

NHS GRAMPIAN
Infection Prevention & Control Strategic Committee (NHSG IPCSC)

Minutes from meeting held 23 July 2019
Conference Room, MacGillivray Centre, Aberdeen Maternity Hospital
10.00 – 12.00

Present:

GMcK – Grace McKerron, Infection Prevention & Control Manager (**Chair**)
LB – Leighanne Bruce, Acting Technical Lead Infection Prevention & Control Nurse
SS – Shona Sinkins, Lead Nurse, Division B, Mental Health & Learning Disabilities
VB – Vhairi Bateman, Consultant Infectious Diseases
LM – Leonora Montgomery, Public Forum Representative
JA – Jane Adam, Public Forum Representative
FR – Fiona Robertson, Chief Nurse
GP – Gavin Payne, Deputy Director, Facilities & Estates
AW – Andrew Wood, Health and Safety Specialist / Risk Management
LO – Linda Oldroyd, Chief Nurse
DL – Deborah Lockhart, Consultant Microbiologist / Infection Control Doctor
VB – Vhairi Bateman, Antimicrobial Management Team Lead
JWa – Julie Warrender, Nursing Services Manager, Aberdeen City CHP
CL – Carol Low, Quality Improvement & Assurance Advisor (deputising for Fiona Mltchelhill)
JL – Juliette Laing, Head of Decontamination and Linen Services / Decontamination Lead
LH – Linda Harper, Associate Director of Nursing (Practice Nursing)

AS - Anneke Street, PA to Infection Prevention & Control Manager (Minute taker)

JK – Jennifer Kane, Bank Secretary (Trainee Minute taker)

Item	Subject	Action to be taken and Key Points raised in discussion	Action
1	Introduction and Apologies	<p>Apologies were received from :</p> <p>Caroline Hiscox (CH) Neil Hendry (NH) Suzanne Brittain (SB) Fiona McDonald (FMc) Alison Smart (ASm) Fiona Mitchelhill (FM) Diana Webster (DW) Malcolm Metcalfe (MJM)</p>	
2	Minutes of last meeting 28 May 2019	<p>The minutes from 28 May 2019 were ratified by the Committee with the following amendments to wording.</p> <ul style="list-style-type: none"> • Attendees: LB - Acting Technical Lead Infection Prevention & Control Nurse • Item 2: Minutes of last Meeting 26 March 2019 • Item 3: Action Tracker wording under 4.1 HEI Inspection Report of Greater Glasgow & Clyde Queen Elizabeth Hospital • Item 3: Meeting 22 January 2019 under 5.1 Sector Report – Acute –Water Systems in Renal Units <i>Staphylococcus aureus</i> bacteraemia (SAB) reported in Ward 308 – PVC Bundle incomplete • Item 4.2: Flushing Regimes in Renal Dialysis Points • Item 5.1: Sector Reports – Acute – Medium – Expressed Breast Milk 	AS

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3	Action Tracker cont.	<p><u>Meeting 28 May 2019</u></p> <p>4.1 HEI Inspection Report of Greater Glasgow & Clyde Queen Elizabeth Hospital GMcK / LB will compose an overarching driver diagram to give oversight and provide assurance to the Board in addition to the current action plan. This is a detailed piece of work.</p> <p>5.1 Sector Reports – Acute Sector – Royal Aberdeen Children’s Hospital (RACH) not submitting Sector Report Data Original Action closed as contact made but data still not being supplied. AS to open new action on tracker.</p> <p>5.1 Sector Report – Facilities – Water Safety / Ventilation Reporting Various differing replies were received by the other Infection Control Managers (ICMs) across Scotland. GP & GMcK met and it was decided that the Water Safety Group (WSG) will provide a Sector Report of ongoing actions; however water safety incidents are still to be reported in individual area’s Sector Reports. No Ventilation report available as yet. Close original action and open a new one specifically surrounding Ventilation reporting issues</p> <p><u>Meeting 26 March 2019</u></p> <p>4.1 HEI Inspection Report of Greater Glasgow & Clyde Queen Elizabeth Hospital - Are all completed audits being uploaded to DATIX? LH feedback that she wasn’t aware that Moray Community Health & Social Care partnership (CHSCP) uploaded at present but would double check. LH to update at next meeting. JWa confirmed that once she had spoken to City Health & Social Care Partnership (HSCP) and gained assurance this would commence immediately. JWa will email the relevant parties and copy in GMcK.</p> <p>5.1 Sector Reports – Mental Health – Bottled Water Coolers Works still underway. Some coolers have been removed but some are still in situ whilst costings continue.</p> <p>5.1 Sector Reports - HAI Education Group – Training for Domestic Support Services This is ongoing. At present face to face training is overcoming the issue with terminology. NHS Education for Scotland (NES) engagement is required to assist with elearning.</p> <p><u>Meeting 22 January 2019</u></p> <p>Shower Tray – Turner Hospital (from meeting 27 March 2018) Work continues. Keep action open as a shared learning exercise will be performed by GP once the works are completed. Open a new Action surrounding the further shower refurbishment at Turner Hospital.</p> <p>5.1 Sector Report – Acute – Water Systems in Renal Units Cathy Young - Unit Operational Manager (UOM) is leading on this from a divisional perspective.</p> <p>Capped Pipes in Peterhead Renal Dialysis Unit The capped pipes have been removed. Close action.</p>	<p>GMcK / LB</p> <p>AS</p> <p>AS</p> <p>LH</p> <p>JWa</p> <p>AS</p>

