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Unannounced Inspection Report

Infection Prevention and Control Inspections of Mental Health Services

East Ayrshire Community Hospital
NHS Ayrshire & Arran

13 February 2024

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About our inspection

Background

As part of a range of actions to support and improve mental health care services in the context of the COVID-19 pandemic and beyond, Scottish Government requested that Healthcare Improvement Scotland develop a proportionate and intelligence-led independent assurance programme for adult mental health units.

Our focus

The initial focus of this work will be on Infection Prevention and Control (IPC) to help services identify and minimise risks to safety and support ongoing improvements in quality of care within the current operating environment. We inspect using Healthcare Improvement Scotland Infection Prevention and Control Standards for Health and Social Care Settings, published May 2022. We take a risk based and intelligence-led approach to these inspections, drawing on a range of relevant data sources to target our inspection activity. We also use the Healthcare Improvement Scotland Quality Assurance Framework.

Further information about our methodology can be found on our website at:

https://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/mental_health_units.aspx

About the hospital we inspected

East Ayrshire Community Hospital is a community hospital in Ayr Road, Cumnock, Ayrshire. It is managed by NHS Ayrshire & Arran through the East Ayrshire Health and Social Care Partnership. The hospital provides community services including older people's services, has a 24 bedded General Practitioner Unit, a Specialised Dementia Unit with 12 beds, Outpatient Department, Physiotherapy Department, Occupational Therapy Department and a Community Health and Wellbeing Hub.

About this inspection

We carried out an unannounced inspection to East Ayrshire Community Hospital, NHS Ayrshire & Arran on Tuesday 13th February 2024.

We inspected the following areas:

- Marchburn ward – Complex Care Older Adult

During our inspection, we:

- inspected the ward and hospital environment

- observed staff practice and interactions with patients, such as during patient mealtimes
- spoke with ward staff, and
- accessed patients' health records, monitoring reports, policies and procedures.

As part of our inspection, we also asked NHS Ayrshire & Arran to provide evidence of its policies and procedures relevant to this inspection. The purpose of this is to limit the time the inspection team is onsite, reduce the burden on ward staff and to inform the virtual discussion session.

The findings detailed within this report relate to our observations within the areas of the hospital we inspected at the time of this inspection.

We would like to thank NHS Ayrshire & Arran and in particular, all staff in East Ayrshire Community Hospital for their assistance during our inspection.

A summary of our findings

Our summary findings from the inspection, areas of good practice and any requirements identified are highlighted as follows. Detailed findings from the inspection are included in the section 'What we found during this inspection'.

We observed the ward environment was clean and well maintained. Staff were knowledgeable about infection prevention and control and reported a good relationship with the infection prevention and control team.

Maintenance requests are completed in a timely manner and any delays are communicated to ward staff.

We observed good compliance with mandatory infection prevention and control training with completion rates of 98% across all staff groups.

We observed effective systems and processes in place for infection prevention and control and for obtaining patient and family feedback on the cleanliness of the environment.

An area for improvement identified relates to clinical waste not stored securely while awaiting uplift and general and clinical waste were stored together.

What action we expect the NHS board to take after our inspection

This inspection resulted in four areas of good practice and two requirements.

We expect NHS Ayrshire & Arran to address the requirements. The NHS board must prioritise the requirements to meet national standards. An improvement action plan has been developed by the NHS board and is available on the Healthcare Improvement Scotland website: www.healthcareimprovementscotland.org

Areas of good practice

Domain 5	
1	The ward was clean and well maintained (see page 5).
2	There was a positive relationship between ward staff and the infection prevention and control team with good responsive support provided (see page 5).
3	We observed good compliance with NHS Ayrshire & Arran's uniform policy (see page 7).
4	Local governance processes were effective for infection prevention and control with good staff knowledge (see page 10).

