

NHS Lothian

Board Meeting
25 January 2012

Director of Public Health & Health Policy (Executive Lead)

HEALTHCARE ASSOCIATED INFECTION UPDATE

1 Purpose of the Report

- 1.1 The purpose of this report is to update the Board on progress and actions to manage and reduce Healthcare Associated Infection across NHS Lothian. Any member wishing additional information should contact the Executive Lead in advance of the meeting.

2 Recommendations

- 2.1 The Board is recommended to support the following activities, under the overall direction of the Director of Public Health and Health Policy, in delivering the agenda to reduce and manage Healthcare Associated Infection:
- Maintain enhanced weekly surveillance of Meticillin Resistant *Staphylococcus aureus* and Meticillin Sensitive *Staphylococcus aureus* Bacteraemia to target resources for a sustained reduction and continue the roll-out of the of the Meticillin Resistant *Staphylococcus aureus* screening programme.
 - Support the development of an escalation process for failure to comply with hand hygiene policy.
 - Increased compliance with best practice, as recommended by the Antimicrobial Management Team.
 - Recognise the need for ongoing work to maintain standards in anticipation of announced and unannounced Healthcare Environment Inspectorate visits.

3 Discussion of Key Issues

- 3.1 *Staphylococcus aureus* Bacteraemia: there were 21 episodes of *Staphylococcus aureus* Bacteraemia recorded in December 2011 (3 Meticillin Resistant *Staphylococcus aureus*, 18 Meticillin Sensitive *Staphylococcus aureus*), compared to 25 in November 2011 (0 Meticillin Resistant *Staphylococcus aureus*, 25 Meticillin Sensitive *Staphylococcus aureus*). Currently, NHS Lothian is on trajectory to achieve the Health Efficiency Access Treatment Target of 0.26 cases or fewer per 1000 acute occupied bed days by March 2013, with a current rate of 0.32.
- 3.2 *Clostridium difficile* Infection: there were 15 episodes of *Clostridium difficile* Infection in patients aged 65 or over in December 2011, compared to 23 in November 2011. Currently, NHS Lothian is on trajectory to achieve the Health Efficiency Access Treatment Target of 0.39 cases or fewer by 1000 acute bed days by March 2013, with a current rate of 0.35.

- 3.3 The sixteenth bi-monthly national hand hygiene audit report was published on 30/11/11. This indicated that NHS Lothian is achieving a hand hygiene compliance of 95%, matching the overall national average compliance. Hand hygiene education and training continues to be delivered to non-compliant staff groups as dictated by audit results. A standard operational procedure for escalation of non-compliance with hand hygiene has been developed and is currently in consultation phase with staff partnership and other key stakeholders. Discussions regarding revision of existing training for nurses in training and their supervisors are underway with education providers.
- 3.4 Meticillin Resistant *Staphylococcus aureus* National Screening Programme: to date, the Screening Programme has screened more than 5,000 patients. NHS Lothian is achieving over 90% compliance with the use of the clinical risk assessment, 100% compliance with the screening of identified high risk patients and 50% compliance with the use of the perineal screen. The compliance with perineal screening has been lower due to the number of patients refusing this screen, primarily medicine for the elderly patients; however, this entire group has been appropriately screened using the alternative nose and throat swabs. Roll-out has been completed; focus is now on robustness and capability.
- 3.4.1 Process development: a Key Performance Indicator reporting pilot is underway as part of a three board pilot for all boards in Scotland. Transition plans are in place for handover to the sustaining nursing team and this activity will be completed in February 2012.
- 3.4.2 Communications: ward level feedback continues and formal monthly reports are being developed. Hospital information road shows are continuing, as are workshops with Public Patient Fora.
- 3.5 Healthcare Environment Inspectorate: NHS Lothian were advised that during the announced Healthcare Environment Inspectorate Inspection at Liberton in December 2011 the Inspectors would be focusing on older people in acute care and as this was a test inspection for the Healthcare Environment Inspectorate a report was not expected. However, it is now understood that NHS Lothian will be provided with a private report which may be subject to Freedom of Information enquiries. The sixteen week Action Plan update for the Unannounced Inspection to the Royal Infirmary Edinburgh was returned to the Healthcare Environment Inspectorate prior to the deadline on 22/12/11.
- 3.6 Antimicrobial Management Team: in clinical areas where Empirical Prescribing Indicators are measured, compliance with guidelines is at target level (95% compliance with Guidelines) for the Royal Infirmary Edinburgh but below the target level for the Western General Hospital. Documentation of indication for antibiotic treatment remains at the target level of 95% documentation of indication for both the Western General Hospital and the Royal Infirmary Edinburgh. For surgical prophylaxis, the data collection focused on colorectal surgery. Compliance with the Surgical Prophylaxis Policy is currently below target level but administration of single dose antibiotic prophylaxis is at the target level (95% compliance with Guidelines and administration of a single dose).
- 3.6.1 Antibiotic expenditure: the total expenditure for 2011/12 is down 23% from the same period in 2010/11. There appears to be an increase in expenditure on oral agents and a decrease in parenteral agents. Reducing the use of parental agents supports efforts to reduce *Staphylococcus aureus* Bacteraemias.

- 3.7 Domestic Services: work is ongoing around the movement from Patient Environment Audit Team Audits to Patient Experience Quality Indicators Audits, with a pilot audit scheduled for 31/1/12.

4 Key Risks

- 4.1 The key risks associated with the recommendations are:
- *Staphylococcus aureus* Bacteraemia increases the burden of illness, the risk of additional treatment and an extended stay in hospital.
 - Consideration of bed allocation and patient movement has to be given to those patients identified as colonised with Meticillin Resistant *Staphylococcus aureus* as part of the Meticillin Resistant *Staphylococcus aureus* screening programme.
 - Failure to comply with hand hygiene increases the potential risk of transmission of infection.
 - Usage of high risk antimicrobials has the potential to increase the risk of *Clostridium difficile* Infection.
 - There is the potential for Healthcare Environment Inspectorate inspectors to find adverse areas of cleanliness or standards of practice, which could lead to adverse publicity for NHS Lothian and loss of public/patient confidence.

5 Risk Register

- 5.1 The Healthcare Associated Infection Corporate Risk Register is currently graded high. The risk register covers norovirus outbreaks and escalation, hand hygiene, Health Efficiency Access Treatment targets, Health Protection Scotland targets, decontamination issues and impact on reputation.

6 Impact on Health Inequalities

- 6.1 There have been no specific issues with the Equality Diversity Impact Assessment as Healthcare Associated Infection is an ongoing issue. However, infection with the organisms used as markers for Healthcare Associated Infection is more common in patients with co-morbidities, diabetes and alcohol problems. As these are socio-economically patterned, reducing the burden of Healthcare Associated Infection will reduce the excess burden of avoidable disease in patients from these groups.

7 Impact on Inequalities

- 7.1 Healthcare Associated Infection is more common in patients with co-morbidities, diabetes and alcohol problems. Accordingly, changes made are reducing the burden of Healthcare Associated Infection, which falls disproportionately on groups protected by equalities legislation.

8 Involving People

- 8.1 Patient public representatives are actively involved during the Healthcare Environment Inspectorate inspections, with one member sitting on the Healthcare Environment Inspectorate Steering Group. Other patient public representatives sit on the Infection Control Committees (Lothian Infection Control Advisory Committee, Acute and Community).

9 Resource Implications

- 9.1 The excess cost of each episode of *Staphylococcus aureus* Bacteraemia and *Clostridium difficile* Infection is variable but estimated to be between £4,000 and £15,000. This is contributed to by increased length of stay and additional treatment required.

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19 January 2012
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List of Appendices

Appendix 1: Scottish Government Health Department Record Cards for NHS Lothian

Healthcare Associated Infection Reporting Template (HAIRT)

Section 1 – Board Wide Issues

This section of the HAIRT covers Board wide infection prevention and control activity and actions. For reports on individual hospitals, please refer to the 'Healthcare Associated Infection Report Cards' in Section 2.

A report card summarising Board wide statistics can be found at the end of section 1

Key Healthcare Associated Infection Headlines for November 2011

- During December 2011 there were 21 episodes of SAB recorded in NHS Lothian (3 MRSA, 18 MSSA)
- There were 15 episodes of CDI in patients aged 65 or over in December 2011

Staphylococcus aureus (including MRSA)

Staphylococcus aureus is an organism which is responsible for a large number of healthcare associated infections, although it can also cause infections in people who have not had any recent contact with the healthcare system. The most common form of this is Meticillin Sensitive *Staphylococcus aureus* (MSSA), but the more well known is MRSA (Meticillin Resistant *Staphylococcus aureus*), which is a specific type of the organism which is resistant to certain antibiotics and is therefore more difficult to treat. More information on these organisms can be found at:

Staphylococcus aureus : [Hhttp://www.nhsinform.co.uk/Health-Library/Articles/S/staphylococcal-infections/introduction](http://www.nhsinform.co.uk/Health-Library/Articles/S/staphylococcal-infections/introduction)

MRSA: [Hhttp://www.nhsinform.co.uk/Health-Library/Articles/M/mrsa/introduction](http://www.nhsinform.co.uk/Health-Library/Articles/M/mrsa/introduction)

NHS Boards carry out surveillance of *Staphylococcus aureus* blood stream infections, known as bacteraemias. These are a serious form of infection and there is a national target to reduce them. The number of patients with MSSA and MRSA bacteraemias for the Board can be found at the end of section 1 and for each hospital in section 2. Information on the national surveillance programme for *Staphylococcus aureus* bacteraemias can be found at:

[Hhttp://www.hps.scot.nhs.uk/haic/sshaip/publicationsdetail.aspx?id=30248](http://www.hps.scot.nhs.uk/haic/sshaip/publicationsdetail.aspx?id=30248)

There were 21 episodes of *Staphylococcus aureus* Bacteraemia recorded in December 2011 (3 Meticillin Resistant *Staphylococcus aureus*, 18 Meticillin Sensitive *Staphylococcus aureus*), compared to 25 in November 2011 (0 Meticillin Resistant *Staphylococcus aureus*, 25 Meticillin Sensitive *Staphylococcus aureus*). Currently, NHS Lothian is on trajectory to achieve the Health Efficiency Access Treatment Target of 0.26 cases or fewer per 1000 acute occupied bed days by March 2013 with a current rate of 0.32.

Clostridium difficile

Clostridium difficile is an organism which is responsible for a large number of healthcare associated infections, although it can also cause infections in people who have not had any recent contact with the healthcare system. More information can be found at:

[Hhttp://www.nhsinform.co.uk/Health-Library/Articles/C/clostridium-difficile/introduction](http://www.nhsinform.co.uk/Health-Library/Articles/C/clostridium-difficile/introduction)

NHS Boards carry out surveillance of *Clostridium difficile* infections (CDI), and there is a national target to reduce these. The number of patients with CDI for the Board can be found at the end of section 1 and for each hospital in section 2. Information on the national surveillance programme for *Clostridium difficile* infections can be found at:

[Hhttp://www.hps.scot.nhs.uk/haic/sshaip/clostridiumdifficile.aspx?subjectid=79](http://www.hps.scot.nhs.uk/haic/sshaip/clostridiumdifficile.aspx?subjectid=79)

There were 15 episodes of *Clostridium difficile* Infection in patients aged 65 or over in December 2011, compared to 23 in November 2011. Currently, NHS Lothian is on trajectory to achieve the Health Efficiency Access Treatment Target of 0.39 cases or fewer by 1000 acute bed days by March 2013 with a current rate of 0.35.

