

Infection Prevention and Control Care Home Champions Newsletter

Issue 2 March 2022

Firstly, all of us here at Infection Prevention and Control would like to thank you all for the hard work and commitment shown in these challenging times particularly over the winter months.

We recognise the difficulties you have all faced and appreciate the warm welcome we always receive from all the care homes we visit.

World Health Organization

UNITE

SAVE LIVES





World Hand Hygiene Day May 5th 2022 Unite for safety: clean your hands

TO HELP SAVE LIVES.

JOIN THE CAMPAIGN

IPC Care Home Champions

We need your help to recognise and celebrate the importance of Hand Hygiene. This year's campaign is **UNITE** so let's work together to showcase how we the caring staff of Birmingham promote best practice.

BCHC IPC team members, Jean and Ian aim to visit 22 Champion Care Homes for 2022. This will take place W/C 02/05/22.

Will your team be up for the glow box challenge?

Email jean.dipple@nhs.net

Create a Hand Hygiene notice board, using posters, pictures and relevant information. Email me a picture of your board to be in with a chance of a prize.

Staff teams across all levels of care can **UNITE** to share and influence a culture of safe quality care within their health care organisation. Hand Hygiene remains the single most effective way to prevent harm and stop the spread of infections.

Unite, talk and work together on hand hygiene for high quality safer care everywhere.





E. coli - What YOU can do to break the 'Chain of infection of Infection'

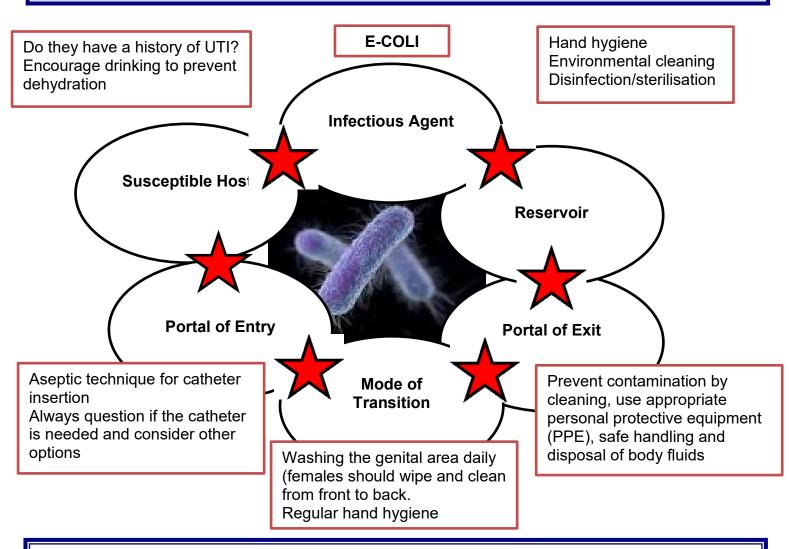
What is E.coli and how does it cause infections?

E. coli is a gram-negative bacteria that lives harmlessly in the intestine of people and animals and provides beneficial functions in aiding food digestion, however, when detected in other parts of the body it can cause problems such as urinary tract infections (UTI), pneumonia and blood stream infections.

In healthy people an E. coli UTI is a less serious problem and causes a lower UTI (cystitis). People who rely on indwelling urinary catheters for bladder drainage are at increased risk of UTI's. This is because:

- This is because the catheter breaches the body's natural defences
- The catheter is a foreign body in the urethra and bladder •
- It rapidly acquires a biofilm composed of bacteria

There is a risk of contamination of the urinary tract during insertion, catheter changes and subsequent catheter care.



Escherichia coli (E. coli) is the most common cause of UTI's, which can lead to life threatening blood stream infections (BSI).

Three-guarters of all E.coli BSI's and the highest number of deaths due to E.coli BSI's, occur in community settings, e.g. care homes, home care. Targeting a reduction in UTI's will have a significant impact in reducing bloodstream infections.

