St Andrew's Healthcare

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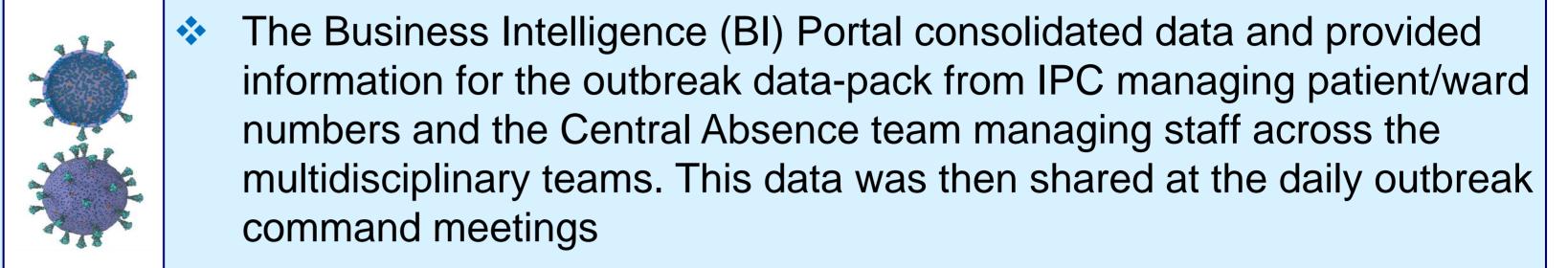
Improving the management of multiple outbreaks of Covid-19 within a mental health hospital using a multidisciplinary approach

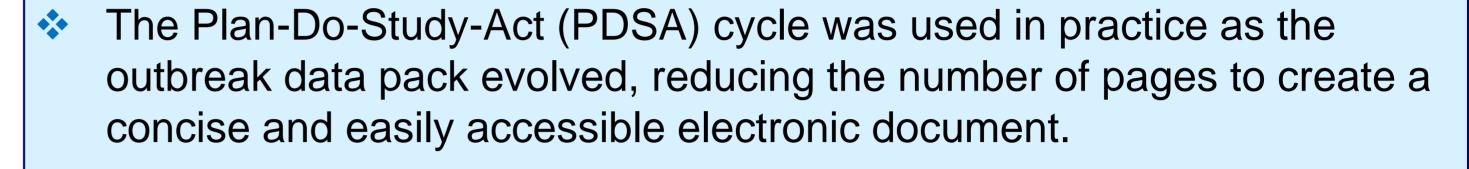
1. Introduction

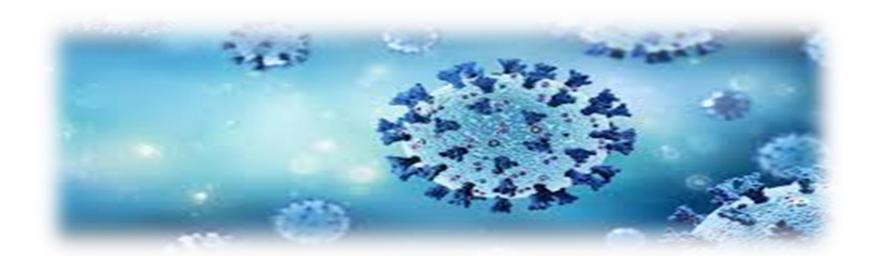
- The Health and Social Care Act (2008) states that healthcare facilities need to demonstrate systems to manage and monitor the prevention and control of infection.
- The Covid-19 pandemic put great stresses on healthcare providers, particularly with regards to staff sickness and track and trace requirements. As a mental health Charity that cares for a large number of inpatients, there was a need to ensure that the leadership team had all the information required in order to manage Covid outbreaks effectively.
- The situation had to be carefully managed to ensure patients still received the care, treatment and therapies they needed, while keeping both patients and staff safe. NHS Improvement England (NHSIE) provided support with strategic objectives and priorities in outbreak management
- The newly formed Infection Prevention and Control (IPC) team identified the Charity's Outbreak Management needed more in-depth and timely information in order to keep up to date with the evolving situation. Highlighting the benefits of developing a digital package incorporating outbreak data which could be updated daily and showed Covid positive staff and patients.

