



DE~BUGGED

Focusing on the provision of Clean, Safe Care...

Infection Prevention & Control Newsletter provided by Herefordshire & Worcestershire Health & Care NHS Trust

TAKE CARE, KEEP GOING...YOU ARE DOING AMAZING

Whilst everything is progressing well in containing COVID-19 illness and bringing a degree of normality back into lives there are still a number of key challenges to consider which we can expect to see over winter months:

An increase in respiratory infectious diseases, including COVID-19, influenza and respiratory syncytial virus (RSV). Modelling suggests that there will be a third peak of COVID-19 infections over the summer of 2021, although the timing and magnitude of the peak are uncertain. Mortality may be less severe than last winter but a rise in infections will take time to work through and put pressure on the health services. The possibility of a further new variant is also of concern. Outbreaks of RSV in the autumn and influenza in the winter could be around twice the size of a 'normal' year, and might overlap (at least partially) with a peak in COVID-19 infections. Part of this will link to a reduction in mask usage which has protected people and potentially may make them more susceptible to infections this winter as well as a reduction in COVID-19 allowing other infections to gain pace. It is also thought that the number of cases of norovirus may increase this winter and outbreaks are already being seen out of predicted norovirus season.

Wider health and wellbeing impacts of the pandemic, including long COVID, mental and physical deconditioning and the impact of delays in diagnosis and disease management. During the winter months, non-communicable diseases such as asthma, chronic obstructive pulmonary disease (COPD), ischaemic heart disease, myocardial infarction and stroke are likely to be exacerbated.

Continued disruption to health and social care service delivery, including managing the backlog of treatment and diagnosis and incorporating IPC measures are likely to continue to impact on health and social care. By the winter we will all have been responding to and living with the pandemic for over 18 months. Some of us will have been directly affected by COVID-19 and others will have had the constant reminders of the pandemic as part of their everyday life.

Added to these, **ongoing uncertainties remain** over the: duration of post-vaccination immunity in different groups (and safety in children); likelihood of and impact of new severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) variants, including the possibility of vaccine-resistant variants. This is in addition to the development and availability of treatments and prophylaxis for COVID-19; and prevalence, duration, severity and ability to treat, long COVID. **Stay Alert, Stay Safe, Look after each Other** and remember the need for **Viral Kindness**. Seek IPC advice and clarification as required. It is a huge massive thank you from the IPC Team to each and everyone of you for your contributions to IPC practice to date.

Volume 2
Issue 40

Herefordshire and Worcestershire
Health and Care
NHS Trust



If you require further information about any item in this newsletter please contact the Infection Prevention & Control Nurses on 01386 502552/32552

Please give us a follow on
TWITTER WHCT_infection



SHARPS INJURIES-LATEST INFORMATION

The pressures of the pandemic the Royal College of Nursing (RCN) have state in a recent report are one of the factors to contribute to a rise in needlestick injuries. Sharps injuries are where a needle, blade (such as a scalpel) or other medical instruments penetrate the skin. Their report Blood and Body Fluid Exposures in 2020 contains the results from a survey of RCN members. The authors surveyed 7,571 RCN members and of those 15% said they had suffered a 'sharps injury' in 2020. This compares to 10% in the year of 2008. Reasons for the rise cited in the report included fatigue induced by the pandemic, use of additional PPE, low staffing levels, lack of training, lack of light in procedure area, lack of space and safer sharps and sharps bins not being available. Many of these are factors that we can all influence by thinking through the procedure, ensuring environment minimises risks and we have all appropriate equipment to hand. If you have any concerns linked to sharps safety within your workplace please contact the IPC Team for advice, ensure sharps bins are available, assembled correctly, labelled and stored safely, that the environment is appropriate



Remember out of hours urgent advice is available from the on call medical microbiologist via switchboard at either Worcestershire Royal Hospital or the Alexandra Hospital Redditch.

The Director with responsibility for Infection, Prevention and Control in the Trust is the Director of Nursing and Quality Michelle Greatorex.

for the procedure you are undertaking and most importantly that you are familiar with the device you are using and have no concerns and can dispose of it safely immediately after use directly into a sharps bin. The last considerations is to make sure you know what to do if you should have a needlestick injury. Trust guidance is available on www.worcestershirehealth.nhs.uk as well as the protocol for management there are also a number of posters including a flow chart of actions and prompts as well as information on how to achieve safe practice. Within audit tools you can also check standards within your area and make recommendations to enhance practice. Be sharp aware and minimise the risk of needlestick and sharps injuries.



Please be alert in your workplace and check that all aspects of infection prevention and control are in place ensuring consistent provision of clean, safe care and minimising infection 100% of the time.

