



Central Manchester University Hospitals



NHS Foundation Trust

Rising to the Challenge

Our Journey

Gill Heaton

**Director of Patient Services/Chief Nurse
Director of Infection Prevention & Control**

October 2009





Our Hospitals.....

6 hospitals over 4 sites:

- University Dental Hospital
- Manchester Royal Infirmary
- St Mary's
- Royal Eye Hospital
- Booth Hall Children's Hospital
- Royal Manchester Children's Hospital

Our hospitals will be provided via the New Hospitals Development on the Oxford Road campus from Summer 2009





Facts & Figures.....

- Total turnover in excess of £600m
- Over 8,000 staff
 - 375 consultants
 - 2800 nurses and midwives
 - 450 under-graduate medical students
- c1400 beds
- 8 Clinical Divisions
 - Medicine (£170m)
 - Children's (£150m)
 - Surgery (£75m)
 - St Mary's (£70m)
 - Clinical & Scientific Support (£55m)
 - Royal Eye Hospital (£25m)
 - University Dental Hospital (£15m)
 - Research & Innovation (£25m)





Our Journey

Background: April – November 2006

- Annual health check & assurance framework identified infection control as an area of concern requiring immediate action
 - IC measures were demonstrating limited impact on clinical outcomes
 - Incidence of MRSA bacteraemia increasing
 - GRE rates amongst highest in the country
 - C Diff rates rising
 - Infection control seen as the business of the infection control team
 - Not on trajectory to meet required reduction in bacteraemia





- April 2006 - Plan put in place to address infection prevention and control which included:
 - Designating a new DIPC
 - Review of all IC policies and procedures and production of new IC manual
 - Reviewing all systems in place
 - Considering the available evidence and best practice
 - Review of infection control team structures
 - Divisional review process implemented

- July 06 - Implemented hand hygiene audits with clinical audit and training
- September 06 - Introduced new system of induction and mandatory training for all staff including infection control
- October 2006 . Commenced implementation of ANTT Trust wide
- November 2006 - Review of IP&C by D o H Improvement Review team





The board and DIPC have already identified a comprehensive range of areas for work and know what needs to be done. You have made an encouraging start in implementing improved performance and practice frameworks and there is evidence of the effective communication of these. However the urgency and drive for these changes has yet to register with many frontline staff particularly medical staff, and translate into their mainstream practice+

DoH Improvement Review Team December 2006





➤ **Focus on:**

- Practice
- Process
- Holding to account
- Change of culture





➤ Practice

Education & Training:

