St Magnus Hospital and Rosemary Park Nursing Home

Annual Infection Control Report
2015

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**Introduction**

This is the second annual report in respect to the Code of Practice for St Magnus Hospital, Park House and Rosemary Park Nursing Home and it sets out the arrangements for prevention, control and reporting of infections.

St Magnus is a mental health hospital which was extended and reconfigured in 2015, in order to provide a new Low Secure Unit (LSU) and increased the Locked Rehabilitation Service (LRS) in order to reflect the needs of the current patient population. The hospital now consists of 3 wards, Sycamore (9 beds), Willow (9 beds) and Oak (16 beds), which makes up the LSU and two other wards, Cowdray (8 Beds) and Petworth (15 beds) which together with Park House (18 beds) form the LRS.

Rosemary Park Nursing Home comprises of 3 units, Main House (33 beds), East Wing (20 beds) and Courtyard (15 beds).

**Known outbreaks of infection**

Wards submit monthly infection control statistics as part of the infection control monitoring across site. These have shown that no infectious outbreaks were identified and that respiratory infections were the reported as the highest across site, which is expected in the current patient/resident population.

There has been some difficulty in collating the statistics for St Magnus due to the extensions and reconfigurations, and the changing of ward names in the first part of 2015. Petworth ward was closed for a period for refurbishing which has also influenced statistics that were submitted. Infection statistics for St Magnus, from January to December 2015, are in Appendix 1.

Rosemary Park Nursing Home Statistics are for the period January to December 2015. Appendix 2.

The annual report for 2016 will contain statistics for the full year and should be easier to collate as all wards will be open for the full calendar year. Oak ward is due to be refurbished.

**Audits undertaken and subsequent actions**

Audits were carried out by Michelle Strauss, Infection Control lead as follows: Christine Courtney-Wells assisted with St Magnus audits.

<table>
<thead>
<tr>
<th>St Magnus Hospital</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sycamore ward</td>
<td>9/7/2015</td>
</tr>
<tr>
<td>Willow ward</td>
<td>9/7/2015</td>
</tr>
<tr>
<td>Oak ward</td>
<td>9/7/2015</td>
</tr>
<tr>
<td>Cowdray</td>
<td>9/7/2015</td>
</tr>
<tr>
<td>Petworth</td>
<td>317/2015</td>
</tr>
<tr>
<td>Park House</td>
<td>1/7/2015</td>
</tr>
</tbody>
</table>
Rosemary Park Nursing Home

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main House</td>
<td>30/7/2015</td>
</tr>
<tr>
<td>East Wing</td>
<td>30/7/2015</td>
</tr>
<tr>
<td>Courtyard</td>
<td>30/7/2015</td>
</tr>
</tbody>
</table>

These audits were done in St Magnus after the two new wards were opened and after the refurbishment of Petworth. The focus was on general ward cleanliness, planned cleaning schedules, waste management, correct sharps disposal, laundry management and correct use of PPE’s.

Cowdray, Petworth and Main House have had refurbishments and Oak ward will be refurbished in 2016.

It was identified that Parker baths were turned off at the wall at times. This has been rectified and an automatic flush has been pre-programmed. Staff are aware that the handheld shower still needs to be run weekly and has been added to relevant documentation to reflect this is happening.

Air matresses need to be sent for terminal cleansing, staff are aware that this needs to be done prior to another patient utilising it.

The Environmental officer visited the site and as a result two hand wash basins have been installed in the new kitchens.

Some wards do not have incineration waste stands in use, as they do not currently have patient’s with known blood borne viruses or patient’s with dressings. However they are aware when they will be required.

Wards had a clear pre-planned cleaning regime of the kitchen, beds, clinic room and equipment.

Staff showed an increase awareness of the Biohazard Spill kit and it has been used appropriately.

An announced CQC inspection took place on the 4th – 6th August 2015 and the overall rating was ‘Good.’ and they mentioned general standards of cleanliness.

