

Infection Prevention & Control Strategy

2021-2023



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Introduction

Our journey to deliver the best quality and safest care to the communities we serve

The prevention and control of healthcare associated infections (HCAI) remains a high priority both locally and nationally with a continued focus on reducing HCAI's and improving and sustaining the quality of care provided by NHS Trusts. This underpins the Care Quality Commission (CQC) Outcome 8 (Regulation 12): Cleanliness and Infection Control, this requires all providers to comply with the Health and Social Act 2008, Code of Practice for health and adult social care on the Prevention and Control of Infections and related guidance.

The Code of Practice, also known as the Hygiene Code, was initially launched to help NHS Trusts plan and implement actions around the prevention and control of HCAI's, setting out criteria with which Trusts must comply.

The CQC, independent regulator of health and adult social care services in England, monitors the Trusts compliance against the Code of Practice through formal visits and the implementation of enforcement actions where necessary.

This three year strategy will ensure the Trust has clearly defined objectives for infection prevention and control. This is based upon the Infection Prevention Society's mission of "informing, promoting and sustaining evidence based infection prevention policies and practices to create a health and care system where no persons health and wellbeing is harmed by preventable infection".

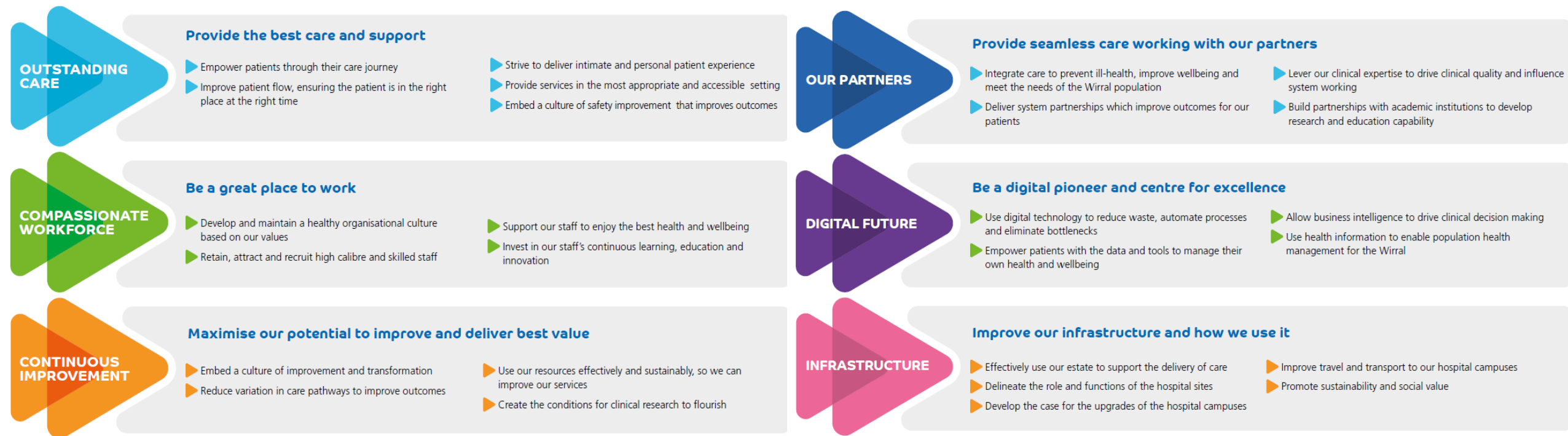
Annual work plans will set out the actions required to achieve our objectives.

The objectives focus on continuing to reduce HCAI, to embed infection prevention in everyday practice and sustain improvements in order to keep patients, staff and visitors safe.

In doing so the Trust will develop existing work and projects and initiate the development of leading edge work, aspiring to be national leaders for the reduction of HCAI's.

Our 2021-2026 Trust Objectives and Priorities

Our six strategic objectives and priorities demonstrate our intention to provide outstanding care across the Wirral through our hospital sites and units, as a lead provider within the Wirral system. We will be a Hospital Trust that patients, families and carers recommend and staff are proud to be part of.



Strategic Framework

Our Enabling Strategies

Our 2021-2026 Strategy will be delivered through seven enabling strategies as shown.

This IPC Strategy underpins our Patient Experience and Quality & Safety strategies. Our IPC Strategy outlines our intention to continue to reduce HCAI, embed infection prevention in everyday practice and sustain improvements in order to keep patients, staff and visitors safe. Achieving our IPC intentions will support us to deliver our vision; together we will deliver the best quality and safest care to the communities we serve.



Our IPC Journey

In 2018 the CQC reported that the Trust had not always controlled infection risks well and that the environment and equipment was visibly dirty in some areas.

In 2018-19 the Trust reported a large protracted Outbreak of *Clostridium difficile* infections across many wards.

