



## Welcome to the third 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 on a bi-monthly basis to support and oversee the development of the Network business and its recommendations.

### IPCQIN Workstream Groups' Update:

#### 1. Person Centred Care - Infection Prevention and Control

**Lead:** Pamela Joannidis, Infection Prevention and Control Associate Nurse Director and Ann McLinton, PCHC Programme Manager, Clinical Governance Support Unit.

**Focus:** Effectively engage with patients, carers and the public in the planning and delivery of our services and be able to demonstrate that we are listening and learning from our service users.

#### Update on Progress:

- Work is ongoing with Patient Experience and Public Involvement (PEPI) and the Person Centred Care Group to recruit representatives for the workstream. Advert for members of the public with lived experience to join the Person Centred Care Reference Group was circulated, awaiting response. The PEPI and PCC Teams are leading on the recruitment process. A Patient Focus Group is also being looked at as an alternative approach.
- IPC Patient Centred Care Reference Group has been established.

## 2. Reducing Infections Associated with the Use of Invasive Access Devices

There are currently four SAB Groups in the North Sector, South Sector, Clyde Sector and a newly established SAB Group in Regional Services. The work of the SAB Groups informs this workstream and ensures that there is a seamless approach across all sectors with minimal variation.

**Focus:** Increasing awareness of SAB prevention across NHSGGC among all professional groups with reviews and actions to address any barriers to good SAB prevention practices.

### Update on Progress:

#### North Sector SAB Group

**Lead: John Carson, Chief Nurse, North Sector, Acute Services**

- SAB toolbox talk integrated into the wards and good liaison with ward staff.
- Working with Medical illustration to get good and poor visual examples of inserted PVCs and dressings to aid clinical teams.
- The Vascular Access Service is supporting targeted education in areas in the GRI that have a high incidence of SABs.
- 2019-2020 PICC related SABs in North Sector being reviewed by IPCT for care bundle compliance.

#### South Sector SAB Group

**Lead: Morag Gardner, Chief Nurse, South Sector, Acute Services**

- Good clinical leadership and wide MDT membership.
- Framework for knowledge, skills and then competency for all HCSWs involved in the use of invasive lines – draft now being consulted on, pre going to Learn Pro team to build the modules.
- Working clinical definition of what constitutes a line infection agreed locally.
- Human Factors and observation of practice work scoped.
- Good progress to reduce line infections in the pilot ward (5D QEUH) – now spreading to 5C and 9A QEUH



## Clyde Sector SAB Group

**Lead: Con Gillespie, Acting Chief Nurse, Clyde Sector, Acute Services**

- The Clyde SAB Group has been established; structures are in place, good progress is being made and Terms of Reference have been signed off.
- Good buy-in from Clinical Teams, senior nursing staff and medical staff.

## Regional Services SAB Group

**Lead: Dr Peter Thomson, Consultant Nephrologist, Renal Medicine**

- Group structure now in place with chair identified and draft terms of reference and driver diagram shared.

## 3. Standard Infection Control Precautions (SICPs) Workstream

**Lead:** Pamela Joannidis, Infection Prevention and Control Associate Nurse Director

**Aim:** By October 2022, all acute areas will demonstrate > 90% compliance with all standard infection control precautions.

### Update on Progress:

- Incorporating the new SICPS Audit Tool into the development section of the Care Assurance and Improvement Resource (CAIR) Dashboard and testing it.
- IPC SICPs strategy has been agreed and in the process of being shared.
- The SOP IPCAT Strategy is currently being reviewed.
- Work continues looking at ways to display SICPs scores using a true quality structure that focuses on improvement. IPCQIN Steering Group and BICC members have been asked to consider how data from audit is to be reported and displayed.



## Key results to date:

- QI have plans to look at the number of SAB infections in 2021 across the Board, using the information from the IPC Data Team, to match with the deprivation scores.
- There is a QI fundamentals Learn-Pro around awareness raising which can be shared and promoted within the IPCT through the induction portal and is for all staff.
- The Communication Strategy for the IPCQIN is now completed.
- An overarching Project plan has been established. This will be continuously updated throughout the life of the Project.
- 23 IPCNs have completed the Scottish Improvement Foundation Skills Programme (SIFS) to support quality improvement.

**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 [Natalia.Hedo@ggc.scot.nhs.uk](mailto:Natalia.Hedo@ggc.scot.nhs.uk)**