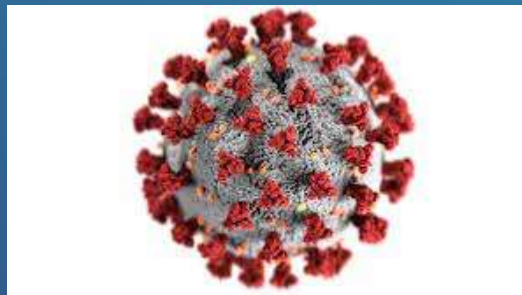


# Infection prevention and Control Annual Report 1 April 2020 - 31 March 2021



GIG  
CYMRU  
NHS  
WALES

Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales



Chapter	Contents	Page
	Introduction	2
	Key Achievements	3
Standard 1	Appropriate Organisational structures and management systems for Infection Prevention and Control must be in place	4
Standard 2	The physical environment should be maintained and cleaned to a standard that facilitates IPC and minimises the risk of infection.	5
Standard 5	All staff employed to provide care in all settings are fully engaged in the process of IP&C.	8
Standard 7	Policies on IPC must be in place and made readily accessible to all staff	9
Standard 8	So far as is reasonably practicable, staff are free of and is protected from exposure to infections that can be acquired or transmitted at work	10
Standard 9	All staff are suitably trained and educated in IPC associated with the provision of healthcare.	12
	<p>Priorities for 2021-2022</p> <p><i>Standards 3,4 and 6 within The Code are relevant to acute services only, so are not reported on for Public Health Wales</i></p>	13

## Introduction

In striving for excellence, Public Health Wales aims to have arrangements in place and to provide services that are safe and comply with best practice standards.

Public Health Wales is committed to ensuring that robust infection prevention and control systems and processes are operating within the organisation.

The organisation has a responsibility to comply Code of Practice for the Prevention and Control of Healthcare Associated Infections 2014 (the 'Code'). A requirement of the Code is for the Board to receive an annual report from the Infection Prevention and Control Group. The annual report seeks to provide the Board and relevant Board Committees with assurance that the organisation is meeting its statutory requirements in relation to the management of infection prevention and control.

This report covers the period from 1 April 2020 to 31st March 2021 including key achievements for this period and priorities for 2021/22

As with all departments within the NHS, the COVID 19 pandemic has impacted on the routine delivery of the work programme for infection prevention and control.

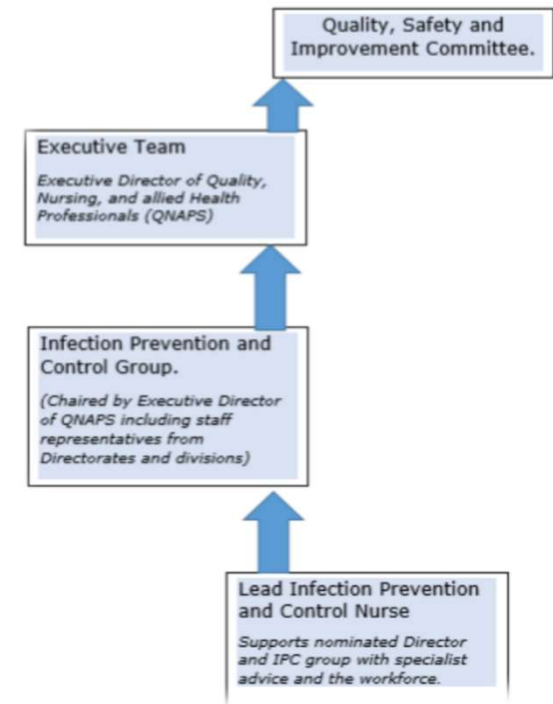
## Key achievements

- Achieving **62.7%** uptake of the flu vaccine by frontline staff within Public Health Wales
- Operationally leading the delivery of the COVID vaccine within Public Health Wales in December 2020 and the introduction of the internal COVID 19 vaccine delivery programme in January 2021.
- Reactivation of screening programmes ensuring they are safe for service users and staff with a variety of IPC audits within the static sites.
- Working in partnership with the health and safety team ensuring the workplace is COVID safe for staff to return to, this includes risk assessments and audits.
- The update of Exposure Injury Policy and procedure and the Outbreak incident management policy.