Hand Hygiene

Good hand hygiene by staff, patients and visitors is a key way to prevent the spread of infections. More information on the importance of good hand hygiene can be found at:

[Hhttp://www.washyourhandsofthem.com/](http://www.washyourhandsofthem.com/)

NHS Boards monitor hand hygiene and ensure a zero tolerance approach to non compliance. The hand hygiene compliance score for the Board can be found at the end of section 1 and for each hospital in section 2. Information on national hand hygiene monitoring can be found at:

[Hhttp://www.hps.scot.nhs.uk/haic/ic/nationalhandhygienecampaign.aspx](http://www.hps.scot.nhs.uk/haic/ic/nationalhandhygienecampaign.aspx)

The 16th bi-monthly national hand hygiene audit report was published on 30/11/11. This indicated that NHS Lothian is achieving a hand hygiene compliance of 95%, matching the overall national average compliance. Hand hygiene education and training continues to be delivered to non compliant staff groups as dictated by audit results.

A standard operational procedure for escalation of non compliance with hand hygiene has been developed and is currently in consultation phase with Staff partnership and other key stakeholders.

Cleaning and the Healthcare Environment

Keeping the healthcare environment clean is essential to prevent the spread of infections. NHS Boards monitor the cleanliness of hospitals and there is a national target to maintain compliance with standards above 90%. The cleaning compliance score for the Board can be found at the end of section 1 and for each hospital in section 2. Information on national cleanliness compliance monitoring can be found at:

[Hhttp://www.hfs.scot.nhs.uk/online-services/publications/haic/](http://www.hfs.scot.nhs.uk/online-services/publications/haic/)

Healthcare environment standards are also independently inspected by the Healthcare Environment Inspectorate. More details can be found at:

[Hhttp://www.nhshealthquality.org/nhsqis/6710.140.1366.html](http://www.nhshealthquality.org/nhsqis/6710.140.1366.html)

Work is ongoing around the movement from Patient Environment Audit Team (PEAT) Audits to Patient Experience Quality Indicators (PQI) Audits with a pilot audit taking place on 31st January 2012.

Outbreaks

Norovirus

A point prevalence report is submitted weekly to Health Protection Scotland and published on their website. Within NHS Lothian the first case of norovirus outbreak for season 2012-2013 was recorded at the WGH during August 2011. To date there have been 24 incidents of gastro-enteritis investigated in NHS Lothian. Of these, norovirus has been confirmed in six (25%) of the incidents by the Virology laboratory. In the remaining 18 (75%) the cause was not identified. This was due to norovirus not being detected or no samples received from affected patients or samples not yet tested by the laboratory.

Other HAI Related Activity

Healthcare Environment Inspectorate

NHS Lothian were advised that during the announced Healthcare Environment Inspectorate Inspection at Liberton in December 2011 the Inspectors would be focusing on Older People in Acute Care and as this was a test inspection for the Healthcare Environment Inspector a report is not expected. The Sixteen Week Action Plan Update for the Unannounced Inspection to the Royal Infirmary of Edinburgh was returned to the Healthcare Environment Inspectorate prior to deadline on 22nd December 2011.

Antimicrobial Management Team update

In clinical areas where Empirical Prescribing Indicators are measured, compliance with guidelines is at target level (95% compliance with Guidelines) for the Royal Infirmary of Edinburgh but is below the target level for the Western General Hospital. Documentation of indication for antibiotic treatment remains at the target level of 95% documentation of indication for both the Western General Hospital and the Royal Infirmary of Edinburgh. For surgical prophylaxis, the data collection focused on colorectal surgery. Compliance with the Surgical Prophylaxis Policy is currently below target level but administration of single dose antibiotic prophylaxis is at the target level (95% compliance with Guidelines and administration of a single dose).

Antibiotic expenditure

The total expenditure for 2011/12 is down 23% from the same period in 2010/11. There appears to be an increase in expenditure on oral agents and a decrease in parenteral agents. Reducing the use of parental agents supports efforts to reduce *Staphylococcus aureus* Bacteraemias.

Meticillin Resistant *Staphylococcus aureus* National Screening Programme

To date the Screening Programme has screened more than 5000 patients. NHS Lothian are achieving over 90% compliance with the use of the clinical risk assessment, 100% compliance with the screening of identified high risk patients and 50% compliance with the use of the perineal screen. The compliance with perineal screening has been lower due to the number of patients refusing this screen, primarily medicine for the elderly patients; however, this entire group has been appropriately screened using the alternative nose and throat swabs. Rollout has been completed; focus is now on robustness and capability.

Process development: KPI reporting pilot underway as part of a three board pilot for all boards in Scotland. Transition plans in place for handover to sustaining nursing team and this activity will be completed in February 2012.

Communications: Ward level feedback continues and formal monthly reports being developed. Hospital information road shows continuing as are workshops with PPFs.

NHS Lothian

SAB There were 21 SAB recorded during December 2011 (3 MRSA & 18 MSSA). The lowest number recorded in the last 12 month period is 14 (June 2011).

CDI There were 26 CDI recorded in December 2011, 15 were in aged 65 & over. February 2011 recorded the lowest number in the last 12 month period with 19 cases.

SAB HEAT Target Currently, NHS Lothian is on trajectory to achieve the set target of 0.26 or less cases per 1000 AOBDS by March 2013. The challenge going forward is to reduce even further.

CDI HEAT Target for Patients aged 65 and over Currently, NHS Lothian is on trajectory to achieve the set target of 0.39 or less cases per 1000 OBDS. The challenge going forward is to maintain this or reduce even further.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
95%	94%	95%	95%	95%	95%	94%	96%	96%	96%	96%	na

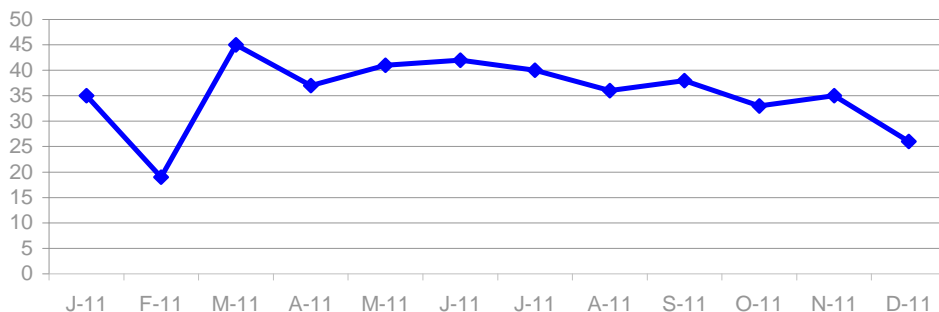
Cleaning Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
95%	96%	95%	95%	95%	95%	96%	95%	95%	96%	95%	na

Estates Monitoring Compliance

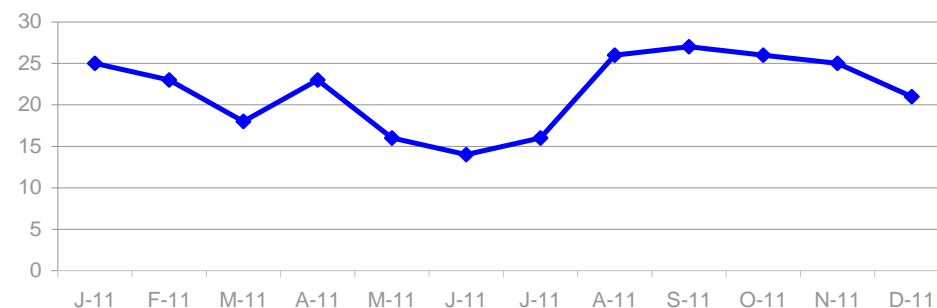
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
97%	96%	96%	97%	96%	97%	97%	97%	97%	96%	97%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



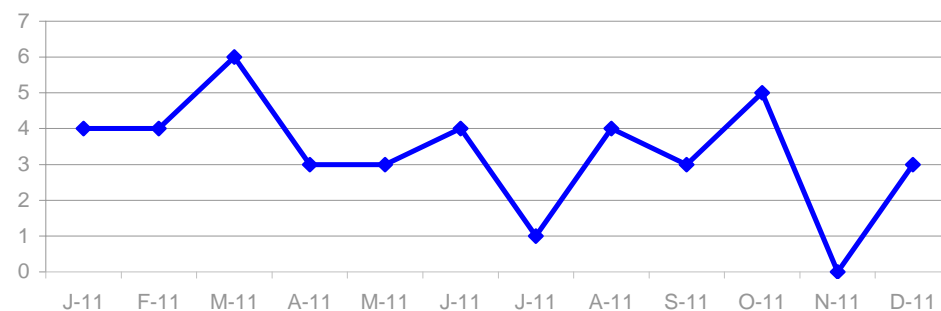
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
35	19	45	37	41	42	40	36	38	33	35	26

Total Staphylococcus aureus Bacteraemia (SAB) Cases



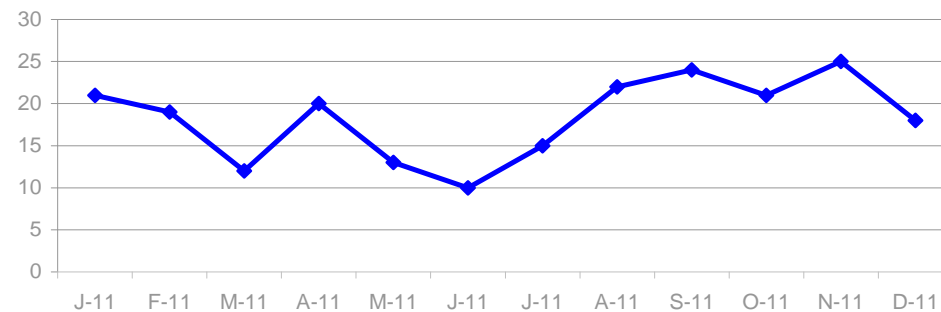
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
25	23	18	23	16	14	16	26	27	26	25	21

MRSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
4	4	6	3	3	4	1	4	3	5	0	3

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
21	19	12	20	13	10	15	22	24	21	25	18

Healthcare Associated Infection Reporting Template (HAIRT)

Section 2 – Healthcare Associated Infection Report Cards

The following section is a series of 'Report Cards' that provide information, for each acute hospital [and key community hospitals – *delete if appropriate*] in the Board, on the number of cases of *Staphylococcus aureus* blood stream infections (also broken down into MSSA and MRSA) and *Clostridium difficile* infections, as well as hand hygiene and cleaning compliance. In addition, there is a single report card which covers all community hospitals [which do not have individual cards], and a report which covers infections identified as having been contracted from outwith hospital. The information in the report cards is provisional local data, and may differ from the national surveillance reports carried out by Health Protection Scotland and Health Facilities Scotland. The national reports are official statistics which undergo rigorous validation, which means final national figures may differ from those reported here. However, these reports aim to provide more detailed and up to date information on HAI activities at local level than is possible to provide through the national statistics.

Understanding the Report Cards – Infection Case Numbers

Clostridium difficile infections (CDI) and *Staphylococcus aureus* bacteraemia (SAB) cases are presented for each hospital, broken down by month. *Staphylococcus aureus* bacteraemia (SAB) cases are further broken down into Meticillin Sensitive *Staphylococcus aureus* (MSSA) and Meticillin Resistant *Staphylococcus aureus* (MRSA). Data are presented as both a graph and a table giving case numbers. More information on these organisms can be found on the NHS24 website:

Clostridium difficile : http://www.nhs24.com/content/default.asp?page=s5_4&articleID=2139§ionID=1

Staphylococcus aureus : http://www.nhs24.com/content/default.asp?page=s5_4&articleID=346

MRSA: http://www.nhs24.com/content/default.asp?page=s5_4&articleID=252§ionID=1

For each hospital the total number of cases for each month are those which have been reported as positive from a laboratory report on samples taken more than 48 hours after admission. For the purposes of these reports, positive samples taken from patients within 48 hours of admission will be considered to be confirmation that the infection was contracted prior to hospital admission and will be shown in the "out of hospital" report card.

