



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>24 August 2021</b>		<b>Agenda Item</b>	<b>3.1</b>
<b>Report Title</b>	100-day plan - Quality Priority - Healthcare Acquired Infections			
<b>Report Author</b>	Nigel Downes, Head of Quality & Safety			
<b>Report Sponsor</b>	Christine Williams, Interim Executive Director Nursing & Patient Experience			
<b>Presented by</b>	Delyth Davies, Head of Nursing – Infection Prevention & Control Nigel Downes, Head of Quality & Safety			
<b>Freedom of Information</b>	Open			
<b>Purpose of the Report</b>	To update the Quality & Safety Committee on the 100-day plan - Quality Priority - Healthcare Associated Infections			
<b>Key Issues</b>	The 100 Day plan, at Appendix A, provides an update on the position of the first 100-day plan and the second 100-day plan (which concludes on 18 October 2021).			
<b>Appendices</b>	<b>Appendix A</b> - Goals, Methods & Outcomes (Extract from HB's Annual Plan 2021/22) <b>Appendix B</b> - HCAI – Quality Priority Draft Governance Arrangements <b>Appendix C</b> – 100-day Plan – Annual Priority – Reduction of Healthcare Acquired Infections			
<b>Specific Action Required</b> <i>(please choose one only)</i> <b>Recommendations</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

## **1. INTRODUCTION**

In March 2021, the Quality & Safety Committee were provided with a report on the rationale for the selection of the Health Board's five quality priorities that have been taken forward and included within the Annual Plan 2021/2.

Following discussions at the July Quality & Safety Committee, the Committee requested the 100-day plan for Healthcare Acquired Infections. Therefore, this report provides the Quality & Safety Committee with an update on the 100-day plan (including the second 100-day plan) up to 18 October 2021, for the Health Board's Quality Priority - Healthcare Associated Infections. The 100-day plan is to be found at Appendix A.

## **2. BACKGROUND**

As previously reported to the Committee, in readiness for deciding on the quality priorities, to be included within the Annual Plan 2021/2, a scoping exercise was undertaken across the Health Board in relation to potential areas to be included. In order to ensure deliverance of this year's quality priorities, it was decided to focus on 5 priority areas/programmes, with other existing programmes continuing to be developed and monitored through normal processes, including Health and Care Standards.

Following this scoping exercise, a Qualities Priorities Workshop was held with stakeholders from across all Service Groups and Corporate teams. The workshop was held via Teams and 27 people were in attendance, including:

- Executive Directors
- Members of the Service Group Triumvirate
- Service Group Quality/Governance managers
- Corporate Teams
- The Chair of the Quality and Safety Committee

Following extensive discussion and debate at the workshop, the quality priorities for 2021/2 were decided as:

- Suicide Prevention
- Falls Prevention
- Sepsis
- Infection Prevention Control – Healthcare Acquired Infections
- End of Life Care for Adults

The Quality Priorities have also been reviewed, discussed and were refined at the Senior Leadership Team meetings on 3 March 2021 and 17 March 2021. The Quality Priorities now form part of the Health Board's Annual Plan and an extract of the Plan, noting the Goals, Methods and Outcomes, for reduction of HCAs is included at Appendix A.

The Governance arrangements, for review of the Quality Priority (including 100-day plan), is included at Appendix B.

The 100-day plan for the Reduction of Healthcare Acquired Infections is included at Appendix C.

In compiling the 100-day plan for Healthcare Acquired Infections, the Assistant Director Infection Prevention & Control (left the organisation in August 2021) and Head of Nursing Infection Prevention & Control have drafted, populated and updated the 100-day plans.

### **3. NEXT STEPS**

The project will be managed in management stages, set out in the 100 day plan(s).

A HCAI Quality Priority Key Group will also meet every 2-4 weeks, to review action against the 100-day plan, and is made up of:


Paul Stuart Davies, Interim Assistant Director of Nursing  
Delyth Davies, Head of Nursing – Infection Prevention & Control  
Nigel Downes, Head of Quality & Safety  
Joanne Walters, Matron, Quality Improvement - Infection Prevention & Control  
Angharad Higgins, Deputy Head of Quality & Safety