# Standard 1

## Appropriate Organisational structures and management systems for Infection Prevention and Control must be in place

- ❖ The Executive Director of Quality, Nursing and Allied Health Professionals provides the Executive lead role for organisational arrangements for Infection Prevention and Control, supported by the Assistant Director for Quality and Nursing and specialist knowledge provided by the Lead Nurse for IP&C.
- ❖ The IPC group meets quarterly and there are representatives from Screening, Microbiology, healthcare associated infection; antimicrobial resistance and prescribing Team (HARP), Health Protection, Health and Safety and facilities.
- ❖ Exception reports and assurance are made to the Business Executive Team and the Quality, Safety and Improvement Committee on compliance with the 'Code'. Policies and procedures relating to infection prevention and control have been reviewed and updated.
- ❖ The Lead Nurse infection prevention and control is notified of all incidents entered on Datix. Each incident is investigated by the appropriate team with assistance from IPC nurse.



GIG  
CYMRU  
NHS  
WALES

Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales

## Standard 2

The physical environment should be maintained and cleaned to a standard that facilitates IPC and minimises the risk of infection.



### Environmental cleanliness

- ❖ Environmental cleanliness audits undertaken on a quarterly basis by the screening teams, Audits were recommenced by screening as of September 2020 with a compliance of 95% for 2020/21.
- ❖ Where premises are used by screening programmes that are owned by Health Boards, validation audits were completed by the screening programs.

### Hand Hygiene Audits.

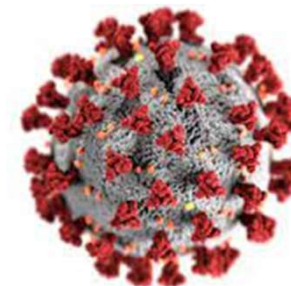
- ❖ Hand Hygiene audits are performed on a quarterly basis by screening teams. These were recommenced in September 2020 with an overall compliance of 97% for 2020/21.
- ❖ Ongoing work with Screening and infection control lead nurse around modernising the audit process by using an electronic tool

### Decontamination

- ❖ The Lead Nurse for Infection prevention and control represents Public Health Wales at the All Wales strategic decontamination Group.
- ❖ Due to the ongoing pandemic the group was suspended until late 2020.
- ❖ Public Health Wales has continued to receive the validation reports for decontamination of endoscopes within Health Boards in Wales.

## Standard 2 Continued: Health and safety

### COVID 19 response



The Lead Nurse for Infection Prevention and Control has been working collaboratively with the health and safety team ensuring:

- ❖ Workplace Covid-19 risk assessments undertaken across the Estate and findings and recommendations actioned through Health and Safety Group and also presented at the infection prevention and control group
- ❖ Increased monitoring across the Estate to ensure compliance with Covid-19 regulations
- ❖ Staff supported to work remotely and safely where their role allows. This has included issuing over 1000 pieces of equipment to support home working and completion of over 150 DSE assessments.
- ❖ Estates and Health and Safety Division continue to work closely with Infection Prevention and Control (IP&C) colleagues to manage the requests and advice on the provision of PPE across the organisation.
- ❖ Working with People and OD, resources to support vulnerable staff and wellbeing have been provided and are readily accessible



## Standard 2 continued: Health and Safety



- ❖ Revised Health and Safety Group arrangements to ensure issues are managed and discussed in a timely manner and to meet the needs of the response. Lead Nurse Infection prevention and control attends this meeting
- ❖ Principles for how we will work in the future published to ensure staff can remain safe as they return to our premises in a safe and controlled way.

### Water safety

- ❖ Public Health Wales remains 100% compliant for the buildings Public Health Wales holds responsibility for compliance for Water Risk Assessments.
- ❖ As a part of the post Covid recovery activity, Legionella sampling has been undertaken for all premises which have either been unoccupied or have had low levels of occupancy and for which Public Health Wales has responsibility for to ensure water safety. No issues were identified as part of this sampling process. Further to completion of sampling, a hot and cold water monitoring service was commissioned to support of our legionella management responsibilities.





