# NHS Golden Jubilee

### **Meeting: NHS Golden Jubilee Board**

### **Meeting date: 29 May 2025**

### **Title: Prevention & Control of Infection Committee Annual Update**

### **Responsible:** Anne Marie Cavanagh, Executive Director of Nursing

### **Report Author: Heather Gourlay, Associate Director Prevention & Control of Infection**

## 1 Purpose

 This Annual Update 2024/2025 has been developed on behalf of NHS GJNH by the Prevention and Control of Infection Team and Board Prevention and Control of Infection Committee and reflects local achievements influenced by our annual work programme and in response to National performance targets.

### 1.1 This is presented to NHS Golden Jubilee Board for:

###  Decision

### 1.2 This report relates to an:

 Annual Operation Plan and Strategic Outputs. This aligns to the following

 NHSScotland quality ambition(s):

* Safe
* Effective
* Person Centred

 **1.3** **This aligns to the following NHSGJ Corporate Objectives:**

* High Performing Organisation – Establishing the conditions for success to enable excellent outcomes and experience for patients and staff.

## 2 Report summary

## 2.1 Situation

The Prevention and Control of Infection Committee and PCI Team co-ordinate the delivery of an extensive body of work summarised within the HAIRT report (Appendix 1). Integral to the success of the programme is the recognition that Prevention and Control of Infection does not rest solely within the domains of the Prevention and Control of Infection Committee and Team. Everyone has prevention and control of infection responsibilities from Board to ward. NHS GJNH managers are supported to take a lead in ensuring national and local interventions are implemented and monitored to ensure a safe environment for patients, staff and visitors.

## 2.2 Background

This Annual report 2024/2025 reflects the NHS GJNH Annual HAI update looking across the organisational performance against existing national HEAT trajectories to support identification of trends/risks and themes for learning whilst considering this in the context of our annual Infection Control work programme outputs and progress.

## 2.3 Assessment

Appendix 1 provides a detailed year end Annual Update HAIRT report reflecting performance against national and local targets in addition to Horizon Scanning for forthcoming initiatives for 2025/2026.

### 2.3.1 Quality/ Patient Care

Robust environmental audits of the clinical areas by the PCI team supplemented by peer reviews offers assurance of compliance with standards, environmental cleanliness and ultimately patient safety.

### 2.3.2 Workforce

The PCI team are all qualified and skilled Infection Control Practitioners supported by ICD, Consultant Microbiologist and ID Consultant reciprocal role in conjunction with NHSGGC.

There have been recruitment challenges within Housekeeping services in the past 12 months and this is mirrored in other NHS Scotland Boards.

### 2.3.3 Financial

There is always a potential for financial impact to the organisation in relation to outbreaks and additional environmental cleaning and litigation. The initiation of peroxide fogging for recent VRE transmission within ICU2 as a considered enhanced control required funding to support response in additional to twice daily cleaning to provide a baseline.

### 2.3.4 Risk Assessment/Management

There are several processes of risk assessment for HCAI related incidents ranging from

PAG (Problem Assessment Group) utilising the National Infection Control Manual Mandatory HIIAT( Healthcare Incident Assessment tool ) which assesses the initial impact of an incident /outbreak . The Incident Management and Escalation to ARHAI and SG policy unit via the HIIORT (Incident and outbreak Reporting template). Debriefs from each PAG are subsequently reported to clinical specialties Clinical Governance meetings and the CGRMG.

In 2024/25 there were 7 Problem Assessment Groups conducted, 3 of which were linked to national ongoing outbreaks or other NHS Boards outbreaks. Other than onward reporting for information, the remaining 4 PAGs did not require any support or intervention from ARHAI or Scottish Government Policy Unit. De-briefs for all incidents were provided.

The HCAI SCRIBE risk assessment captures environmental new build/refurbishment and all unforeseen built environment incident responses.

In 2024/25 we have seen a 54% increase (312 SCRIBEs) up from previous year (203 SCRIBEs) a significant undertaking for the Infection Control Team and this was not inclusive of those related to Phase 2.

Significant adverse event reviews and feedback are managed on a case by case basis and risk assessment is supported where required, this is further embedded within corrective action plans where appropriate.

**2.3.5** **Equality and Diversity, including health inequalities**

An impact assessment has not been completed as this paper provides a report following an analysis of data.

### 2.3.6 Other impacts: Climate Emergency and Sustainability

Potential for reputational impact due to the nature and content of the report. The IPCT have been involved in Green Theatre Initiatives both nationally and locally and influence where possible conflict with existing National Policy and guidelines.

### Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage external stakeholders where appropriate. Outwith the annual update progress is provided quarterly to the Prevention and Control of Infection Committee and Clinical Governance Committee/Risk Management Groups, and via monthly HAI Reporting Template (HAIRT) to the NHS Board.

**2.3.8 Route to the Meeting**

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| **CGRMG Meetings 2024/25** | **PCIC Meetings 2024/25** |
|  24.04.24 | 10.05.24 |
| 23.05.24 | 23.08.24 |
| 24.06.24 | 15.11.24 |
| 24.07.24 (cancelled) | 04.03.25 |
| 22.08.24 |  |
| 25.09.24 |  |
| 23.10.24 |  |
| 26.11.24 |  |
| 19.12.24 |  |
| 23.01.25 |  |
| 25.02.25 |  |
| 26.03.25 |  |

The content of this report has been previously considered by the Clinical Governance Committee, Clinical Governance Risk Management Group and the Prevention Infection Control Committee, in addition to presentation at clinical specialties governance groups. The report is also presented at Public Board meetings.

These groups have either supported the content, or their feedback has informed further the development of the content presented.

## Recommendation

 **Approval –** NHS GJ Board is asked to approve the Year end HAIRT Report for 2024/25.

## List of appendices

The following appendices are included with this report:

* Appendix No 1 Year End HAIRT March 2025