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3	Action Tracker cont.	<p>Staphylococcus aureus bacteraemia (SAB) reported in Ward 308 – PVC Bundle incomplete A Level 2 review has been completed. To complete the shared learning and feedback loop it was decided that the key learning points were to be fed back to the Committee as part of a shared learning process.</p> <p>LO suggested that outcomes from this could be discussed at the next shared learning event held in the Medical Lecture Theatre. CL offered to assist with this if required. FR to present the Level 2 Review at the September IPCSC meeting. GMcK to invite</p> <p><u>Meeting 27 November 2018</u></p> <p>5.1 Sector Report – Facilities - Water Safety in Non NHSG Premises This is ongoing as the National Survey will be conducted over a number of months and no further information at this time.</p> <p><u>Meeting 27 March 2018</u></p> <p>5.1 Sector Report – Moray CH&SCP Work on the first shower tray at Turner Hospital, Keith is complete. Work has now started on the second unit.</p> <p><u>Meeting 23 January 2018</u></p> <p>5.1 Sector Reports – Facilities – Forres Health Centre Water Safety Issue Permanent chemical dosing plant now being installed (due by 31 August 2019); this will be followed by a testing plan and should bring the system within acceptable parameters. VB advised that risk control measures are still in place and management have been advised that these should continue until the plant is working appropriately. Incident Management Team (IMT) meeting needs to be reconvened with Infection Prevention & Control (IPC) chairing for actions to be closed off. A review also needs to be completed and outcomes, along with lessons learned, need to be reported back to the Committee.</p> <p>JA queried the action regarding the resignation of Infection Control Doctors (ICDs) with no suitable cover and asked whether this was now completed. GMcK replied that there was now a full complement of ICDs with a new doctor joining NHSG 16 September 2019.</p>	FR
4	Matters Arising Item 4.1	<p>HEI Inspection Report of Greater Glasgow & Clyde (GGC) Queen Elizabeth Hospital The first meeting of the Group to discuss the Action Plan was held yesterday afternoon and good progress has been made. Further work to be undertaken.</p> <p>Requirement 1 – Governance Structures Areas at risk surrounding water safety and ventilation are being reported via the NHS Infection Prevention & Control Strategic Committee (NHSG IPCSC).</p> <p>Requirement 2 – Negative pressure Isolation Rooms Awareness is required for staff on how to access a negative pressure room; awaiting final comments on a draft procedure document and a paragraph is required on how to access these rooms, if required, during the night.</p>	