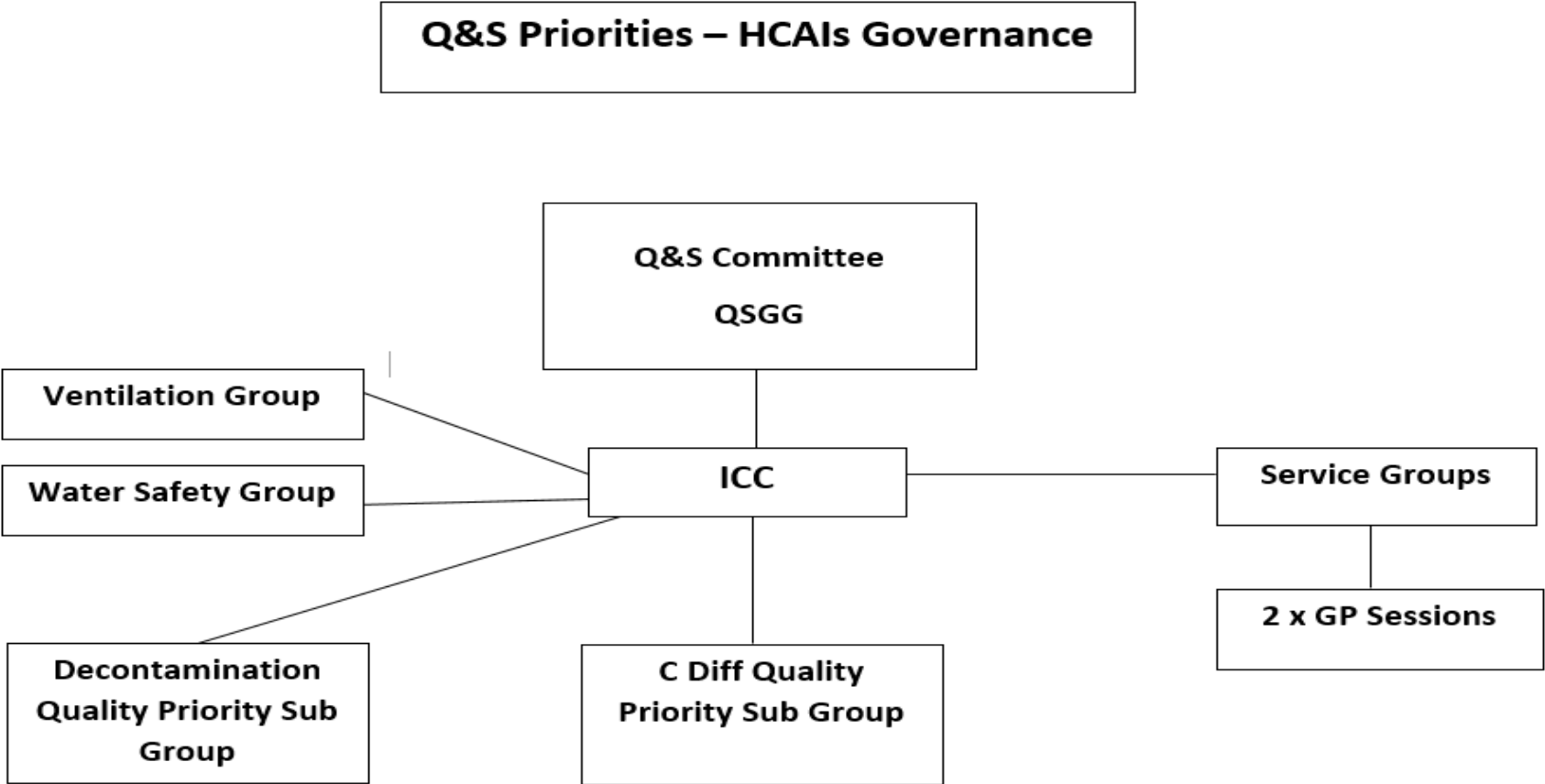
Monthly updates on progress, risk and quality measures will be reported into the Infection Control Committee and Quality Safety Governance Group. The Quality & Safety Committee will be provided with quarterly updates on the priority and 100-day plan(s).

### **4. RECOMMENDATIONS**

Members of the committee are asked to note the contents of this report and appendices.

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> (please choose)	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	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"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
<b>Health and Care Standards</b>		
(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 checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
This paper provides a summary of the rationale for the annual quality priorities 2021/2.		
<b>Financial Implications</b>		
None		
<b>Legal Implications (including equality and diversity assessment)</b>		
None		
<b>Staffing Implications</b>		
None		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
None		
<b>Report History</b>	N/A	
<b>Appendices</b>	<b>Appendix A</b> - Goals, Methods & Outcomes (Extract from HB's Annual Plan 2021/22) <b>Appendix B</b> - HCAI – Quality Priority Draft Governance Arrangements <b>Appendix C</b> – 100-day Plan – Annual Priority – Reduction of Healthcare Acquired Infections	

