

Infection Prevention & Control Report to Trust Board

Meeting Date – 7th January 2021

1. Executive Summary

COVID-19

The Infection Prevention & Control (IP&C) Team continue to be significantly involved with the management of any suspected or confirmed cases of COVID-19, the continued development of COVID-19 pathways, contact tracing and processes and outbreak management. The IP&C Team are also required to continue to support Independent Sector care homes in the event of any declared outbreaks. As a result of the increased demands upon the Team and within the current IP&C resources, there are challenges in attending to other routine work.

Reduction Targets

The Department of Health for Northern Ireland (NI) has not yet issued new healthcare-associated infection reduction targets for 2020/21. These targets relate to *Clostridium difficile* (*C. difficile*) associated disease, Meticillin-Resistant *Staphylococcus aureus* (MRSA) bacteraemia and gram-negative bacteraemia (GNB), specifically *Escherichia coli*, *Klebsiella species* and *Pseudomonas aeruginosa*.

Current MRSA Bacteraemia Performance

Since the beginning of April 2020 five MRSA bacteraemia cases have been reported. Four are categorised as community-associated as they occurred less than 48 hours after admission to hospital and one is categorised as healthcare-associated as it occurred more than 48 hours after admission to hospital (definition used by the Public Health Agency [PHA]).

As of 24th December 2020, the total number of days since the last Trust hospital-associated MRSA bacteraemia is:

Altnagelvin Hospital – 780 days	(Last recorded case was in Ward 42)
South West Acute Hospital (SWAH) – 193 days	(Last recorded case was in Ward 8)
Tyrone County Hospital/ Omagh Hospital & Primary Care Complex (OHPCC) – 2165 days	(Last recorded case was in the Rehab Unit)

Current *C. difficile* Performance

So far this year 46 cases of *C. difficile* have been reported. 22 of the cases are classified as healthcare-acquired or associated as they occurred more than 72 hours after admission to hospital (definition used by the PHA). However, this is not always an accurate predictor of being healthcare-associated. The remainder (24) are classified as community-acquired as the patients presented with symptoms within a 72 hour period after admission.

Current GNB Performance

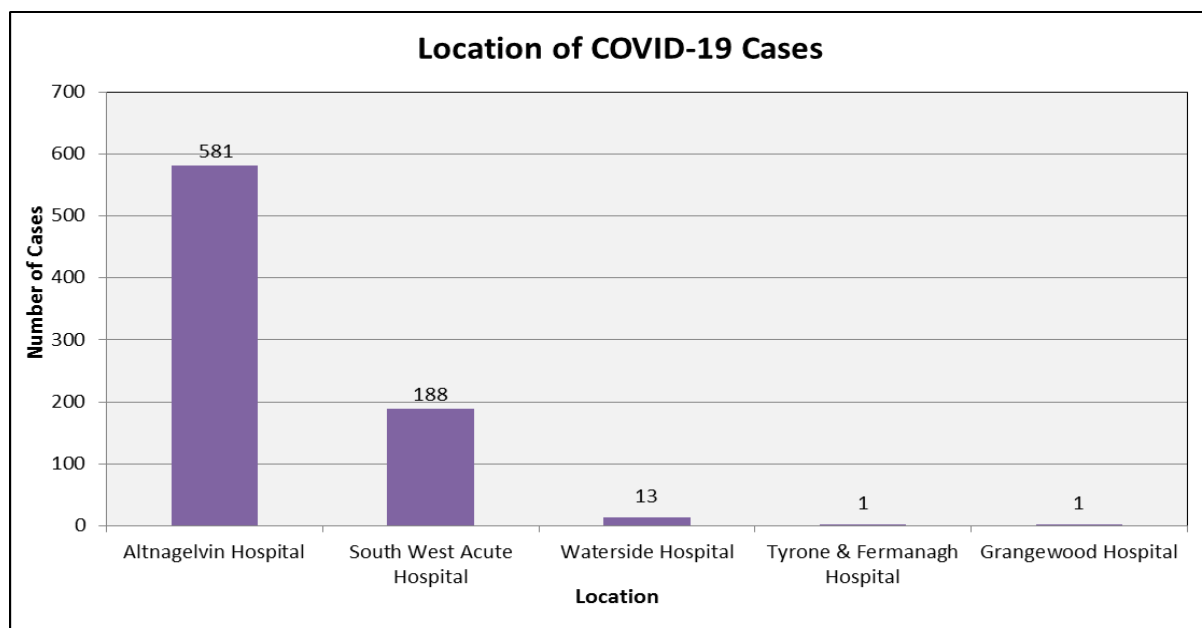
As of 24th December 2020, 24 healthcare-associated GNB cases have been reported.