Understanding the Report Cards – Hand Hygiene Compliance

Good hand hygiene is crucial for infection prevention and control. More information can be found from the Health Protection Scotland's national hand hygiene campaign website:

<http://www.washyourhandsofthem.com/>

Hospitals carry out regular audits of how well their staff are complying with hand hygiene. The first page of each hospital report card presents the percentage of hand hygiene compliance for all staff in both graph and table form.

Understanding the Report Cards – Cleaning Compliance

Hospitals strive to keep the care environment as clean as possible. This is monitored through cleaning compliance audits. More information on how hospitals carry out these audits can be found on the Health Facilities Scotland website:

<http://www.hfs.scot.nhs.uk/online-services/publications/hai/>

The first page of each hospital Report Card gives the hospitals cleaning compliance percentage in both graph and table form.

Understanding the Report Cards – 'Out of Hospital Infections'

Clostridium difficile infections and *Staphylococcus aureus* (including MRSA) bacteraemia cases are all associated with being treated in hospitals. However, this is not the only place a patient may contract an infection. This total will also include infection from community sources such as GP surgeries and care homes and. The final Report Card report in this section covers 'Out of Hospital Infections' and reports on SAB and CDI cases reported to a Health Board which are not attributable to a hospital. Given the complex variety of sources for these infections it is not possible to break this data down in any more detail.

Royal Infirmary of Edinburgh

Staphylococcus aureus Bacteraemia (SAB)

There were 2 SAB during November 2011 and 5 SAB during December 2011.

Clostridium difficile Infection (CDI)

There were 11 CDI during November 2011 and 10 CDI during December 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
94%	93%	95%	93%	94%	95%	94%	96%	94%	95%	94%	na

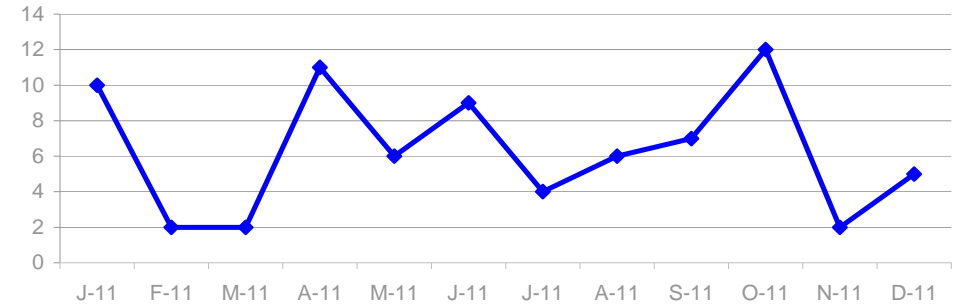
Cleaning Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
96%	96%	96%	96%	97%	96%	96%	96%	96%	96%	96%	na

Estates Monitoring Compliance

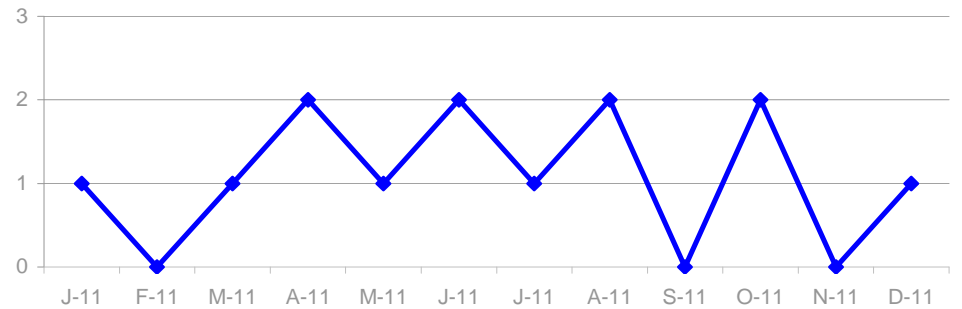
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
96%	95%	94%	97%	96%	96%	95%	96%	95%	95%	97%	na

Total Staphylococcus aureus Bacteraemia (SAB) Cases



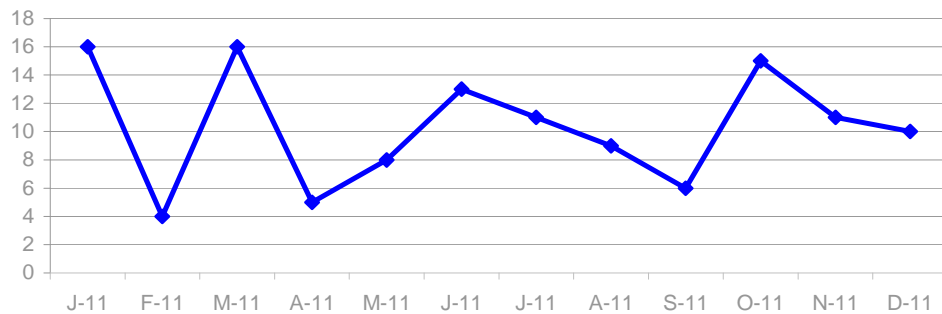
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
10	2	2	11	6	9	4	6	7	12	2	5

MRSA Bacteraemia Cases



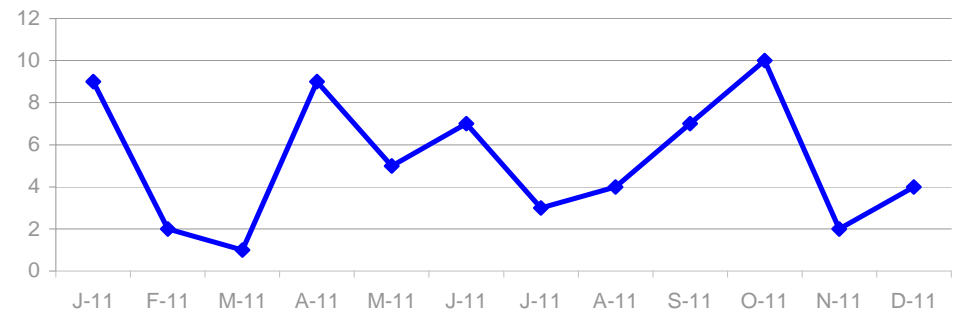
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
1	0	1	2	1	2	1	2	0	2	0	1

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
16	4	16	5	8	13	11	9	6	15	11	10

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
9	2	1	9	5	7	3	4	7	10	2	4

Western General Hospital

Staphylococcus aureus Bacteraemia (SAB)

There was 4 SAB recorded during November 2011 and 2 during December 2011.

Clostridium difficile Infection (CDI)

There were 12 CDI during November 2011 and 3 CDI during December 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
93%	92%	94%	95%	94%	95%	93%	95%	94%	95%	97%	na

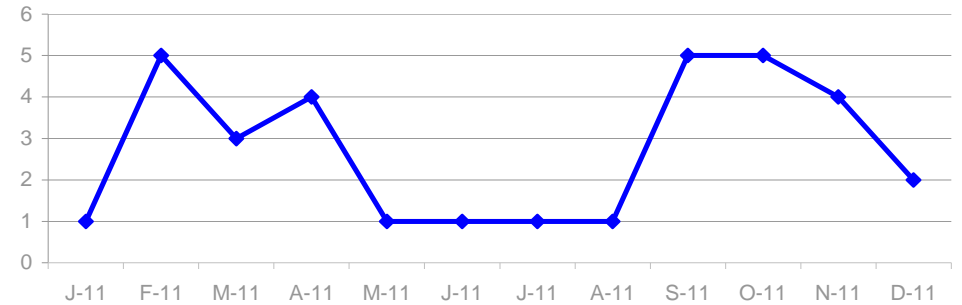
Cleaning Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
95%	95%	94%	95%	94%	95%	95%	95%	94%	94%	95%	na

Estates Monitoring Compliance

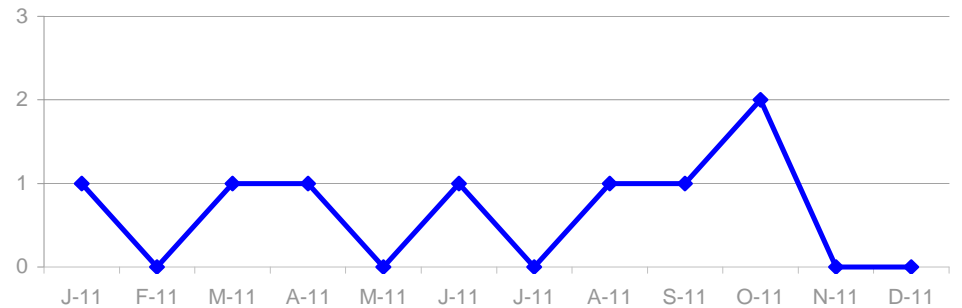
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
100%	100%	100%	99%	99%	100%	100%	99%	100%	99%	99%	na

Total Staphylococcus aureus Bacteraemia (SAB) Cases



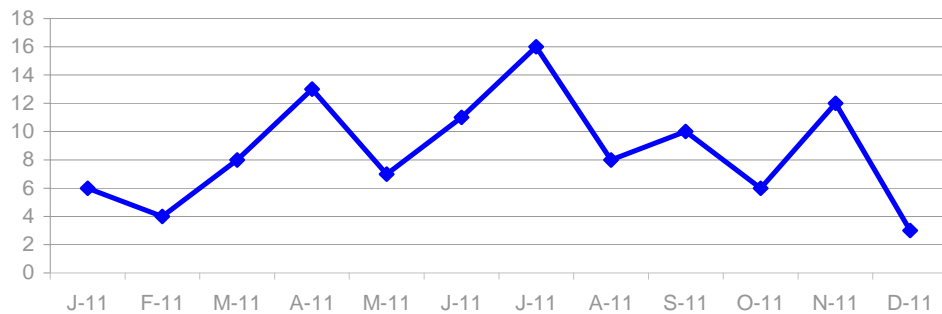
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
1	5	3	4	1	1	1	1	5	5	4	2

MRSA Bacteraemia Cases



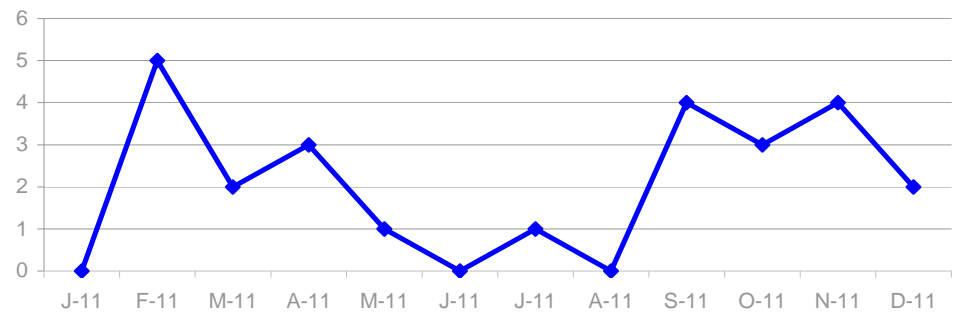
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
1	0	1	1	0	1	0	1	1	2	0	0

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
6	4	8	13	7	11	16	8	10	6	12	3

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	5	2	3	1	0	1	0	4	3	4	2

St Johns Hospital

Staphylococcus aureus Bacteraemia (SAB)

There was 1 SAB recorded during November and 1 during December 2011.