## Standard 5

### All staff employed to provide care in all settings are fully engaged in the process of IP&C (Microbiology)



- ❖ During 2020-2021 the Microbiology annual audit schedule was put on hold to respond to the COVID pandemic. This has been restarted in 2021.
- ❖ The audit inspects aspects of infection, prevention and control, (including) daily cleaning schedule compliance, maintenance and cleaning of equipment, PPE compliance, and health and safety induction, understanding of needle stick inoculation procedure, eye wash location/expiry, autoclave inspection and registering understanding of key documents such as the health and safety policy and the spillage and disinfection policy.
- ❖ Audits completed so far in 2021 show a decrease in the overall number of non compliances.
- ✓ All CL3 laboratories completed the quarterly audit.
- ✓ CL3 Sealability testing completed by an external contractor with all laboratories passing.
- ✓ MSC replacement project to be completed by June (affects 6 MSC in 3 CL3 facilities). **80%** of CL3 cabinet systems will be less than 10 years old.
- ✓ All laboratories completed the internal 6 monthly laboratory audits and office audits.
- ✓ Contingency plans to address reliability and access to autoclaves. Two new autoclaves at UHL and UHW have been installed.
- ✓ Microbiology staff wearing FRSM IIR when not able to social distance

## Standard 7

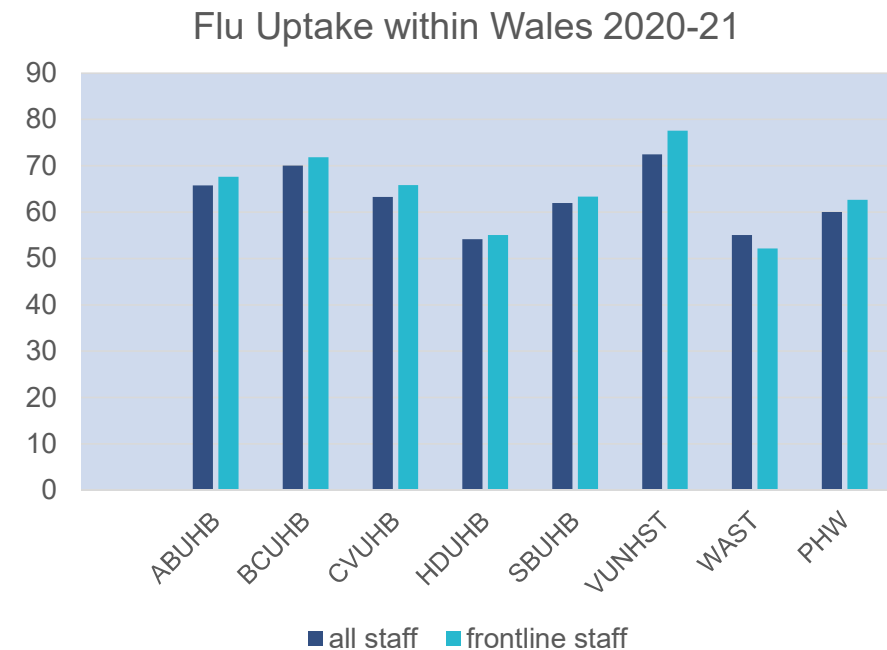
### Policies on IPC must be in place and made readily accessible to all staff

- ❖ Public Health Wales uses the electronic National Infection Prevention and Control Manual to ensure staff have access to consistent, current and standardised policies.
- ❖ Rolling programme in place to review policies and procedures that are out of date.
- ❖ Core policies available on Public Health Wales intranet site for staff to access.
- ❖ During 2020-21 the outbreak incident policy and exposure injury policy and procedure was reviewed.