2. Coronavirus (COVID-19)

COVID-19 Case Statistics

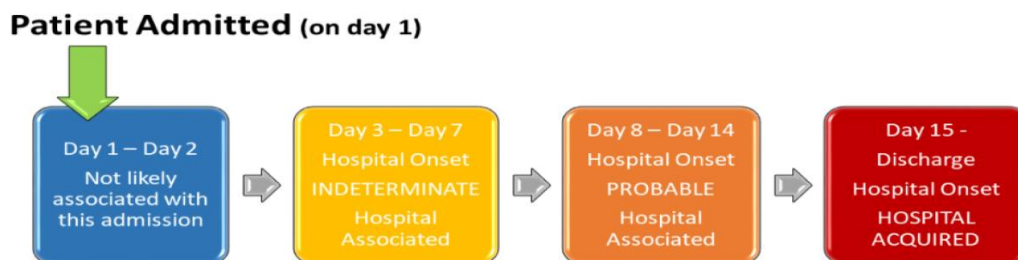
Data on the number of COVID-19 cases was initially collated from the Western Trust Tracker System, which started in March 2020. However, this system was later stopped. Thereafter the IP&C Team obtained this information by telephoning individual wards/ departments on a daily basis. Currently, the data is collected from daily lists of positive patients produced by the Altnagelvin Bronze Team and by interrogating various Trust systems, including Patient Centre, NI Electronic Care Record and Labs.

From March to 24th December 2020 there have been a total of 784 COVID-19 cases within the Western Trust (*number is only those cases which the IP&C Team have been informed about*). The cases were located at five hospital sites as shown in the chart below.



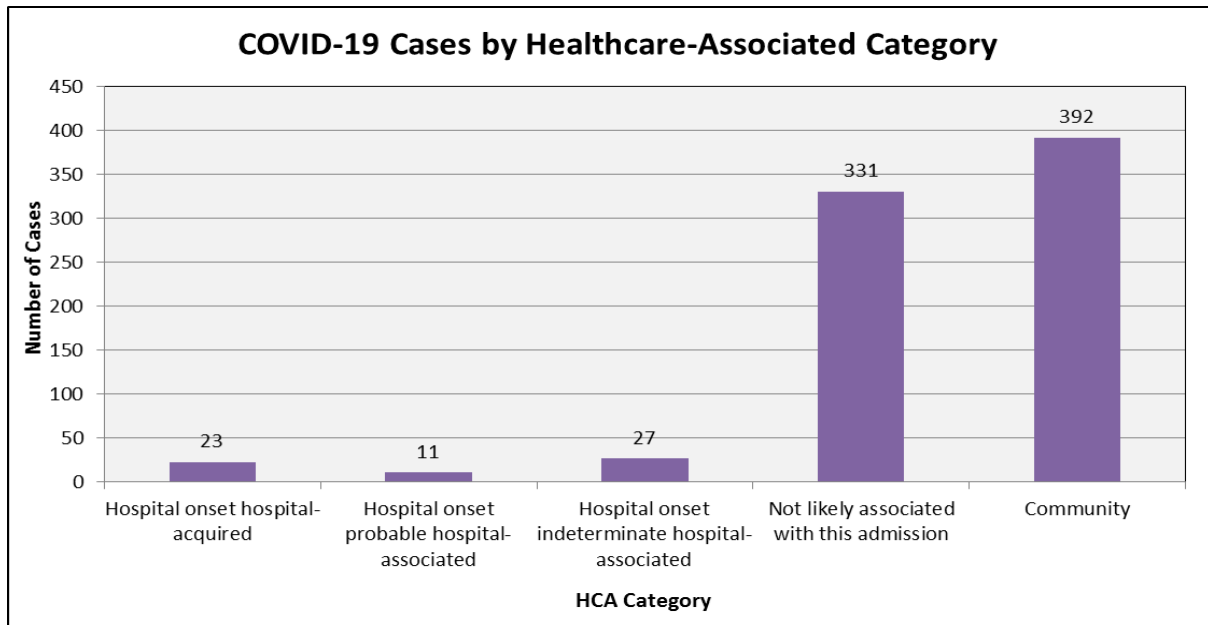
The PHA have introduced a new surveillance programme for healthcare-associated COVID-19 cases in NI. All laboratory-confirmed cases reported to the NI regional data warehouse (via local Health Protection Teams) from 26th February 2020 onwards are included. Duplicates (second positive \leq 42 days after first positive) and second episodes (positive $>$ 42 days after first positive) are removed. Each positive case is then linked by health and care number to a hospital admission, extracted from the Patient Administration System (PAS).

