

AGENDA ITEM

3.2.3

QUALITY AND SAFETY COMMITTEE

HIGHLIGHT REPORT FROM THE INFECTION PREVENTION AND CONTROL COMMITTEE

DATE OF MEETING	22 nd November 2021
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
PREPARED BY	Julie Donovan, IPC Co-Ordinator
PRESENTED BY	Greg Dix, Executive Director of Nursing
EXECUTIVE SPONSOR APPROVED	Executive Director of Nursing

REPORT PURPOSE

For Noting

ACRONYMS	
ILG	Integrated Locality Group
IPC	Infection, Prevention & Control
POW	Princess of Wales
RCA	Root Cause Analysis
RTE	Rhondda Taf Ely
MC	Merthyr Cynon
ОСТ	Outbreak Control Team
PHW	Public Health Wales



1. PURPOSE

- 1.1 This report had been prepared to provide the Committee with details of the key issues considered by the Infection Prevention and Control (IPC) Committee at its meeting held on 9th September 2021.
- 1.2 Key highlights from the meeting are reported in section 2.
- 1.3 The Committee is requested to **NOTE** the report.

2. HIGHLIGHT REPORT

ALERT / ESCALATE	None to Report
ADVISE	The Tier 1 targets for reducing health care associated infections have not been revised since 2019/20 and have been extended further for 2021/22.
	The ILG and IPC team have set and agreed local targets based on the national reduction expectations for reducing healthcare associated infections. This will enable the ILGs to monitor their own position and progress.
	For the period April – July 2021, Cwm Taf Morgannwg UHB have reported fewer cases of MRSA bacteraemia and Klebsiella spp. bacteraemia compared to the same period last year.
	There has been an increase in C. difficile infections (CDI) across CTM. A recent PII meeting was held in POW to discuss the increase in CDI cases. The RCA process is embedded into the Bridgend ILG. This will be replicated in RTE and MC ILG's.
	There has been 1 C.Difficile outbreak linked to Ward 8 in POW. Meetings were held to discuss the incident and share the learning. The incident now closed.
	There are ongoing issues with Legionella in POW, estates are carrying out remedial works and corrective actions.
	There has been an increase of COVID19 cases across CTMUHB. Weekly OCT meetings are taking place to monitor the situation and raise any concerns. PHW attend these meetings.



The Committee received and noted for assurance the contents of the IPC/Decontamination Risk Register.
The Committee received and noted for assurance the following Exception reports:- • RTE ILG • MC ILG • Bridgend ILG • Facilities (Housekeeping, Waste & Food Safety) • Occupational Health
IPC Level 2 face to face training has recommenced to improve training compliance.
Committee members received and noted the following IPC Reports:-
 IPC Report April – August 2021 IPC / Decontamination Risk Register COVID19 Update – 31.08.21
 The following facilities documents will be presented at the Clinical Policies Group for approval:- Housekeeping and Cleanliness Policy Waste Policy Food Safety Policy
 The following Policy was approved at Committee:- Central Venous Access Devices (CVAD) Policy: Infection Prevention & Control Principles for their Insertion and Maintenance (IPC 26).
With support from shared services colleagues, an internal review is being undertaken to look at the current decontamination infrastructure, processes and systems within CTMUHB. Recommendations to follow.
Plans for RSV surge in paediatrics are in place.
An SBAR has been developed and will be submitted to Board on the roll out of the 3 vaccination programmes for CTM. It will highlight the risks associated with the absence of the vaccine programmes and the additional resources required.



	The Endoscopy Department/SSD in Royal Glamorgan Hospital have achieved an Amber/Green rating in the recent JAG Decontamination Audit undertaken by Shared Services.
APPENDICES	Choose an item. NONE