



Infection Prevention & Control News

Issue 4

July 2018

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Welcome to the fourth issue of the Infection Prevention and Control Team (IPCT) news bulletin!

We have returned this time with even more infection prevention and control news and developments as well as informative specialist articles provided by members of the team. We hope you enjoy!!

Please send any submissions or feedback to Pamela Joannidis / Kerry Carr and look out for the next issue in **2018!!**

Things happening in IPC....

Trialing the new NUCCP

A team at the Victoria ACH are working with the IPCT to test the new **National Urinary Catheter Care Passport** (NUCCP). Trials will commence this July for use on patients being discharged home with a Urinary Catheter. Ellen McGimpsey, Susan Gallagher, Angela Greener (Wards 1&2, NV ACH) and Wilma Hepburn are working with the IPCT in a quality improvement project to trial this new catheter passport. Wilma Hepburn, who represents community staff on the project, will support an evaluation of the passport once patients have been discharged from hospital.

For further information don't forget to check the NHSGGC UUC Hub on our website.

<http://www.nhsggc.org.uk/your-health/infection-prevention-and-control/urethral-urinary-catheter-care-hub/>



Revising our PVC Care Plan

Pamela McQuarrie, Karen Myles and her team in ward 9D at the QEUH are supporting the IPCT to revise the NHS GGC PVC care plan throughout July and August using focussed quality improvement methodology. The project is being supported by Dr Chris Jones and members of the SAB Group. Look out for updates in our next edition.

Whats new on the IPC Website..

Launch of the Water Safety Information Hub!

The new Water Safety Information Hub has now been launched on the IPC website and is where you will find all our information and resources concerning water safety.

Because patients in hospital are often at a heightened risk of infection, water safety is extremely important. NHSGGC has a responsibility to protect all patients, staff and members of the general public from water associated infections within their premises and therefore there are policies and guidance in place to help ensure this. Therefore, the Water Safety Information Hub will provide an easy to navigate list of all our current resources for all staff to make use of.

Water Safety Information Hub

Welcome to the NHSGGC Infection Prevention and Control Team, Water Safety Information Hub!

This is where you find all of our information and resources concerning water safety.

The below SOP and risk assessment provide direction and guidance for ward based staff, to meet their responsibilities for the control of risks associated with water systems in NHS premises.

[NHSGGC SOP - Pseudomonas aeruginosa](#)

[NHSGGC IPC Checklist - Pseudomonas aeruginosa](#)

[NHSGGC Water Safety Risk Assessment \(Interim\)](#)

[NHSGGC Hydrotherapy pool Guidance for ICDs](#)

These documents should be read in conjunction with the Board Water Systems Safety Policies and written schemes.

[Board Water Safety Policy](#)

- Prevention and Control of Infection Manual (Policies / SOPs / Guidelines)
- Water Safety Information Hub**
- MERS-CoV Information Hub
- Norovirus
- Patient Information
- Reports and Publications
- Risk Assessments
- IPC News Bulletin
- IPC Team (documents)
- IPC Audit Tool Guidance Documents for NHSGGC Staff
- IPC Strategies

PHARMACY
FIRST

NHS
SCOTLAND

Welcome to the Middle East Respiratory Syndrome Coronavirus (MERS-CoV) Information Hub!

Here you will find all of our information and resources concerning MERS-CoV.

What is MERS-CoV?

MERS-CoV is a viral respiratory disease. It is a strain of coronavirus first identified by the Netherlands in 2012. Symptoms include fever and cough that progress to a severe pneumonia causing shortness of breath and breathing difficulties. In some cases, a diarrheal illness has been the first symptom to appear. There is currently no vaccine available for MERS-CoV.

Since April 2014, there has been a marked increase in reported infections with MERS-CoV outside the UK. There continues to be a risk of imported cases to the UK, and health professionals should remain vigilant. Early identification and rapid implementation of appropriate infection control measures for suspected cases is crucial.