- Hand Hygiene
- ANTT
- Induction
- Mandatory training
- Prescribing

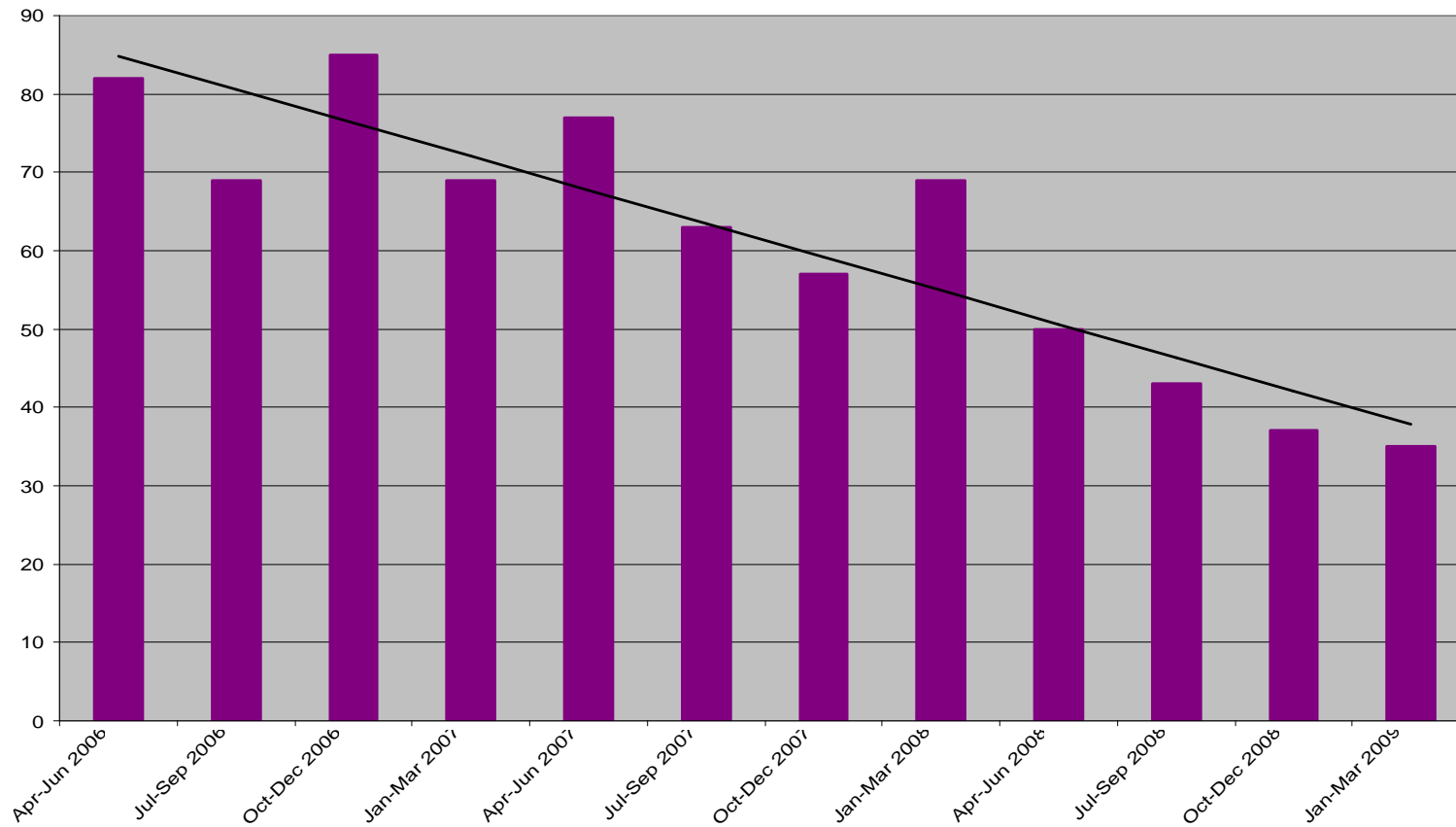
Screening