Cases are assigned to one of three healthcare-associated categories according to the number of days between the patient's test date and admission date, where the date of admission is defined as Day 1.



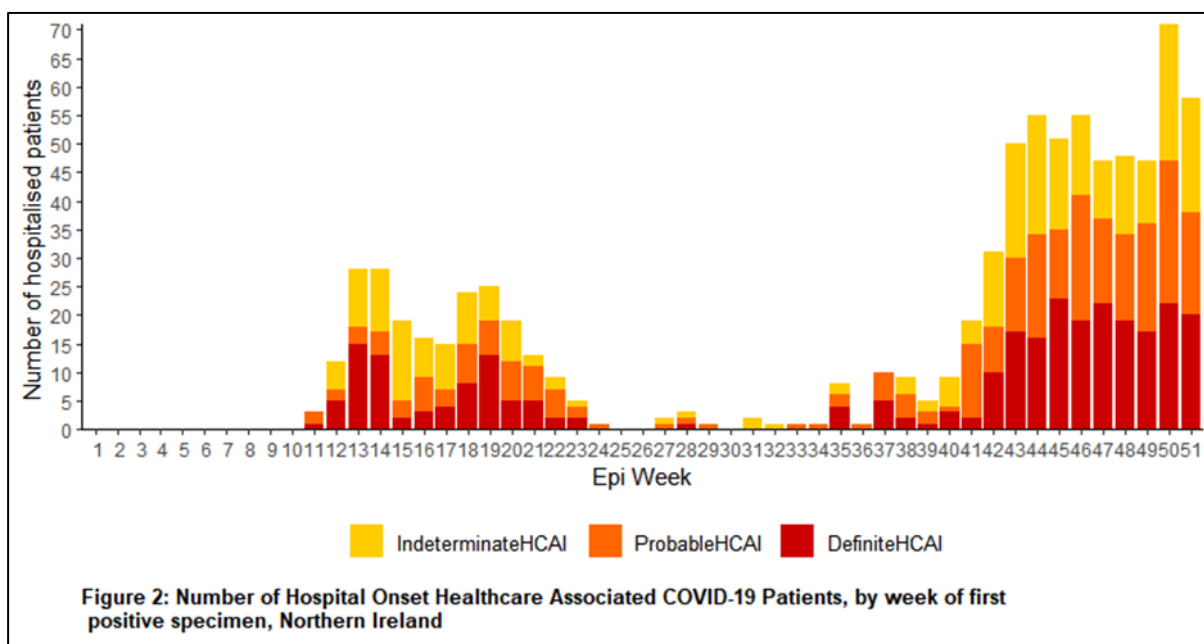
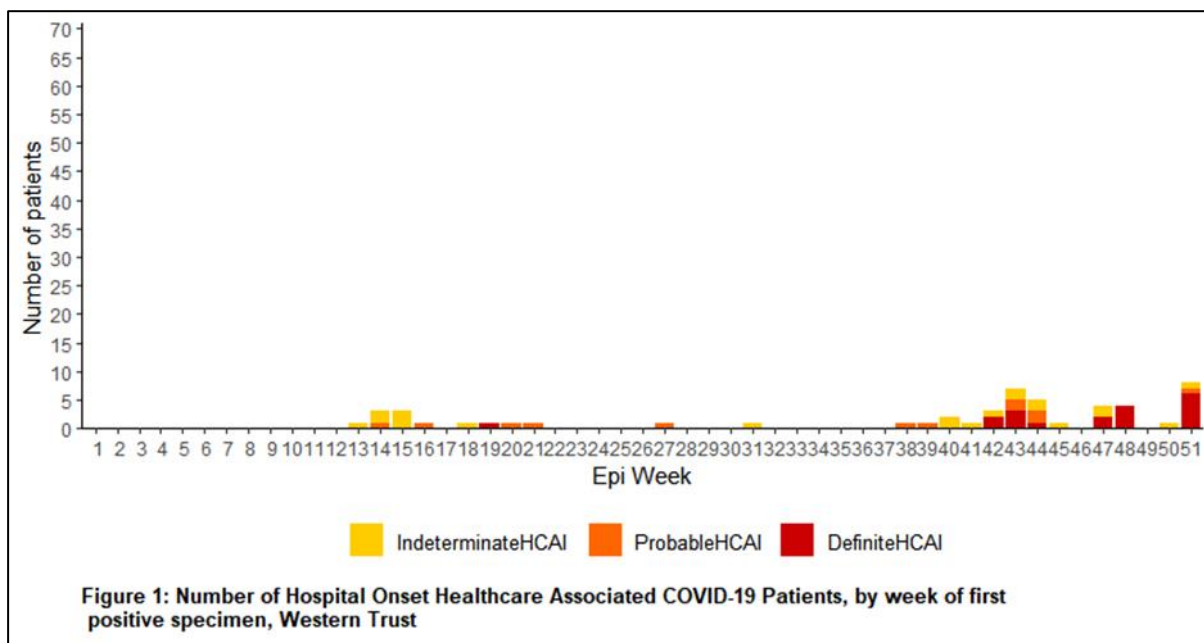
The IP&C Team have coded the 784 COVID-19 cases reported in the Western Trust according to the PHA healthcare-associated categorisation. The breakdown is shown in the