GOALS	METHOD	OUTCOME
<p>INFECTION PREVENTION AND CONTROL (IPC)</p> <p>Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staff Aureus</p> 	<ul style="list-style-type: none"> <li>Review and implement reduction targets for primary and secondary care in line with best performing organisations, requires benchmarking: primary care across Wales; secondary care across the UK.</li> <li>Focussed work in Primary Care and community to achieve reduction in top 3 Tier 1 target infections to understand mechanism of transmission and ensure learning is undertaken and shared across the HB.</li> <li>Undertake HB rollout of Medicine Management – Electronic Prescribing and Administration system.</li> <li>Reduce antibiotic usage and improve quality of prescribing in terms of compliance to guidelines, review of antibiotics, documentation and timely transfer of IV to Oral prescribed medications.</li> <li>Achieve compliance with staff training (MDT) - all available staff</li> <li>Environment – ensure we achieve a fit for purpose environment that is cleaned and decontaminated to national standards.</li> </ul>	<p>Reductions in Healthcare Acquired Infections across the HB:</p> <ul style="list-style-type: none"> <li>C Difficile - 15% Reduction</li> <li>Klebsiella - 10% Reduction</li> <li>Staff Aureus - 10% Reduction</li> </ul> <p>Reduce amount of antimicrobial and antibiotic prescribing:</p> <ul style="list-style-type: none"> <li>Achieve 100% compliance (96% - Feb 2021) with secondary care antibiotic key prescribing indicators.</li> <li>Reduce overall antibiotic usage and broad-spectrum antibiotics in line with WG and AWMSG Targets.</li> </ul> <p>Increase compliance with staff training:</p> <ul style="list-style-type: none"> <li>Hand Hygiene – 100% (of available staff) (82.71% - Feb 2021)</li> <li>Infection Prevention and Control – 100% (of available staff) (81.25% - Feb 2021)</li> </ul> <p>Ensure a clean and decontaminated environment is met by:</p> <ul style="list-style-type: none"> <li>Compliance with scoring matrix &gt;95%</li> <li>Maintain accreditation of Decontamination Units across the HB</li> </ul>



**100 Day Plan**
**Appendix C**
**Annual Priority - Reduction of Healthcare Acquired Infections**

ID	Goal	Method	Action	rt date	e date	Status	Dependent on	Enablers
SBU-TPO-QAS-1015	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Establish governance and reporting structures to deliver improvements against the priority across the Health Board.	Define governance structures to support the quality priority	18/06/21	21/06/21	Completed		
SBU-TPO-QAS-1016	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Development of a ward to board dashboard to enable oversight of key indicators and early intervention.	Development of a ward to board dashboard to enable oversight of key indicators and enable early intervention	18/06/21	31/03/22	On-track	SBU-TPO-QAS-1018	Informatics input
SBU-TPO-QAS-1017	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Development of a ward to board dashboard to enable oversight of key indicators and early intervention.	Engage with Informatics to develop dashboard system for HCAI	18/06/21	31/07/21	Completed		Informatics input

**100 Day Plan**
**Appendix C**
**Annual Priority - Reduction of Healthcare Acquired Infections**

ID	Goal	Method	Action	rt date	e date	Status	Dependent on	Enablers
SBU-TPO-QAS-1018	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Development of a ward to board dashboard to enable oversight of key indicators and early intervention.	Currently in process of developing ward to board project delivery plan with clear timescales for delivery. Initial due date of 31/07/2021, updated due date 10/09/2021.	21/06/21	10/09/21	On-track		Informatics support.
SBU-TPO-QAS-1019	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Educational support to relevant professionals.	Achieve compliance with staff training.	18/06/21	01/09/21	Not started		Investment into ESR for self-service model.
SBU-TPO-QAS-1020	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	<ul style="list-style-type: none"> <li>Recruitment of 2 x GP Clinical Sessions to lead on antimicrobial prescribing within Primary Care &amp; Community Services.</li> <li>Recruitment of 1 x Enhanced Decontamination Manager (Band 6).</li> </ul>	Confirmation of resources for additional staff.	18/06/21	29/06/21	Completed		Finance – Approval 11/08/21.



**100 Day Plan**
**Appendix C**
**Annual Priority - Reduction of Healthcare Acquired Infections**

ID	Goal	Method	Action	rt date	e date	Status	Dependent on	Enablers
SBU-TPO-QAS-1021	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	<ul style="list-style-type: none"> <li>Recruitment of 2 x GP Clinical Sessions to lead on antimicrobial prescribing within Primary Care &amp; Community Services.</li> <li>Recruitment of 1 x Enhanced Decontamination Manager (Band 6).</li> </ul>	Development of band 6 job description			Completed		
SBU-TPO-QAS-1022	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	<ul style="list-style-type: none"> <li>Recruitment of 2 x GP Clinical Sessions to lead on antimicrobial prescribing within Primary Care &amp; Community Services.</li> <li>Recruitment of 1 x Enhanced Decontamination Manager (Band 6).</li> </ul>	Advertisement and recruitment to post	21/06/21	21/06/21	Off-track	SBU-TPO-QAS-1020	Issues with Finance. Therefore, delay to advertising of post. Personal Specification now with Job matching and Job evaluation panel.
SBU-TPO-QAS-1023	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	<ul style="list-style-type: none"> <li>Recruitment of 2 x GP Clinical Sessions to lead on antimicrobial prescribing within Primary Care &amp; Community Services.</li> <li>Recruitment of 1 x Enhanced Decontamination Manager (Band 6).</li> </ul>	Commencement of post-holder	22/06/21	01/09/21	On-track	SBU-TPO-QAS-1022	See above delay re: issues with Finance. Therefore, delay to advertising of post. Likely delay to commencement of post-holder and completion date may require amending.