Requirements

Domain 5	
1	<p>NHS Ayrshire & Arran must ensure clinical waste is stored in a designated, safe and lockable area whilst awaiting uplift. General and clinical waste must be always segregated at the source (see page 8).</p> <p><i>This will support compliance with the National Infection Prevention and Control Manual (2022), Standard 6.1 of Healthcare Improvement Scotland's Infection Prevention and Control Standards (May 2022) and Scottish Health Technical Note 3 NHSScotland waste management guidance Part D: Guidance and example text for waste procedures 5.86 (February 2015).</i></p>
2	<p>NHS Ayrshire & Arran must ensure all hazardous cleaning products are securely stored and labelled appropriately, as per manufacturers guidelines (see page 8).</p> <p><i>This will support compliance with the Control of Substances Hazardous to Health (COSHH) Regulations (2002).</i></p>

What we found during this inspection

Domain 5 – Planning for quality

Implementation and delivery: How well do we manage and improve performance?

- Quality indicator 5.3 – Risk management and business continuity

Staff demonstrated a good knowledge of infection prevention and control. All staff we spoke with described the infection prevention and control team as being very supportive. The ward environment was visibly clean, and we observed good compliance with mandatory infection prevention and control training.

NHS Ayrshire & Arran have adopted the current version of the National Infection Prevention and Control Manual. This manual describes standard infection control precautions. There are 10 standard infection control precautions, including hand hygiene and the use of personal protective equipment, such as aprons and gloves. Staff inspectors spoke to were knowledgeable when discussing infection prevention and control.

There was no alcohol-based hand rub in communal areas due to the assessed risk to patients however, staff carried their own personal alcohol-based hand rub and were observed to be using as required. A ward level risk assessment was provided for this.

Personal protective equipment was readily available at the point of care. All patient rooms had a storage unit which contained all personal protective equipment required including a clinical waste bag to dispose of it. We observed that the ward had sufficient stocks of personal protective equipment.

Inspectors observed good compliance with NHS Ayrshire & Arran's uniform policy, which requires staff to ensure their hands and forearms are free of jewellery and sleeves are above the elbow.

Transmission-based precautions are additional precautions that should be applied when standard infection control precautions are not sufficient, for example, when staff are caring for patients with a known or suspected infection. Ward staff we spoke with were knowledgeable about additional precautions that must be implemented when patients have a suspected or known infection.

We observed sharps were managed in line with current guidance. All sharps' bins were labelled appropriately and less than three quarters full, in line with national guidance. Clinical waste bins were available within the ward and were not over filled.

Clean linen should be stored in a clean, designated area, preferably an enclosed space. Inspectors observed that clean linen was stored appropriately, and the room was clean and tidy with no items stored on the floor. Dirty linen, including patient's own clothing was stored in the sluice.

Clinical waste must be stored in a designated, safe, lockable area whilst awaiting uplift. We observed clinical waste was stored in an unsecure area and could potentially be accessed by members of the public and other unauthorised persons while awaiting uplift. Inspectors observed clinical waste bags being stored with domestic waste bags and dirty linen bags. Linen cages were in corridors accessible to the public. We highlighted this at the time of inspection to senior managers. We were provided evidence that, immediately following the inspection, a hazard identification and risk assessment in relation to the removal had been carried out and measures implemented to ensure that linen and waste are removed in separate bins. A requirement has been given to support improvement in this area.

Patient equipment inspected was clean and well maintained. The environment was clean and clutter free, with minimal wear and tear however, inspectors observed that the treatment room worktops and cupboard doors were damaged. We were informed by senior managers and the estates team that a refurbishment plan for the treatment room was due to commence in April and were provided with a copy of this.

Estates and facilities at East Ayrshire Community Hospital are managed by private contractor BAM Facilities Management through a private finance initiative however, this service will be passed back to NHS Ayrshire & Arran next year. We observed no issues with requests for repairs and staff reported systems and processes in place were effective.

Domestic staff we spoke with told inspectors that they felt well supported by their supervisors and that they had adequate equipment and time to complete their tasks. We observed daily cleaning schedules that were complete, accurate and reflected standards of cleanliness.

Chlorine-based cleaning solution was made up by domestic staff for the next shift however, we observed that contrary to manufacturer's instructions the solution did not have date/time/dilution noted. A requirement has been given to support improvement in this area.