## Standard 8

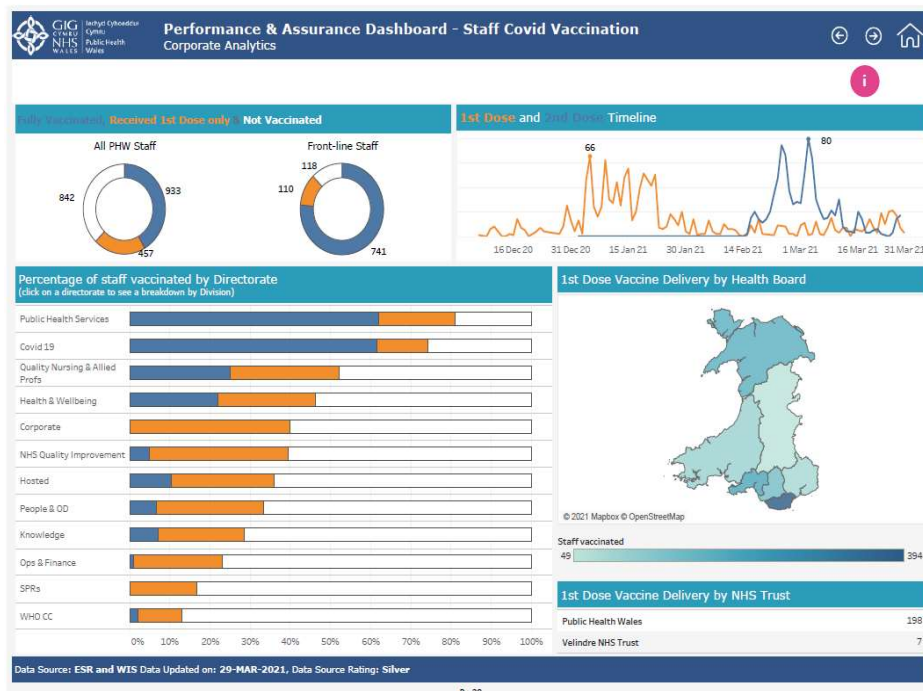
So far as is reasonably practicable, staff are free of and protected from exposure to infections that can be acquired or transmitted at work

- ❖ Influenza campaign was delivered via mixed model approach using an in-house vaccination team which consisted of peer vaccinators and bank immunisers
- ❖ Microbiology staff were able to access the vaccine through the occupational health department within the health board they are based apart from Cardiff and Vale University health Board a peer vaccinator was on site)
- ❖ Despite a challenging year Public Health Wales achieved **62.7%** uptake in frontline staff with an overall uptake of **60.7%**.



## Standard 8

**So far as is reasonably practicable, staff are free of and protected from exposure to infections that can be acquired or transmitted at work**



- ❖ In the United Kingdom two COVID 19 vaccines were authorised for use by the Medicines and Healthcare products Regulatory Agency (MHRA) Pfizer BioNtech in December 2020 and the Oxford Astra Zeneca vaccine in Jan 2021.
- ❖ Due to the logistics of the first vaccine which had to be stored at ultra low temperature  $-70^{\circ}\text{C}$ , it was decided this vaccine was unsuitable for Public Health Wales to deliver internally. Therefore, assistance from Health Boards were sought to vaccinate identified frontline staff until a preferred and more manageable vaccine became available.
- ❖ In January 2021 the internal COVID vaccine delivery programme commenced modelled on the flu campaign using Oxford Astra Zeneca vaccine at three main locations: Matrix Swansea, CQ2 Cardiff, Breast Test Wales, Llandudno. The Covid-19 vaccine were delivered to the priority groups as indicated by Joint committee for vaccination and immunisation (JCVI)
- ❖ All staff will be offered a vaccination and encouraged to attend a session when eligible and appropriate. The programme is predicated to be completed i.e. 2 doses for every staff member by September 2021.

## Standard 9

### All staff are suitably trained and educated in IPC associated with the provision of healthcare

- ❖ Infection prevention and control e-modules were available to all staff for both level 1 and level 2.
- ❖ The Welsh Government target for e learning compliance is 85%, with an internal target of 95%..
- ❖ Aseptic Non Touch Technique (ANTT) is mandatory which is required to be completed by clinical staff within Breast Test Wales who perform invasive procedures.
- ❖ There has been a slight increase in compliance.
- ❖ Due to the suspension of services and training throughout Wales there has been little progress on this, however it is one of the key priorities going forward in 2021-22.

	2019-2020	2020/2021
IPC Level 1	82.4%	86.9
IPC Level 2	79.26%	76.36
Aseptic Non touch technique (ANTT)	75%	78.72



## Next Steps

### Priorities for 2021-2022.



- ❖ Develop Key performance indicators for inclusion in the organisation's dashboard.
- ❖ Continue the co-ordination and delivery of the internal staff flu programme to protect staff and achieve an uptake target of 100% for front line staff.
- ❖ Continued coordination and oversight of the Internal COVID 19 vaccination programme achieving 100% uptake of the vaccine.
- ❖ Modernise the internal audit process by introducing an electronic tool for staff to use and access easily.
- ❖ Provide on-going advice to Public Health Wales staff especially front facing staff in relation to COVID 19 precautions
- ❖ Lead and coordinate in the infection prevention and control audit delivery programme.
- ❖ Facilitate implementation of Aseptic Non Touch technique (ANTT) practice and assessment within Breast Test Wales.