Clostridium difficile Infection (CDI)

There was 1 CDI recorded during November and 2 during December 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
96%	96%	97%	97%	97%	96%	96%	97%	98%	99%	99%	na

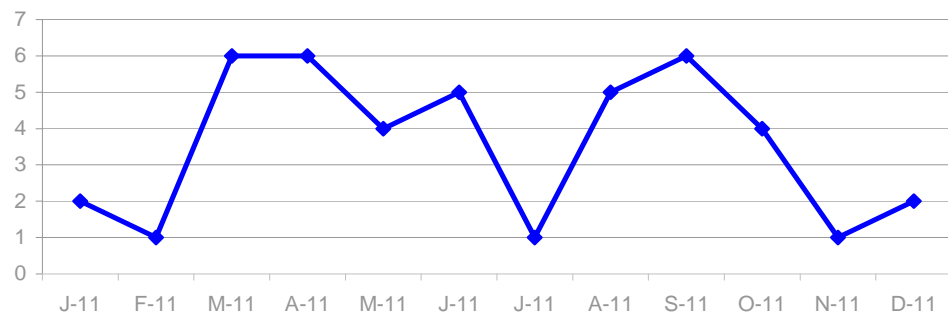
Cleaning Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
95%	95%	94%	95%	94%	95%	95%	95%	94%	94%	95%	na

Estates Monitoring Compliance

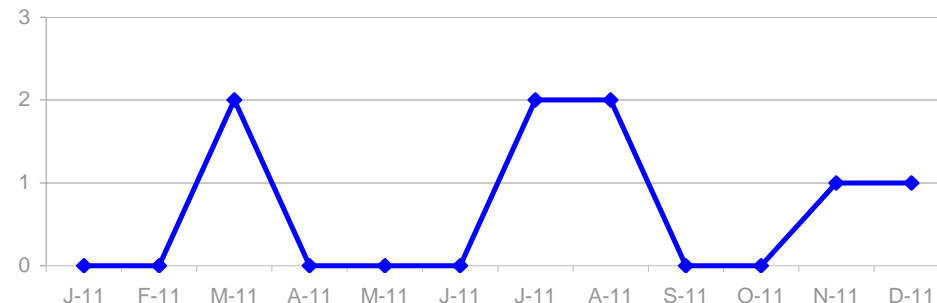
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
97%	97%	96%	97%	97%	97%	97%	97%	96%	97%	97%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



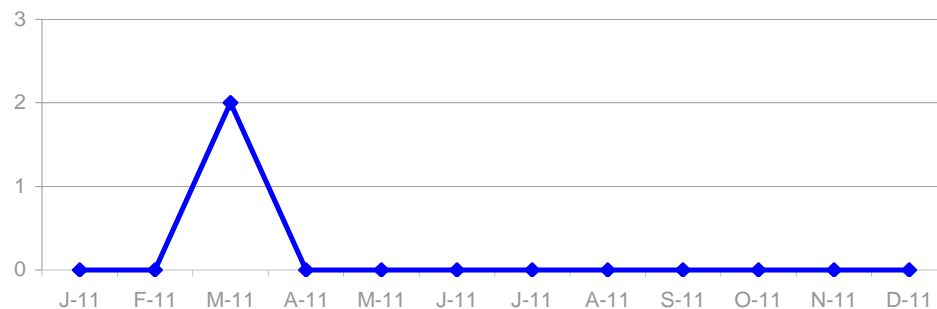
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	1	6	6	4	5	1	5	6	4	1	2

Total Staphylococcus aureus Bacteraemia (SAB) Cases



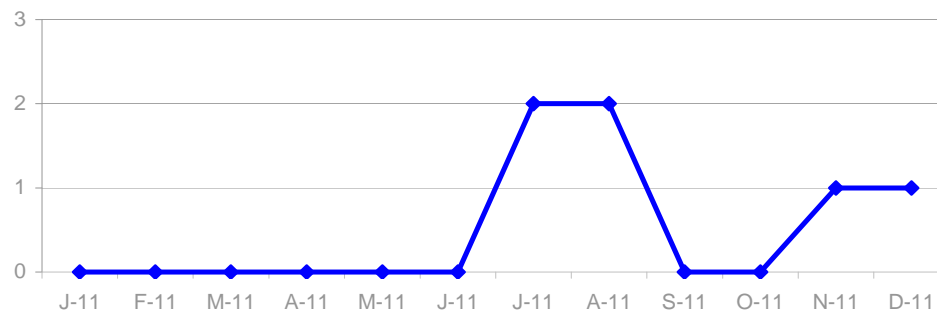
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	2	0	0	0	2	2	0	0	1	1

MRSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	2	0	0	0	0	0	0	0	0	0

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	0	0	0	2	2	0	0	1	1

Liberton Hospital

Staphylococcus aureus Bacteraemia (SAB)

There were NO SAB recorded during November and 2 during December 2011.

Clostridium difficile Infection (CDI)

There were NO CDI recorded during November and December 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
98%	96%	98%	99%	99%	98%	96%	99%	99%	99%	na	na

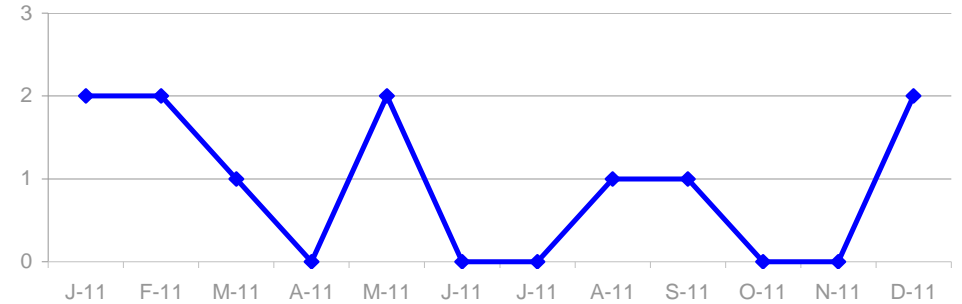
Cleaning Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
97%	95%	96%	95%	94%	96%	96%	95%	96%	95%	94%	na

Estates Monitoring Compliance

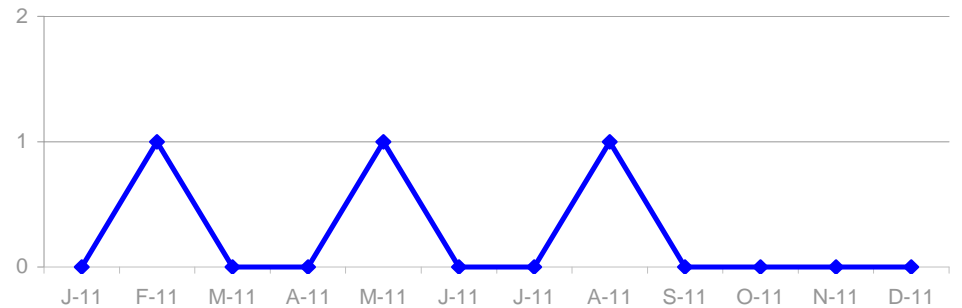
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
93%	91%	95%	95%	95%	94%	95%	94%	95%	86%	93%	na

Total Staphylococcus aureus Bacteraemia (SAB) Cases



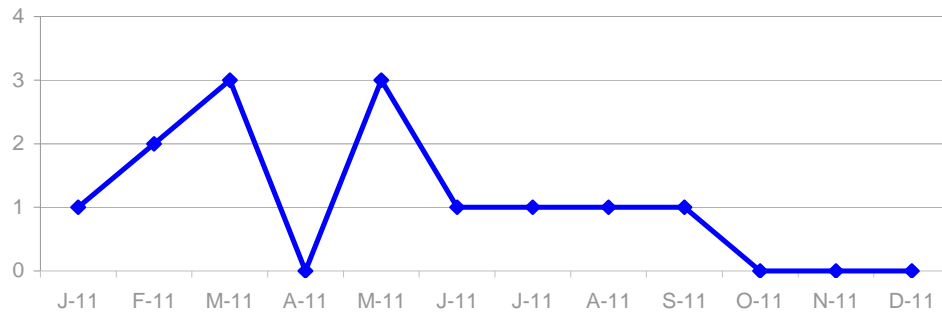
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	2	1	0	2	0	0	1	1	0	0	2

MRSA Bacteraemia Cases



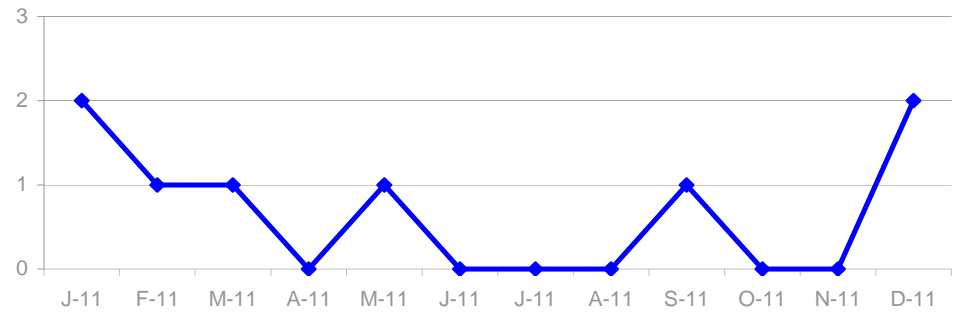
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	1	0	0	1	0	0	1	0	0	0	0

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
1	2	3	0	3	1	1	1	1	0	0	0

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	1	1	0	1	0	0	0	1	0	0	2

Royal Hospital for Sick Children

Staphylococcus aureus Bacteraemia (SAB)

There was NO SAB recorded in November and 2 in December 2011.

Clostridium difficile Infection (CDI)

There were NO CDI recorded in November and 1 in December 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
96%	95%	94%	95%	96%	98%	96%	96%	97%	94%	95%	na

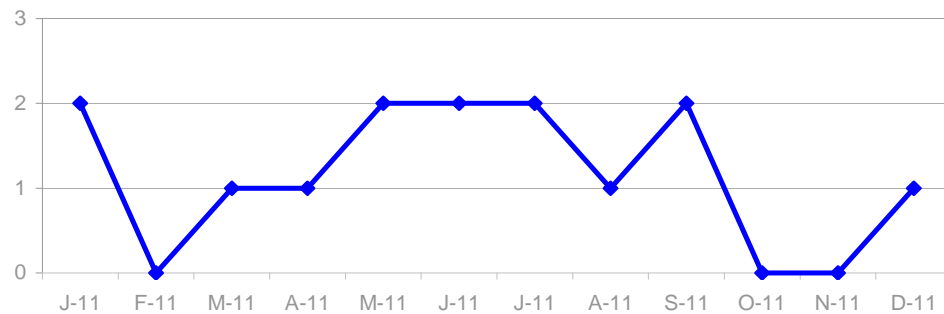
Cleaning Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
95%	94%	95%	95%	96%	95%	96%	96%	96%	97%	94%	na

Estates Monitoring Compliance

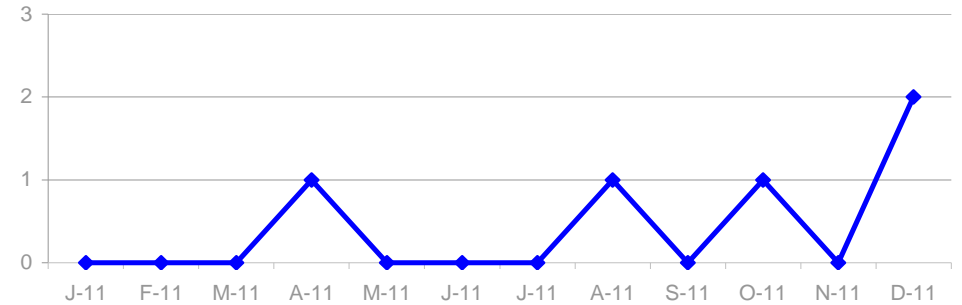
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
99%	99%	98%	99%	99%	99%	99%	99%	99%	99%	99%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