The following quotes have been taken from the written report.
‘We saw staff following good infection control practice including hand washing and managing soiled linen. Equipment was clean and in good working order. We saw evidence of maintenance checks in all equipment.’

‘All units were clean, with good furnishings and were well maintained. The maintenance department went to the units daily and we saw staff actioned requests promptly. The units had dedicated housekeeping staff. Cleaning records were complete and up to date in all units. We also saw evidence of requests for a “deep clean” where it was needed. Environmental risk assessments were undertaken annually and we saw evidence of work being done as a result.’
Action taken following an outbreak of infection
No outbreaks were reported.

Risk assessments undertaken for prevention and control of infection
Individual risk assessments are carried out for patients if any infections are identified. The laundry department has a specific risk assessment in place.

Training received by staff
All new staff are expected to attend induction training which is provided by the education department as a teaching session and if requested this can be done on a 1:1 basis on the ward.

As of April 2015 staff new to care are required to complete The Care Certificate, where Standard 15 covers Infection Control. Annual updates for staff are in line with national minimum training standards with lesson plans available from education department.

This year monthly infection control training statistics have been captured for the different wards. This statistics are in Appendix 3 that in general the level of compliance increased over the year. We aim to maintain these levels in 2016.

The infection control lead attended an Infection Control training day with West Sussex Learning and Development as well as the Infection Prevention Society’s annual conference.

The CQC reported the following after their announced inspection in August 2015 with regards to training:

‘We attended a training session with a group of new employees undergoing their induction. The 12-week induction programme was detailed, thorough and comprehensive. New employees said they found the induction programme particularly helpful in preparing them to provide high-quality care and the calibre of training staff was exceptional.’

Review and update of policies, procedures and guidance
No changes have been made to Infection control policies during 2015 as these were updated by Andrew Wilby, Clinical Governance in 2014. The Infection control Policy C 25 as well as the Infection Control Manual are due to be reviewed updated again in January 2018.

There is no change in the role as detailed in the 2014 report with regards to Jo Randall being the Director of Infection Prevention and Control for St Magnus.
Infection control awareness week
Infection control awareness week was due to be in December, but has been re-scheduled to take place in 4th April 2016 to 8th April. Posters on how to fight Flu this winter were displayed to raise awareness.

Infection control committee
Minuted meetings were due to be held once a quarter, however only two meetings were held, due to the changes in the hospital. We plan to have quarterly meetings in 2016. The committee is chaired by Michelle Strauss and made up of Andrew Wilby (Clinical Governance), Sandra Davies (Housekeeping manager), Gavin Applegate (Chef) and two representatives from each ward (a nurse and a senior carer). Members of the committee are encouraged to complete level 2 training infection control. Three committee members successfully completed this course during 2015.

Looking ahead to 2016
The aim is to ensure quarterly meetings are done as planned.
Audits to be done 6 monthly and committee members to be more involved with these.
Park House Unit will be extended to a 30 beds, the new ward, Goodwood Ward will comprise of 12 beds, which will be included in the infection control programme for 2016.
The infection control lead will attend The West Sussex Learning and Development Infection Prevention and Control Champion Link Meetings.
In 2016 wards will be required to keep a list of all antibiotics prescribed, this will form part of infection control monitoring.

Michelle Strauss, Infection Control Lead
Andrew Wilby, Clinical Governance
Appendix 1    St Magnus Hospital and Park House statistics

Sycamore Ward Infections Jan-June 2015

Sycamore Infections July - December 2015
Infection Control Annual Report 2015

Oak Ward Infections Jan - June 2015

Oak Ward Infections July - Dec 2015
Cowdray Infections Jan-June 2015

Cowdray Infection July - December 2015
Petworth Statistics not all captured as the ward was closed for refurbishment March to August.
Appendix 2  Rosemary Park Nursing Home statistics

Main House  Infections Jan-June 2015

Main House  Infection July - December 2015
Appendix 3  Infection control Training Statistics

RPNH Infection Control Training

RPNH Infection Control Training - Support services

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No Statistics available for Sycamore and Willow