



**INFECTION CONTROL COMMITTEE MEETING  
HELD ON 23 MAY 2001**

**PRESENT:** Dr R Brindle - Chairman

**Code A**

**In attendance:**

**Action**

**01/01 Apologies for absence**

Apologies were received from [Code A] Sqn Ldr M Connor, Lt S Harriman, [Code A] Dr P McQuillan, Dr S E Neira-Munoz, [Code A] Dr I Reid, Dr R Sawyer, Dr D Shand, [Code A]

**02/01 Minutes of the meeting held 21 November 2000**

The Minutes were approved as a true record of proceedings.

**03/01 Matters arising from the Minutes.**

There were no matters arising.

**04/01 Hand Hygiene.**

SEH updated the Committee on the installation of hand hygiene products within the Trust. Cutan alcohol gel was now installed in all areas at the SMH and QAH sites. Problems had been identified with the product, which were being addressed by the manufacturer. Report pending. The installation programme would be extended to outlying sites once the problems had been resolved.

**SEH**

It was noted that the incidence of adverse reaction to the product had been extremely low.

SEH proposed that the hand hygiene programme be expanded to include the soap and moisturising products supplied by the same manufacturer. The Committee agreed that trials of the products should proceed with a view to installing them Trust wide by the year-end.

**05/01 Action Plan for RH Haslar integration.**

SEH reported that the integrated guidelines between the PHT and RHH would be complete later than previously anticipated and that the first draft would be available by April 2002. Ursula Ward requested that the Clinical Support Divisional Manager be briefed on the situation.

SEH

The Committee approved the Action Plan.

**06/01 Controls Assurance**

**Code A** summarised the principles of Controls Assurance and outlined the Infection Control Action Plan for adherence. IC is currently 60% compliant with the aim of 85% compliance by financial year-end.

It was noted that Ursula Ward had been appointed as the IC Executive Lead for Controls Assurance.

It was agreed that PHT and PHCT should liaise more closely over controls assurance. **Code A** to identify a generic Action Plan between both Trusts. **Code A** to provide copies of the PHCT accountability chart and controls assurance documentation.

SK/SEH

JJ

The following amendments to the Action Plan, and Accountability Chart, were requested by the Committee:

Amendments:

Cri. No. 1. Ursula Ward requested that the accountability chart be amended to include the Divisional Senior Nurse in the professional accountability line.

SEH

Cri. No. 13. Ursula Ward reported that no NHS Trust currently had the definitive answer to the question of key indicators. Discussions ongoing.

Cri. No.14/15. Audit System. Ursula Ward informed the Committee that the internal audit function was available within the Trust. However, the service was under outside contract, which was currently up for renewal. Under the new contract the Trust may not receive the same level of support, but that it would have some flexibility. UW to send SEH a copy of the consultative document outlining the clinical indicators for performance.

UW

The committee approved the amended accountability chart and controls assurance action plan.

*Note: Dr M Tweeddale joined the Committee meeting.*

**07/01 Annual Report for 2000-2001.**

RB outlined the Infection Control Annual Report for 2000, which included nosocomial infection data.

Concern was raised at the increase of sharps injuries within the PH Trust, which mirrored an increase in PHCT. After some discussion, the Committee agreed that a comprehensive reporting system was required in order that the relevant bodies were notified of sharps injuries promptly and for action to be effected. A representative from the relevant areas to meet to agree a reporting structure for sharps injuries.

SEH

General note: **Code A** reported that Occupational Health planned a high profile awareness campaign for the reporting of sharps injuries within both Trusts and relevant Health Authority areas.

Ursula Ward reported a Serious Clinical Incidence policy would be brought before the Governance Committee for approval and that it was proposed that sharps injuries be dealt with under this policy. After some discussion it was agreed that Dr R Brindle would discuss the situation further with the **Code A**

RB

The Annual Report for 2000-2001 was approved by the Committee

**08/01 Programme for 2001-2002**

Sharps Management: Ursula Ward reported that following the concern expressed over sharps management, it may be constructive to commission a one-off project investigating sharps management, which could be funded by central risk management monies. The Committee agreed that this would be a positive step forward.

SEH/JB

SEH outlined the new environmental audit tool. PHCT requested more information on the environmental tool and computer based training, but expressed concern over the compatibility of software between Trusts.

SEH/JJ

The programme for 2001-2002 was approved by the Committee

**09/01 Decontamination.**

a. Instrument decontamination. **Code A** reported that the NHS Executive required a full review of decontamination services within PHT, PHCT and primary care. MEC reported on the current position of PHT and PHCT. After some discussion it was agreed that the Health Authority should co-ordinate this activity and that MEC should contact Dr Neira-Munoz to discuss further action.

MEC/  
SN-M

b. Single Use Items. Enteral feeding bags: Following a question from PHCT regarding the re-use of enteral feeding bags, the Committee confirmed its view that items which were marked as single-use items should not be processed and re-used.

**10/01 PHT Infection Control Policy**

**Code A** reported that the Infection Control Team recommended that the PH Trust adopt the Infection Control Policy. The Committee endorsed the policy.

Ursula Ward reported that a paper was to be produced for the management of policies; until this was in place she recommended that the policy should be taken to the Clinical Governance Committee for ratification. UW to take the policy to the next CG Committee meeting for consideration.

**UW****11/01 Any other business.**

a. CHI: Ursula Ward reported the Trust had received formal notification that the CHI team would be visiting the Trust. A substantial amount of work would be required by the Trust to produce the relevant documentation for the audit. A web site and a dedicated team would be established to assist with the project with UW taking the executive lead. The Committee nominated **Code A** to be the Infection Control contact for the project.

**SEH**

b. Patient Information: **Code A** informed the Committee that patient information leaflets on C.diff and MRSA were now available throughout the Trust. Leaflets are obtainable from the Infection Control department.

**12/01 Dates and times of future meetings.**

The next meeting will be held on 9 October 2001 at 12.30 pm in the SMH Board Room. The following meeting will be held on 19 February 2002 also at 12.30 pm in the SMH Board Room.

**JM**