

## Infection Prevention and Control Quality Improvement Network (IPCQIN)

# IPCQIN Newsletter - July 2026

### ***Our Vision:***

*As an Improvement Network, we influence and support our staff, patients and carers to continuously improve person-centred infection prevention and control practices, ensuring a safe and effective care experience*



### **Welcome to the July 2026 IPCQIN Newsletter – Issue 16!**




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*The IPCQIN continues to meet every two months, with steady progress being made across all workstreams. Our most recent meeting took place on 11th June 2026, and teams remain focussed on delivering the actions within the IPCQIN Workplan to support ongoing improvement efforts.*

*Each newsletter continues to feature a **spotlight on a different workstream**, helping to share good practice and shine a light on the fantastic work happening across NHSGGC.*

### **In this issue**

- 
-  **Workstream & Sector Updates**
  -  **Spotlight: Bare Below the Elbows - Mental Health**

-  *Spotlight: Commode Cleaning - Clyde*
  -  *IPCQIN Workstream Contacts*
  -  *Next Steps*
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## Workstream Updates



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### *Patient Experience*

*Lynn, our IPC Nurse Consultant is continuing to review recent SAB cases to identify a suitable patient story to share, helping to bring the patient voice into improvement work.*

*Filming of new IPC Toolbox Talk videos with Medical Illustrations have been developed to improve access to education at the point of care.*

*Development of a staff questionnaire aligned to 'What Matters to You' to assess staff awareness and benefit of the patient information leaflet (PIL) QR code poster is nearing completion. The poster continues to be utilised by staff, with further print runs on order to reenergise the initiative.*

### **Want to get involved?**

Contact **Lynn Pritchard**: [Lynn.Pritchard@nhs.scot](mailto:Lynn.Pritchard@nhs.scot)

### **Standard Infection Control Precautions (SICPs).**

*The SICPs workstream continues to focus on supporting meaningful quality improvement. The 6 monthly report will be shared at the next IPCQIN meeting.*

*Work is progressing to finalise updates to the CAIRs audit tool, with completion anticipated by the end of July. Engagement has also taken place with Medical Illustrations colleagues to support the development of 2 staff training videos aimed at improving consistency in undertaking SICPs audits.*

### **Get involved:**

Contact **Lynn Pritchard**: [Lynn.Pritchard@nhs.scot](mailto:Lynn.Pritchard@nhs.scot)

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- *The CAUTI Group continues to progress work to standardise guidance and improve consistency across services. Development of a competency framework, catheter passport and SOP is ongoing.*
  - *A central SharePoint site for all CAUTI resources is being developed to improve access to resources and shared learning.*
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 **More Information:**

Contact **Kat Stewart** (Katherine.Stewart7@nhs.scot) or **Donna Mitchell** (Donna.Mitchell10@nhs.scot).

[CAUTI Toolbox Talk - NHSGGC](#)

 **Mental Health IPC Support Group**

*Work within Mental Health services continues to focus on uniform compliance and hand hygiene improvement.*

*A quality improvement project has been underway to improve "bare below elbows" compliance, supported by education and staff engagement.*

*A Uniform Policy poster is nearing finalisation and will be shared across all wards for board-wide use.*

 **Get involved:**

Contact **Grant Scott** at Grant.Scott@nhs.scot.

 **Short Dwell Cannulas**

*Our newly appointed Lead Nurse for Imaging, Oudwin Griffith, is leading on the important short-dwell cannulas work.*

*Work continues to strengthen oversight and standardisation of short-dwell PVCs in patients attending CT/MRI. Improvement activity has focused on enhancing documentation, reinforcing care standards and increasing audit coverage.*

*Targeted education and ward level engagement remain a key focus to address variation in practice and improve consistency across services.*

 **Get involved:**

Contact **Oudwin Griffith** [Oudwin.Griffith2@nhs.scot](mailto:Oudwin.Griffith2@nhs.scot)

### **Cleaning Near Patient Equipment**

*Focussed improvement work has been undertaken in relation to commode cleaning, following audit findings which identified inconsistent standards and highlighted this as a key IPC risk area.*

*A short-life working group for cleaning near patient equipment will be set up in the coming months to take this work forward, with further updates shared in the next Newsletter.*

 **Get involved:**

Contact **Lynn Pritchard** [Lynn.Pritchard@nhs.scot](mailto:Lynn.Pritchard@nhs.scot)

### **Hand Hygiene**

*Hand hygiene performance across GGC remains strong, with overall compliance remaining high. However, there are areas of poor practice that can affect this level of performance. Excessive or inappropriate use of gloves can increase the risk of not carrying out hand hygiene and this is a common observation in audits. In a comparison between pre and post pandemic, we are now using approximately 66,000 more boxes of gloves annually.*

*Ongoing education and communication will support reinforcement of standards.*

 Get involved:

Contact Stefan Morton [Stefan.Morton@nhs.scot](mailto:Stefan.Morton@nhs.scot)

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## Sector Updates

# SECTOR UPDATES

### Clyde Sector

- No PVC related SABs in April.
- Key areas of focus include strengthening PVC care and documentation compliance, supported through the development of visual prompts and educational resources to reinforce safe practice.
- Commode cleaning has been identified as a key IPC risk area, with only around half found clean at audit, prompting a structured improvement approach focused on visual resources, staff engagement and education.