chart below. In this instance the Community category refers to cases where the test date occurred prior to the patient’s admission to hospital.



In mid-August the PHA began issuing a weekly surveillance bulletin to each Trust reporting the number of healthcare-associated COVID-19 cases. The most recent report covered the period up to 20th December 2020. Below are two graphs, taken from this report, which show data at the Trust and NI level.

NB: The bulletin is based on data routinely collected by the PHA, caveats and definitions, which may change as familiarity with the data improves. Because of this, and other issues (e.g. the recording of admissions for some hospitals on the PARIS system rather than PAS, missing/ incorrect patient identifiers which prevents linkage of results between the Virology and PAS datasets, etc.), the PHA’s figures do not tally with the Trust’s internal data. The IP&C Team have provided feedback to the PHA about the discrepancies and some have now been rectified. However, it has been confirmed that some other cases will not be included in the PHA’s figures because they fall outside the parameters of their surveillance definitions and processes. The PHA have acknowledged this as a limitation of their approach. The IP&C Team will continue liaising with the PHA regarding any discrepancies that arise in future bulletins.



Outbreak Management

COVID-19 outbreaks continue to be declared in Trust wards, departments and facilities. The IP&C Team and/ or Occupational Health are supporting the management of these incidents as applicable. Incident meetings are taking place and all IP&C measures have been instigated. Recently affected areas include:

NB: Closure of an outbreak is deemed to be 28 days from the last positive case.

Ward/ Department/ Facility	Month	Current Status of Outbreak
Thackeray Place Residential Home, Limavady	November 2020	Ongoing
Holly Lane Supported Living, Gransha	November 2020	Closed
Ward 5, Waterside Hospital (Greenhaw Lodge residents)	November 2020	Closed

Cytology Laboratory, Altnagelvin	November 2020	Closed
Gynaecology Secretaries, Altnagelvin	November 2020	Closed
Discharge/ Social Work Team, Altnagelvin	November 2020	Closed
Ward 3, Waterside Hospital	November 2020	Ongoing
Acute Care at Home Service, Derry	November 2020	Ongoing
Creggan Day Centre, Derry	November 2020	Closed
Ward 41 AGM, Altnagelvin	November 2020	Ongoing
Home Care Team, Fintona	November 2020	Ongoing
Killadeas Day Centre, Lisnaskea	December 2020	Closed
Seymour Gardens Residential Home, Derry	December 2020	Ongoing
Drumclay Transitional Care Unit, Enniskillen	December 2020	Ongoing
Ash Villa, Tyrone & Fermanagh Hospital	December 2020	Ongoing
Ward 24 AMU, Altnagelvin	December 2020	Ongoing

The IP&C Team are also required to continue to support Independent Sector care homes in the event of any declared outbreaks. There are a number of homes affected at present, including:

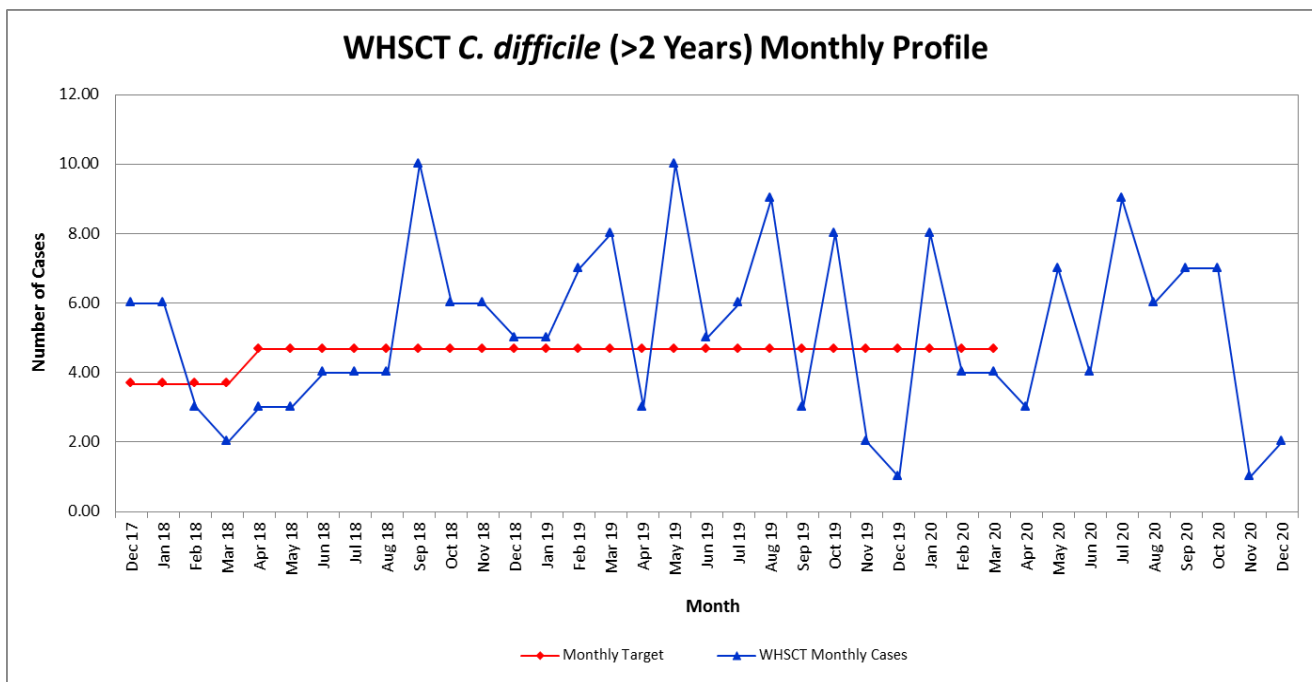
Care Home	Date PHA Notified	Current Status of Outbreak
County, Enniskillen	14/09/2020	Ongoing: Active
Meadowbank Care Home, Derry	13/10/2020	Over
Railway Court, Omagh	14/10/2020	Over
Millcroft, Enniskillen	17/10/2020	Over
Longfield Care Home, Eglinton	19/10/2020	Over
Daleview House, Derry	23/10/2020	Over
Woodmount, Strabane	25/10/2020	Over
Alexander House, Derry	28/10/2020	Over
Barnlee, Lisnaskea	29/10/2020	Over
Owen Mor Care Centre, Derry	31/10/2020	Over
Woodbank House, Omagh	03/11/2020	Over
Graan Abbey, Enniskillen	04/11/2020	Over
Three Rivers Care Home, Omagh	06/11/2020	Over
Edgewater Nursing Home, Derry	06/11/2020	Over
Meadow View, Enniskillen	07/11/2020	Over
Hillcrest, Omagh	12/11/2020	Over
Cornfield Care Centre, Limavady	18/11/2020	Ongoing: Active
Slieve Na Mon, Omagh	19/11/2020	Over
Parkview House, Castlederg	21/11/2020	Ongoing: Active
Ardlough, Derry	27/11/2020	Ongoing: Active
Graan Abbey, Enniskillen	08/12/2020	Ongoing: Active
Woodmount, Strabane	17/12/2020	Ongoing: Active
Culmore Manor Care Centre, Derry	17/12/2020	Ongoing: Active
Gortacharn, Lisnaskea	18/12/2020	Ongoing: Active

Support to these homes requires an on-site visit by a Senior IP&C Nurse. The IP&C Team are challenged to provide this due to the current COVID-19 surge within both acute and community settings, as well as the limited availability of Senior IP&C Nurses. Independent Sector visits are, therefore, being risk assessed and organised as capacity allows.