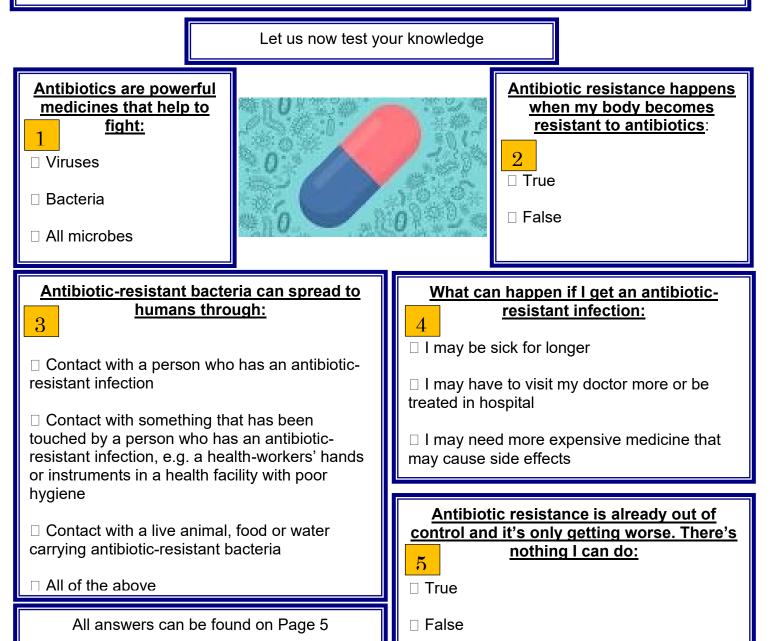




Antibiotic Awareness

The World Health Organisation (WHO), has launched a World Antibiotic Awareness campaign. To increase awareness of Antimicrobial resistance and its impact upon healthcare associated infection and their key messages are:

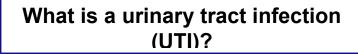
- Antimicrobial resistance (AMR) threatens effective treatment and prevention of an increasing range of infections
- AMR is a serious threat to public health globally, requiring action across all government sectors and society
- Major surgery and cancer chemotherapy would be compromised without effective antibiotics
- Resistant infections have higher costs due to prolonged hospitalisation, and use of more expensive drugs
- Drug resistance is complicating treatments for TB, HIV, Malaria and C-Dif





Birmingham Community Healthcare NHS

NHS Foundation Trust





The diagnosis of urinary tract infection (UTI) is difficult in older people who are more likely to have bacteria in their urine which is not causing any harm, (asymptomatic bacteriuria) and doesn't need antibiotic treatment.

Older Patients frequently receive unnecessary antibiotic treatment for asymptomatic bacteriuria which puts them at risk of developing future antibiotic resistance or Clostridium difficile Infection (C.diff)

Upper UTI

Includes infections of the kidneys or ureters (the tubes connecting the kidneys to the bladder).

Symptoms:

- high temperature (fever) of 38oC or above
- low temperature less than 36oC with shivering or chills
- pain in sides or back
- new confusion, agitation or restlessness

Lower UTI

Includes infections of the bladder (cystitis) or urethra (the tube that carries urine out of the body).

Symptoms:

- increased frequency of passing urine •
- pain or discomfort when passing urine
- sudden urges to urinate/new incontinence
- lower abdominal pain
- feeling generally unwell, aches and tiredness.

Preventing urinary tract infections

Preventing dehydration - Ensure service users receive adequate hydration. Good personal hygiene

- For females, it is important after they have passed urine to wipe with toilet paper from front to back and dispose of after each wipe into the toilet/commode.
- When washing the female genital area, wipe from front to back. The cloth/sponge, if not disposable, should be rinsed in warm soapy water between each wipe.
- Routine personal hygiene, such as a daily bath or shower, is ideal.
- If unable to bathe, staff should wash the genital area daily with soap and warm water and rinse.

