**Subject:**
Infection Prevention & Control

**Executive Lead:**
Irene Barkby, Executive Director, NMAHPs

**Governance Committee:**
HQAIC

**Author:**
Infection Prevention & Control Team

**Period covered:**
1 April 2018 – 30 September 2018 (6 month update)
(Data validated by Health Protection Scotland 8 January 2019)

**Date:**

**CONTEXT / BACKGROUND:**

- All Scottish NHS Boards are required to achieve the SAB Annual Operating Plan (AOP) Target of 24 cases or less per 100,000 acute occupied bed days (AOBD) by 31 March 2019.
- All Scottish NHS Boards are required to achieve the CDI AOP Target of 32 cases or less per 100,000 AOBD in the aged 15 and over age group is to be achieved by 31 March 2019.
- It is worth noting that the AOP methodology uses a rate per 1,000 AOBD whereas Health Protection Scotland (HPS) uses a rate per 100,000 AOBD. In effect, the decimal point is moved two spaces to suit whichever reporting regime is being used.

**HIGHLIGHTS & EXCEPTIONS AGAINST KEY ACTIONS FOR THIS PERIOD:**

**Annual Operating Plan (AOP) Target - April to September 2018**

**Staphylococcus Aureus Bacteraemia (SAB)**

- During April to September 2018, there were 69 SAB cases.
- There has been a reduction of 10 SAB cases (down 13%) against the same time period in 2017/2018 (Chart 1). NHSL is above the trajectory levels set against the AOP target.
- The Infection Prevention and Control Team (IPCT) are focusing on the number of SAB cases assessed as HCAIs which are reviewed as part of IPCT improvement programmes. Of the 69 SAB cases, 46 cases were HCAIs (an increase of 7 HCAI cases against the same time period in 2017/2018).

**NHSL Monthly SAB Cases against AOP Target 2018-2019**

![Chart 1: Staphylococcus Aureus Bacteraemia (SAB) April to September 2018](image)
**Clostridium Difficile Infection (CDI)**

- During April to September 2018, there were 62 CDI cases.
- There has been an increase of 7 CDI cases (up 11%) against the same time period in 2017/2018 (Chart 2). NHSL is below the trajectory levels set against the AOP target.

**FURTHER ACTION PLANNED IN LIGHT OF ABOVE:**

- Progress will be reported and monitored via NHS Lanarkshire Infection Control Committee (LICC).
- Reduction strategies led by the Infection Prevention and Control staff with key stakeholders are in place.

**RISK MANAGEMENT:**

<table>
<thead>
<tr>
<th>Currently on a Risk Register</th>
<th>Yes ☑️</th>
<th>If Yes, Risk Register ID: No. 257</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1 Corporate</td>
<td>☐</td>
<td>Level 2 Operating Division ☐</td>
</tr>
<tr>
<td>Require Escalation to higher level</td>
<td>Yes ☑️</td>
<td>No ☐</td>
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</tbody>
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**GOVERNANCE AND MANAGEMENT ASSURANCE:**

HQAIC

**STATEMENT OF ASSURANCE on PERFORMANCE MANAGEMENT:**

It is hereby confirmed that all performance shortfalls arising in this period have been reported to the HQAI Committee, and that each has an appropriate remedial action plan in place that is reported to, and will be open to further scrutiny by the Committee.

I Barkby, Director of Nursing, Midwifery & AHPs

**FURTHER DETAILS:**

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