results reported are a mandatory HAI requirement related to national policy and guidance.

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Healthcare-Associated Infection Report

Annual Infection Prevention and Control Programme of Work

The Annual IPC programme for 2021/2022 is compiled to ensure compliance with national and local requirements for the prevention and control of infection and the management of HAI. In addition, the work programme actively supports recovery from the COVID-19 pandemic, the prevention of transmission of COVID-19 and the Scottish Ambulance Service Remobilisation Plan to March 2022. The IPC annual report was approved at the Clinical Governance Committee (CGC) on 16th August 2021 along with the terms of reference for the Infection Control Committee (ICC).

The team continue to make progress with the outstanding deliverables in the programme of work for 2020/2021, that were transferred to the programme of work for 2021/2022. As requested at the Board meeting on 28 July, a report was provided to CGC highlighting the outstanding deliverables in more detail, included progress reports and, where applicable, mitigations. The outstanding deliverables do not impinge on the safety of patients or place staff or patients in an unsafe IPC environment. The ICC meets quarterly and will monitor progress and outcomes through its governance processes.

COVID-19 Pandemic

The third wave of the COVID-19 pandemic has increased the workload of the IPC team. The easing of social restrictions in public life is not applicable to the health and care work settings and has, in fact, resulted in increases in enquiries from staff on COVID-19 related control measures, self-isolation and physical distancing. This is a period of transition for all healthcare and care organisations as we restore services safely whilst COVID-19 remains a risk to health.

Audit Programme

The comprehensive IPC audit programme of ambulance vehicles and stations (known as the RIVO audits) will remain a priority for 2021/2022. The regional and department representatives on the ICC will report their audit results formally at the next quarterly ICC meeting in September 2021. They will highlight any issues and provide assurance that improvements are progressing with IPC matters. This is part of an initiative in the 2020/2021 programme of work to encourage regional departments to take ownership of IPC within their area. This is being supported by the Care Quality Regional Leads. The IPC team meet regularly with the Leads to promote ownership of IPC, build understanding of the audit data and its application and support services to continue to deliver quality.

The monitoring of the Standard Infection Control Precautions (SICPs) commenced in August 2021 and aim to be completed by the end of December 2021. The SICPs audits monitor staff knowledge and application while caring for our patients at the emergency departments. In 2020, the SICPS audits in the Western Islands could not be carried out due to COVID-19 restrictions. Provided there are no restrictions this year, they will be completed as planned.

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Inspection Visits to New and Refurbished Premises

IPC inspection visits were carried out at new and shared premises at Aviemore Station in August and Broadford Station is planned for September 2021.

Policy and Guidance

As part of the remobilisation services, we have worked with the Head of Scheduled Care to implement the 1-metre minimum physical distancing in patient transport services. This has entailed the development of a risk assessment and IPC guidance for staff and call handlers. There are processes in place via COVID-19-specific questions to identify patients with COVID-19 or suspected to have COVID-19 to ensure the safety of our staff and other patients. In addition, patient transport guidance has been developed on the importance of mask wearing and of reporting symptoms at the time of booking or afterwards so that we can maintain safe systems of care and reduce the risk of infection. This work was approved through the National Clinical Cell and the CMO's Professional Advisory Group meetings.

A Scottish Ambulance Service workshop for all key stakeholders will be held in early September to review viral haemorrhagic fever, including HCID (high consequences infectious diseases) and action cards as an interim mitigation until the national review. The Scottish Health Prevention Network HCID group was suspended during the pandemic, and it held its first meeting on 23 June 2021. Due to pressures as a result of the continual threat of COVID-19, the August meeting has now been cancelled and is planned for mid-October.

External Partner Engagement

The IPC team has maintained and contributed to communication internally and externally, for example, by contributing to incident support meetings with infection control managers, which are coordinated by HPS weekly, and by attending meetings of the National Infection Prevention and Control Ambulance Group (UK-wide). The HAI Infection Control Standards are being reviewed by Healthcare Improvement Scotland and are due to be circulated for consultation. The Lead IPC Advisor represents the Ambulance Service within this group.

Peripheral Venous Catheter (PVC) Insertion Bundle

Compliance with the PVC bundle remains above the target of 95%, with May at 96.9%, June at 96.7% and July at 96.5% this is a good achievements given the significant operational pressures across the system.

Conclusion

This report highlights the challenges with delivering the annual IPC programme of work due to the ongoing pandemic, which is now in its third wave. The annual programme of work for 2021/2022 actively supports recovery from the COVID-19 pandemic and the prevention and control of HAIs. The main components of the programme, including audit, policy and guidance, education and training, advising and gathering and sharing knowledge, support the service to prevent and reduce the risk of infection for the people we care for and our staff.

Recommendations

The Board is asked to discuss this report.

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