**100 Day Plan****Appendix C****Annual Priority - Reduction of Healthcare Acquired Infections**

<b>ID</b>	<b>Goal</b>	<b>Method</b>	<b>Action</b>	<b>rt date</b>	<b>e date</b>	<b>Status</b>	<b>Dependent on</b>	<b>Enablers</b>
SBU-TPO-QAS-1024	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Recruitment of 2 x GP Clinical Sessions to lead on antimicrobial prescribing within Primary Care & Community Services.	Development of specification for sessional GP roles	21/06/21	31/07/21	Completed		Workforce
SBU-TPO-QAS-1025	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Recruitment of 2 x GP Clinical Sessions to lead on antimicrobial prescribing within Primary Care & Community Services.	Advertisement of GP Roles	22/06/21	10/09/21	On-track	SBU-TPO-QAS-1024	Funding initially delayed. Therefore, due date amended.
SBU-TPO-QAS-1026	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Recruitment of 2 x GP Clinical Sessions to lead on antimicrobial prescribing within Primary Care & Community Services.	Recruitment to sessions	23/06/21	05/11/21	On-track	SBU-TPO-QAS-1025	Workforce

**100 Day Plan**
**Appendix C**
**Annual Priority - Reduction of Healthcare Acquired Infections**

ID	Goal	Method	Action	rt date	e date	Status	Dependent on	Enablers
SBU-TPO-QAS-2017	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Prudent antimicrobial prescribing.	Update gentamicin guidelines and reduce the renal threshold for prescribing gentamicin to increase usage	11/07/21	01/08/21	Completed		
SBU-TPO-QAS-2018	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Prudent antimicrobial prescribing.	Begin discussions with ED on a proposal to remove "first dose" policy for single shot broad-spectrum antibiotics whilst bloods are awaited	11/07/21	20/09/21	On-track		
SBU-TPO-QAS-2019	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Prudent antimicrobial prescribing.	Introduce empirical oral options into sepsis guidelines to encourage earlier step-down from IV broad-spectrum antibiotics	11/07/21	20/09/21	On-track		
SBU-TPO-QAS-2020	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Undertake Health Board rollout of Medicine Management – Electronic Prescribing and Administration system.	Request project plan from HEPMA implementation team	11/07/21	02/08/21	Completed		

**100 Day Plan**
**Appendix C**
**Annual Priority - Reduction of Healthcare Acquired Infections**

ID	Goal	Method	Action	rt date	e date	Status	Dependent on	Enablers
SBU-TPO-QAS-2021	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Undertake Health Board rollout of Medicine Management – Electronic Prescribing and Administration system.	Revision of Digital Intelligence Project Resource Paper to include AMR data	11/07/21	02/08/21	Off-track	SBU-TPO-QAS-1018	
SBU-TPO-QAS-2022	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Undertake Health Board rollout of Medicine Management – Electronic Prescribing and Administration system.	Identify technical specifications for LIMS and HEPMA systems.	11/07/21	10/09/21	On-track	SBU-TPO-QAS-2021	
SBU-TPO-QAS-2023	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Undertake Health Board rollout of Medicine Management – Electronic Prescribing and Administration system.	Engage with Information Governance Teams (HB & DHCW) regarding data access requirements.	11/07/21	10/09/21	Completed	SBU-TPO-QAS-2021	
SBU-TPO-QAS-2024	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Undertake Health Board rollout of Medicine Management – Electronic Prescribing and Administration system.	Identify barriers and solutions to progressing ward to board project delivery plan, with clear timescales for delivery.	11/07/21	30/11/21	On-track	SBU-TPO-QAS-2023	

100 Day Plan  
Annual Priority - Reduction of Healthcare Acquired Infections

Appendix C

ID	Goal	Method	Action	rt date	e date	Status	Dependent on	Enablers
SBU-TPO-QAS-2025	Reduction of HCAI's Inc. C.Difficile, Klebsiella and Staph Aureus	Engagement with the Multi-Disciplinary Team.	Intranet article to raise awareness	10/08/21	10/09/21	On-track		