# HPN Sector

- Recent SAB performance slightly above target but cases assessed as low risk.
- Ongoing improvement activity includes regular walk rounds, enhanced feedback to ward teams, and a QI project aimed at improving SIPS compliance and completion of associated action plans.
- Learning from walk rounds continues to identify common themes across services, particularly relating to equipment cleanliness, hand hygiene and uniform policy compliance.



# North Sector

- April SABs reported slightly above target.
- Outbreak Poster Hubs – Phase 1 complete, Phase 2 commencing June 2026.
- Continued emphasis on shared learning through SAB meetings, with areas experiencing challenge encouraged to present and learn from peer approaches.

**Outbreak Flowchart** NHS  
Coronavirus  
and Covid

**Definition of an outbreak –**

1. Two or more blood tests with the same infectious agent associated with the same clinical setting over a specified time period.
2. A higher than expected number of cases in a given clinical area over a specified time period.
3. A single case of a serious illness with major public health implications where action is necessary to investigate and prevent ongoing exposure to a hazardous agent.

**Respiratory Step Guide**

2 or more patients within the unit with the same infectious agent (e.g. influenza, C-19 or RSV) or new viral respiratory symptoms (e.g. pneumonia, sepsis, meningitis, neurological)?

YES	NO
<p><b>Potential Outbreak</b></p> <p>1. Contact IPC or call microbiology team immediately. Inform senior management if possible or email and telephone TBM. Throughout the unit close contacts of symptomatic patients, use correct PPE etc.</p> <p>2. Send urgent PCR for symptomatic patients and LAB PCR only if testing for RSV.</p> <p>4. Ask medical team to review other patients for symptoms and query testing. Continue to monitor all patients for new symptoms.</p>	<p>If only 1 patient, send urgent PCR for LAB PCR if testing for RSV. Inform senior management and contact IPC team.</p> <p>If the unit has had or more new positive viral infection cases within 6 days prior to removal from the ward contact IPC team or email microbiology.</p>

**Gastrointestinal Step Guide**

2 or more patients within a 24hr period in the unit with the same infectious agent or 2 or more episodes of acute diarrhoea/vomiting not caused by external factors (e.g. laxatives, overuse, new antibiotics/CPM use)?

YES	NO
<p><b>Potential Outbreak</b></p> <p>1. Contact IPC or call microbiology team immediately. Inform senior management if possible or email and telephone TBM. Throughout the unit close contacts of symptomatic patients, use correct PPE etc.</p> <p>2. Send urgent PCR for symptomatic patients and LAB PCR only if testing for RSV.</p> <p>4. Ask medical team to review other patients for symptoms and query testing. Continue to monitor all patients for new symptoms.</p>	<p>If only 1 patient, send urgent PCR for LAB PCR if testing for RSV. Inform senior management and contact IPC team.</p> <p>If the unit has had or more new positive gastroenteric cases within 6 days prior to removal from the ward contact IPC team or email microbiology.</p>

**Infection Prevention and Control Guidelines**

1. Follow the QH leads to Disease Specific Information and choose the relevant pathogen (e.g., COVID-19, Gastrointestinal, influenza etc.).
2. For an outbreak, complete the Outbreak Checklist (provided by IPC on the day of outbreak). This must be updated daily and outline all required actions.
3. Review every positive or suspected patient (e.g. those on beds) has a relevant Care Checklist in place.
4. For patients with loose stools, ensure a Bristol Stool Chart is in place.
5. Refer to the relevant site Memos for guidance on Transmission Based Precautions, including PPE use, isolation, linen handling and cleaning of equipment/roomwork.



**SCAN ME**

## Regional Sector

- 14 SABs in April–June, slightly above aim.
- There remains a clear link between SAB incidence and vascular access, particularly within renal services. Work is progressing to better understand this risk through triangulation of infection data with renal line activity.
- Improvement activity continues through strengthened education, enhanced audit processes, and closer working with Estates and Facilities to address environmental factors.



## South Sector

- Following a peak in SABs earlier in the year, rates reduced but have shown a slight increase again in April, prompting renewed focus on targeted education and prevention activity.
- Expansion of PVC audit activity across a greater number of wards is supporting improved oversight and embedding of practice.
- Enhanced ward-level engagement continues through increased leadership presence on SICPs walk rounds and delivery of focused teaching sessions, which have been well received and highlighted knowledge gaps in key IPC standards.



