



Welcome to the second 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. Role descriptor and advert drafted for patients with lived experience to join the Person Centred Care Reference Group.



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

There are currently two well-established SAB Groups in the North Sector and South Sector and a newly established SAB Group in the Clyde Sector. Work in underway to establish an additional SAB Group for the Regional Services Directorate. 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

- Good staff engagement with the educational opportunities available, further rolled out to include junior doctors.
- Wide range of clinical teams getting involved and taking initiative.
- PICC line training for all incoming FY1 trainees, training was mapped against wards who had experienced recent SABs.
- Driver diagram for improvement developed with support from QI team.

South Sector SAB Group

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

- Newly established group with good clinical leadership and wide MDT membership.
- Good progress to reduce line infections in the pilot ward, using visible data for improvement.
- Excellent education framework in place with real involvement and engagement from clinical staff across a range of professions and specialties; examples include; learn pro modules, observed practice and competency sign off/recording.

Clyde Sector SAB Group

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

- Group structure now in place and draft terms of reference shared.
- Good buy-in from clinical teams; senior nurses and medical staff.

3. Standard Infection Control Precautions (SICPs) Workstream

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

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

Update on Progress:

- Second Test of Change completed using the SICPs Audit Tool to provide assurance re SICPs compliance. Lead for roll-out of new SICPs Audit Tool identified.
- SICPs strategy developed to include incorporating the new SICPs tool onto the Care Assurance and Improvement Resource (CAIR) Dashboard by June 2022.
- Linking work of SICPs collaborative to Oversight Board/Case Notes Review recommendations.

Key results to date:

- Flash reports on progress of the work streams presented to the Operational and Steering Groups meetings.
- Collaborative working and support from QI leads and clinical services.
- The Communication Strategy is in place.
- An overarching Project plan for IPCQIN has been established.
- An EQIA for the IPCQIN has been submitted for approval.
- An update on progress is regularly presented at the Gold Command and the Quality Strategy Groups.

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

