

Inspection report

The prevention and control of infections South Western Ambulance Service NHS Trust

Region:
South West

Provider's code:
RYF

Type of organisation:
Ambulance trust

Type of inspection:
Enhanced

Sites we visited:
Eight ambulance stations and vehicles located at three accident and emergency sites. In total we inspected sixteen vehicles.

Date of inspection:
26 & 27 August 2009

Date of publication:
7 October 2009

Introduction to our inspections

NHS organisations that provide healthcare directly to patients must be registered with the Care Quality Commission. To be registered, they must meet the Government's new regulation to protect patients, workers and others from the identifiable risks of acquiring a healthcare-associated infection (HCAI). Examples of HCAIs are *Clostridium difficile* and meticillin-resistant *Staphylococcus aureus* (MRSA).

In the financial year 2009/10, the Care Quality Commission is inspecting up to half of all NHS trusts that provide healthcare, to assess whether they are meeting the new regulation on HCAIs and following the supporting Code of Practice and related guidance. We are inspecting all eleven ambulance trusts.

Our assessors make unannounced visits, to ensure that they see the services as a service user would see them. We focus on certain areas of practice to form a 'snap shot' of the trust's activities related to infection prevention and control. This allows us to identify issues that are a potential risk to service users' safety or that could affect their experience of care. The findings and judgements we report are based on the evidence we collect in specified areas of a trust on the days of inspection only.

We plan the scope of our inspections before our visit using the analysis of data. For ambulance trusts, we perform an enhanced inspection over two days using at least 17 measures. We may look at additional measures in more detail if we have identified these as a risk in planning or at the inspection itself.

The measures that we assess each trust against are based on the Code of Practice on HCAIs and related guidance. We use this information to judge whether the trust is compliant with the government regulation on HCAIs.

Where we identify a breach of the regulation we make requirements. The trust must act on these within the specified timeframe. For further information please refer to the enforcement policy on our website at www.cqc.org.uk.

We may find some areas for improvement on the inspection, yet judge a trust to be compliant with the regulation overall, as it is protecting patients, workers and others from the identifiable risks of HCAI, so far as is reasonably practicable. In these cases, we make recommendations to the trust about how it can strengthen its approach and expect the trust to act upon these quickly.

We will typically make an unannounced follow up visit to the trust within one month, for every trust with recommendations and requirements, to gain assurance that it has acted on them.

Background on the trust

The South Western Ambulance Service Trust provides services across Devon, Somerset, Cornwall and Dorset. The trust is one of the largest of the recently formed trusts, its present formation being established in July 2006. The trust covers an area of 20,231 miles of road and 827 miles of coastline. The trust provides ambulance services for the South West Strategic Health Authority, and also works with the primary care trusts of Cornwall and Isles of Scilly, Devon, Plymouth, Torbay, Somerset, Bournemouth and Poole, and Dorset.

The trust has 65 stations and covers four geographic areas including the Isles of Scilly. For the purpose of this inspection, we looked at eight ambulance stations, and 16 vehicles used for care delivery and the transportation of patients to various care settings.

The Healthcare Commission rated the trust as 'good' for quality of services and 'good' for use of resources in the annual health check for 2007/08. As part of this assessment, the trust met the core standards related to infection control, decontamination, and a clean, well-designed environment.

The Healthcare Commission inspected the trust against the previous Code of Practice on HCAs on 17 February 2009.

At the time of the current inspection, the trust was registered with the Care Quality Commission without conditions, based on an assessment of its compliance with the regulation on HCAs.

Our overall judgement

On inspection, we found no evidence that the trust has breached the regulation to protect patients, workers and others from the risks of acquiring a healthcare-associated infection.

How we made our judgement

Of the 17 measures we inspected, we had no areas for concern about 16 and found areas for improvement in the remaining one. The following tables provide further information.

For this inspection, we:

- Analysed information on how the trust manages infection prevention and control.
- Examined policies and procedures.
- visited the following ambulance stations:
 1. Taunton Ambulance Station
 2. Tiverton Ambulance Station
 3. Crediton Ambulance Station
 4. Exeter Ambulance Station
 5. Honiton Ambulance Station
 6. Yeovil Ambulance Station
 7. Saltash Ambulance Station
 8. Derriford Ambulance Station
- Visited vehicles located at the following accident and emergency areas:
 1. Taunton and Somerset NHS Foundation Trust
 2. Dorset County Hospitals NHS Foundation Trust
 3. Plymouth Hospitals NHS Trust

(In total, 16 vehicles were inspected)

- Had discussions with paramedics, technicians, supervisors, managers, ambulance care assistants, emergency care practitioners, emergency care assistants, a maintenance supervisor and a maintenance charge hand. In addition the director of infection prevention and control (DIPC) who also holds the position of director of urgent care and clinical services was interviewed, as was the infection control manager, estates manager, head of education and professional development, decontamination lead and a non executive director.