When to send a specimen?

For Patients who are over 65 years, consider sending a specimen if there are two or more symptoms of a UTI. For catheterised service users, consider sending a specimen if their temperature is less than 36°C or greater than 38°C, they have a new or increased confusion or loss of diabetic control.

Specimen collection

Collect a mid-stream specimen before starting antibiotics.

Use a specimen container with boric acid (red top) as it preserves bacterial numbers for up to 72 hours. Fill to the fill line. If you need a catheter specimen, only take urine from the sampling port, never the bag, using an aseptic technique. Remember all service users with a catheter will have bacteria in their urine so only take a specimen if there are symptoms of an infection.







NHS Foundation Trust



World Antibiotic Awareness



Answers

Antibiotics are medicines that treat bacterial infections. They do not cure infections caused by viruses, such as the common cold or flu.

Taking antibiotics when you do NOT need them can prevent them working when you DO need them.

3.

1

Antibiotics are given to humans, animals, fish and crops. Antibiotic resistance happens when bacteria change and become resistant to the antibiotics used to treat the infections they cause.

Antibiotic-resistant bacteria spread through contact with humans, animals, food or environment that are carrying them.

You can help to prevent the spread of infections by regularly washing your hands, covering your nose and mouth when you cough or sneeze, and practising safer sex



2. False.

Antibiotics target bacteria, killing or weakening them and helping you to fight off infections.

Your body does not develop resistance to antibiotics; it is the bacteria which becomes resistant to antibiotics through genetic changes.

This means that if you get an antibiotic-resistant bacterial infection, the usual antibiotics used to fight it will no longer be effective.

A less accessible or last resort antibiotic will then need to be used, and in some cases options for potential active antibiotics could run out

4.

Antibiotic resistance is happening everywhere in the world, affecting people of all ages.

It is one of the biggest threats to public health today.

Antibiotic resistant infections can take longer to treat, may require more frequent doctor visits, possible hospital stays, more severe side effects.

5.

While antibiotic resistance occurs naturally over time, the misuse and over-use of antibiotics in plants, animals and humans has accelerated this process to dangerously high levels. BUT it's not too late to reduce the impact of antibiotic resistance and we all have a part to play in preserving the effectiveness of antibiotics.





Over to you...

Link worker in the spotlight

Catching up with Laura Talbot at "Castlecroft Care Home" Weoley Castle part of the Sanctuary Care



Laura Talbot

House Keeping Supervisor based at Castlecroft Care Home, Sanctuary Care.

Laura joined the team in 2020 and has strived to keep all her residents and colleagues as safe as possible.

Laura attended the IPC Champions Event in September, after demonstrating a real interest in all things IPC.

"For me the key learnings were the importance of hand hygiene and how completing audits will lead to improvements."

She also found the outbreak management section particularly useful and can draw on the knowledge gained.

"Doing the training has given me the confidence to not only challenge poor practice if I see it, but I also now feel able to support others and give explanations, why we have to implement actions"



Laura in action encouraging all visitors to use the hand hygiene facilities on entering the premises.

Thank you Laura for being an Infection Prevention Control Champion.

THIS COULD BE YOU !!

If you would like to be a Link worker in the spotlight please email: ipcdata@nhs.net



Upcoming Care Champions meeting

We are planning to hold an IPC champions network forum on April 26th 2pm via Microsoft Teams. Join on your computer or mobile app

Click here to join the meeting

In addition we are hoping to hold a half day event to launch our new IPC work book so look out for that.

We are very keen to welcome new champions and in the process of planning a further training event for care home staff that did not manage to book onto the dates last year.

Thank you for taking time out to read this guarters Care Home Champion newsletter.

In the next instalment we will look at

WHO Hand Hygiene Day

And

Improving Environment non compliance

If you would like a topic added please don't hesitate to contact the IPC Team.