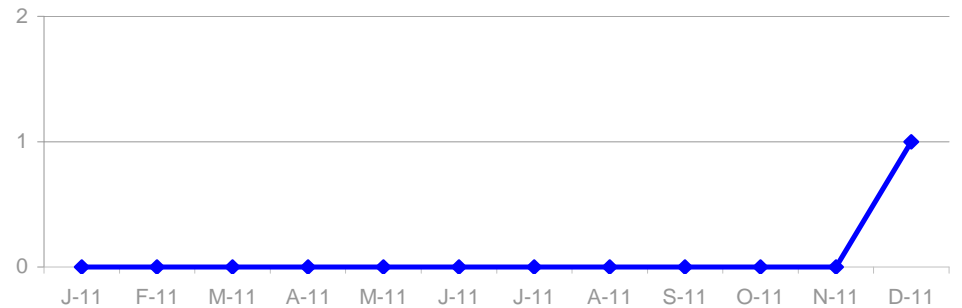
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	0	1	1	2	2	2	1	2	0	0	1

Total Staphylococcus aureus Bacteraemia (SAB) Cases



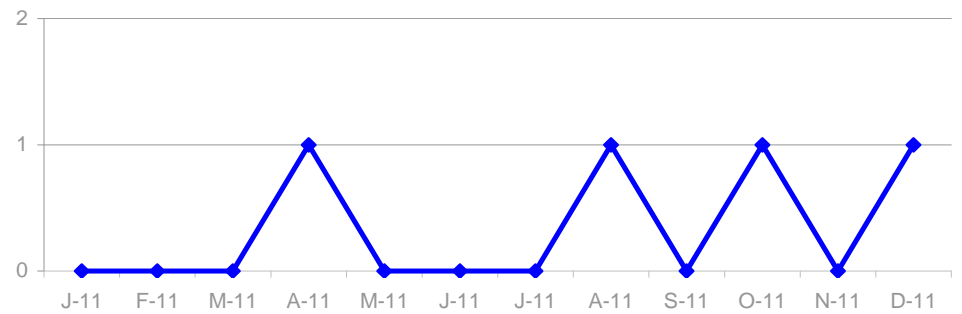
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	1	0	0	0	1	0	1	0	2

MRSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	0	0	0	0	0	0	0	0	1

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	1	0	0	0	1	0	1	0	1

Royal Victoria Hospital

Staphylococcus aureus Bacteraemia (SAB)

There was 1 SAB recorded during November and none during December 2011.

Clostridium difficile Infection (CDI)

There were NO CDI recorded during November and December 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
95%	95%	96%	98%	95%	95%	97%	97%	97%	98%	97%	na

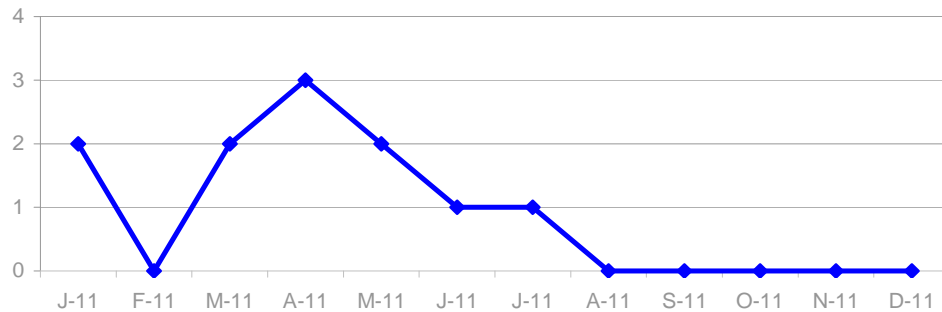
Cleaning Compliance

J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
93%	93%	91%	93%	93%	92%	94%	93%	93%	95%	96%	na

Estates Monitoring Compliance

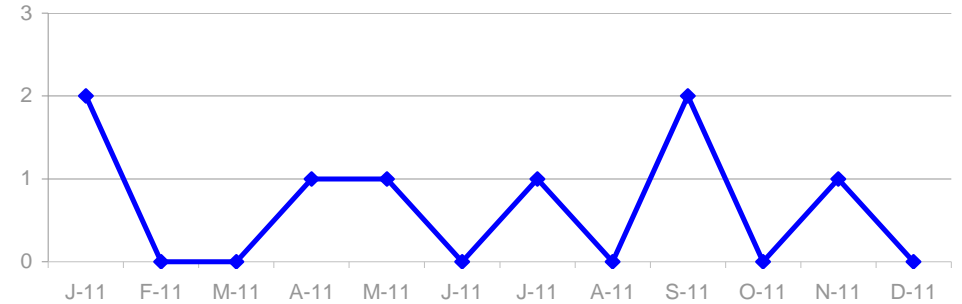
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
97%	100%	97%	98%	98%	98%	99%	99%	97%	99%	100%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



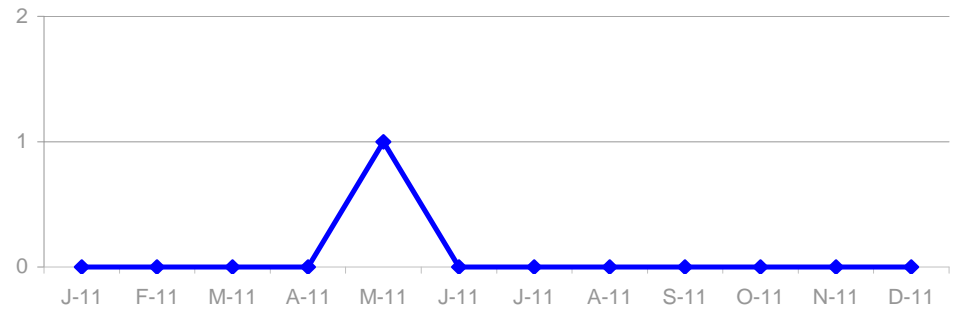
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	0	2	3	2	1	1	0	0	0	0	0

Total *Staphylococcus aureus* Bacteraemia (SAB) Cases



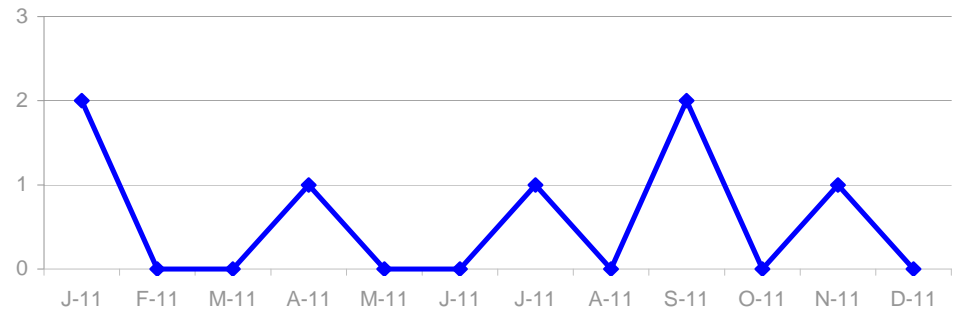
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	0	0	1	1	0	1	0	2	0	1	0

MRSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	0	1	0	0	0	0	0	0	0

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	0	0	1	0	0	1	0	2	0	1	0

Community Hospitals

***Staphylococcus aureus* Bacteraemia (SAB)**

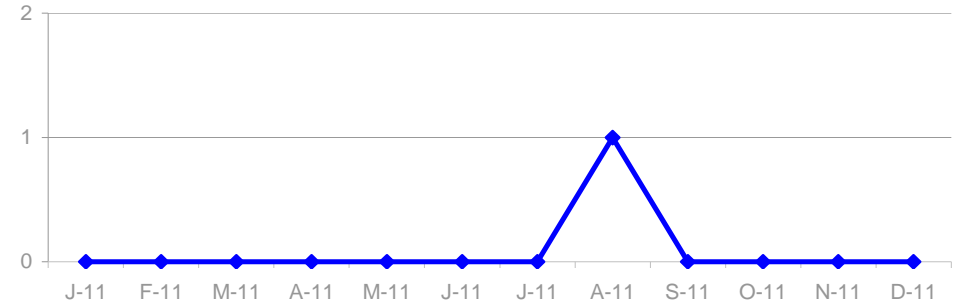
There was only 1 SAB recorded in the last 12 month period.

***Clostridium difficile* Infection (CDI)**

There were 3 CDI recorded during November and 2 during December 2011.

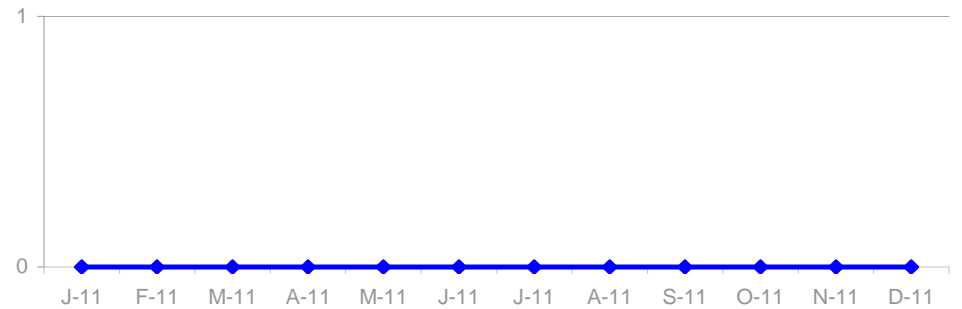
This is the new Report Card Format introduced by Scottish Government July 2011

Total *Staphylococcus aureus* Bacteraemia (SAB) Cases



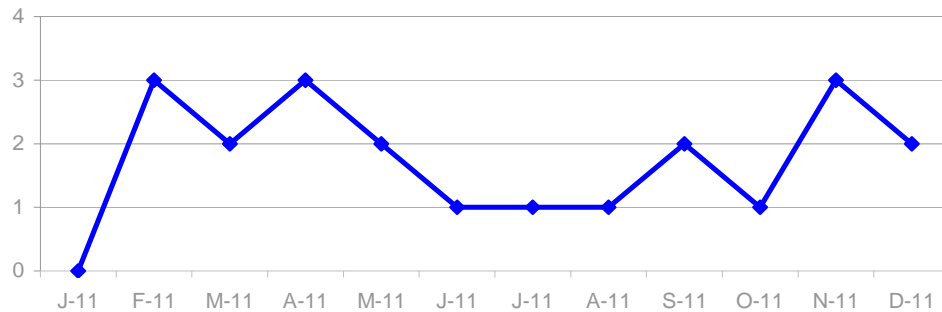
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	0	0	0	0	1	0	0	0	0

MRSA Bacteraemia Cases



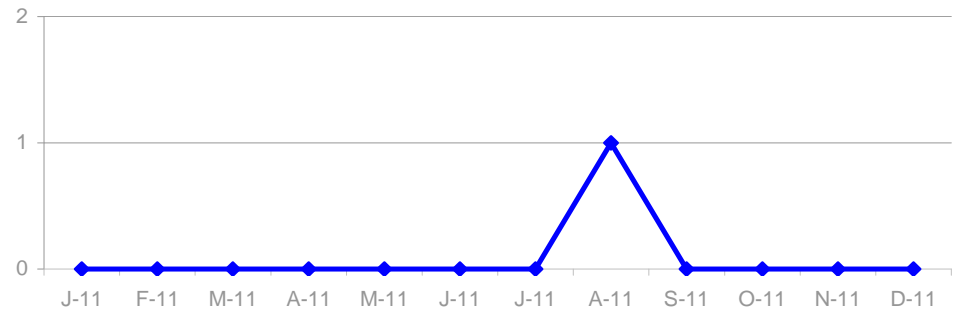
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	0	0	0	0	0	0	0	0	0

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	3	2	3	2	1	1	1	2	1	3	2

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
0	0	0	0	0	0	0	1	0	0	0	0

Out of Hospital Infections

Staphylococcus aureus Bacteraemia (SAB)

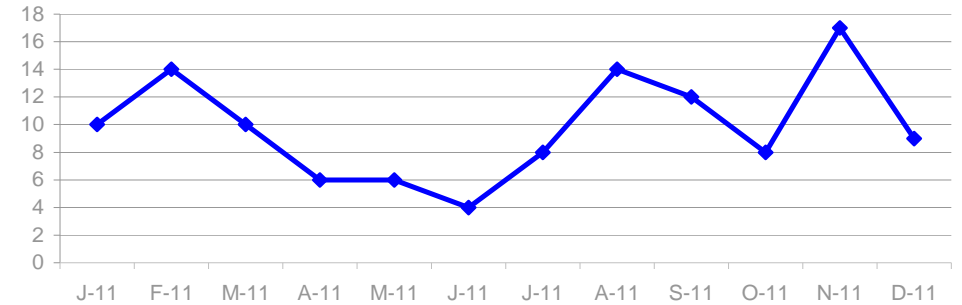
There were 17 SAB recorded during November and 9 SAB during December 2011 that were identified as Out of Hospital Infections.