### **Spotlight: Bare Below the Elbows - Mental Health**

*Work has been ongoing to progress a targeted QI approach to strengthen compliance with hand hygiene and uniform and dress code policy standards across Mental Health services.*

*The recent audit demonstrates generally good compliance. However, key areas of non-compliance include jewellery, nails, footwear and poor adherence to "**bare below the elbows**".*

*Spot checks have been ongoing with immediate feedback provided and action plans requested from identified areas.*

*A QI approach has been agreed to focus specifically on addressing behavioural and cultural factors influencing "bare below the elbows" compliance and hand hygiene practice at ward level. Work is ongoing to identify a suitable ward for this pilot.*

*A "bare below the elbows" poster has been developed to raise awareness and compliance and will be shared in our next newsletter.*

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## **Spotlight 2: Commode Cleaning - Clyde**

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*Work has been carried out in Clyde sector to improve how commodes are cleaned after audits revealed there are challenges with commode cleaning across clinical areas with **less than half of commodes clean and ready for use**. This highlighted a clear risk area for infection prevention that needs to be addressed.*

*In response, improvement work has focused on understanding the issues in practice. Staff feedback highlighted challenges including lack of clarity around cleaning commodes, uncertainty about roles and responsibilities and difficulty in cleaning certain types of commodes due to complexity.*

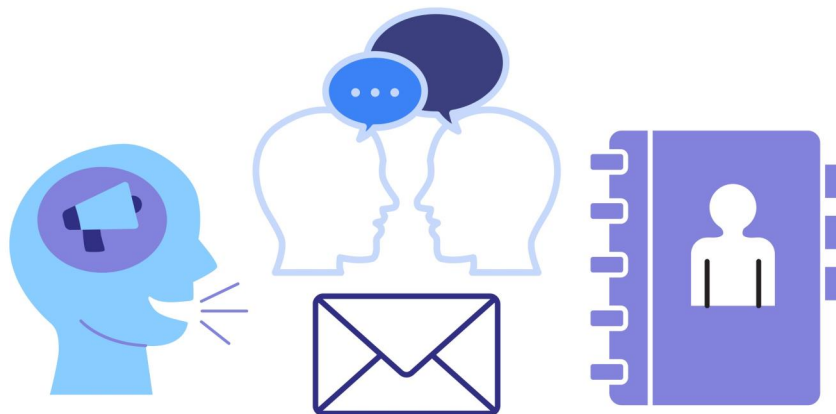
*Based on this feedback, visual posters have been developed to make expectations clearer and support staff in practice. Early feedback has been positive, however staff have made some suggestions to make the poster more effective. The poster is being refreshed to make it more visual and include a QR code linking to guidance or a short video demonstrating disassembly and cleaning.*

*This work will continue to be tested, with plans to expand Board wide to support consistent and effective cleaning at the point of care. Posters will be shared via this newsletter once finalised.*

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## IPCQIN Workstream Contacts:



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*We're always keen to hear your ideas and involve interested staff in our improvement work.*

*For any queries/suggestions, or if you would like to become a member of the IPCQIN please contact Kara Black, Business Manager -- IPC, at [Kara.Black@nhs.scot](mailto:Kara.Black@nhs.scot)*

*If you'd like to join any of the workstream groups mentioned in this newsletter, please contact those listed above or the IPCQIN sector leads below:*

 **North** - Erin Lees

 **South** - Sara Quinn

 **Clyde** - Jamie Clark

 **Regional** - Lynsay Creighton

 **W&C** - Mandy Meechan

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## **IPCQIN Next Steps for 2026**

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*We are always on the lookout for positive work or stories relating to Infection Prevention Control -- don't hesitate to get in touch.*

*Thank you for your continued commitment to infection prevention and control.*

### **Ongoing focus on targeted Quality Improvement**

*We continue to prioritise targeted Quality Improvement activity, using data, audit findings and staff feedback to focus effort where it can make the greatest difference.*

### **Expansion of IPC Education and Communication Resources**

*IPC education and communication resources continue to expand, with the development of Toolbox Talk videos, patient education materials and refreshed guidance to support staff at the point of care. These resources aim to improve consistency, confidence and accessibility of IPC information across all services.*

### **Continued Delivery of the IPCQIN Workplan**

*Delivery of the IPCQIN Workplan remains on track, with actions progressing across workstreams aligned to agreed priorities. This work continues to support collaboration, shared learning and improvement across sectors and services.*

## **Upcoming Newsletter**

*The **17th edition** of the IPCQIN Newsletter will be published in September. This edition will shine a spotlight on a selection of workstreams and key developments.*

## **Next Meeting**

*Our next IPCQIN meeting will take place on **20th August 2026**.*

## **Spotlight Features**

*We're highlighting different workstreams at each meeting. If you'd like your team's work showcased, please get in touch — we'd love to feature you!*

## **Share Your Good News**

*We're always keen to hear about positive work or uplifting stories related to Infection Prevention & Control. Please don't hesitate to reach out if you have something to share.*

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