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Mr David Melding AM Chair of the Audit Committee National Assembly for Wales Cardiff Bay Cardiff **CF99 1NA** 

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## WELSH ASSEMBLY GOVERNMENT RESPONSE TO THE AUDIT COMMITTEE REPORT - MINIMISING HEALTHCARE ASSOCIATED INFECTIONS IN NHS TRUSTS IN WALES

The Clerk's letter of 19 June requested my advice on the Welsh Assembly Government's response to the recommendations made by the Audit Committee in its report Minimising Healthcare Associated Infections in Wales.

The Assembly Government's response is positive and comprehensive, and it accepts all nine of the Committee's recommendations. In particular, the response sets out the Assembly Government's intention to issue by the end of March 2009 a refreshed strategy to minimise healthcare associated infections, which will take account of the recommendations in both my own and the Committee's reports. The Assembly Government also intends to issue by September 2008 a Welsh Health Circular instructing trusts to implement the relevant recommendations of both reports.

Although the Assembly Government agrees that the trust mergers represent an opportunity to adopt good practice in infection prevention and control, the response to recommendation iv does not acknowledge the associated risks. Therefore, it will be important that the Assembly Government and NPHS ensure that the inevitable disruption caused by the mergers does not lead to the new trusts losing focus on infection prevention and control.

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The Committee will be well aware of the importance of standards of cleanliness, particularly in tackling the problem of Clostridium difficile. The Minister has established a project to examine the role of ward sisters within NHS Wales. The project included a working group that focused on hospital cleanliness and accountability for cleaning. The report, which the Minister plans to launch at the end of June 2008, will include recommendations on cleanliness, storage, accountability for cleanliness and good practice. Officials are undertaking an audit of storage in NHS trusts, although the response does not make specific reference to the surge capacity mentioned in recommendation v(b). The response makes clear that the refreshed strategy will reinforce the importance of hand hygiene, which is a matter of concern to the public as well as the Committee.

In respect of recommendation v, the Assembly Government states that it will 'shortly' be producing guidance on new capital projects which will highlight the measures, such as single rooms and easier to clean finishes, that new projects should incorporate. The Assembly Government is also addressing the issue of isolation facilities.

Consistent with the Committee's sixth recommendation, the Assembly Government's refreshed strategy will include guidance on the appropriate ratio of infection control nurses to beds. And, given the benefits of prudent antibiotic prescribing, both in tackling healthcare associated infections and reducing antibiotic usage, the Assembly Government's work with the NPHS on succession planning for microbiologists is welcome.

The Committee's seventh recommendation required the Assembly Government to consider extending C difficile surveillance to include patients under the age of 65. The Assembly Government has accepted this and is planning to issue a Welsh Health Circular to extend the current C. difficile surveillance scheme to include patients over the age of two and under the age of 65. On the wider issue of some trusts' poor compliance with surgical site infection surveillance schemes, the Welsh Healthcare Associated Infection Sub-Group is working with trusts that need support and resources to implement more effectively the surveillance requirements. The Committee will expect to see significant improvements to address its concern about poor levels of compliance.

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On screening, which the Committee's eighth recommendation addressed, the Chief Medical Office and Chief Nursing Officer recently issued a joint letter about using local protocols to target screening for MRSA on high-risk groups of patients in certain clinical areas. A study on the costs of screening is underway in Scotland, the results of which will help the Assembly Government decide whether or not to issue further guidance on the costs and impact of screening programmes.

In the light of the Government's positive and comprehensive response to the report, my staff will continue to monitor progress implementing the Committee's recommendations. We will also liaise closely with Healthcare Inspectorate Wales whose ongoing programme of infection control spot checks will provide useful intelligence on progress. I will draw to the Committee's attention any areas where I think that further action is merited.

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JEREMY COLMAN
AUDITOR GENERAL FOR WALES