Care pathways



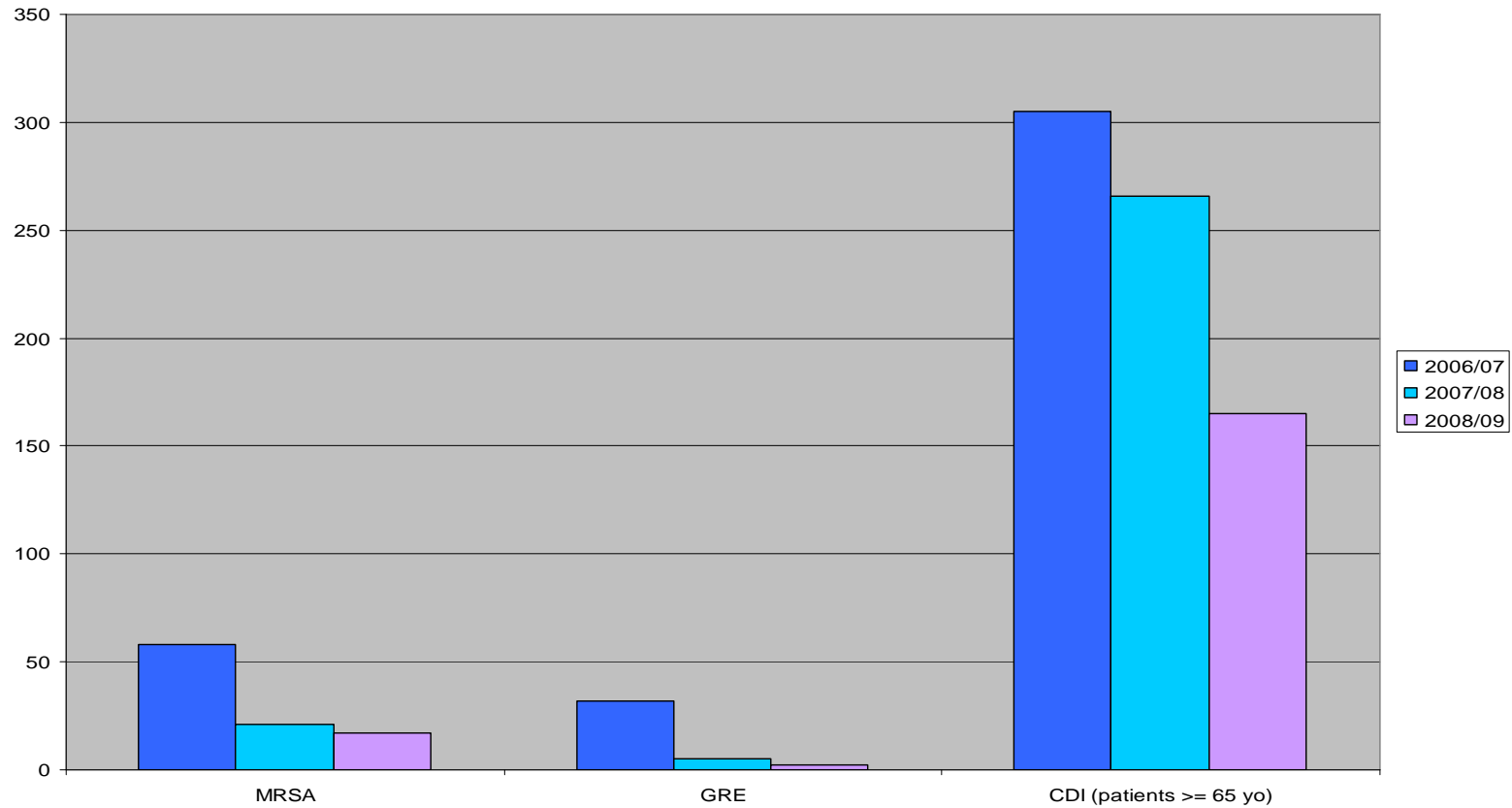


CDI cases reported to the HPA 2006-2009 (patients \geq 65 years old)