Measures where improvement was needed

Using effective arrangements for the appropriate decontamination of instruments and other equipment, which are detailed in appropriate policies

(For full wording see Code of Practice criterion 2 and guidance 2h).

What we found on the inspection

Single-use sterile equipment including endotracheal tubes, air ways and forceps were found without their protective wrappers ready for use in rapid response bags. The trust has a programme for replacement of these bags, which includes the provision of sealed packaged items; this has not been rolled out to all sites.

Our recommendation

The trust should ensure it uses effective arrangements for the decontamination of instruments.

Measures where we had no concerns on inspection

The board having an agreement that outlines its collective responsibility for minimising the risks of infection and the general means by which it prevents and controls such risks

(For full wording see Code of Practice criterion 1 and guidance 1a).

Having appropriate mechanisms for the trust's board to ensure that sufficient resources are available to effectively prevent and control HCAs

(For full wording see Code of Practice criterion 1 and guidance 1c).

Ensuring that workers involved in patients' care receive appropriate information, training and supervision on how to prevent and control infections

(For full wording see Code of Practice criterion 1 and guidance 1d).

Performing a programme of audit to ensure that policies and practices are being followed

(For full wording see Code of Practice criterion 1 and guidance 1e).

Having a policy for (as appropriate) the admission, transfer, discharge and movement of patients between departments and within and between healthcare facilities

(For full wording see Code of Practice criterion 1 and guidance 1f).

Ensuring that the environment for providing healthcare is suitable, clean and well maintained

(For full wording see Code of Practice criterion 2 and guidance 2e).

Having cleaning arrangements that detail the standards of cleanliness required and making cleaning schedules available to the public

(For full wording see Code of Practice criterion 2 and guidance 2f).

Having an adequate provision of suitable hand-washing facilities and antibacterial hand rub

(For full wording see Code of Practice criterion 2 and guidance 2g).

The supply and provision of linen and laundry reflecting national guidance (Health Service Guidance (95)18)

(For full wording see Code of Practice criterion 2 and guidance 2i).

Having a policy for uniforms and work wear to ensure that staff wear clothing that is clean and fit for purpose

(For full wording see Code of Practice criterion 2 and guidance 2j).

Gain the co-operation of staff, contractors and others involved in the provision of healthcare in preventing and controlling infection

(For full wording see Code of Practice criterion 5).

Following appropriate policies and protocols on standard precautions for infection control

(For full wording see Code of Practice criterion 8 and guidance 8a).

Following appropriate policies and protocols on aseptic technique (a procedure that is performed under sterile conditions)

(For full wording see Code of Practice criterion 8 and guidance 8b).

Following appropriate policies and protocols on the safe handling and disposal of sharps

(For full wording see Code of Practice criterion 8 and guidance 8e).

Following appropriate policies and protocols on the management of staff exposure to blood-borne viruses and preventative treatment after exposure

(For full wording see Code of Practice criterion 8 and guidance 8g).

Following appropriate policies and protocols on the decontamination of reusable medical devices

(For full wording see Code of Practice criterion 8 and guidance 8j).

Bibliography

The new Code of Practice on HCAs, which came into force on 1 April 2009

The Health and Social Care Act 2008. Code of Practice for the NHS on the prevention and control of healthcare associated infections and related guidance. Department of Health, January 2009. Available at:

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_093762

The Government's new regulation on HCAs, which came into force on 1 April 2009

The Health and Social Care Act 2008 (Registration of regulated activities) Regulations 2009. Department of Health, March 2009. Available at:

www.opsi.gov.uk/si/si2009/uksi_20090660_en_1

The previous Code of Practice on HCAs (used by the Healthcare Commission for inspections up to 31 March 2009)

The Health Act 2006: Code of practice for the prevention and control of healthcare associated infections. Department of Health, January 2008. Available at:

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_081927

National guidance on laundry and linen supplies

HSG (95)18: Hospital laundry arrangements for used and infected linen, Department of Health, April 1995. Available at:

http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Healthserviceguidelines/DH_4017865