Clostridium difficile Infection (CDI)

There were 8 CDI recorded during November and 8 CDI during December 2011 that were identified as Out of Hospital Infections.

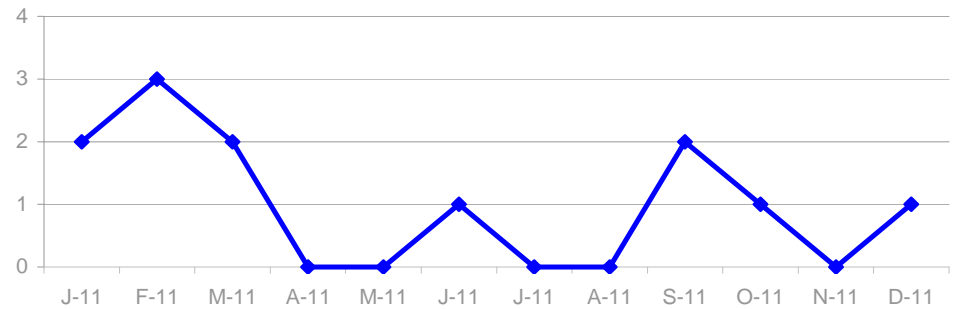
This is the new Report Card Format introduced by Scottish Government July 2011

Total *Staphylococcus aureus* Bacteraemia (SAB) Cases



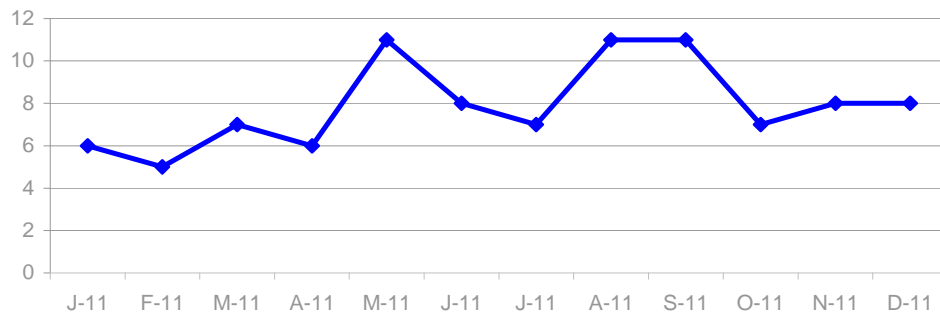
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
10	14	10	6	6	4	8	14	12	8	17	9

MRSA Bacteraemia Cases



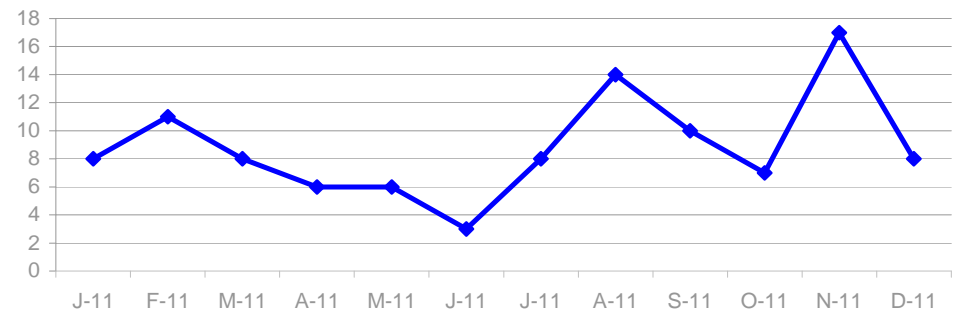
J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
2	3	2	0	0	1	0	0	2	1	0	1

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
6	5	7	6	11	8	7	11	11	7	8	8

MSSA Bacteraemia Cases



J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11	N-11	D-11
8	11	8	6	6	3	8	14	10	7	17	8

Western General Hospital

Staphylococcus aureus Bacteraemia (SAB)

There was 5 SAB recorded during September 2011 and 5 during October 2011.

Clostridium difficile Infection (CDI)

There were 10 CDI during September 2011 and 6 CDI during October 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
94%	93%	93%	92%	94%	95%	94%	95%	93%	95%	95%	97%

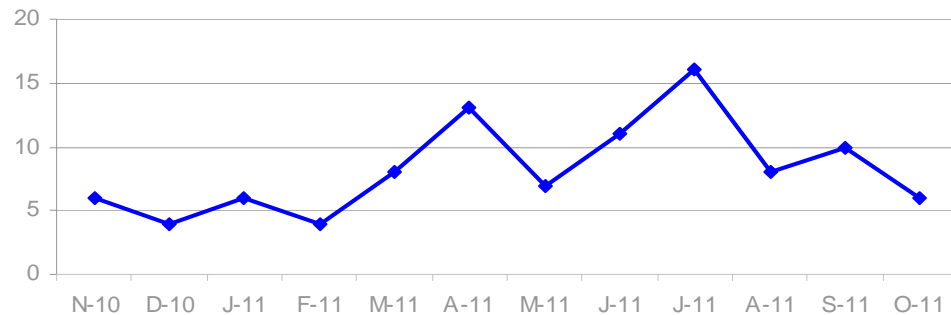
Cleaning Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
95%	95%	95%	95%	94%	95%	94%	95%	95%	95%	94%	na

Estates Monitoring Compliance

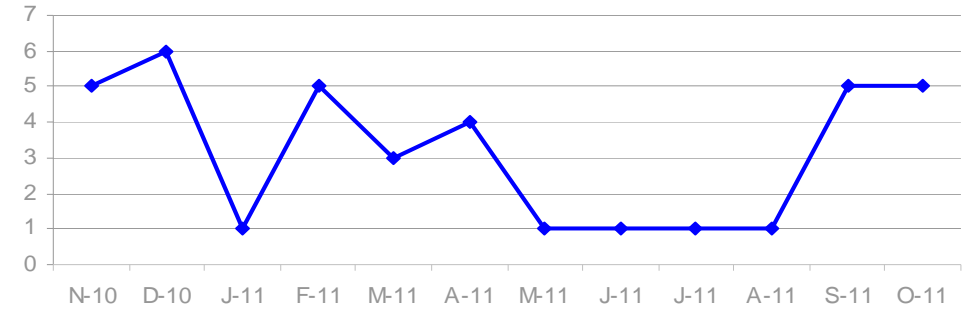
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
99%	99%	100%	100%	100%	99%	99%	100%	100%	99%	100%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



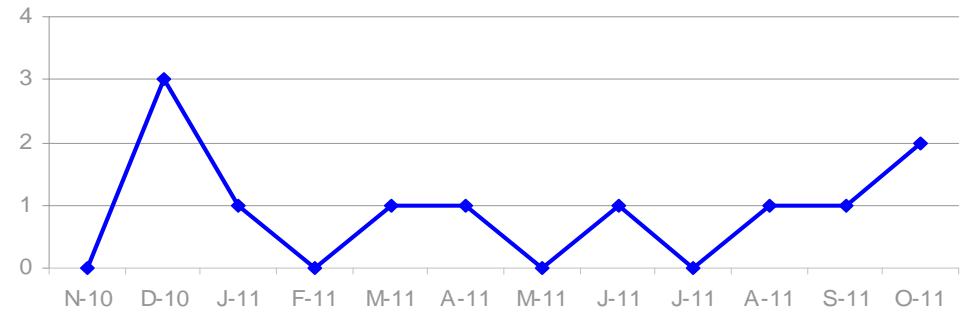
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
6	4	6	4	8	13	7	11	16	8	10	6

Total *Staphylococcus aureus* Bacteraemia (SAB) Cases



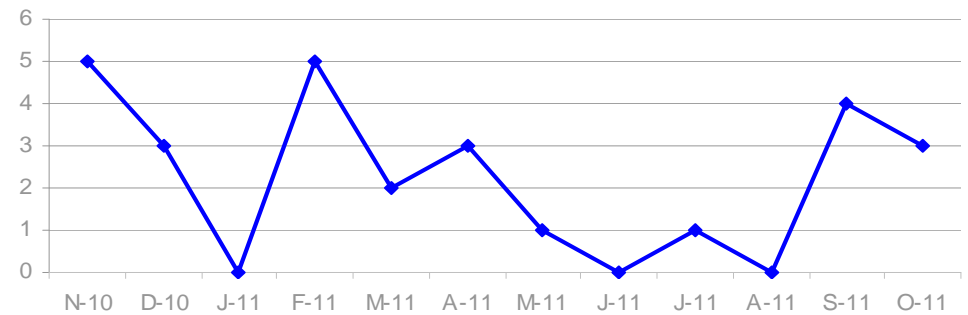
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
5	6	1	5	3	4	1	1	1	1	5	5

MRSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	3	1	0	1	1	0	1	0	1	1	2

MSSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
5	3	0	5	2	3	1	0	1	0	4	3

St Johns Hospital

Staphylococcus aureus Bacteraemia (SAB)

There were NO SAB recorded during September and October 2011.

