

**INFECTION CONTROL STEERING GROUP
MEETING MINUTES
5TH JUNE 2009 9.30 – 12.30
FIELDEN HOUSE CONFERENCE ROOM**

Present : Chris Vale Harry Day Alison McKee Karen Walling Pat Hopkins (formerly Osliff) John Winnister Ian Lee Daniel Adams Nikki smith Jason Challen Trevor Hubbard Tony Crabtree Laila Abraham Marcus Davies David Hodgkinson Maureen Knight (Minutes)	Apologies : Ian Bullamore Andy Street John Selby Paul Williams Liam Lehane
ITEM	ACTION
1. Introductions and Apologies	
2. Minutes of Previous Meeting It was agreed that the minutes of the previous meeting held on 10 th February 2009 were a true and accurate record apart from Item 5b – DSO's and Infection Control Champions to audit stations and satellites and not NS	
3. Matters Arising	
a. Waste Section to be added to Infection Control Manual More kit and other items are still to be added. Also a decision on whether the Manual is Vehicle or Personal Issue is to be made. TH to progress	TH
b. Forms to accompany Clinical Waste Forms to accompany Clinical Waste must be completed by all stations and satellites. Not all stations are complying. TH to take up with AOM's and Area Health and Safety to promote within their areas.	TH
c. Orange Clinical Waste Bags A communication has been sent to all staff. Orange bags are now on the stock catalogue. Surplus yellow bags will be put to use in the Pandemic Flu Stockpile.	
d. Infection Control Responsibilities in JD's TH to meet with TC to discuss further.	TH/TC
e. Single Use Tourniquet Trial at Romford IL to check with Jane Worthington on progress.	IL

<p>f.</p> <p>g.</p> <p>h.</p> <p>i.</p> <p>j.</p> <p>k.</p>	<p>SPPP for Infection Control items Now approved, all orders raised.</p> <p>Linen and Sterile Equipment Storage Audit DSO's will carry out the audit. Adaptation of stores for adequate storage will be carried out where necessary. DA to check progress</p> <p>Implementation of NPSA guidelines meeting Meeting has taken place regarding the reinforcing the guidelines and training of Service cleaners and cleaning contractors regarding Infection Control. LSS have completed this for contractors. Service cleaners training is in progress.</p> <p>Management of Waste Policy CV is to liaise with TC on this.</p> <p>LA52's Needlestick Injuries / Infection Control Cases HS reported Needlestick injuries are occurring during VDI's and cleaning. There has been a case of the Laerdal Suction Unit blowing instead of sucking because it was connected incorrectly. It is the responsibility of crews to clean out this piece of equipment and not Make Ready. H & S are preparing a Bulletin to re-iterate this to staff. TH stated that the new style LSU has different connectors which make erroneous connections impossible. HD suggested KPI's for Root cause analysis.</p> <p>Review Of Infection Control Audit Covered under Item 8</p>	<p>DA</p> <p>CV</p> <p>HD</p>
<p>4.</p> <p>a.</p>	<p>Implementation of Ambulance Infection Control Guidelines</p> <p>TH brought samples of : Alcohol Hand Gel which will be personal issue. Disposable sleeve protectors. Single cannulation pack. Chloraprep – a Chlorhexidine pad for preparing emergency cannulation (this will eventually be included in the single cannulation pack). Clinell wet and dry wipes. IL enquired if training will be required for Chloraprep. TH confirmed there this would take an hour and the Infection Control Champions will be rolling this out.</p> <p>New Paramedics will have this included in their training. This should all be completed by August/September. IL enquired if this will cause confusion as hospitals where trained staff will be using one system and untrained staff will be using another. TH replied that it will all be recorded on the PRF. Pads should be disposed of in the sharps bin. Clinell Wet Wipes can be used on most surfaces and kill most bacteria, but not C-diff spores.</p>	

