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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	24 October 2019	Agenda Item	2.5
Report Title	Severe Infections in People Who Inject Drugs		
Report Author	Judith Tomlinson, Consultant in Public Health		
Report Sponsor	Dr Keith Reid, Interim Director of Public Health		
Presented by	Dr Keith Reid, Interim Director of Public Health		
Freedom of Information	Open		
Purpose of the Report	The purpose of this paper is to inform the Quality and Safety Committee of the findings of the recent Public Health Wales 'Investigation of severe infections amongst people who inject drugs', the implications for SBU HB in terms of governance and risk together with any financial implications.		
Key Issues	<ul style="list-style-type: none"> • An All Wales investigation was undertaken into an increased number of severe infections amongst people who inject drugs resulting in radical surgical intervention and /or ITU during an 18 month period between November 2017 to April 2019 • A final report described the investigation process and findings together with a series of recommendations which include interventions to: <ul style="list-style-type: none"> • raise awareness and minimise harm related to injecting • to reduce the risk of minor infections becoming severe • to engage people with injecting drug use with preventative and treatment services • increasing outreach services • to manage complex cases using a multidisciplinary approach • The HB jointly provides substance misuse services with other partners but needs a clear strategy of providing improved patient access and experience at an early point in the care system whilst acknowledging that some patients are not open to or are accessing current services within substance misuse services. • Named HB Leads need to be identified to take this work forward with regular reporting back to Quality and Safety for a. 		

Specific Action Required (please choose one only)	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE that the 'Investigation of severe infections amongst people who inject drugs' report and recommendations will enable services to focus more on prevention of future serious infections with safer and more timely services for those who do develop injecting related infections • NOTE that the HB needs to seek clarity needed from the reports authors around some of its recommendations for example "extraordinary case review panels" and there should be an named HB Lead to take this work forward • NOTE the proposed joint co-produced service planning as a priority and that this will be considered at a forthcoming Senior Leadership Team meeting • NOTE and SUPPORT that the joint co-produced planning of future services with the APB and other partners is urgently required to gain multiagency consensus, clarity around pathways and the service users views • AGREE that substance misuse services for PWID should continue to provide feedback and updates to Q&S committee for assurance of quality and safety and it should be the responsibility of a named HB Lead to undertake this. 			

INVESTIGATION OF SEVERE INFECTIONS AMONGST PEOPLE WHO INJECT DRUGS

1. INTRODUCTION

This report briefly describes an All Wales investigation by PHW Health Protection Division of severe infections amongst Persons Who Inject Drugs (PWID) and draws to the committee's attention to recommendations made by that investigation and the subsequent improvement in the quality and safety of future services for PWID.

2. BACKGROUND

On February 1st 2018, the PHW Health Protection Team were notified by microbiology and surgical consultants in Morriston Hospital of several cases of severe infection in people who inject drugs resulting in radical surgical intervention to limbs.

Of seven cases undergoing surgery, four patients had required hip disarticulation since 3rd November 2017. Further cases requiring intensive care admission were reported. All cases were resident in the ABMU area. Microbiology specimens demonstrated a variety of organisms but no common species identified.

After some initial investigation the PHW Health Protection Division undertook an All Wales investigation, 35 confirmed cases were identified across Wales between 1st November 2017 and 1st April 2019 with 2 cases deceased.

Analysis of the confirmed cases found that 54% were male (with a greater representation than expected of females) and the median age was 38 years.

54% of cases identified were resident in ABMU HB (it is thought that because the initial notifications came from ABMU HB and the priority given to the incident locally that all cases have been identified and reported within ABMU HB whereas there may be some under reporting in other HB areas. Further data analysis is required to confirm this hypothesis.

The clinical presenting symptoms included muscle or groin infections for example groin abscess, infective endocarditis, cavitating pneumonia. No common infective species was recorded with a range of gram-positive and gram-negative organisms detected.

Surgical intervention was recorded in 19 cases including amputations and valve replacements (4 hip disarticulation procedures were undertaken).

In depth interviews were undertaken in order to establish any commonalities. The median age of first injecting was 25 years with the length of injecting ranging from 2 to 28 years. There was no clear pattern in relation to age or length of injecting career and 40% were unstably housed or homeless.

All reported groin injecting with the majority injecting heroin, heroin and crack or amphetamine and one case of amphetamine only.

The frequency of injecting was reported from 4 to 10 times a day. Re-use of injecting equipment was reported in 4/5 respondents resident in Swansea and 3/5 respondents in Neath Port Talbot. The majority (67%) reported co-morbid mental health issues.

There is some limited evidence of use of poor quality drugs with residues that increase the likelihood of injecting site infections.

3. GOVERNANCE AND RISK ISSUES

The report made a series of recommendations which have been distributed to PHW, Health Boards (including Directors of Public Health, Medical Directors, surgical teams, emergency departments and intensive care), substance misuse services, Microbiologists and Infectious Disease Specialists (PHW and other), PHE and Welsh Government Substance Misuse and Health Protection Divisions.

The report was presented to the Swansea Bay Area Planning Board in June 2019 who noted the recommendations to:

- promote interventions to raise awareness and minimise harm related to injecting
- to reduce the risk of minor infections becoming severe
- to engage people who inject drugs with preventative and treatment services
- to increase outreach services
- to manage complex cases using a multidisciplinary approach

In a timely response to the local increase of severe infections in PWID, SB APB had already specifically commissioned more outreach services to promote safer injecting practices and engage people particularly those who might not otherwise engage in services earlier in preventative and treatment services. They had also streamlined processes so clients can access treatment services in a more timely way.