Beat *E. coli* *Escherichia coli* (*E. coli*) is the most common cause of urinary tract infections (UTI), which can lead to life threatening blood stream infections (BSIs). Three-quarters of all *E. coli* BSI's and the highest number of deaths due to *E. coli* BSI's, occur in community settings, e.g. care homes, home care. Targeting a reduction in UTIs will bring us significant reductions in blood stream infections and enhance general health. If you have a minute look at the resources on www.worcestershirehealth.nhs.uk linked to being UTI aware and consider whether any of these will help promote key messages for you, for your patients, families and colleagues. *E. coli* is a gram-negative bacteria that lives harmlessly in the intestine of people and animals and provides beneficial functions in aiding food digestion, however, when detected in other parts of the body it can cause urine infections, pneumonia, and blood stream infections. In healthy people an *E. coli* UTI is a less serious problem and causes a lower urinary tract infection (cystitis), but people who rely on indwelling catheters for bladder drainage are at increased risk of UTI's. This is because their catheter is a foreign body in the urethra and bladder, which rapidly acquires a biofilm of bacteria and there is a risk of contamination of the urinary tract during insertion, catheter changes and subsequent catheter care. Correct diagnosis of suspected UTIs **not** based on dipstick results and antibiotics prescribed according to guidelines, are also essential to prevent antibiotic resistance and ensure correct management.



Keep hydrated don't wait until you're thirsty to drink. Drink cool water before you start your shift and as regularly as you can to reduce the possibility of dehydration. Wearing masks makes this challenging, make sure you remove your mask in a safe area.



NICE guideline [NG199] *Clostridioides difficile* infection: antimicrobial prescribing was issued in July 2021, this represents some changes to recommended prescribing for treatment of C diff. Guidance can be viewed on [Web Link](#) please remember to keep a look out for our updated prescribing guidance to reflect this change, you will also note changes on ICE when results are reported directing prescribers to the newly recommended treatment options.

REMEMBER OUR NHS GUIDANCE

The use of face masks or face coverings remains as an IPC measure. In addition to social distancing, hand hygiene for staff, patients/individuals and visitors is advised in both clinical and non-clinical areas to further reduce the risk of transmission. Patients in all care areas should still be encouraged and supported to wear a face mask, providing it is tolerated and is not detrimental to their medical or care needs. Physical distancing of 2 metres remains in place as standard practice in all health and care settings, unless providing clinical or personal care and wearing appropriate PPE.

Decontamination is not effective without a thorough clean first remember C is before D (clean before decontaminate). There is absolutely no point in decontaminating something with a disinfectant wipe unless you have cleaned it beforehand and it is visibly clean. This is because the disinfectant will not even reach the surface and will instead be soaked up by the particles of dust and dirt that have not been cleaned away.

LOOK OUT FOR OUR NEW POSTERS AND LEAFLETS PROMOTING BEST PRACTICE REMEMBER EVERY ACTION COUNTS



WINTER INFECTIONS...

It is likely to be a challenging winter with our usual infections and also potential for COVID-19 illness, it is essential that we make plans and ensure we are prepared. The IPC team will be sending out a check list for inpatient areas initially to raise awareness of actions we can take.

INFLUENZA

The best way to prevent influenza is to have your flu jab. Keep yourself and those you care about safe.

REMEMBER TO CONSIDER YOUR PATIENTS

In inpatient settings where patients may miss the opportunity to receive a flu vaccine due to their hospital stay please ensure that they can access one and don't miss out. ALSO check that admissions in, if eligible for flu vaccine, have taken this opportunity or support them in obtaining a flu vaccine during their stay if they wish. This year the flu jab is more important than ever before and will be key to reduce the amount of respiratory illness this winter and minimise infection risks.



VIRAL GASTRO-ENTERITIS

Clusters of cases of viral gastro-enteritis have started to present in community and healthcare settings. It is imperative that **staff are aware of the need to remain vigilant when accepting admissions/transfers to ensure that they have asked questions relating to prevalence of symptoms within a ward/area and in the individual being transferred including whether they have previously been positive.** Remember for staff who present with symptoms and infection cannot be excluded they need to be 48 hours symptom free before returning to work. Please ask these questions for all transfers or admissions and do not rely on others to provide the information. **Contact Infection Prevention and Control on 01386 502552 for advice.**



MASK ETIQUETTE

Please make sure you avoid those too often seen lapses in mask wearing amongst the general population.

Masks should be worn covering the nose and mouth, masks worn on chins and foreheads don't provide respiratory protection and risk spreading SARS-CoV-2 and other infections.

If you are in a setting or undertaking tasks at work or when out and about when you should be wearing a mask, please make sure you do. They protect you and also everyone around you. In the Trust the use of IIR masks is a set standard in all buildings where patients are seen/present unless it is a COVID-19 secure area. A mask can protect you from acquiring COVID-19 and also stop you giving it to someone else. Yes they are uncomfortable but they are necessary.

Always ensure hands are cleansed prior to putting on mask and also after you remove the mask. Please take care when wearing your IIR mask at work, if you do it right, it will protect you, your patients and your colleagues but if done badly, it will increase the risk that it is designed to reduce, as a team we need to look after each other. Stay safe.

If you are undertaking an aerosol generating procedure please contact the IPC Team to discuss practices which need to be in place during the procedure and for the hour following, ensure you have been fit tested for a respirator.

BE READY FOR WINTER INFECTIONS...KNOW HOW TO IDENTIFY AND WHAT ACTIONS TO TAKE

CORONAVIRUS Always consider but don't dismiss other infections. Remember protect yourself and others.



Don't forget to visit www.worcestershirehealth.nhs.uk for all resources linked to infection prevention and control!