

# INFECTION PREVENTION AND CONTROL ANNUAL WORK PLAN 2019/20

Created: 25.02.19

Last updated: 08.10.2019

**Person responsible:** Lisa Hinton, Assistant director of nursing infection prevention and control

## BRAG Key

Blue – On target	Red – Will not achieve	Amber – Some slippage but will be achieved	Green - Achieved
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Objective	Detail	Actions	Person responsible	Update on progress	Date for completion	BRAG/ date completed																				
Support Delivery Units in reducing HCAIs	Early detection	Develop and pilot spot-check audit systems for time taken from onset of unexplained diarrhoeal symptoms to sampling and receipt in laboratory to improve Delivery Unit processes for early detection	Delyth Davies/ Joanne Walters	03.05.19 – An Annual Audit Programme is being created and this audit will be included.  08.10.19 – Still ongoing. <table><tr><th>Specimen receipt by lab</th><th>0 - 1 days</th></tr><tr><td>Jan-19</td><td>84%</td></tr><tr><td>Feb-19</td><td>78%</td></tr><tr><td>Mar-19</td><td>75%</td></tr><tr><td>Apr-19</td><td>71%</td></tr><tr><td>May-19</td><td>93%</td></tr><tr><td>Jun-19</td><td>84%</td></tr><tr><td>Jul-19</td><td>84%</td></tr><tr><td>Aug-19</td><td>81%</td></tr><tr><td>Sep-19</td><td>94%</td></tr></table>	Specimen receipt by lab	0 - 1 days	Jan-19	84%	Feb-19	78%	Mar-19	75%	Apr-19	71%	May-19	93%	Jun-19	84%	Jul-19	84%	Aug-19	81%	Sep-19	94%	October 2019	
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		Link with Datix Manager to review how Datix reporting could be utilised to support audit of early detection improvement markers	Delyth Davies/ Lisa Hinton	25.04.19 – Work underway to review Datix and pilot the Cloud for Tier one HCAIs.  20.06.19 – appropriate coding identified and with Datix team to update fields	October 2019																					

				Development of infection specific fields within incident report to follow.	December 2019	
	Early isolation	Review HB standard for time to isolation for patients with unexplained diarrhoea, and develop spot-check audit system of time taken from onset of unexplained diarrhoeal symptoms to isolation.	Delyth Davies/ Lisa Manchipp-Taylor	03.05.19 – An Annual Audit Programme is being created and this audit will be included.	December 2019	
	Effective patient care environment decontamination processes	Implement and embed 4D cleaning process through acute services across the Health Board	Sharon Williams	4D process agreed at ICC on 31.01.19. Training provided to acute services and process commenced from 18.02.19.	June 2019	May 2019
		Implementation of UVc cleaning at Morriston Hospital	Sharon Williams	The UVc cleaning at Morriston Hospital commenced from 18.02.2019.	June 2019	May 2019
		Review the environmental decontamination cleaning processes and develop a consistent plan for Health Board wide provision for environmental decontamination	Sharon Williams/ Lisa Hinton	03.05.19 – Discussed at the Environmental Decontamination T&F Group on 16.04.19; agreed a whole system approach of all decontamination cleaning will be reviewed.  02.10.19 - 6-month trial commenced in Singleton for UVc system. A business case is being prepared to purchase 2 additional machines once the trial has finished. It has been agreed that 1 UVc machine will be transferred from Morriston to NPTH; who will cover the costs. This will ensure a standardisation approach to enhanced cleaning across all 3 sites.	December 2019	
	Faecal microbiota transplant	Implementation of FMT Health Board wide	Jo Walters/ Brendan Healy	03.05.19 – Cases are being reviewed and patients receiving treatment. Action complete.	May 2019	May 2019
	Review HCAs at the point of care	Pilot post infection review process at Morriston Hospital to ensure a timely review of HCAs with support from IPC team	Lisa Hinton	20.06.19 – pilot commenced at Morriston Hospital June 2019, to be evaluated and actions going forward to be identified after 3 month trial.	September 2019	