The report does make recommendations about developing outreach services, encouraging needle exchange and peer support networks. These recommendations have already been addressed by APB actions and this report can provide assurance for those recommendations

PHW will also support a targeted national awareness/ education programme aimed at increasing awareness around the dangers and symptoms of groin injecting.

Issues that carry some risk to the Health Board

The PHW report recommends “APBs and HBs support the prevention of serious infections amongst PWID through the provision of community or district nurse care in substance misuse services alongside implementation of ACT self-care wound packs programme across Wales. Currently there is substantial disparity in the provision of community based wound care for injecting related infections. All services aimed at homeless and vulnerable populations and substance misuse services should have regular provision for the early identification, and treatment of injecting site infections to prevent escalation to hospitalisation and surgical intervention.”

Currently access to district nursing and specific wound care nurses for this client group is limited and not specifically provided for this patient group by SBU HB.

Engagement by this patient group to those type of services and other services such as GP's and A&E is also limited due to their chaotic lives and sometimes challenging behaviour which can create negative responses to them at those points of contact.

This has the potential for their health needs to continue to escalate and result in a more significant crisis as described in this serious infection report.

The Health Board and the APB need to be clear about how they could improve those patients' access and experience at an early point in the care system (whilst also acknowledging that some of this patient group are not open to or accessing services within substance misuse services).

The report also recommends "community based clinical teams lead on the establishment of extraordinary case review panels for individuals with complex needs. The extraordinary multidisciplinary reviews can be initiated by any relevant agency working with the individual. The reviews are aimed at those with problematic substance use and acute or chronic severe infections requiring pain management, surgical /clinical intervention and involve local authority including social services and housing and specialist substance misuse representation for care pathway development and ongoing care."

However the report isn't clear what is meant by "extraordinary case review panel", what their purpose would be and how a case would get to that panel. The HB needs to seek clarity from the report's authors in order to carry out this recommendation.

The Swansea Bay Area Planning Board is currently developing a new commissioning strategy for substance misuse Tier 2 and Tier 3 services which will be out for Consultation in autumn 2019. This commissioning strategy should address issues and recommendations identified in the investigation but will require HB commitment to improving services and new quicker service models of delivery.

Within HMP Swansea PWID attend regularly for dressing reviews and have timely access to doctors and the Tissue Viability Nurse Specialist. The Opiate treatment pathway allows quick access to opiate medications negating the need to inject drugs whilst in prison. When prisoners are released community services provide continuity of a maintained opiate plan supporting harm reduction and providing appropriate treatment for addiction reducing the need for IV use.

4. FINANCIAL IMPLICATIONS

There may be a financial implication to the Health Board/APB if we want to enhance further HB employed outreach street workers for improved engagement with the homeless population which the report recommends. The APB have already increased outreach services as a pilot study and significant amount of the patients are now engaging in services this way. Whilst some of these patients are making informed choices to disengage with services for varied reasons and they don't necessarily need to be active with substance misuse services, they are to be able to access primary care type services on wound care etc if needed.

From a nursing perspective pathway development from early identification through to treatment and ongoing support would be welcomed. Any housebound PWID would be eligible for DN services which would increase workloads and costs. If a PWID required IV antibiotics as well as wound care then it has been suggested that the acute clinical teams support these patients which would then incur increased costs. If a new

initiative such as ring fenced appointments in wound clinics were agreed then this too would have new cost implications for the HB.

From the CNS for Homelessness and Vulnerable Adults perspective she is currently establishing options and costings for a joint wound clinic with the Tissue Viability Nurse Specialist as part of the homelessness service which will include input from the Vascular Nurse Specialist as required. This will be a new and necessary service which will require funding and will prevent future serious infections.

5. RECOMMENDATION

Members are asked to:

- **NOTE** that the 'Investigation of severe infections amongst people who inject drugs' report and recommendations will enable services to focus more on prevention of future serious infections with safer and more timely services for those who do develop injecting related infections
- **NOTE** that the HB needs to seek clarity needed from the reports authors around some of its recommendations for example "extraordinary case review panels" and there should be an named HB Lead to take this work forward
- **NOTE** the proposed joint co-produced service planning as a priority and that this will be considered at a forthcoming Senior Leadership Team meeting
- **NOTE** and **SUPPORT** that the joint co-produced planning of future services with the APB and other partners is urgently required to gain multiagency consensus, clarity around pathways and the service users views
- **AGREE** that substance misuse services for PWID should continue to provide feedback and updates to Q&S committee for assurance of quality and safety and it should be the responsibility of a named HB Lead to undertake this.

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
<p>If future services for PWID are redesigned and co-produced according to the recommendations set out in the report:</p> <ul style="list-style-type: none"> • PWID will be empowered to make more informed choices about the safety of groin injecting • will receive services better designed to their needs which will increase engagement with treatment and preventative services • which in turn will reduce unsafe practices and subsequent severe infections. 		
Financial Implications		
The recommendations made within the 'Investigation of severe infections amongst people who inject drugs' does have some financial implications to note		
Legal Implications (including equality and diversity assessment)		
The recommendations made within the 'Investigation of severe infections amongst people who inject drugs' does not have any legal implications to note		
Staffing Implications		
Future staffing implications need to be considered as part of the wider Substance Misuse Review that the APB has commissioned in relation to the future model of service		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
Embedding HB applicable recommendations made within the 'Investigation of severe infections amongst people who inject drugs' as standard practice will have a positive impact on prevention and the quality of care provided by the HB for this vulnerable population. The recommendations will also meet the goals of integration and long term working with stakeholder involvement in the way future services are delivered and developed together with collaboration of all of the APB partners.		
Report History	N/A	

Appendices	Appendix 1