Clostridium difficile Infection (CDI)

There was 6 CDI recorded during September and 4 during October 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
97%	98%	96%	96%	97%	97%	97%	96%	96%	97%	98%	99%

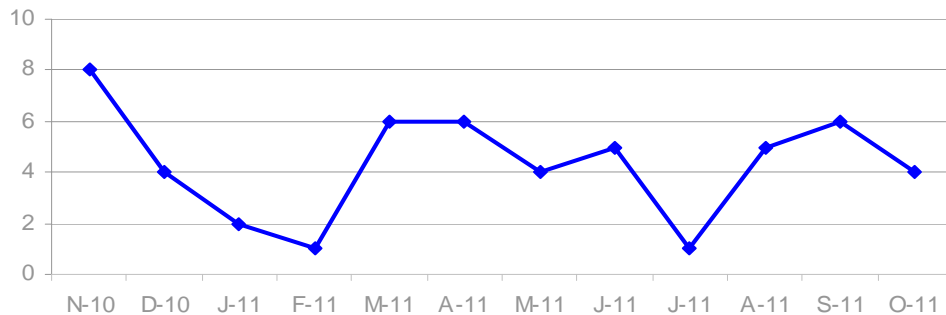
Cleaning Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
95%	95%	95%	95%	94%	95%	94%	95%	95%	95%	94%	na

Estates Monitoring Compliance

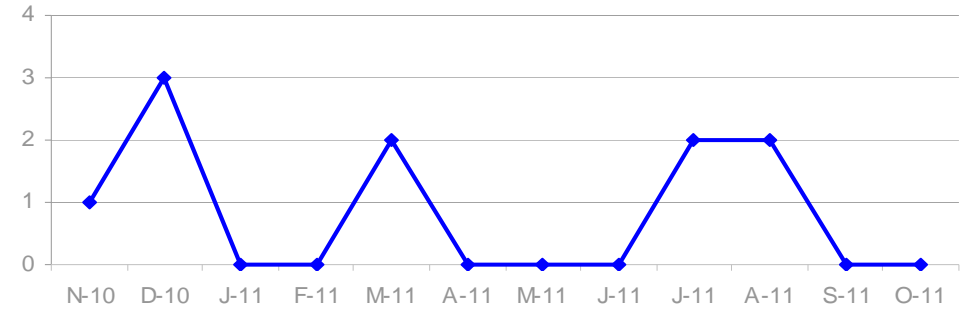
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
95%	96%	97%	97%	96%	97%	97%	97%	97%	97%	96%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



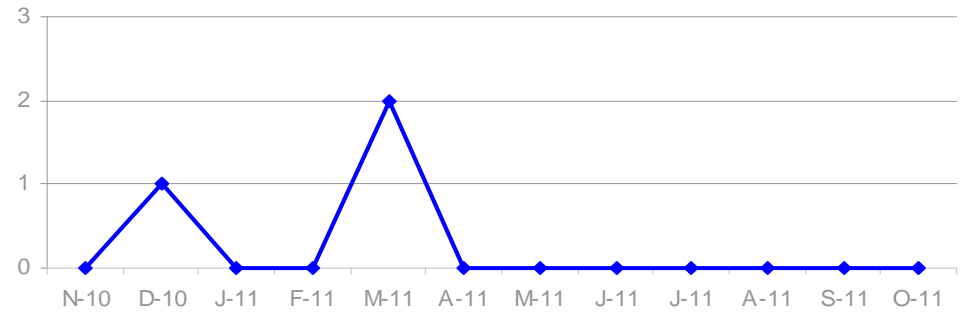
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
8	4	2	1	6	6	4	5	1	5	6	4

Total Staphylococcus aureus Bacteraemia (SAB) Cases



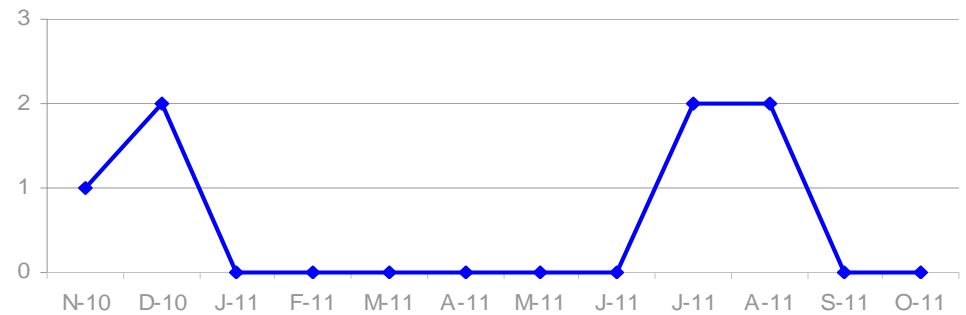
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
1	3	0	0	2	0	0	0	2	2	0	0

MRSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	1	0	0	2	0	0	0	0	0	0	0

MSSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
1	2	0	0	0	0	0	0	2	2	0	0

Liberton Hospital

Staphylococcus aureus Bacteraemia (SAB)

There was 1 SAB recorded during September and NO SAB during October 2011.

Clostridium difficile Infection (CDI)

There was 1 CDI recorded during September and NO CDI during October 2011.

This is the new Report Card Format introduced by Scottish Government July 2011

Hand Hygiene Monitoring Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
99%	99%	98%	96%	98%	99%	99%	98%	96%	99%	99%	100%

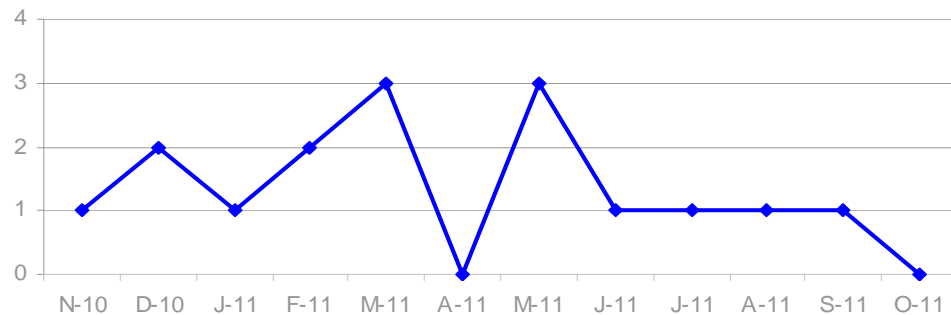
Cleaning Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
95%	92%	95%	94%	95%	95%	96%	95%	96%	96%	96%	na

Estates Monitoring Compliance

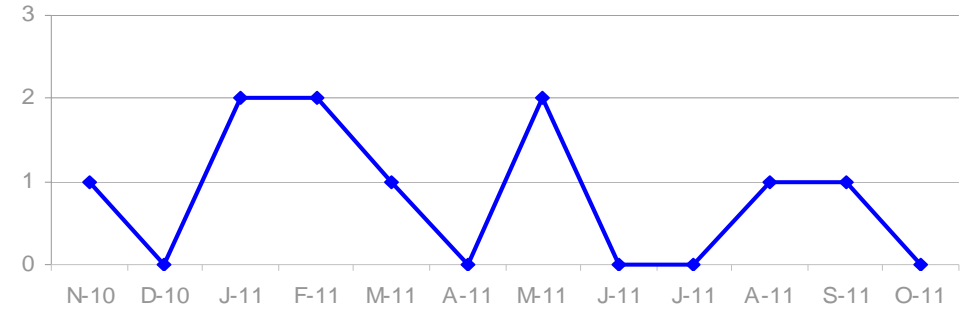
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
99%	96%	99%	99%	98%	99%	99%	99%	99%	99%	99%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



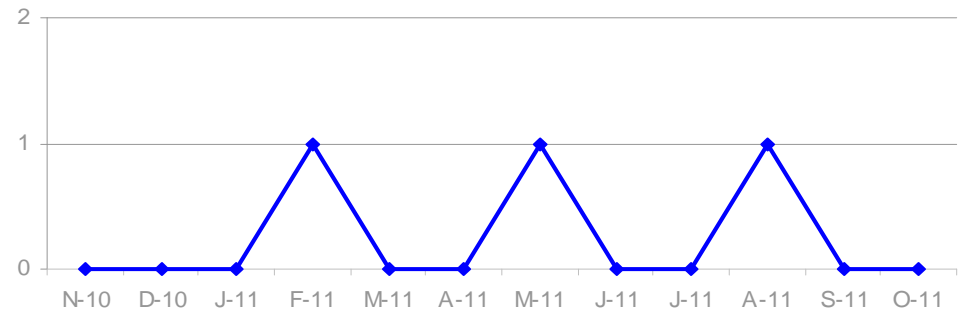
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
1	2	1	2	3	0	3	1	1	1	1	0

Total Staphylococcus aureus Bacteraemia (SAB) Cases



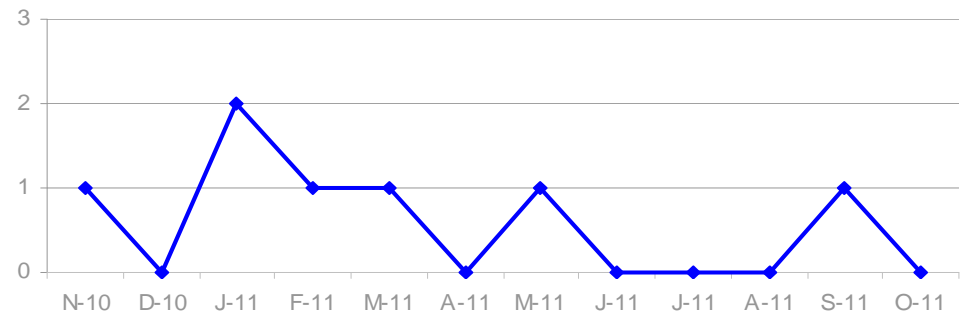
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
1	0	2	2	1	0	2	0	0	1	1	0

MRSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	0	0	1	0	0	1	0	0	1	0	0

MSSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
1	0	2	1	1	0	1	0	0	0	1	0

Royal Hospital for Sick Children

Staphylococcus aureus Bacteraemia (SAB)

There were NO SAB recorded in September and 1 in October 2011.

Clostridium difficile Infection (CDI)

There were 2 CDI recorded in September and NO CDI in October 2011.

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Hand Hygiene Monitoring Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
93%	97%	96%	95%	94%	95%	96%	98%	96%	96%	97%	93%

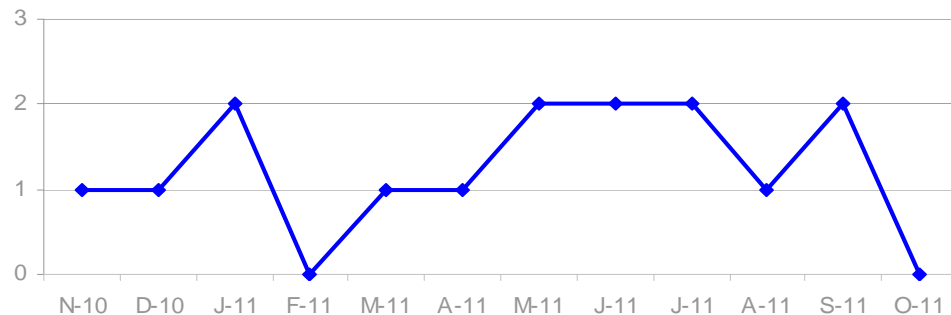
Cleaning Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
93%	93%	93%	93%	91%	93%	93%	92%	94%	93%	93%	na

Estates Monitoring Compliance

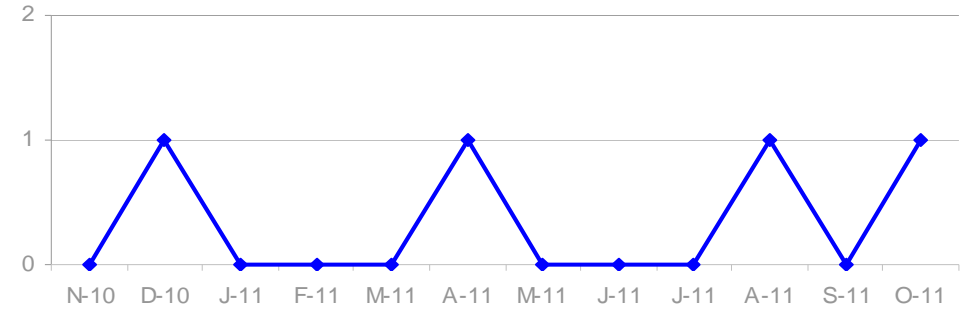
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
100%	100%	97%	100%	97%	98%	98%	98%	99%	99%	97%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



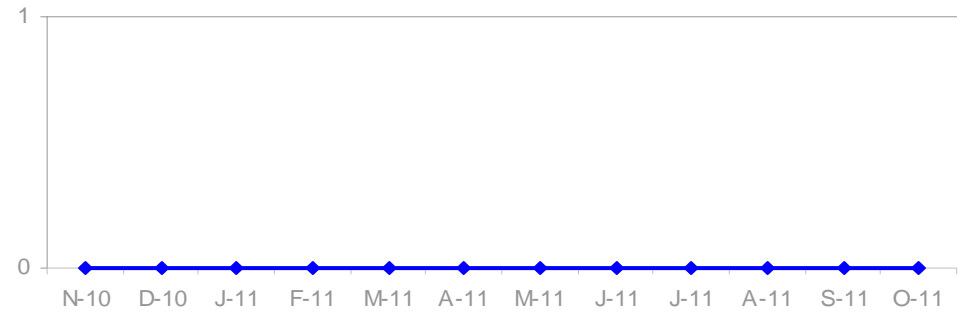
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
1	1	2	0	1	1	2	2	2	1	2	0