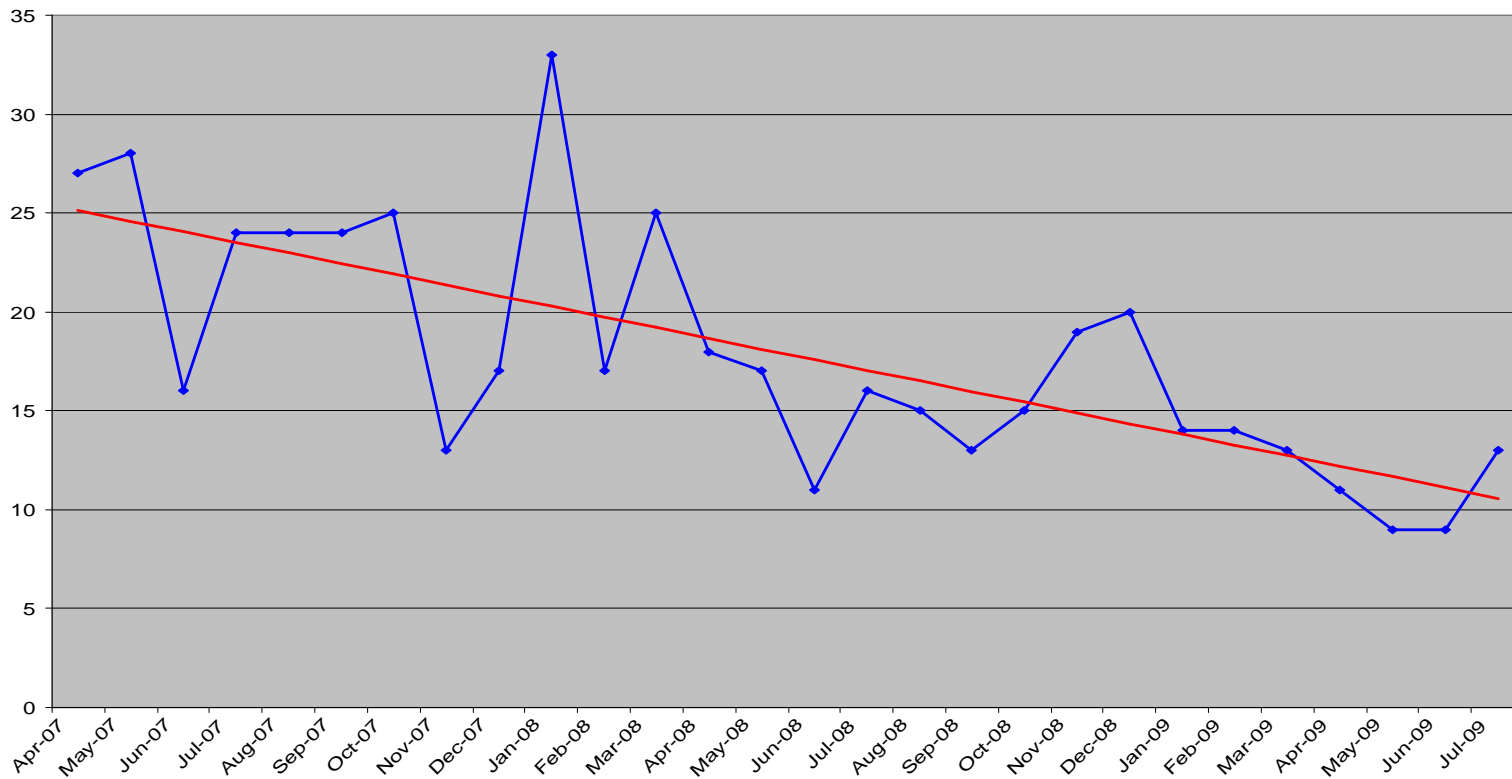


Trust performance by surveillance year (2006-2009)