3. **C. difficile Performance**

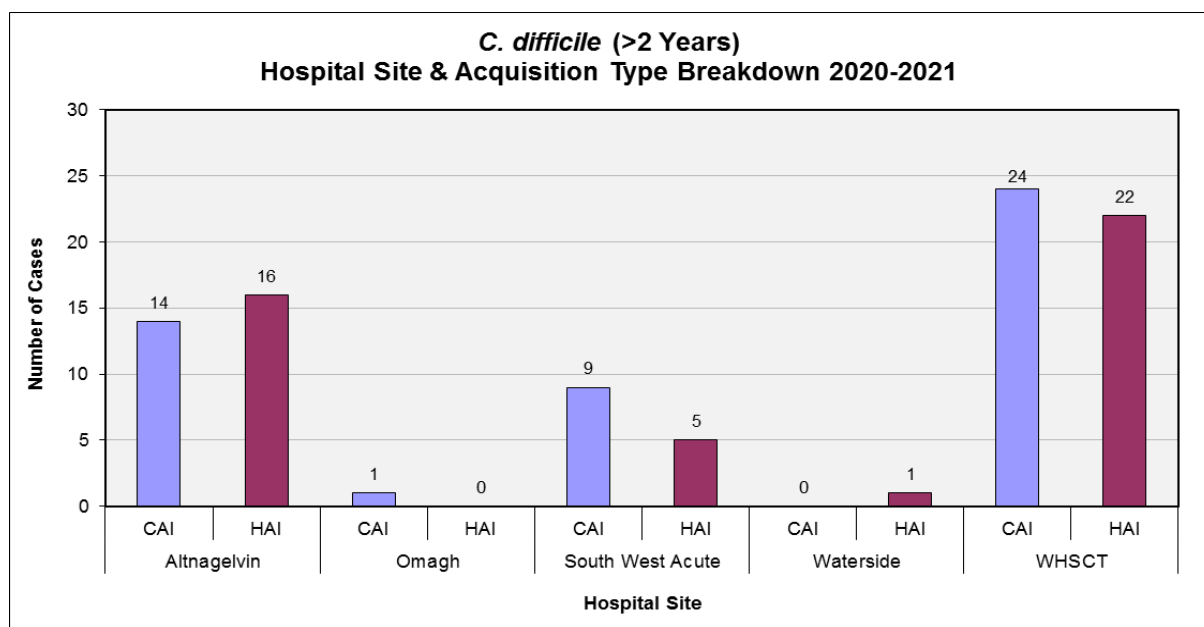
The new 2020/21 reduction target for *C. difficile* (≥ 2 years) has not yet been issued.

Since the beginning of April 2020 46 cases have been reported, with 24 of those being categorised as community-associated.

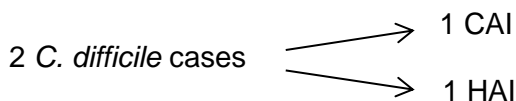


A breakdown of the cases by hospital site and acquisition type is given in the chart below.

Key:
CAI Community-associated infection
HAI Hospital-associated infection



Since the last Report to Trust Board, which contained figures as at 25th November 2020, there have been two new cases of *C. difficile* (breakdown below). A post-infection review (PIR) is required for one of these cases. This is currently pending as PIRs have been temporarily suspended due to the COVID-19 surge.



Preventable/ Non-Preventable

In respect of *C. difficile* cases occurring during 2020/21 a total of 12 PIRs were conducted prior to suspension of the process. These found that none of the cases were preventable, 11 were non-preventable and one was difficult to determine.

4. Pseudomonas

Pseudomonas aeruginosa is an opportunistic pathogen or coloniser, well known in the hospital environment. *Pseudomonas* is predominantly an environmental organism and is highly attracted to water sources. *Pseudomonas* is ubiquitous in the alimentary tract of humans and, therefore, carriage is normal and its presence is not indicative of infection. The term 'colonisation' is used to describe the identification of any organism without signs of infection. Specific groups of patients who are immunocompromised are at a higher risk of colonisation or infection than the normal population. The Trust has stringent measures in place regarding the surveillance and management of *Pseudomonas* in augmented care areas and participates in the PHA surveillance as detailed below.

Pseudomonas Surveillance (Augmented Care* Areas Only)

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2017/18	0	1	0	0	1	0	0	1	0	0	0	0	3
2018/19	0	0	1	1	0	0	0	0	1	0	0	0	3
2019/20	0	0	0	2	0	0	0	1	0	0	0	0	3
2020/21	0	0	0	2	0	0	0	0	1†				3†

* The PHA defines augmented care as NNICU, Adult ICU/ HDU, Renal, Oncology/ Haematology.

† These values are subject to change as the report was compiled prior to the end of the month/ year.