While the risk of MERS-CoV in individuals who meet the case definition for a possible case in the UK

- Prevention and Control of Infection Manual (Policies / SOPs / Guidelines)
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- Norovirus
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- IPC Team (documents)
- IPC Audit Tool Guidance Documents for NHSGGC Staff
- IPC Strategies

Did you know that...

Launch of the MERS-CoV Information Hub

Our new MERS-CoV Information Hub is also being launched and much like our other Information Hubs, this webpage will be packed with information and useful links for staff to use. If you would like to learn more about MERS CoV check out our Bug Byte article, in this issue of the newsletter!!

Coming soon.....

We have some exciting launches for you to look out for in the coming weeks!!

- ❖ We will be adding a 'What's new in IPC' page to the IPC website in order to help everyone keep up to date with any new guidance or updates to existing SOPs, Care Checklists and other documentation staff can access from the website.



We are always looking for ways to improve our website, so if there is anything further you would like to see included please email Pamela Joannidis / Kerry Carr with your idea!



PPE: Get it on! Get it off!

Personal protective Equipment (PPE) is an essential component of SICPs (Standard Infection Control Precautions) however from our audits, visits and HEI (Health Care Environment Inspection) reports, we know that there is evidence of lapses in PPE use.

Check your knowledge and practice below:

Do you change gloves when torn, damaged or heavily contaminated?

It doesn't matter which order you put on/take off PPE?

Do you ever forget you are wearing PPE?

Do you perform hand hygiene once PPE is removed?

Do you answer the phone with your gloves on?

Do you keep PPE in your pocket?

You dispose of PPE as clinical waste even if it hasn't been used?

You wear spectacles / glasses, these provide sufficient eye protection?

Do you keep your gloves away from your face when they are worn?

Every time you put on or take off PPE you should risk assess- 'Is PPE required?'

Is there a risk from blood or body fluids?

What PPE should I use?

What order do I put them on?

Using PPE can become routine, but look closely at the pictures below. Do you follow the correct order for putting on or taking off PPE? This order is important to minimise risk and keep yourself and patients safe

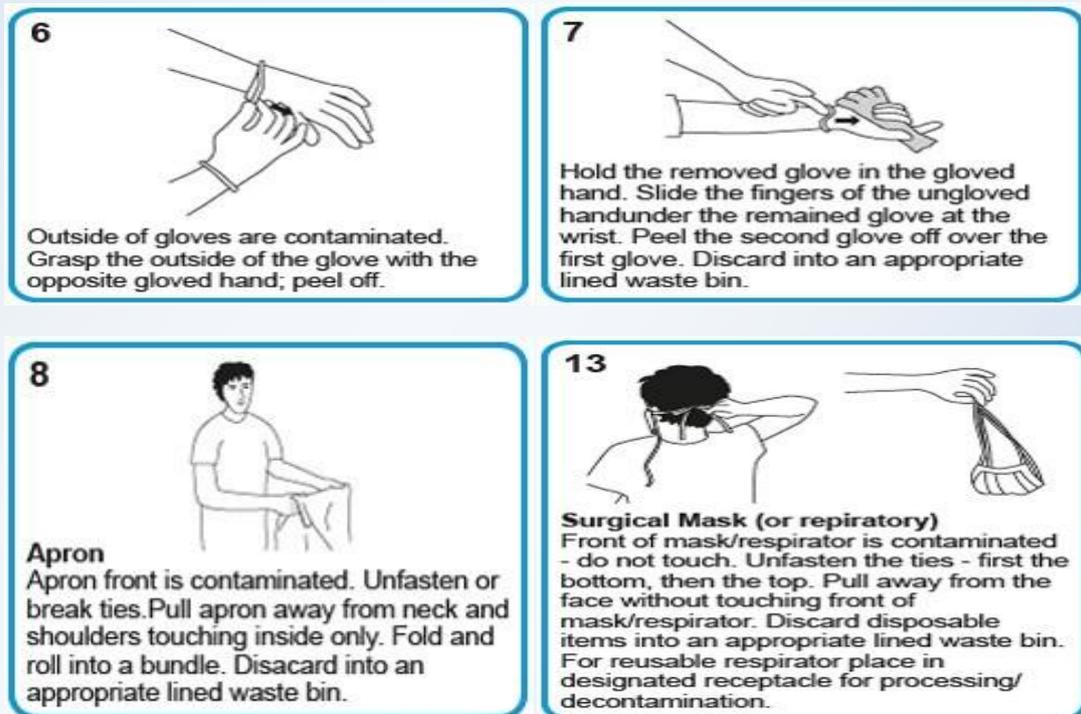
Putting on Personal Protective Equipment (PPE)

