

EXECUTIVE SUMMARY: BOARD OF DIRECTORS**21 SEPTEMBER 2011**

Subject:	Update on the Clostridium difficile (<i>C.diff</i>) Action Plan
Supporting Director:	Professor Hilary Chapman, Chief Nurse / Chief Operating Officer
Author:	Mr Chris Morley, Deputy Chief Nurse
Status (see footnote):	N

PURPOSE OF THE REPORT:

This report describes the current level of performance on *C.diff* and has the most recent version of the action plan attached.

KEY POINTS:

- The Trust is not currently on the required trajectory to meet its *C.diff* target for 2011/2012.
- The target for the year is 134 and the Trust had recorded 109 cases by the end of August.
- There is a high likelihood of breaching the national target so the Trust trajectory has been re-set to 183 i.e. lower than 2010/2011 outturn. This gives a monthly trajectory of 10.5 cases which remains extremely stretching.
- An action plan to reduce incidence was agreed at the Board of Directors meeting on 15 June 2011.
- No further actions have been added to the action plan this month.
- The action plan will be amended to include the recommendations of the external review.
- Attached to this report is an abridged version of the action plan, showing those actions which were either due to be completed in August or have still to be completed. A full version of the action plan is being maintained for audit purposes.

IMPLICATIONS:

Achieve Clinical Excellence	Need to maintain the Trust's reputation for high standards on infection control
Be Patient Focused	Important element of patient safety
Engaged Staff	Need to ensure that staff are aware of the current challenges regarding <i>C.diff</i>

RECOMMENDATION(S):

It is recommended that the Board of Directors note the current level of performance on *C.diff* and the progress with the actions contained within the action plan.

APPROVAL PROCESS:

Meeting	Presented	Approved	Date
Board of Directors			21 September 2011
Healthcare Governance			26 September 2011

CLOSTRIDIUM DIFFICILE ACTION PLAN

Action plan to address the rise in cases of *Clostridium difficile* (*C.diff*) at Sheffield Teaching Hospitals NHS Foundation Trust

ACTION		KEY MILESTONES	PERSON RESPONSIBLE	RISK ASSESSMENT	COMMENTS
1	Reducing Contamination on High Risk Wards				
1.1	Building on the existing deep clean team, recruit further staff to enable the deep clean programme to be delivered at the Royal Hallamshire and Northern General Hospitals using the Cambridge model.	30 November 2011	Hotel Services Director	Medium	The Cambridge model has a team which perform functions currently undertaken by our Domestic Services, Estates and Infection Control Team. Increase of 16 WTE planned.
1.2	Reconfigure services to enable a vacant ward to become available at the Northern General Hospital site to be used as a decant ward for the deep clean programme.	30 September 2011	Deputy Chief Operating Officer	High	Work is actively progressing to achieve this, but decant ward not likely to be available until 31 October 2011
1.3	10 additional Housekeepers to be recruited to work across 9 high incidence wards identified since April.	30 November 2011	Deputy Chief Nurse	Low	Staff to be in post by November 2011.
1.4	Increase capacity to the Rapid Response cleaning teams across the Trust but to be particularly available to the Assessment Units / A&E.	30 November 2011	Hotel Services Director	Low	
1.5	Optimise the admission process so that where appropriate, patients transfer directly from A&E and patients staying on Assessment Units are either discharged or transferred to the appropriate ward in a timely manner.	30 September 2011	Deputy Chief Operating Officer	High	
1.6	Remove all radiator covers on inpatient wards and clean the radiator and cover prior to heating being turned on for winter.	31 October 2011	Hotel Services Director	Low	Programme began 5 September 2011

ACTION		KEY MILESTONES	PERSON RESPONSIBLE	RISK ASSESSMENT	COMMENTS
2	Optimising Infection Prevention and Control Practice				
2.1	To trial the use of a new cleaning solution, DIFFICIL-S® .	31 August 2011	Deputy Chief Nurse	Low	Trial commenced in July 2011 and ongoing currently.
3	Evidence Based Prescribing				
3.1	The inpatient prescription chart is to be amended to include a specific section on antibiotic prescribing.	31 August 2011	Director of Pharmacy	Low	Achieved
4	C.diff Case Follow Through and Actions				
4.1	Lessons learnt disseminated across the organisation.	30 September 2011	Director of Infection Prevention and Control	Low	
4.2	A review of the cases from quarter 1 to be undertaken to try to identify and trends or recurring patterns.	31 August 2011	Deputy Chief Nurse	Low	Achieved and the results fed back to the weekly CEO summit
5	Further Raising the Profile of Infection Prevention and Control				
5.1	Targeted support will be made available to clinical areas requiring support with infection control issues from the Chief Executive, Medical Director and Chief Nurse / Chief Operating Officer.	31 August 2011	Deputy Chief Nurse	Low	CEO visit to high incidence wards on 29 June 2011. Achieved and ongoing
5.2	A series of meetings to be held for Domestic Services staff highlighting the reasons why effective cleaning is so important, led by the Infection Control Team.	30 September 2011	Hotel Services Director	Low	Meetings taking place during the week commencing 5th September 2011. Meetings have been well attended.
6	Monitoring				
All actions in this section have been implemented.					
7					
7.1	Commission on external review of the Trust's performance on C.diff and associated action plan.	31 August 2011	Chief Nurse / Chief Operating Officer	Low	Review completed on 23 August 2011, revised report received and comments returned, final report awaited.
7.2	Meet with representatives of the Yorkshire and Humber Strategic Health Authority and South Yorkshire cluster PCTs to determine whether any further actions should be taken.	30 September 2011	Chief Nurse / Chief Operating Officer	Low	Meeting scheduled for the 9 September 2011.