				08.10.19 - Pilot in Morriston needs further discussion with Matrons and Ward Managers. Two recent meetings with Ward Managers/ Matrons were cancelled at short notice. Plan to update at the Matrons Development Programme on 14.10.19		
	Training and education	IPC to develop a robust annual programme of Infection prevention training and ANTT assessor training to improve compliance	Jo Walters	08.10.19 – Venues have been secured across all sites for the delivery of IPC education & training for 2020 (which will include ANTT). Singleton SDU clinical educator team with IPC support are currently delivering on-site training. IPC team on Neath site are also delivering ward based refresher training and will make contact with the clinical educators on-site to establish a similar process. Plans to re-establish ANTT training with clinical educators to be arranged at Morriston.	October 2019	
Improve the quality of information on HCAI	Fund ongoing licence for ICNet	Link in with Capital Finance regarding case submission for ongoing funding of ICNet, and link with Public Health Wales regarding reworked finances following Bridgend Boundary changes	Delyth Davies	01.04.19 – ICNet funding has been sourced via Investment and Benefits Group. Action complete.	July 2019	May 2019
	Collaboration with Informatics to establish interface with ICNet to extract data and develop a more intelligent reporting system	Development of an interface from ICNet to the Health Board dashboard for ward level data on infections	Delyth Davies	03.05.19 – LH due to meet with Matt John to progress. 08.10.19 – Meeting with IT to review dashboards on 08.10.19	October 2019	
		Develop automated reporting mechanisms for regular reports to Delivery Units on new infections	Delyth Davies	03.05.19 – to prepare weekly reports for the SDU's which can be circulated via SW/ DH. 08.10.19 – as above	August 2019	

	for Delivery Units.	Develop automated reporting mechanisms for regular reports to Delivery Units graphically summarising infection rates	Delyth Davies	See above. 08.10.19 – as above	August 2019	
		Review reporting and investigation processes to refine and improve information and Health Board wide learning	Delyth Davies/ Lisa Hinton	08.10.19 – as above	September 2019	
	Review surveillance processes and datasets	Revise and refine information captured within ICNet	Delyth Davies/ Jo Walters	01.04.19 – Information has been refined. DD is part of the National Working Group and will continue to feedback information. Action complete.	June 2019	May 2019
Review the Infection Prevention & Control (IPC) workforce	Review skill mix	Review current IPCT skill mix in line with boundary changes and vacancies	Lisa Hinton	25.04.19 – review underway. Awaiting confirmation of post boundary budget to identify opportunities.  20.06.19 – skill mix review completed and required structure identified.	June 2019	June 2019
		Identify appropriate Health Board wide skill mix to incorporate community services and undertake appropriate recruitment	Lisa Hinton	25.04.19 – review underway. Recruitment of matron underway. 20.06.19 – matron appointed, new vacancy, paper being developed for IBG.  02.10.19 – Additional posts have been agreed by Execs. These include – 1 WTE Band 7 ANP in Community 1 WTE Band 6 IPCN in Community 1 WTE Band 3 HCSW – Community & Decontamination 1 x 0.6WTE Band 3 HCSW – acute sites Also Band 7 ANP – acute sites is currently out to advert.	October 2019	
	Review education and training needs	Undertake a training needs analysis of the team and benchmark against National standards of education	Lisa Hinton	25.04.18 – Review of core skills within the team undertaken. Benchmarking against other teams.	July 2019	June 2019

				20.06.19 – Review complete, learning needs identified and appropriate courses sourced		
		Source appropriate training and education of the team to ensure fair access to development and support access whilst maintaining an effective service.	Lisa Hinton	<p>25.04.19 - Request for funding made to head of education to ensure all members of the team reach minimum standards of education. Confirmation of funding expected May 2019.</p> <p>20.06.19 – Training and education identified, funding obtained and support in place for team.</p>	September 2019	June 2019
Support primary care to improve uptake rates of the MenACWY vaccine	Improved uptake rates of vaccine	Analyse practice level data from VPDP with initial aim of targeting practices who have less than 30% uptake of the vaccine (in catch up cohort initially).	Cath Watts	<p>15.05.19 – 17 GP Practices have been contacted. Weekly GP practice uptake rates are being received from PHW; which shows no improvement in uptake rates as yet.</p> <p>02.10.19 – There has been a delay in receiving further uptake rates due to an issue with the software; which NWIS are in the process of resolving. PHW will provide further uptake rates to the IC when issue has resolved.</p>	September 2019	
Establish whether children across the HB receive their primary immunisations at the recommended ages.	Audit the timeliness of first immunisations	Snap shot audit to be undertaken in 1 cluster initially. Aim to roll out across the HB with support from ChIG members.	Cath Watts	<p>15.05.19 – Work has not commenced as yet.</p> <p>02.10.19. – Immunisation coordinator has commenced work, but has audited the whole birth cohort during a two week period for babies born in April 2019. IC is now liaising with HV Leads to complete audit.</p>	December 2019	