Perform hand hygiene before putting on PPE. The order for putting on PPE is Apron or Gown, Surgical Mask, Eye Protection (where required) and Gloves



Removing Personal Protective Equipment (PPE)

The order for removing PPE is Gloves, Apron or Gown, Eye Protection, Surgical Mask. Perform hand hygiene immediately on removal. All PPE should be removed before leaving the area and disposed of as healthcare waste.



For more information please follow the link to the National Infection Prevention and Control Manual:
[National Infection Prevention and Control Manual: Appendix 6 - Putting On and Removing PPE](#)

Alison Edwardson, Senior Infection Control Nurse, West Team.

ACE CDI TIPS

Clostridium difficile infection (CDI) is a significant cause of healthcare associated diarrhoea and can have a high mortality rate in severe cases. The care of patients who have CDI can be daunting, especially for junior staff.

The new mnemonic acronym **ACE CDI TIPS** has been used at Gartnavel General Hospital with a positive response from staff.

A

Antibiotic prudence/review

C

Close door

E

Environment: de-clutter and clean with Actichlor

C

Communication: patients, relatives, staff

D

Documentation: CDI checklist, bowel chart

I

Isolation

T

Treatment

I

Individual equipment

P

PE: apron and gloves for all contact with patient/environment

S

Soap and water for hand washing

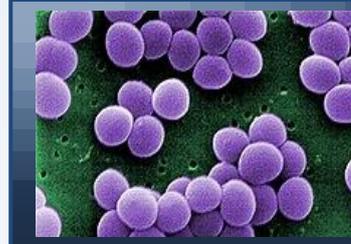
Doing 'Summit' about SABs

NHSGGC SAB Summit, June 2018

The Rate of *Staphylococcus aureus* bacteraemias (SABs) in NHS Greater Glasgow & Clyde has continued to plateau despite significant focus and local intervention over recent years.

To ensure we are exploring and considering every option for further reduction in rates of SAB, NHSGGC recently hosted a "SAB Summit"

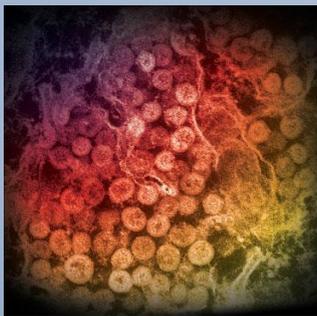
Colleagues from two NHS Boards, NHS Ayrshire and Arran and NHS Lothian, with recent success in reducing the rates of SAB were invited to review the NHSGGC approach and to contribute their local experience, interventions and actions.



❖ Scanning electron micrograph of *S. Aureus*, false colour added.

The event was agreed as beneficial to all and a number of the shared initiatives are being implemented within NHSGGC. These will be taken forward by the Board Infection Control Committee, and the GGC SAB Steering Group in collaboration with Clinical Colleagues. Look out for more news on this important topic soon.

