

## Infection Prevention & Control Annual Report 2021/2022 Summary Sheet

- There were no MRSA acquisitions and a reduction in MSSA acquisitions from the previous year (2020-2021).
- There were 12 cases of C. difficile which is low compared to the national and regional benchmarking.
- The Trust reported a total of 9 cases of E. coli bacteraemia which remains very low compared to the national rates.
- One patient isolated CPE from routine screening. This patient was isolated appropriately and there was no spread.
- The incidence of COVID nosocomial infections was carefully monitored and reporting as nationally mandated. The nosocomial rate for Royal Papworth Hospital was 5.5%. Single rooms and an enhanced ventilation system allowed the Trust to isolate patients promptly ensuring the spread of the virus was kept to a minimum.
- There were no flu cases in 2021/22 and no Norovirus outbreaks.
- The vaccination of healthcare workers was led by workforce and the clinical education team.
   The seasonal flu vaccine was rolled out with 73% of frontline staff vaccinated and 79% Trust wide.
- Fit Testing for FFP3 masks was on-going.
- Five new cases of M. abscessus were identified with three classed as moderate harm. The
  M. abscessus Oversight Committee established three working groups. The executive led
  Stakeholder Group met bimonthly and reported to the RPH Quality and Risk Committee.
- The Chief Nurse has lead responsibility as Director of Infection Prevention Control (DIPC) and reports to the Chief Executive and the Board of Directors. The Executive Directors engage with patient environment rounds. The Matrons play a key role in auditing, monitoring and reporting on compliance with IPC standards and practices.
- The Infection Prevention and Control Team provide education, support and advice to all Trust Staff with regard to infection prevention and control.
- The Infection Control and Pre and Perioperative Care (ICPPC) Committee, chaired by the DIPC, is the main forum for discussion concerning changes to policy or practice relating to infection prevention and control.



- There was a significant rise in surgical site wound infections in 2021-22. The SSI (Surgical Site Surveillance) Stakeholder Group met fortnightly to ensure clinical practise is improved and monitored. The SSI Response Group was established to take assurance that actions are being adhered to. Early indications for 2022-23 indicates that there is some improvement in SSI rates.
- A TB "hard stop" principle was introduced to ensure no new employee can commence work until satisfactory TB checks are complete.
- The Antimicrobial Stewardship (AMS) Team continued with daily Microbiology rounds in CCA and twice weekly ward rounds in the surgical division.
- OCS provides a cleaning service to Royal Papworth hospital and is on track to met the requirements recommended by the NHS Cleaning Standards 2021 by November 2022.
- Two external decontamination leads were appointed to support the Trust we endoscope decontamination.
- The Water Safety Group meets regularly to review any issues relating to water systems and any concerns are escalated through the ICPPC committee.
- The Trust achieved 100% compliance for IPC training on induction and annual updates are required by all staff for completion of their annual appraisals. Online M. abscessus training was introduced in May 2021.
- The IPC annual audit program was reviewed by the ICPPC committee and robust action plans were completed to provide an overall insight.
- Summary of Key areas for the coming year:
  - Continue work streams regarding the reported increase in surgical site infections.
  - Management and oversight of the *M. abscessus* incident and maintain safety mitigation throughout RPH.
  - Enhance assurance reports to the ICPPC committee for water safety, imbed ventilation safety and to work closely with the Estates team.
  - Work with the audit team and gain clinical engagement to maintain an IPC robust audit cycle with action plans that are followed up and completed.
  - o Complete the gap analysis of the Hygiene code and share at the ICPPC.