In 2019 there was a re-focus on infection prevention. This was critically important during 2020 when the COVID 19 pandemic arrived.

By 2021 the CQC reported that the Trust had a clear vision and plan for continuously improving practices related to infection prevention and control and that there were effective processes and accountability to support standards of infection prevention and control including managing cleanliness and a suitable environment.

The CQC recognised that leaders had worked to decrease the number of healthcare associated infections and a result saw that reportable infections had reduced considerably over the last 2 years.

The CQC stated that the innovative infection prevention campaign 'Keep it Simple' was an example of outstanding practice that engaged staff in IPC awareness activities to communicate key messages to staff, patients and visitors.

The Trust must continue this hard work to maintain this continuous improvement.



Roles and Responsibilities

Infection prevention and control is everybody's responsibility; staff, patients and visitors.

A key challenge for the prevention and control of healthcare associated infections is to ensure that practices are in place to reduce the risk of acquiring such infections.

All staff are responsible for establishing, maintaining and supporting a coordinated approach to infection prevention in all areas of their work. This includes complying with Trust infection prevention policies and procedures and attending mandatory infection prevention training.

Staff should be proactive in identifying and addressing infection risks in their area of work; this may include the environment, resources and behaviours.

The Director of Infection Prevention and Control (DIPC) is responsible for the development and implementation of this strategy.

The Board of Directors will approve the strategy and monitor its progress. In doing so, it will ensure sufficient resources are available and key strategies are aligned to support the effective delivery of the IPC objectives.

Senior managers and clinicians have the responsibility to ensure adherence to IPC policies and procedures; this includes investigating all incidences of HCAIs and outbreaks to establish a root cause and learning.

Our IPC Strategic Objectives

2021-2023



Strategic Alignment

Our IPC Strategic Objectives Aligned to Our 2021-26 Trust Strategic Objectives

WUTH Strategic Objectives & Priorities 2021-2023						
IPC Strategic Objectives 2021-2023	Outstanding Care	Compassionate workforce	Continuous Improvement	Our Partners	Digital Future	Infrastructure
	<i>Provide the best care and support</i>	<i>Be a great place to work</i>	<i>Maximise our potential to improve and deliver best value</i>	<i>Provide seamless care working with our partners</i>	<i>Be a digital pioneer and centre for digital excellence</i>	<i>Improve our infrastructure and how we use it</i>
Training & Education	✓	✓	✓	✓		
Audit & Surveillance	✓	✓	✓	✓	✓	✓
Policies & Procedures	✓	✓	✓	✓	✓	✓
Care Environment	✓	✓	✓			✓
Communications & Information	✓	✓	✓	✓	✓	
Research & Innovation	✓	✓	✓	✓	✓	
Antimicrobial Stewardship	✓	✓	✓	✓		

Objective 1 - Training and Education

Regulation 12 & 7 (CQC) , Criterion 1,6 & 10 (The Hygiene Code)

WUTH places strong emphasis on the need for all health care staff to understand, be competent and discharge their roles and responsibilities in relation to IPC.

A training and education programme aimed at developing IPC expertise at all levels of staff will be developed.

We will also determine how we better educate our patients and visitors in relation to IPC.

We will:

- Ensure our staff are trained and competent in IPC practices

- Develop a competency framework to reflect the IPC requirements for different roles

- Develop our “link roles” as a way of constantly reinforcing best practice through education

- Improve the ‘paper less’ recording of training activities

- Introduce further e-learning packages relating to IPC topics

Objective 2 - Audit & Surveillance

Regulation 9, Criterion 4

IP surveillance data plays a central role in providing the information needed to underpin our IPC strategic objectives as well as informing priorities and focus for day to day operations. Infection reduction programmes can only be demonstrated as being effective if accurate rates of infections are known. Incorporation of an effective surveillance programme with regular feedback of results to clinical staff is recognised as crucial to the development of action plans to facilitate reductions in the incidence of HCAI.

Clinical audit provides an important tool to monitor the implementation of policies and operational performance. It can also provide insight into problems highlighted by surveillance. Infection prevention audits will be reviewed and strengthened to reflect national standards.

We will:

- Complete timely and accurate reporting of mandatory surveillance of all Alert organisms (Infections)
- Develop an overarching IPC annual audit programme reflecting current national guidance
- Support the development of an SSI strategy
- Work in collaboration with WUTH teams to ensure local care & management audits reflect national guidance

Objective 3 - Policies & Procedures

Regulation 12, Criterion 1 & 9

Policies are decision orientated and made to support the strategies while Procedures are helpful in the implementation of programmes because they are action orientated. Local infection prevention policies should reflect national guidance. Policies need to be thoroughly accepted by the people who are influenced by them so it is essential to have an education programme around the development and implementation of new policies.