Tom Walsh, Infection Control Manager

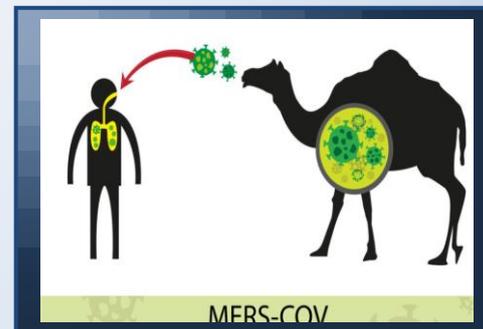


Bug Byte: MERS CoV

Middle East Respiratory Syndrome (MERS) is a viral respiratory disease caused by a novel coronavirus (MERS-CoV) that was first identified in Saudi Arabia in 2012. By April 2018, there were 2240 reported cases mostly from countries in the Middle East, particularly the Kingdom of Saudi Arabia (82%) and the United Arab Emirates.

Coronaviruses are a large family of viruses that can cause infections ranging from the common cold to Severe Acute Respiratory Syndrome (SARS). Symptoms typically include fever, cough and shortness of breath. Pneumonia is common and symptoms such as diarrhoea have also been reported.

Humans become infected after contact with infected animals (dromedary camels are a reservoir) or humans. However, the virus does not pass easily from person to person unless there is close contact, such as providing care to an infected patient without taking the appropriate infection prevention and control precautions.



Those at risk of contracting MERS-CoV include travellers to the Arabian Peninsula (or those in close contact with those who have travelled). The Hajj, the single largest pilgrimage in the world, will fall approximately from the 19th -24th August 2018.

While the risk of infection with MERS-CoV to UK residents in the UK remains very low, there continues to be a risk of imported cases and health professionals should remain vigilant. Early identification and rapid implementation of appropriate infection control measures for suspected cases is crucial.

NHS GGC Infectious Diseases and Infection Prevention and Control Teams have been preparing guidance for staff located on the IPC Website; staff should check the MERS-CoV information Hub for guidance.

Pamela Joannidis, Nurse Consultant IPCT

- ❖ NHSGGC Infection Control MERS-CoV Information Hub: <http://www.nhsggc.org.uk/your-health/infection-prevention-and-control/mers-cov-information-hub/>
- ❖ HPS MERS-CoV document library: <http://www.hps.scot.nhs.uk/resp/coronavirus.aspx>
- ❖ HPS Infection Prevention and Control advice for MERS-CoV <http://www.hps.scot.nhs.uk/resourcedocument>

MYTHBUSTERS

Every issue we try to debunk some common Infection Control Myths....

MYTH: VRE does cause diarrhoea

FACT: VRE does **NOT** cause diarrhoea. It can colonise the GI tract and is not the cause of a patient's diarrhoea.



BUSTED

MYTH: Artificial nails are ok to wear in a clinical setting as long as they are short and clear or natural coloured.

FACT: Artificial nails are **NOT** ok to wear in a clinical setting. Artificial nails such as gel, acrylic or shellac can harbour bacteria and other microorganisms in the join between the natural nail and false nail which cannot be removed by performing hand hygiene.



BUSTED

Meet the Team!! - North Sector

The North Infection Prevention and Control Team (IPCT) is led by Lead Nurse Kate Hamilton and her team of Infection Control Nurses; Gillian Bowskill, Gillian Mills, Jennifer Barrett, Marlene Hay, Helen Wallace and their team administrator Julie Dryden

Working from their base at Glasgow Royal Infirmary the team oversee infection prevention and control throughout the North Sector, including Stobhill and Victoria ACH as well as community hospitals. The team has a wealth of experience in the field of infection prevention and are proactive and enthusiastic in their approach to infection prevention and control.



The North IPCT are passionate about educating staff and are always looking for new, innovate ways to deliver education. Recently the team have been utilising educational board displays and stalls to promote knowledge and encourage discussion on a number of IPC topics. They have also been using a workspace scenario based training model during staff training, this interactive and engaging method of training has been extremely well received to date.

The North Sector Infection Prevention and Control team can be contacted on 0141 221 4388 and as always, they'll be happy to help with any infection prevention and control queries.

Useful Links



- ✓ [Infection Prevention and Control Manual \(link is available on all desktops\)](#)
- ✓ [Infection Prevention and Control Team Contact Details](#)
- ✓ [National Infection Prevention and Control Manual](#)