



NHS Golden Jubilee

Meeting: NHS Golden Jubilee
Meeting date: 27 August 2026
Title: HAIRT report June 2026
Responsible Executive/Non-Executive: Anne Marie Cavanagh, Executive Nurse
 Director and HAI Executive Lead
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 Prevention and Control of Infection

1 Purpose

This is presented to the Board for:

Assurance	☐	Awareness	x
Decision	x	Discussion	x

This report relates to a:

Annual Delivery Plan	x	Local Policy	☐
Emerging Issue	x	NHS / IJB Strategy or Direction	x
Government Policy or Directive	x	Other	☐
Legal Requirement	☐		

This aligns to the following NHS Scotland quality ambition(s):

Safe	x	Effective	x
Person-Centred	x		

Please select the level of assurance you feel this report provides to the board/committee and briefly explain why:

Significant	x	Moderate	☐
Limited	☐	No Assurance* / Not Yet Assessed* (*delete)	☐

Comment: Significant Assurance: The report provides significant assurance through comprehensive monitoring of healthcare associated infection performance against national and local targets, robust environmental auditing, surveillance programmes, established risk management processes, and ongoing oversight through governance and assurance structures. The report demonstrates that effective controls are in place

to maintain patient safety and infection prevention standards, with identified risks and improvement actions being actively managed.

From the list below, please select which Board Priority this paper relates to. If none of the priorities suit, please select other and briefly explain why this paper needs to be reviewed at Board/Committee:

Service Sustainability	☐	Financial Sustainability	☐
Workforce Sustainability	☐	Environmental Sustainability	x
Quality and Safety	x	Population Health and Health Inequalities	☐
Other	☐		

Comment:

Quality & Safety: The report provides assurance on infection prevention and control arrangements, compliance with standards, and management of healthcare associated infection risks to protect patient safety and quality of care.

Environmental Sustainability: The Prevention and Control of Infection Team continues to support national and local Green Healthcare initiatives and contributes to sustainable healthcare practices through representation on relevant organisational groups.

2 Report summary

2.1 Situation

The Prevention and Control of Infection Team produce the monthly 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 and clinical staff are supported to take a lead in ensuring national and local interventions are implemented, monitored and assured commensurate with a safe environment for patients, staff and visitors.

2.2 Background

The June 2026 HAIRT report reflects the NHS Golden Jubilee National Hospital HCAI 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. In addition it reflects forthcoming national initiatives and touches on horizon scanning in conjunction with key stakeholders for implementation.

2.3 Assessment

Appendix 1 June 2026 HAIRT report 2025-26 reflects performance against national and local targets.

- HCID preparedness stakeholder meetings ongoing in response to DL (2025) 20 High Consequence Infectious Disease (HCID) Personal Protective Equipment (PPE) Addendum. Pathways developed and training being progressed. Implementation date has now been extended to 31 March 2027 and the focus will now be on training with key stakeholder support to reach full implementation.
- We await the resources ARHAI are developing to support implementation of the revised National Transmission Based Precautions and have been advised these will not be shared in advance of 3 August 2026 launch date. All clinical teams being made aware of forthcoming changes via a number of stakeholders platforms and full date for implementation approx. 6 months however this will be confirmed through DL as part of formal launch.

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. Local surveillance supports improvement and interventions for those areas where compliance is sub optimal, through SCN led action plans.

2.3.2 Workforce

Scotland's Infection Prevention and Control workforce faces significant challenges and the national Infection Prevention workforce strategic plan aims to support resilience and sustainable skills; with clear pathways for recruitment, progression and retention within Infection Control.

The PCI team are all qualified and experienced Infection Control Practitioners supported by ICD, Consultant Microbiologist and ID Consultant reciprocal role in conjunction with NHSGGC. Two new members of nursing staff commence late August 2026.

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.

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. While not mandatory the hot debrief review tool is an effective process to identify lessons learned and celebrate good practice. The HCAI SCRIBE risk assessment captures environmental new build/refurbishment

and all other unforeseen built environment incident responses, in collaboration with key stakeholders.

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 Climate Emergency and Sustainability

The PCIT continue to support Green Healthcare Initiatives both nationally and locally and influence where possible conflict with existing National Policy and guidelines, and are represented on NHSGJ Green Healthcare/Theatres sub group.

2.3.7 Other impacts – N/A

2.3.8 Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage external stakeholders where appropriate. The HAIRT report is provided monthly to Clinical Governance specialist groups, CGRMG and to the NHS Board, and quarterly to the Prevention and Control of Infection Committee and to Clinical Governance Committee.

2.3.9 Route to the Meeting

Prevention and Control of Infection Committee - 14 August 2026

Clinical Governance Committee – 12 August 2026

2.4 Recommendation

- **Decision** – Reaching a conclusion after the consideration of options.

List of appendices

The following appendix is included with this report:

- Appendix No 1, HAIRT June 2026