

Healthcare without preventable infections

September 2022 | Issue 4

Welcome to the 4th issue of the Infection Prevention and Control Quality Improvement Network (IPCQIN) Newsletter

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.

The Infection Prevention and Control Quality Improvement Network Steering Group and the Operational Group have continued to meet to support and oversee the development of the Network's key actions.

Key Updates:

- Morag Gardner is the new Deputy Nurse Director and Chair for the IPCQIN Steering Group.
- The new SICPS Audit Tool will go live on the CAIR dashboard week beginning 31st October 2022 and the Infection control teams will visit all clinical areas to ensure that the clinical teams are aware of the key changes with the new tool. It is envisaged that all clinical areas complete a SICPs audit within the first month of the new tool going live. Table 1 below shows a screenshot view of SICPs on dashboard.

Mock screenshot view of new SICPs Audit Tool on the Development (test) Site of the CAIR Dashboard

ector (All)	🚽 Hospital	(All)	🚽 Ward	(All)	-		Return
			Overall Complian	се			
Hospital	Ward	RAG Status	Max Section Score	Total Achieved	% Compliance		Indicator:
Beatson	BCC B3	Amber	30	21	70.0%		Summary Overall Compliance Patient Placement Hand Hygiene Respiratory & Cough Hygiene Personal Protective Equipment (PPE) Management of Care Equipment Control of the Environment Safe Management of Linen Management of Blood & Body Fluid S Safe Disposal of Waste Occupational Exposure Management
Beatson	BCC AOAU	Green	30	30	100.0%		
Beatson	BCC B4	Red	30	20	66.7%		
Beatson	BCC 6 DU	Red	30	19	63.3%		
Beatson	BCC B1	Green	30	28	93.3%		
Beatson	BCC B2	Green	30	27	90.0%		
Beatson	BCC B7	Red	8	5	62.5%		
Beatson	BCC B7	Red	8	5	62.5%		
Beatson	BCC B5	Red	8	3	37.5%		
Beatson	BCC B5	Red	8		37.5%		
Birdston Nursing Home	BNH North	Red	27	13	48.1%		
Blythswood House	BH 1	Green	11	11	100.0%		
Dumbarton Joint Hospital	DJH Glenarn	Green	3	3	100.0%		RAG Statuses Explained
Dykebar Hospital	DB East	Green	30	29	96.7%		RAG Statuses Explained Green >= 90% Compliance Well done! Re-audit in 6 months
Dykebar Hospital	DB Bute	Green	30	29	96.7%		
Dykebar Hospital	DB North	Red	30	14	46.7%		
Dykebar Hospital	DB South	Green	30	30	100.0%		

 The Vascular Access Device (VAD) careplans have been reviewed and updated. The review also provided the opportunity to have more consistency in key messages on implementing Aseptic Non Touch Technique (ANTT), dwell times and removal of devices. Further information and a list of all the new documentation is provided in the table below, and are available to order from Medical Illustration:

PVC care plan and continuation sheet	Unchanged.
Arterial Cannula 330516_1_1 230516_1_1 Arterial line Care Plan (3).pdf	Developed to address gap in NHSGGC. Will not replace careplan on Critical Care 'carevue', but provides a careplan for other area such as ED or theatres.
Midline 335712_1_0 ^{POF} 335712_1_0 (2).pdf	Replaces the previous insertion and continuation careplans 318669v1.0 and 318670. Updated to be consistent in key messages and in diary style for max dwell time for device – keeping insertion, care/maintenance and removal in one document.
Short term CVC 269425-1_2_0	Updated the previous version to include short term PICCs, additional care criteria and removal. Should be used for documenting CVC insertion and care/maintenance for all short term non tunnelled CVC (including renal/dialysis) and short term PICCs. Continuation sheet 269425-2 v1.0 also updated to reflect changes.
Long term VAD 330171_2_0 330171_2_0 Central Venous Catheter (CVC	VAD diary for long term PICCs, tunnelled CVCs and implanted ports. Replaces version 276267_3_1. Easier to locate insertion information with care/maintenance in fewer documents.

Please contact Lynne Robertson, Acute Services Corporate Practice Development for any queries re the VAD Careplans via e-mail at: Lynne.Robertson4@ggc.scot.nhs.uk

- A recent quality improvement initiative to raise awareness of the high oral bioavailability of metronidazole and the benefits of prescribing oral rather than intravenous (IV) metronidazole where appropriate, resulted in a 45% reduction in IV metronidazole usage data and 320 less IV metronidazole administrations per month in the targeted surgical wards. This is important in terms of improved AS, patient safety, healthcare cost savings, workforce efficiency and sustainability. Please click on the following link for the poster <u>https://api.ltb.io/show/ABMPT</u> which was also published in JAC Antimicrobial Resistance: <u>https://academic.oup.com/jacamr/article/4/Supplement_2/dlac053.003/6596249?login=true</u>
- The Person Centred Care Workstream Group had held interviews with staff and patients to complete a "What Matters to Me" questionnaire, in June 2022, on whether the information provided, in relation to COVID-19, was relevant and understood, to help identify the best approach and any gaps for improvement. Positive feedback was received as patients felt that the verbal information from both medical and nursing staff was sufficient.

- The North Sector SAB Group are providing a SAB toolbox talk, with speakers presenting on IVOST and Hand Hygiene. The talk will be timed with the start of junior doctors and newly qualified nurses in early October 2022. For further information or to become a member of the North Sector SAB group, please contact John Carson, Chief Nurse for Acute Service and Chair of the North Sector SAB Group at John.Carson@ggc.scot.nhs.uk
- The South Sector SAB Group are testing the improvement bundle for line infections in 2 wards. For further information or to become a member of the group please contact Kevin McAuley, Associate Chief Nurse for Acute Services and Chair of the South Sector SAB Group at <u>Kevin.Mcauley@ggc.scot.nhs.uk</u>
- The Clyde Sector SAB Group's primary focus of has been on the number of unknown SABs, to identify the source and any lessons to be learnt. For further information or to become a member of the group, please contact Con Gillespie, Chief Nurse, Clyde Sector and chair of the group at <u>Con.Gillespie@ggc.scot.nhs.uk</u>
- SAB prevention and management is now a routine component of induction and/or ongoing training across the frontline nursing teams within the Regional Services. For further information or to become a member of the Regional Services SAB Group, please contact Dr Peter Thomson, Consultant Nephrologist, Renal Medicine and chair of the group at <u>Peter.Thomson@ggc.scot.nhs.uk</u>
- A new short-life working group "Building Quality Improvement into the Management and Use of PPE" within the GGC Allied Health Professional Teams (AHPs) is being established with an aim to examine AHPs understanding/ appreciation of current PPE use and its escalation with COVID-19 and patients. The Group will focus on:
 - Understanding people's awareness/beliefs of current PPE use.
 - Providing education as to the benefits and modifications in PPE when dealing with transmissible infections including use of AGP's.
 - Supporting the development tools to assess these and establishing improvement management plans.

If you are interested in getting involved and being part of this group, please contact **Lisa Morrison, Principal Physiotherapist Cystic Fibrosis** and the proposed chair of the group by e-mail at: <u>Lisa.Morrison@ggc.scot.nhs.uk</u>

For any queries/suggestions or if you would like to become a member of any of the work-stream groups mentioned above, please contact Natalia Hedo, Infection Prevention and Control Business Manager on <u>Natalia.Hedo@ggc.scot.nhs.uk</u>