Since the beginning of April 2020 three *Pseudomonas* cases have been reported. One is categorised as community-associated and two as healthcare-associated.

The most recent healthcare-associated positive blood culture in an augmented care area pertains to an inpatient admission in Ward 50, Altnagelvin, in December 2020. All IP&C measures have been put in place. There have been no other positive patients in this area for over a year, nor have any recent water samples identified the presence of *Pseudomonas aeruginosa*. The water supply in the patient's room has been tested and the result is negative.

Prior to this, there had been no healthcare-associated positive blood cultures in augmented care areas since July 2019.

5. Antimicrobial Management Team (AMT)

The AMT met on 2nd December 2020. The following item was discussed:

- **Antimicrobial Dashboard** – The primary purpose of this dashboard currently is to gather data and facilitate audit participation by frontline staff. Ultimately a dashboard to showcase data is required. Currently the Business Informatics Team are awaiting the outcome of a request for funding from the Digital Rebuild Programme in order to achieve this. IT and the

Antimicrobial Pharmacist have worked on a prototype data collection SharePoint. This was demonstrated to the AMT. The audit data will be exportable to Excel for reports to be generated by individual wards. The Antimicrobial Pharmacist will be an administrator for the site to further develop this work and tailor the site to needs. The AMT decided the audit data collection SharePoint should be trialled by a small group (doctors and pharmacists) initially to refine the system and then it will be rolled out to each Directorate.

A power cut truncated discussion of subsequent agenda items.

6. Critical Care Device-Associated Infection Surveillance

Critical care device-associated infection surveillance commenced in June 2011. There have been no infections in the Trust for more than two years. The most recent infection recorded was a ventilator-associated pneumonia, which occurred in ICU, Altnagelvin, in October 2018.

Results, as of November 2020, are shown in the table below.

	Date of Last Recorded Case in Hospital		Hospital Rolling Average Infection Rate Per 1000 Device Utilisation Days		NI Rolling Average Infection Rate Per 1000 Device Utilisation Days
	Altnagelvin	SWAH	Altnagelvin	SWAH	
Ventilator-Associated Pneumonia	11/10/2018	21/09/2016	0.00	0.00	0.64
Catheter-Associated Urinary Tract Infection	Zero to date	23/07/2011	0.00	0.00	0.20
Central Line Associated Blood Stream Infection	Zero to date	11/03/2012	0.00	0.00	1.06

7. IP&C Nurse Independent Audits

The tables below show compliance on a number of IP&C key performance indicators for wards/ departments where audits have been completed most recently by the IP&C Team. Some scores are marked with (A), indicating that a number of audits took place during that month and an average score has been recorded. These audits are discussed through the normal governance arrangements, including a new pilot process to support the Chief Executive HCAI Accountability Forum at a monthly Corporate Management Team Huddle.

WARD 4 AURO, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene						85% (P)(A)			75%				
PPE						93% (A)			75%				
Organism Type													Total
MRSA Colonisation (HCAI only)			1				1						2
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)			1										1

WARD 5 PAEDIATRIC ASSESSMENT UNIT/ CHILDREN'S C-19, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene							100%	100%					
PPE							80%	88% (A)					
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 6 CHILDREN'S, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene						100%		100%					
PPE						100%		100%					
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 21 EOU, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene							83% (A)(P)	100% (A)					
PPE							100% (A)	93% (A)					
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 22 SPECIALIST MEDICINE, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene						88% (P)(A)	100% (A)	90% (P)(A)					
PPE						73% (A)	100% (A)	95% (A)					
<i>C. difficile</i>		50%		100%	50%	75% (A)							
<i>C. difficile</i> Care Pathway		Pass		Pass	Fail	Pass x 2							
Cleaning & Decontamination						43%							
Organism Type													Total
MRSA Colonisation (HCAI only)	2												2
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)						1							1

WARD 25 FOU, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene					56%	90% (A)(P)	81% (A)	67% (P)					
PPE						62% (A)	78% (A)	40%					
ANTT: Peripheral & Central IV Therapy					81%								
Commode							75% (A)						
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 26 RESPIRATORY MEDICINE, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene						77% (A)	79% (A)	100% (A)					
PPE						75% (A)	90% (A)	86% (A)					
<i>C. difficile</i>				100%									
<i>C. difficile</i> Care Pathway				Pass									
Organism Type													Total
MRSA Colonisation (HCAI only)									1				1
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)				1									1