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4	Matters Arising cont. Item 4.3	HAI Risk Matrix The Risk Management of HAI: A Methodology for NHS Scotland document was submitted however this was not discussed.	
5	Standing Items Item 5.1	Sector Reports <u>Acute</u> FR feedback that there were no updates from Royal Aberdeen Children's Hospital (RACH) or Dr Gary's (DG). 1 New Areas of Concern raised by Divisions 1 a) Section of Level 8 - ECC has been used to store Enhanced Personal Protective Equipment (PPE) As per National guidelines a minimal amount of equipment is required to be stored and must be accessible within a few minutes to allow staff to don prior to the patient's arrival. Storing in this location is considered a fire risk and a suitable alternative area needs to be found. This is to be taken to the Fire Physical & Technical Group 2 July 2019 for clear identification of risk holding. No update received so far. 1 b) Medium – Hand Hygiene Audits 2 recent Hand Hygiene audits have been below expected levels. Problem Assessment Group (PAG) meetings have been held and actions put in place and a process regarding who should be completing the audits. 1 c) High - Eye Outpatients Department Issues have been found with the ventilation within Eye Outpatients resulting in black dust being dumped. Incident Management Team (IMT) meetings have been held and chaired by DW with involvement from Health Protection Scotland (HPS). The rooms affected will not be used until it can be confirmed that the refurbishment meets the specifications required. VB commented that the design is not suitable and has contacted HPS for guidance. The IMT will continue to take this forward. e1 e) Low – No Cleaning Regime in place for Wheelchairs Midwifery manager contacted Portering manager to discuss if a cleaning schedule can be rolled out to Aberdeen Paternity Hospital (AMH). Recently a porter has been collecting the "stray" chairs from around the site and returning them to their correct locations. FR also reported that the ongoing issue of increased heat within Aberdeen Royal Infirmary (ARI) was mentioned at the Safety Brief. VB replied that an email has been circulated regarding the lifting of the "closed windows" decision in specific departments. This will depend on Risk Assessments (RA) being completed and the outcome of these. LB feedback that a decision had been made to supply air conditioning units in some areas. GMcK enquired as to whether the risks within the report had been re-assessed as requested at the last meeting. FR confirmed that they had.	

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5	Standing Items cont.	<p><u>Aberdeenshire H&SCP</u> NH was not in attendance</p> <p>1 New Areas of Concern raised by Divisions</p> <p>1 b) High – Banff Health Centre Water Safety Issue IMT has taken place and testing of water is ongoing. Bottled water has been supplied for drinking and staff are using hand gels post hand wash. Water cooler has been removed – no maintenance contract in place or flushing completed.</p> <p>2 Progress Against Areas of Concern Previously Reported</p> <p>2 e) High – Level of input into HMP Young Offenders Institution (YOI) This is due to staff shortages and a lack of permanent staff which had an impact on the level of education that had been delivered and completed by staff. All staff have now engaged in the completion of the mandatory elearning modules required and the IPCT are in regular contact. Inspectors were also concerned to find that that no Hand Hygiene audits had been undertaken since June 2018. This needs to be discussed further. The report details 112 recommendations to be made 2 of which are surrounding IPC.</p> <p><u>Aberdeen City CHP</u> No narrative received from City CHSCP.</p> <p>1 New Areas of Concern raised by Divisions</p> <p>1 a) Medium – Engagement from City HSCP. There is still a lack of engagement from Community in relation to attending HAI meetings. JWa will meet with Heather MacRae to discuss this.</p> <p>VB suggested that the Health Village IMT should be included on the Sector Report. JWa will amend and send a revised report to AS; this will also include reporting on flushing of water outlets.</p> <p>2 Progress Against Areas of Concern Previously Reported</p> <p>2 e) Medium – Staff unable to find time to complete mandatory training The level of risk here is to reduce due to staff completing mandatory training.</p> <p>AW stated that awareness is required regarding issues that could arise, within the Mobility and Rehabilitation Service (MARS). Tayside Health Board have been issued with 2 improvement notices regarding Control of Substances Hazardous to Health (COSHH) guidelines; this was surrounding dust and ventilation within Orthotics and Prosthetics departments. It was mentioned that Gary Mortimer is taking forward a proposal for the use of 3D scanners rather than the use of plaster casts. GMcK suggested that MARS become involved in the discussions.</p>	<p>JWa</p> <p>JWa</p>

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5	Standing Items cont.	<p><u>Facilities</u></p> <p>1 New Areas of Concern raised by Divisions</p> <p>1 a) High – Banff Health Centre – Water Safety Concerns have been raised due to high Total Viable Colonies (TVCs) at certain water outlets. Further testing took place in late June showing issue not resolved. Staff have being supplied with bottled water and are using hand gel following handwashing.</p> <p>2 Progress Against Areas of Concern Previously Reported</p> <p>2 b) Kincardine Hospital Renal Unit – Water Safety There were concerns raised due to low temperatures recorded at end of line hot water outlets. 2 sinks have been removed the system was disinfected and samples taken; these confirmed limits were acceptable. IPCT have asked for further sampling to be completed after which discussion is required as to what further steps need to be taken.</p> <p>2 c) Inverurie Hospital Renal Unit – Water Safety The pipework at the affected sinks has been altered / replaced and disinfected. Resampling has shown negative for Pseudomonas aeruginosa (Pa).</p> <p>A discussion then took place regarding the issues staff have with closing and locking the clinical waste bins.</p> <p><u>Moray (CHSCP)</u></p> <p>LH has discussed the Sector Report with ASm and it will be more robust for the next meeting. Areas of concern include</p> <ul style="list-style-type: none"> • broken bath - Stephen • condition of showers – Seafield Hospital • carpet in a clinical area – Seafield Hospital • Domestic cover – staff only work in the mornings this has been highlighted the Nathan Matthews (Assistant Domestic Services & Portering Manager – DGH). <p>GP suggested that the issue of domestic cover be raised with Gillian Poskitt.</p> <p><u>Mental Health</u></p> <p>2 Progress Against Areas of Concern Previously Reported</p> <p>SS feedback that the issues noted within the report are mainly surround the built environment and that challenges are ongoing.</p> <p>3 Areas of Achievement / Good Practice</p> <p>100% compliance on clinical waste storage has been maintained</p>	LH