Total Staphylococcus aureus Bacteraemia (SAB) Cases



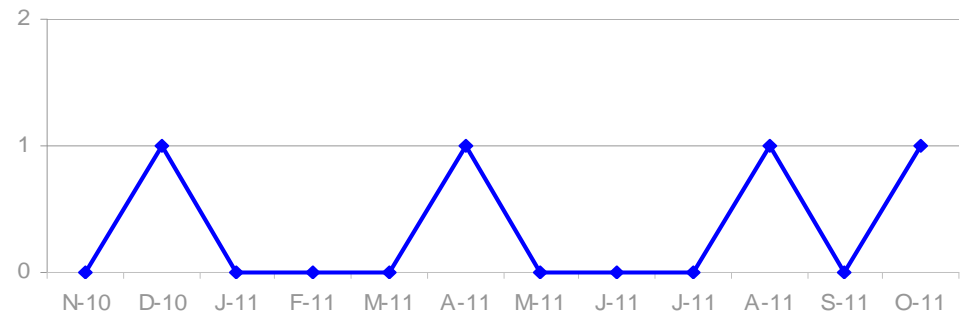
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	1	0	0	0	1	0	0	0	1	0	1

MRSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	0	0	0	0	0	0	0	0	0	0	0

MSSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	1	0	0	0	1	0	0	0	1	0	1

Royal Victoria Hospital

Staphylococcus aureus Bacteraemia (SAB)

There were 2 SAB recorded during September and NO SAB during October 2011

Clostridium difficile Infection (CDI)

There were NO CDI recorded during September and October 2011.

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Hand Hygiene Monitoring Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
96%	96%	95%	95%	96%	98%	95%	95%	97%	97%	97%	98%

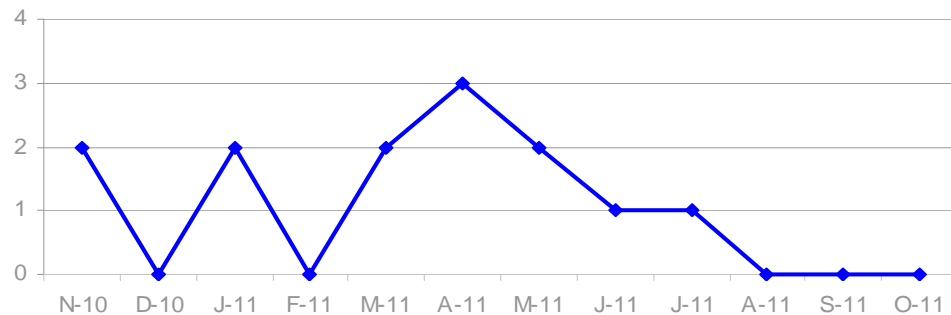
Cleaning Compliance

N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
95%	97%	97%	95%	96%	95%	94%	96%	96%	95%	96%	na

Estates Monitoring Compliance

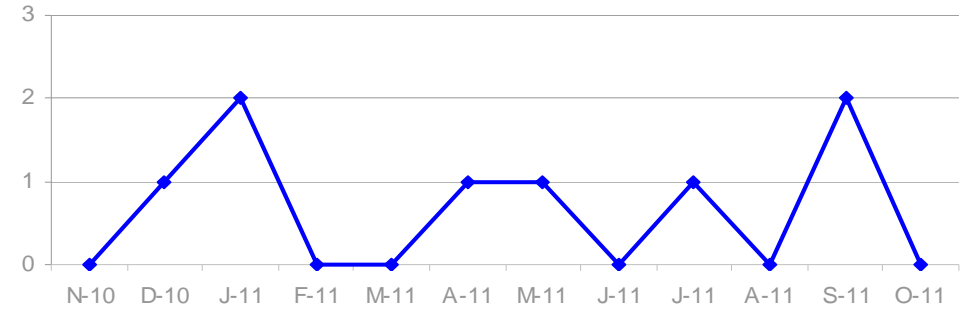
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
94%	93%	93%	91%	95%	95%	95%	94%	95%	94%	95%	na

Clostridium difficile Infection (CDI) Cases in Patients ages 15 and over



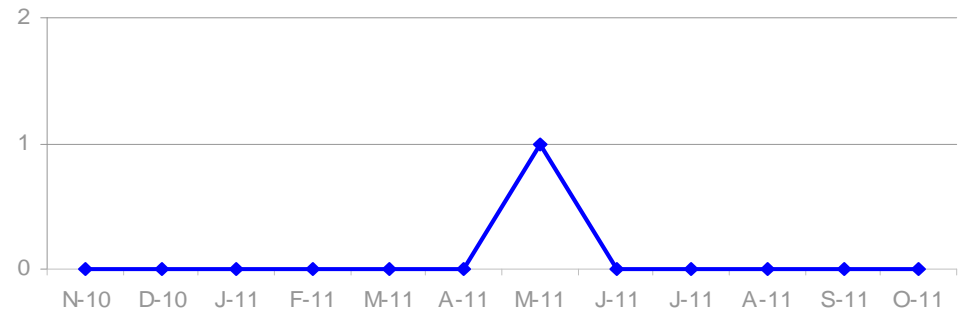
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
2	0	2	0	2	3	2	1	1	0	0	0

Total Staphylococcus aureus Bacteraemia (SAB) Cases



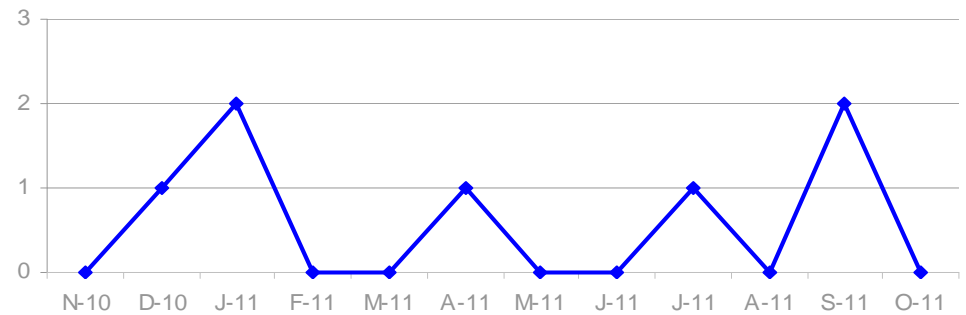
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	1	2	0	0	1	1	0	1	0	2	0

MRSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	0	0	0	0	0	1	0	0	0	0	0

MSSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	1	2	0	0	1	0	0	1	0	2	0

Community Hospitals

***Staphylococcus aureus* Bacteraemia (SAB)**

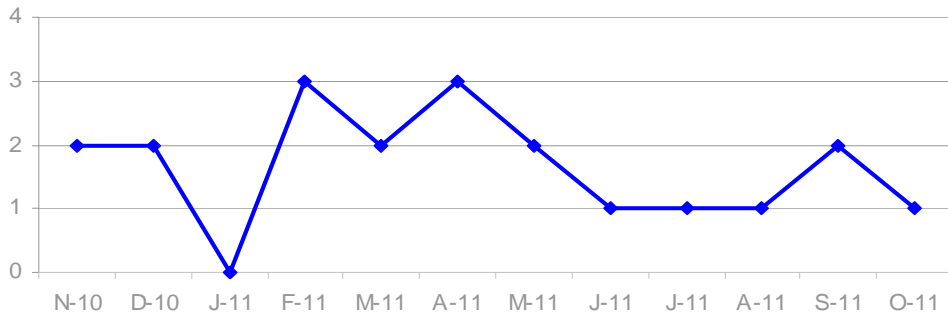
There were only 2 SAB recorded in the last 12 month period.

***Clostridium difficile* Infection (CDI)**

There were 2 CDI recorded during September and 1 during October 2011.

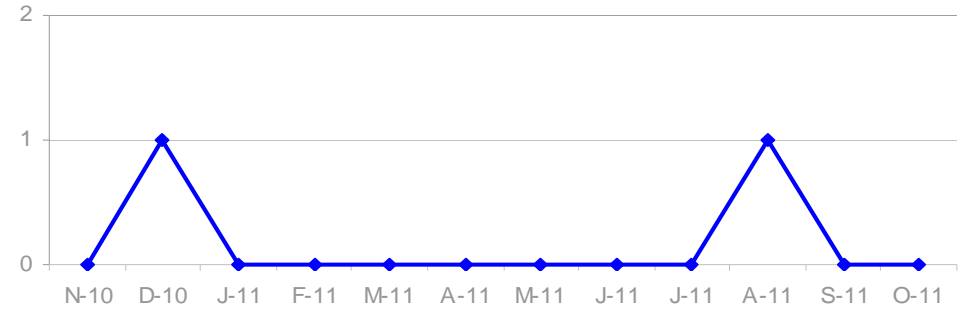
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***Clostridium difficile* Infection (CDI) Cases in Patients ages 15 and over**



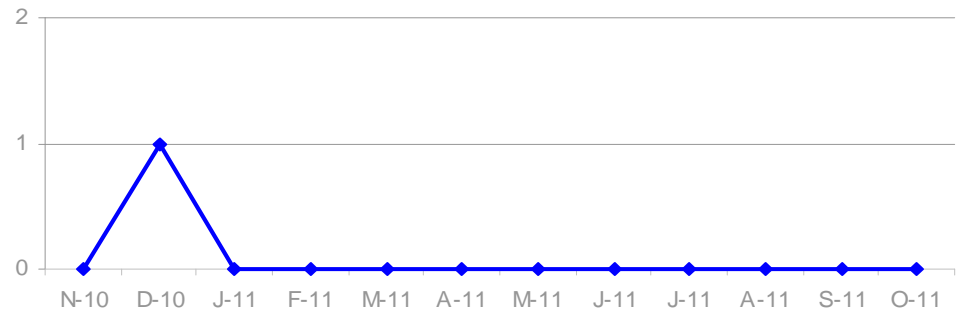
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
2	2	0	3	2	3	2	1	1	1	2	1

Total *Staphylococcus aureus* Bacteraemia (SAB) Cases



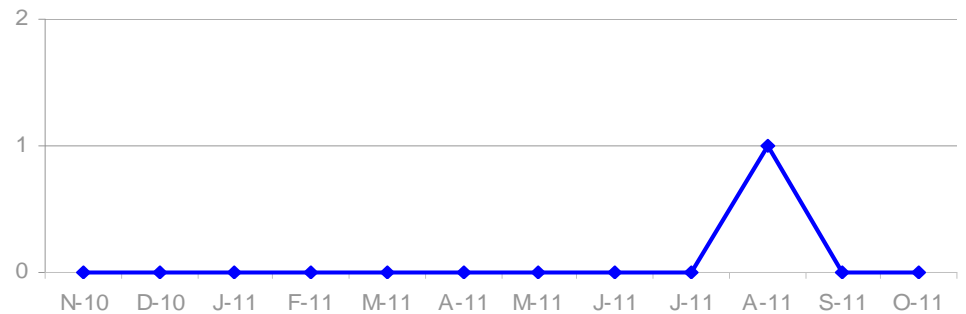
N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	1	0	0	0	0	0	0	0	1	0	0

MRSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	1	0	0	0	0	0	0	0	0	0	0

MSSA Bacteraemia Cases



N-10	D-10	J-11	F-11	M-11	A-11	M-11	J-11	J-11	A-11	S-11	O-11
0	0	0	0	0	0	0	0	0	1	0	0