2. Methods

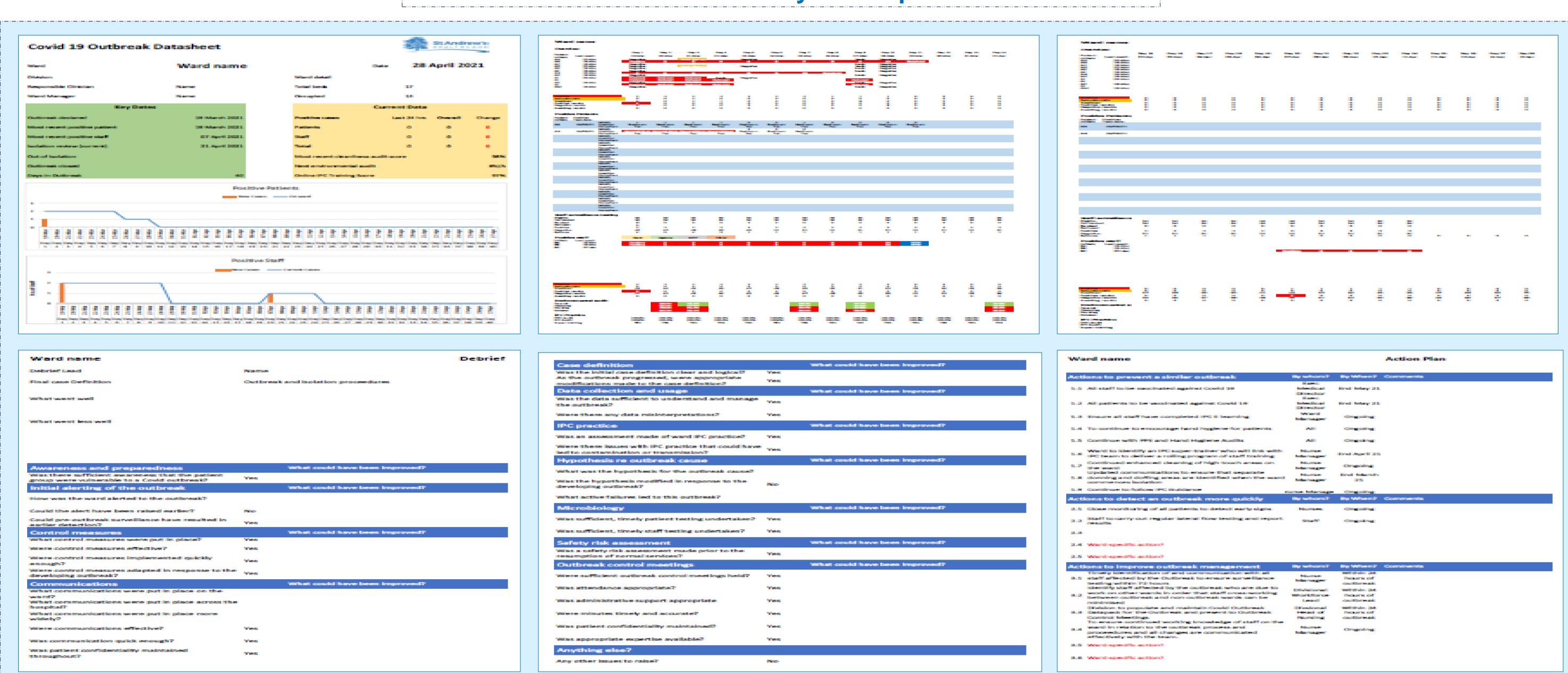
The IPC team worked in collaboration with the Central Absence and Operations teams to develop a data tool which facilitated information regarding virus transmission (e.g. number of patients testing positive, number with symptoms, staff absences) which could be monitored and shared with the wider multidisciplinary team (MDT).







Content contained in the newly developed Outbreak Pack



3. Results

- The data tool improved the process of monitoring outbreaks by ensuring wards needing additional support (e.g. due to staff absence/sickness) could be quickly identified.
- Improved communication links between the senior operations team and nurse managers with the outbreak information pack being updated daily which enabled the appropriate action plans to be put in place for wards in isolation.
- This provided assurance to the Director of IPC (DIPC) and NHSIE that outbreaks were being managed swiftly, safely and downgraded more quickly. The tool also allowed tracking of the amount of personal protective equipment (PPE) available.
- The implementation of the data pack provided a tool to effectively monitor the epi curve of multiple outbreaks from declaration to closure, resulting in a reduction in the length of outbreaks.

4. Discussion

- The tool has been shared across the Mental Health DIPC forum and is being modified for outbreaks of other non Covid infections within the Charity.
- The outbreak pack evidenced the need for on site Covid testing for staff as it was taking over 2 weeks to access off site. The IPC team were able to implement staff surveillance swabbing as a result.
- Staff are now able to access Covid testing within the Charity, rather than having to use external channels. This allows staff to get their PCR results considerably quicker and be back at work more swiftly. Staff reported this was much better for them and their patients.
- Having one document that is used MDT wide is more efficient and ensures collaborative working which reduces the need for multiple data requests across the organisation. While engaging all stakeholders including administration support, ensured the project flowed and was effective in practice.
- References: 1. Department of Health (2008) Health and Social Care Act 2008: code of practice on the prevention and control of infections.
 - 2. Public Health England (2020) COVID-19: investigation and initial clinical management of possible cases.