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Let's renew our crusade to beat the bugs

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No-one arriving at the main entrance of Maidstone Hospital in Kent could fail to notice the large display explaining the crusade against hospital-acquired infections and the hand gel to be used by everyone entering the building.

If anyone did pass by without using the gels, they would manage only a few steps before being met by a helpful volunteer or staff member who would point out the hand hygiene policy and ask them to comply, before they could go to the main reception desk or a ward or clinic.

As I spent a short time in the reception area, waiting for Dr Sara Mumford, a microbiologist who is now the director of Infection Prevention and Control, to escort me to the meeting with the trust's chief executive and senior nursing staff, it was clear that most people did not need to be asked to comply.

The message had been transmitted loud and clear. After an inquiry into an outbreak of clostridium difficile

(C Diff) in 2007, everyone at Maidstone Hospital is determined to keep up the concerted effort that has seen a massive reduction in the number of C Diff cases.

2008/09 saw a reduction of 66% in C Diff infections compared with 2007/08. Importantly, the authorities have managed to maintain the improvement, with a further 26% year on year reduction to the end of September this year.

What has been the key to this success, which has seen a reduction in cases that is well in advance of Scotland's target? For starters, permanent isolation wards have been opened and a restricted antibiotic policy has been introduced. New risk assessment procedures for patients with diarrhoea have not only helped reduce C Diff cases, they have also dramatically reduced the number of beds closed because of norovirus over the winter months.

Every case of C Diff is now subjected to "root cause analysis" and only two episodes of cross infection, affecting four patients, occurred in 2008/09. Efforts have also been made to tackle MRSA by screening all patients coming into the hospital

for elective treatment and improving procedures on blood culture practice. A new uniform and dress code, including "bare below the elbows", has been introduced. More than 4000 staff attended additional training on hand hygiene, a useful exercise that explained why the new procedures were being introduced.

While all of these measures are vital, it was apparent to me that there had also been a radical change of culture in the organisation. Clear responsibilities are laid down, with senior staff in microbiology and nursing responsible for leading the work, on the basis that each member of staff has a responsibility too.

On a tour of the wards, I had the opportunity to hear from matrons in charge of infection control, oncology and medicine about how practice had changed at ward level. Speaking to nursing staff, they felt this was vital as, during previous episodes of infection, "numbers had been collected, but no-one spotted what was actually going on". Another staff member told me that, previously, everyone had been working away in their own areas and the bigger picture had been missed. Now there were regular meetings across disciplines and everyone had to account for the part they played.

Every member of staff I met, from chief executive Glenn Douglas to ward staff, was open and offered to answer any questions I had. A number of staff made the point that much of what was now being done could be described as common sense, yet it needed constant monitoring and direction to ensure good practice was consistently applied and standards did not slip. Everyone was acutely conscious that this was not just about ticking boxes but about saving lives.

With the winter flu season approaching, and the likely increase in hospital admissions from swine flu, it is time to renew the crusade against hospital-acquired infection in Scotland.

We will no doubt learn further lessons from the Vale of Leven inquiry, but we would also do well to look at what has been achieved in Maidstone and how we can stretch our aspirations further than the relatively modest targets set in Scotland

thus far.

- Cathy Jamieson speaks for Scottish Labour on health.

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