	<p>Dry wipes should used for this and any other wet spillages. Dry wipes are activated when they come into contact with liquid.</p> <p>The supplier will be fitting Wet wipe boxes on all vehicles. Spillage Kits will still stay on vehicles, and in the meantime D10 and blue roll should continue to be used.</p> <p>TH and AC will be promoting the above at Roadshows. Single use tourniquets will be dependant on trial results.</p>	
b.	<p>The Ambulance guidelines booklet sent out has caused confusion.</p> <p>Mainly with the section on jewellery and linen.</p> <p>The booklet states that all wrist and hand jewellery should be removed and all items of linen must be changed after every patient. Also, there is more than 1 version. TH stated that the booklet provided guidelines.</p> <p>This was a DoH not LAS publication.</p>	
c.	<p>Blankets may be changed at hospitals on a 1 for 1 basis. This could mean a lesser quality blanket being used.</p> <p>Disposable mattress covers to be investigated and costed.</p>	DA
5.	<p>Annual Infection Control Report to Trust Board</p> <p>The annual report has been approved by the SMG. It went to the Trust Board at the beginning of May.</p>	
6.	<p>Pandemic Flu Update</p> <p>Swine Flu is currently at level 5. There have been so far 420 cases with no deaths. The Fit testing kits have not yet been delivered. The kit consists of FFP3 Face Mask, Hood and Spray.</p>	
7.	<p>5 Moments</p> <p>TH ran through the 5 Moments for Hand Hygiene procedure.</p> <p>He distributed leaflets explaining the 5 moments procedure which are</p> <ol style="list-style-type: none"> 1. Before Patient Contact 2. Before Clean/Aseptic Procedure 3. After Body Fluid Exposure Risk 4. After Patient Contact 5. After Contact With Patient Surroundings 	
8.	<p>Quarterly Audits</p> <p>HD distributed the latest Premises Inspection Records. JC noted that the PTS list was out of date. TH, IL and JC to review the content of the Audit and report back at the next meeting.</p>	TH/IL/ JC
9.	<p>Education and Communication</p> <p>JC has prepared a PTS Infection Control Bulletin.</p> <p>IB is drafting a bulletin for the roll out of new kit. This will be added to the Induction Course package.</p> <p>Infection Control Champions are now being recruited.</p> <p>TH is looking for 1 person per complex and</p>	

	<p>representatives from corporate departments. They will perform audits and give training on all aspects of Infection Control.</p>	
<p>10.</p> <p>a.</p>	<p>Products</p> <p>D10 replacement A trial for Chemex is being carried out at Romford. It will then be tested at Croydon. Chemex appears to be a more effective cleaner than D10 and does not have to be diluted.</p>	<p>TH</p>
<p>b.</p>	<p>Disposable Stretcher Covers Covered under item 4</p>	
<p>c.</p>	<p>Towels CV and DA to get together to discuss possibilities. NHS Supplies should have towels on the catalogue.</p>	<p>CV/DA</p>
<p>d.</p>	<p>Clinical Wipes Covered under Item 4b</p>	
<p>11.</p>	<p>Facilities</p> <p>Sluices TH showed photographs of some extremely dirty sluices, and sluices where linen, sterile equipment and other items were stored next to them. TH is to form a small group to look at sluices and find out what will be required to rectify the situation. DA to talk to LSS to see if sluice cleaning could be incorporated into the Make Ready schedule. DA to include this as part of the new tender agreement.</p>	<p>TH</p> <p>DA</p> <p>DA</p>
<p>12.</p> <p>a.</p>	<p>Make Ready</p> <p>Swabbing / Clinical Waste PH enquired whether swabbing was carried out on a regular basis. CV confirmed that this was the case. Eclipse, who process the swabs are in the process of creating a portal to view the results on line. The possible purchase of APT Testing Monitor for spot checks to be investigated.</p>	
<p>b.</p>	<p>Cleaning of FRU/ECP Vehicles A SPPP has been approved for the Deep Cleaning of FRU's and PTS vehicles. This will commence on 6th July 2009. LSS are in the process of putting together a dedicated Deep Clean team. FRU's will be Deep Cleaned on a 4 monthly basis and PTS vehicles every 6 months. The day to day cleaning of FRU's is down to crews, IL requested a copy of the LSS FRU deep clean specification. MK to provide.</p>	<p>MK</p>

13.	<p>VOR Policy A crew changed into scrubs at a hospital having got their uniform dirty. They were then sent on a call in the scrubs. CV to take to the ADO group to review the policy.</p>	CV
14.	<p>Occupational Health Update HR have met with the Occupational Health provider. Although the overall KPI performance is acceptable the quality of customer care is not. Inoculations and Vaccine updates are not happening TC requested that any issues/concerns regarding Occupational Health be directed to him to progress</p>	
15.	<p>Infection Control Risks The Infection Control Risk Register is to be re-introduced to the group. Laila Abraham to bring to the next meeting.</p>	LA
16.	<p>Any Other Business Overshoes These are now available to order on the catalogue.</p> <p>Performance Accelerator DH ran through the Performance Accelerator which is an on line governance tool which captures audit details for both self assessment and internal/external auditors. This could be used in future Infection Control Audits/Risk reporting</p>	
<p>DATE OF NEXT MEETING 19TH AUGUST 2009 – 9.30 – 12.30 FIELDEN HOUSE CONFERENCE ROOM</p>		