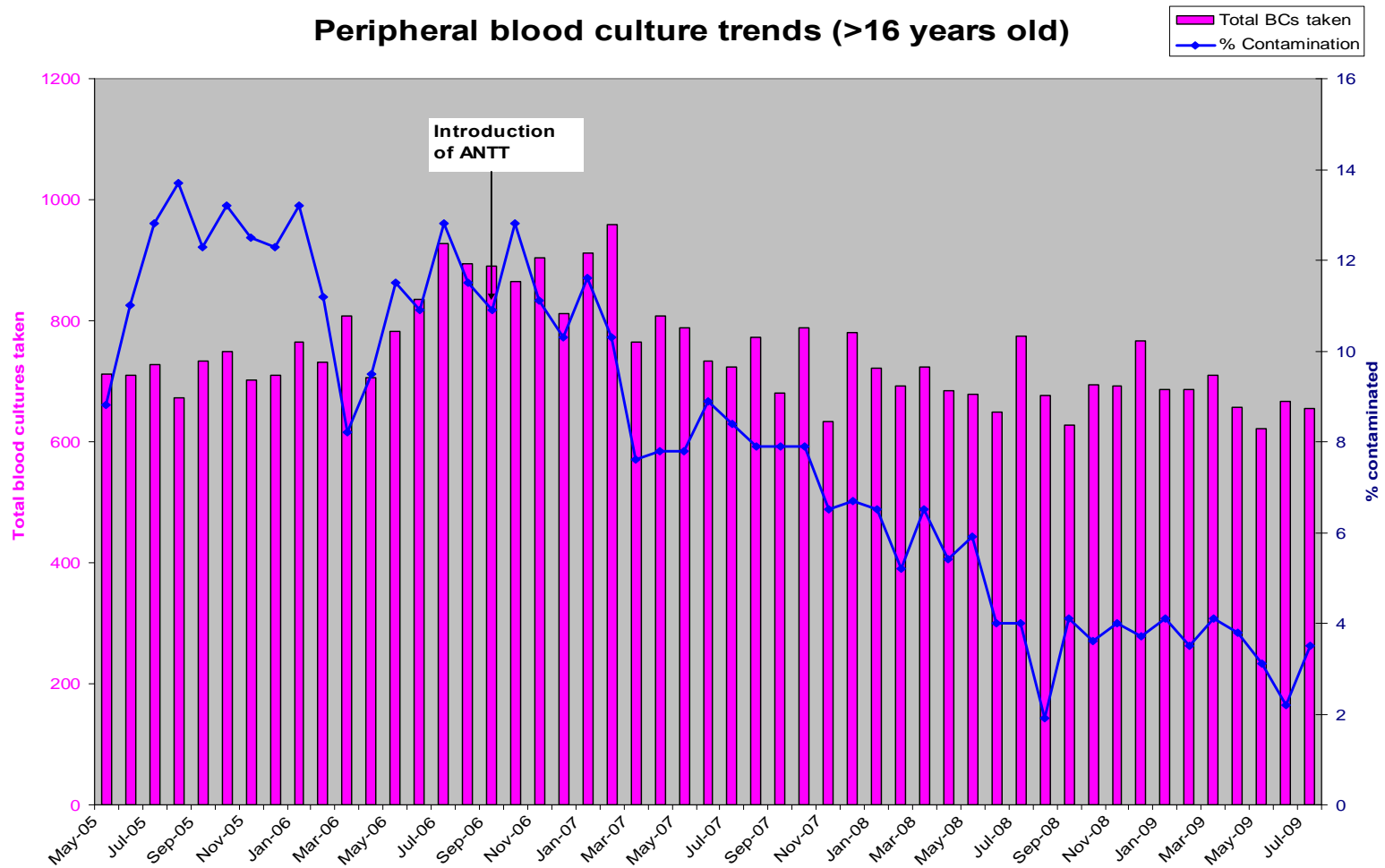


Number of CDI cases reported to the HPA attributable to CMFT (2007-2009)