We will:

- Develop a suite of IPC policies in line with the requirements set in the Health and Social care Act 2008
- Work with the divisions to strengthen existing procedures developed from national guidelines
- Work with the corporate teams to strengthen and support the review and implementation of the High Impact Interventions where appropriate

Objective 4 - Care Environment

Regulation 15, Criterion 2 & 7

There is a strong recognition between the cleanliness of the hospital environment and infection. There has been great emphasis placed on getting the basics right and delivering high quality care in clean and safe environments. The revised NHS Standards of Cleanliness has just been released (May2021) and the trust will be adopting these standards which will provide a structured approach to defining the environmental cleanliness requirements that will aid the successful delivery of this strategy. Whilst the responsibility for providing the cleaning and maintenance of the estate lies with the Estates and Facilities department; the ward /departmental manager has responsibility for ensuring that the high standards of hygiene and maintenance is achieved.

Support from the Estates Department is essential for ensuring that the fabric of the environment is suitable for meeting the needs of patients, carers' visitors and staff. It is essential that audits of ward cleanliness are reviewed with the IPC Team frequently and that the IPC team independently audit ward cleanliness on a regular basis.

Any plans for capital schemes and planned preventative maintenance must be brought to the attention of the IPC team at the first stage of planning to ensure that IPC is designed in and risks mitigated as much as possible.

We will:

Work in collaboration with Estates Teams regarding all schemes and projects to ensure the provision of a safe and appropriate environment.

Ensure that the built environment meets all HTM/HBN requirements

Work in collaboration with Facilities to introduce and educate staff regarding the new National standards of cleanliness (April 2021)

Objective 5 - Communications & Information

Regulation 17, Criterion 5

Effective information and engagement with staff, patients, service users and carers is essential to support the reduction of HCAs.

By ensuring that patients and staff are provided with clear, easy to understand information about infections and taking the time to talk them through it and answer questions is an important step towards helping staff and patients to make the best choices with regards to the management of infection prevention and control.

We will:

Support the development of a BI portal page for timely reporting of IPC data

Review and update staff, patient and visitor information leaflets/posters reflecting national guidelines

Produce monthly newsletters reflecting local patient safety issues relating to IPC

Objective 6 - Research & Innovation

Criterion 9

Research and innovation is essential to improve clinical practice. In order to deliver our vision and prevent avoidable infections we will promote and work in collaboration with our teams and partner organisations to become involved in programmes of research and quality improvements to underpin the delivery of high quality infection prevention practice; with the potential to foster improvements in experience, safety and effectiveness of patient care

We will:

Develop a quality improvement project for Infection Prevention to move us from “Good” to “Great”. This will form part of the patient safety work plan.

Review and evaluate IPC innovations for their suitability for WUTH.
Participate in relevant research.

Objective 7 - Antimicrobial Stewardship

Regulation 12, Criterion 3 & 9

Alarming, the prevalence of antimicrobial resistance (AMR) has risen over the last 40 years, and there have been few truly novel antimicrobials developed. As a result this has led to an increased pressure on existing antibiotics and thus greater challenges in treating patients. Inappropriate use of antimicrobials increases the risk to patients of colonisation and infection with resistant organisms and subsequent transmission to other patients. Criterion 9 of the Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance outlines the standards for compliance for registered organisations to provide evidence of prudent prescribing and antimicrobial stewardship. The updated Code of Practice places greater emphasis on antimicrobial resistance and stewardship. The Code states: “Procedures should be in place to ensure prudent prescribing and antimicrobial stewardship. There should be an ongoing programme of audit, revision and update. In healthcare this is usually monitored by the antimicrobial management team or local prescribing advisors”.

We will :

- Maintain an audit programme of adherence with antimicrobial prescribing policies, responding effectively when areas for improvement are identified.
- Consolidate the work of the ward-based antimicrobial stewardship service for inpatient clinical areas.
- Work towards national targets for quality indicators associated with antimicrobial prescribing and reductions in antimicrobial consumption

Next Steps

Implementation, Monitoring and Review



Development and sign off of the 3 year IPC Strategy aligned to the Trust Strategic objectives.

The IPC strategy translated into the 2021-2023 IPC Annual plan

Key performance indicators for infection prevention and control .i.e. infection rates, audit results and cleaning standards will be discussed at the monthly Divisional IPC and governance meetings with a focus on outcome, exceptions will be monitored via the Monthly IPCG meeting

Key to the success of this IPC strategy is the ability to adhere to the underlying principles of Infection prevention practice whilst meeting the changing demands of the population we serve

IPC Strategy objectives will be reviewed as part of annual operational and strategic planning to ensure they remain relevant to our evolving patient needs and maintain delivery momentum.