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5	<p>Standing Items cont.</p> <p style="text-align: right;">Item 5.2</p> <p style="text-align: right;">Item 5.3</p>	<p><u>HAI Education Group</u></p> <p>2 Progress Against Areas of Concern Previously Reported</p> <p>2 c) Medium – Education required around the lack of compliance with swabbing for Carbapenemase-producing Enterobacteriaceae (CPE) following a positive Clinical Risk Assessment (CRA). This is being reported at the Acute HAI Group and a performance report is also being submitted via the Acute Sector Clinical care Quality and Safety Group (ASCCQSG).</p> <p><u>Infection Prevention & Control Team (IPCT)</u></p> <p>LB feedback that she had updated the Sector Report to align it to HAI methodology. This is currently being trialled solely on the IPCT Sector Report at present; clarity is required before moving forward with new layout for all reports.</p> <p>1 New Areas of Concern</p> <p>1a) Medium – Yellow Zone area Level 4 in state of disrepair. This area was found to be derelict and uninhabitable. Evidence of staff using area and t access Simulation Skills area. Full action plan agreed and taken forward by multi-disciplinary teams. GMcK and Malcolm Ewan visited. This has now been completed.</p> <p>HAI Work Programme 2019/20 No report was submitted at this meeting due to the volume of work still to be completed. When report is available AS will email out for comments. The report will be shared at the next meeting.</p> <p>HAI Executive Committee (HAIEC) Update The next meeting will be held 31 July 2019.</p>	<p style="text-align: center;">AS</p>
6	<p>HAI Report to Clinical Governance Committee / Board</p> <p style="text-align: right;">Item 6.1</p>	<p>HAI Report to the Board (HAI-RT) The Committee had some suggestions with regard to the narrative detailed on page 31 with regard to the Incident Management Team (IMT) and Problem Assessment Group (PAG) meetings. Some felt that the level of information given could be taken out of context when in the public domain. Transparency is key but narrative should be kept relevant and simple to understand. GMcK to amend this and add a HIIAT RAG status column. The report was not ratified by the Committee. It will be taken to the HAIEC with the above comments for discussion and agreement. AS will resend the amended report to the Committee for ratification.</p>	<p style="text-align: center;">GMcK</p> <p style="text-align: center;">AS</p>

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6	<p>HAI Report to Clinical Governance Committee / Board cont.</p> <p style="text-align: right;">Item 6.2</p>	<p>HAI Report to the HAI Executive Committee (HAIEC) Issues to be escalated:</p> <ul style="list-style-type: none"> • Water • Ventilation • Maintenance of showers within Community Hospitals • Continuing issues with new builds and refurbishment <p>Access for maintenance work to be completed – the built environment has to be prioritised</p>	
7	<p>AOCB cont.</p> <p style="text-align: right;">Item 7.1</p> <p style="text-align: right;">Item 7.2</p>	<p>HAI Common Themes This was not discussed.</p> <p>HAI Work programme 2018/19 (for ratification) The Committee ratified this report with no changes to be made.</p> <p>GMcK informed the Committee that the Terms of Reference (ToR) for the HAIEC have now been ratified and the name of this Committee will be changing to the NHS Grampian Infection Prevention & Control Strategic Committee (NHSG IPCSC)</p> <p>In addition Healthcare Improvement Scotland (HIS) have announced a visit to Community and Moray CHSCP hospitals – 8 in total. AS will share the information with the Committee.</p>	AS
9	<p>Date of Next Meeting</p>	<p>24 September 2019, 10.00 – 12.00 Conference Room, Dugald Baird Suite, Aberdeen Maternity Hospital</p>	