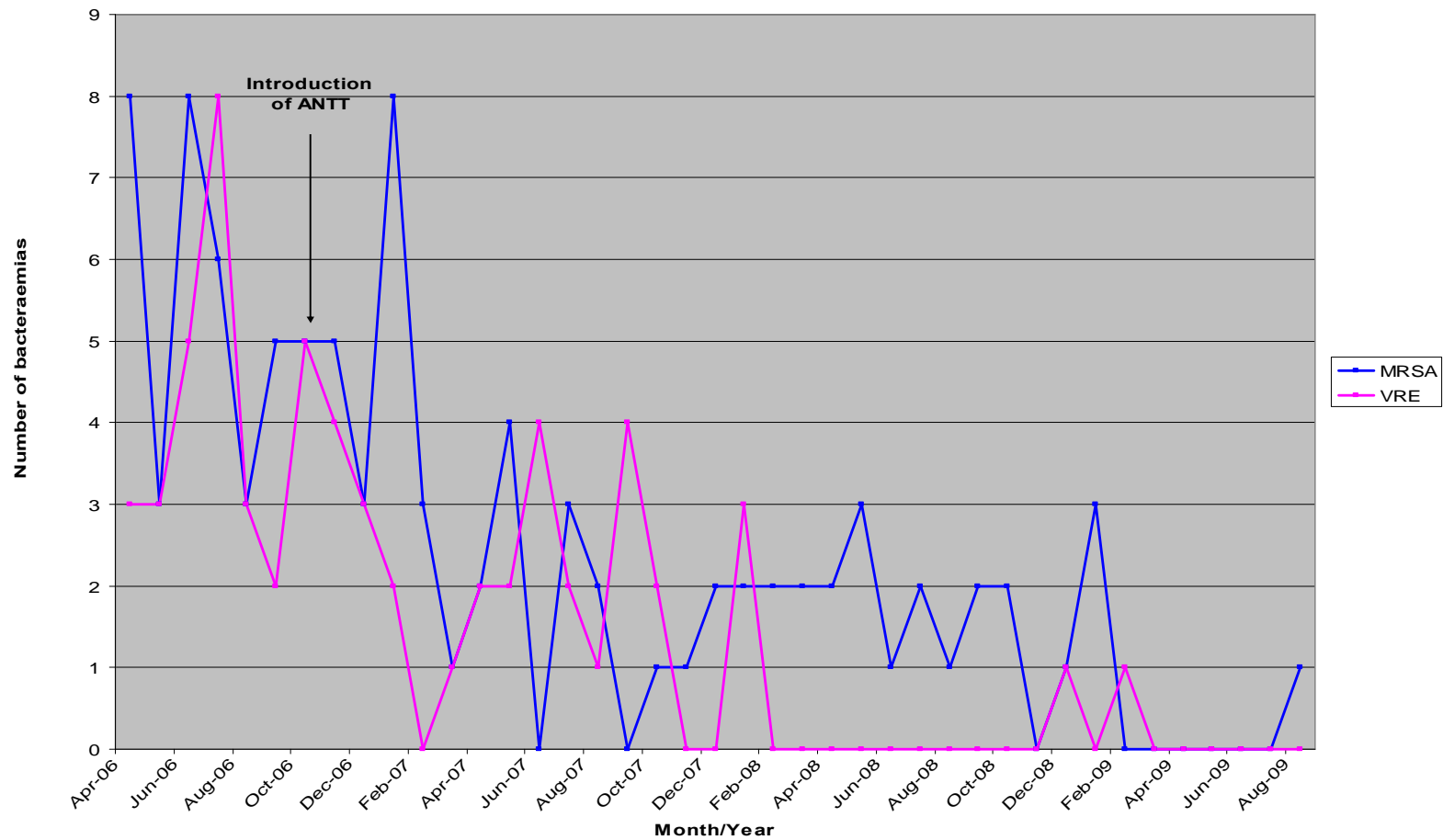


Peripheral blood culture trends (>16 years old)





MRSA and VRE bacteraemias April 2006 - August 2009





➤ Processes

- Policy
- Audit
- Reporting
- Information





➤ **Holding to Account**

- Key performance indicators
- Weekly performance review
- Action plans
- Feedback





Central Manchester University Hospitals



NHS Foundation Trust

➤ **Cultural Changes**

- Whole system approach
- Board to Ward
- Clarity of purpose
- Everyone's responsibility
- Share data
- Hold to account
- Take pride in our performance





Central Manchester University Hospitals



NHS Foundation Trust

Next Steps

- Mainstream
 - Further develop systems for managing medical staff training
 - Further embed systems within the divisional reporting & performance management framework
 - Broaden our scope
 - Keep high profile . Everybody's business
 - No magic bullet . more of the same ò ò