WARD 31, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene						91% (A)	67% (A)	96% (A)					
PPE						57% (A)	87% (A)	94% (A)					
<i>C. difficile</i>			0%	67%		0%		33%					
<i>C. difficile</i> Care Pathway			Pass	Fail		Pass		Pass					
Organism Type													Total
MRSA Colonisation (HCAI only)						3							3
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)						1		1					2

WARD 32 ESU, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene		70%						88% (P)					
PPE								91%					
<i>C. difficile</i>			20%			33%							
<i>C. difficile</i> Care Pathway			Fail			Pass							
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 40, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene				82%	87% (A)	85% (A)	100%	93% (P)(A)					
PPE						72% (A)	100%	76% (A)					
<i>C. difficile</i>				40%	0%			0%					
<i>C. difficile</i> Care Pathway				Pass	Fail			Pass					
Cleaning & Decontamination				13%	53% (A)	92% (A)		59% (A)					
Commode				100%	100% (A)			100%					
Mattress					100%								
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)				2			1						3

WARD 41 GENERAL MEDICINE, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene								65% (A)	90% (A)				
PPE								74% (A)	90% (A)				
<i>C. difficile</i>		100%	100%	50% (A)		75% (A)							
<i>C. difficile</i> Care Pathway		Pass	Pass	Pass x 2		Fail x 1							
Peripheral Line Ongoing Care						71%							
ANTT: Peripheral Venepuncture							62%						
ANTT: Peripheral & Central IV Therapy							94%						
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)						1							1

WARD 41B, ALTNAGELVIN (Located in Ward 3)

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene									100% (A)				
PPE									75% (A)				
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 42, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene				90% (P)(A)			100%	95% (A)					
PPE							100%	95% (A)					
<i>C. difficile</i>					100%		100%						
<i>C. difficile</i> Care Pathway					Pass		Fail						
Organism Type													Total
MRSA Colonisation (HCAI only)			1					1					2
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)						1	1						2

WARD 43 GYNAECOLOGY, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene							100%		100%				
PPE							86%		100%				
<i>C. difficile</i>			50%			50%							
<i>C. difficile</i> Care Pathway			Pass			Fail							
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 47 MIDWIFERY LED UNIT, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene								75% (P)					
PPE								50%					
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 48 LABOUR, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene								100%					
PPE								100%					
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 49 NNICU, ALTNAGELVIN

Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene			85% (A)	74% (A)	79% (A)	94% (A)	85% (A)	92% (P)(A)					
PPE							100%						
4 Cloth Cleaning				Pass x 1 Fail x 1	Pass								
Organism Type													Total
MRSA Colonisation (HCAI only)		1	2		1	3							7
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

EMERGENCY DEPARTMENT, ALTNAGELVIN													
Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene							82% (A)	100%					
PPE							93% (A)	89%					
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

SPRUCE HOUSE, ALTNAGELVIN													
Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Hand Hygiene									94% (P)(A)				
PPE									76% (A)				
Organism Type													Total
MRSA Colonisation (HCAI only)													0
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 1 MSAU, SWAH													
Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
<i>C. difficile</i>					100%	100%		100%					
<i>C. difficile</i> Care Pathway					Pass	Pass		Pass					
Organism Type													Total
MRSA Colonisation (HCAI only)		1		1									2
MRSA Bacteraemia (HCAI only)													0
<i>C. difficile</i> (HCAI only)													0

WARD 5, SWAH												
Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
PPE								100%				
Organism Type												Total
MRSA Colonisation (HCAI only)							1	1				2
MRSA Bacteraemia (HCAI only)												0
<i>C. difficile</i> (HCAI only)					1	1						2

WARD 6, SWAH												
Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
<i>C. difficile</i>				50% (A)				80%				
<i>C. difficile</i> Care Pathway				Fail x 2				Pass				
Organism Type												Total
MRSA Colonisation (HCAI only)			1			1		2				4
MRSA Bacteraemia (HCAI only)												0
<i>C. difficile</i> (HCAI only)		1	1				1					3

WARD 3, WATERSIDE												
Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Hand Hygiene								60%	100% (A)			
PPE								73%	100% (A)			
Organism Type												Total
MRSA Colonisation (HCAI only)												0
MRSA Bacteraemia (HCAI only)												0
<i>C. difficile</i> (HCAI only)									1			1

THACKERAY PLACE RESIDENTIAL HOME, LIMAVADY												
Audit Type	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Hand Hygiene								83% (P)(A)	80% (P)			
PPE								78% (A)	100%			