NHS boards are required to have water safety systems in place for the control and management of risks posed by water borne organisms that may cause disease. NHS Ayrshire & Arran have systems in place to reduce water associated risks, including the flushing of infrequently used water outlets. Domestic staff complete water

flushing in the wards three times per week including infrequently used outlets. Reports provided confirmed that water safety processes were being followed.

Requirements

Domain 5 – Quality Indicator 5.3

- 1** NHS Ayrshire & Arran must ensure clinical waste is stored in a designated, safe and lockable area whilst awaiting uplift. General and clinical waste must be always segregated at the source (see page 8).

This will support compliance with the National Infection Prevention and Control Manual (2022), Standard 6.1 of Healthcare Improvement Scotland’s Infection Prevention and Control Standards (May 2022) and Scottish Health Technical Note 3 NHSScotland waste management guidance Part D: Guidance and example text for waste procedures 5.86 (February 2015).

- 2** NHS Ayrshire & Arran must ensure all hazardous cleaning products are securely stored and labelled appropriately, as per manufacturers guidelines (see page 8).

This will support compliance with the Control of Substances Hazardous to Health (COSHH) Regulations (2002).

Domain 5 – Planning for quality

Implementation and delivery: How well do we manage and improve performance?

- Quality indicator 5.4 – Audit, evaluations and research

NHS Ayrshire & Arran has systems and processes in place to monitor infection prevention and control. Effective infection prevention and control audit processes were in place. Patient and carer feedback was discussed at local meetings.

NHS Ayrshire & Arran has an infection prevention and control governance framework in place. There is a range of meetings scheduled which consider infection prevention and control data, audit outcomes and staff training. We observed minutes from infection prevention and control committees that provided infection prevention and control governance and oversight. Estates and facilities contractors attend the local senior charge nurse meetings where infection prevention and control is a standing agenda item. Contractor managers' report good communication and joint working with the infection prevention and control team.

We observed the infection prevention and control audit and facilities monitoring tool programmes were completed on schedule with high compliance scores. Inspectors were also provided with completed audits for hand hygiene and combined care assurance audit tools.

NHS Ayrshire and Arran infection prevention and control training is mandatory for all staff and is completed via online modules. We were told ward managers are responsible for monitoring staff compliance and that compliance rates are discussed at the infection prevention and control committee. We observed good compliance with mandatory training with completion rates of 98% and above. Ward staff informed us that all relevant infection prevention and control policies are readily accessible and changes to infection prevention and control guidance are communicated to all staff through email, at ward level handovers, staff meetings and via the safety brief.

The infection prevention and control standards include the importance of gaining feedback from patients and visitors on the cleanliness of the environment. Marchburn ward collects carer feedback through Care Opinion and have a 'you said, we did' board with patient feedback noted within the ward. Feedback is discussed at the East Ayrshire Community Hospital clinical governance meeting, including verbal and written feedback from family members.

Appendix 1 – List of national guidance

The following national standards, guidance and best practice were current at the time of this inspection. This list is not exhaustive.

- [COVID-19: Endorsed Guidance For NHS Scotland Staff and Managers on Coronavirus](#) (NHS Scotland, January 2022)
- [Health and Social Care Standards](#) (Scottish Government, June 2017)
- [Infection Prevention and Control Standards](#) (Healthcare Improvement Scotland, May 2022)
- [National Infection Prevention and Control Manual](#) (NHS National Services Scotland, February 2024)
- [Scottish Health Technical Note 3 NHSScotland waste management guidance Part D: Guidance and example text for waste procedures 5.86](#) (National Services Scotland, February 2015)
- [The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives](#) (Nursing and Midwifery Council, October 2018)
- [Quality Assurance Framework: September 2022](#) (Healthcare Improvement Scotland, September 2022)
- [Scottish Health Technical Memorandum 64 Sanitary Assemblies](#) (Health Facilities Scotland, December 2009)
- [The Control of Substances Hazardous to Health Regulation 2002](#) (legislation.gov.uk, December 2020)
- [Operating Framework](#) (Healthcare Improvement Scotland and Scottish Government, October 2022)

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