

SNBTS HAI Reporting Template – April to June 2011

1. **Author(s) of Paper**

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2. **Purpose of Paper**

To provide relevant NSS Management groups with a copy of the HAI (Healthcare Associated Infection) Report with regard to compliance with Hand Hygiene and Cleaning Specifications within SNBTS.

3. **Service Implications**

This is the tenth SNBTS HAI Reporting Template providing information on compliance with Hand Hygiene and Cleaning Specifications.

The key service implication is that there needs to be measurable hygiene standards to ensure that SNBTS blood and tissue components are manufactured to the required standards of hygiene. There are a large number of measures taken by SNBTS to ensure that the levels of hygiene required for the collection and processing of our components and tissues meet the standards expected by relevant regulatory bodies, such as MHRA and HTA. This is a fundamental requirement of the Good Manufacturing Practices demanded of SNBTS by law.

As part of this overall cleanliness programme, the SNBTS are required to meet established SGHD standards of cleaning and hand hygiene. For cleaning, this is generally carried out by external contractors and monitored using a standard monitoring tool. For hand hygiene, this is audited in SNBTS blood collection sites by NSS personnel against a standard for the performance of hand hygiene.

The data collected from these measures is compared with that achieved in other Health Boards in Scotland.

4. Other Key Issues

Summary Analysis of Data in SNBTS HAI Reporting Template

SNBTS Hand hygiene data (Table 1)

SNBTS hand hygiene compliance score for each of the 3 months was in excess of 98.0%. Compliance percentages ranged from 90%-100% with a total of 1231 opportunities for hand cleansing being observed. This level of compliance consolidates the improvement seen since this programme was initiated. Benchmarking shows that SNBTS data is slightly above the national average. However, there are no confidence intervals for this data therefore at present we are uncertain whether this is of statistical significance.

Cleaning Monitoring (Table 2)

The attached HAIRT summary indicates that the quarterly outcome for cleaning monitoring in April to June achieved 97% compliance with the expected cleaning standards. This is the same overall result as was obtained in the previous quarter. With the exception of one finding, all values reported in this quarter exceeded the target of 90% compliance expected by SGHD. The one finding which was below this value related to the laboratories in Edinburgh New Royal Infirmary, where a figure of 88.7 % compliance was noted in April. This finding is similar to that reported in February. This non compliance is due to issues over the cleaning of a temporary canteen facility and the local manager has agreed to ensure that local action is taken to remedy this problem.

5. Resource Implications

There are no resource implications relating to this report.

6. Contracts

There are no contractual issues relating to this report

7. Risk Implications

Staff:

As reported in previous reports, the key current risk of the hand hygiene programme is not of non compliance with the agreed standard, but rather is an Occupational Health Issue with an increased incidence of reactions to the hand hygiene products. Work has been carried out to assess whether a reduced frequency of hand cleansing still gives acceptable performance. This approach has been supported in a paper prepared by HPS in September 2010. The data from the SNBTS study has actually shown that reducing the frequency of hand cleansing actually improves compliance with the procedure for carrying out hand hygiene. A summary report on this study has been prepared and discussed at SNBTS Clinical Governance and Safety Committee (CGSC) in August 2011. More work on this report was requested and it will be resubmitted for final review at SNBTS CGSC in September, then sent for review at NSS EMT prior to being forwarded to SGHD HAI team for formal ratification that hand cleansing can be reduced to a single instance prior to phlebotomy of each donor. Note: where there is direct patient contact, there will be no change in our hand cleansing practice.

Organisational:

SNBTS are a highly regulated organisation and strive to ensure that adequate standards are in place at all times. In the event of non compliance with the relevant HAI standards we would need to assess the implications, but would inevitably require a review of how the activities are carried out. This could have implications for existing NSS contracts.

Reputational:

There are potential risks to reputation if any SNBTS premises are perceived to have unsatisfactory levels of cleanliness.

Business:

Ineffective systems and processes ensuring cleanliness may expose NSS to liabilities in the event of contaminated components being manufactured.

Clinical

The principal clinical risk is that failure to perform effective cleaning of facilities or hands could lead to the generation of contaminated blood or tissue components, with the obvious risk to patients if these go undetected.

8. Equality & Diversity Implications

There are no Equality & Diversity implications associated with the paper.

9. Partnership Working

No specific partnership issues related to this report.



**TABLE 1
HAND HYGIENE**



	Board Total	Glasgow Athenaeum/ Sessions	Glasgow Garnavel	Glasgow Possilpark	MDC Y496 BSF	MDC SK52 ODG	MDC W441 PSG	Glasgow Clinical (Beatson)	Edinburgh Lauriston/ Sessions	MDC M465 WSG	Edinburgh New Royal Infirmary Clinical	Ellen Glen's Road	Aberdeen Donor Centre/ Sessions	Dundee Donor Centre/ Sessions	Inverness Donor Centre/ Sessions	Nurse	Medical	Ancillary/ other	AHP
Hand hygiene Programme																			
Compliance % score Apr '11	98	97						95	100		100		95	100	100	105	153	1	1
Compliance % score May '11	99	97						100	99		100		95	100	100	162	0	259	0
Compliance % score June '11	99	99						100	100		100		100	100	100	214	5	330	1
No of observations Apr-June '11	1231	441						60	270		90		170	140	60	481	158	590	2
Compliance % rate previous quarter (Jan-Mar '11)	99	99						95	99		100		100	100	100				
Number of observations previous quarter	1027	309						80	170		108		160	90	110	396	17	611	3

Comments:



**TABLE 2
CLEANING**



	Board Total	Glasgow Athenaeum/ Sessions	Glasgow Garnavel	Glasgow Possilpark	MDC Y496 BSF	MDC SK52 ODG	MDC W441 PSG	Glasgow Clinical (Beatson)	Edinburgh Lauriston/ Sessions	MDC M465 WSG	Edinburgh New Royal Infirmary Clinical	Ellen Glen's Road	Aberdeen Donor Centre/ Sessions	Dundee Donor Centre/ Sessions	Inverness Donor Centre/ Sessions	Nurse	Medical	Ancillary/ot her	AHP
Cleaning specification compliance																			
Compliance rate April 2011	96.5	98.4& 98.6		97.5					97.7		88.7	95.7 &95.9							
Compliance rate May 2011	97.7					100	100			100			97.3	100	96				
Compliance rate June. 2011	96.7	98.5 96.3	100, 97.3, 98.7 & 96.9	98					93.5			93.5 & 98.8							
Number of audits Apr - June 2011	23	4	4	2		1	1		2	1	1	4	1	1	1				
Compliance rate previous quarter	97																		
Number of audits previous quarter	33	4	10	1	1	2	2		4	2	2	3		2					

Comments:

The quarterly score April to June , reportable to the Government will be 97 % (no change from previous quarter)