

# Inspection report

## Cleanliness and infection control Devon Primary Care Trust

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**Region:**

South West

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**Provider's code:**

5QQ

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**Type of organisation:**

Primary Care Trust

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**Sites we visited:**

Whipton Community Hospital  
Exmouth Hospital  
Tiverton and District Hospital  
Ottery St Mary's Hospital  
Tavistock Hospital  
Totnes Hospital

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**Date of inspection:**

26 May 2010

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**Date of publication:**

16 June 2010

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## Introduction to our inspections

NHS organisations that provide regulated activities must be registered with the Care Quality Commission by law. To be registered they must meet new registration requirements – essential standards of quality and safety. Once registered, we continually monitor their compliance. In addition, from April to September 2010 we are running a dedicated inspection programme to assess NHS compliance with regulation 12, regarding cleanliness and infection control. We will focus on community hospitals provided by primary care trusts, but may visit other NHS trusts.

Our assessors make unannounced visits, to ensure that they see the hospital as a patient or visitor would see it. 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 patients' 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 analyse data to plan the scope of our inspections before each visit. We will usually spend at least one day inspecting the trust and will also interview key members of staff. The measures that we assess each trust against are based on parts of the Department of Health's Code of Practice on infection prevention and control and related guidance (*The Health and Social Care Act 2008: Code of practice for health and adult social care on the prevention and control of infections and related guidance, Department of Health, December 2009*). We use this information, alongside our guidance on compliance, to assess the trust's compliance with the regulation on cleanliness and infection control.

## Background on the trust

The Devon Primary Care Trust is based in Exeter, Devon. It has recently undergone an internal restructure to split its commissioning function from the care services provider part of the organisation.

The trust has 22 inpatient sites with 456 beds. The larger community hospitals have minor injury, x-ray and theatre departments.

For the purpose of this inspection only the inpatient services at six community hospitals were considered.

The trust had not been inspected previously against the Code of Practice on infection prevention and control.

## Our overall judgement

On inspection, we found evidence giving us moderate concern about the provider's compliance with the regulation on cleanliness and infection control.

## How we made our judgement

Of the 14 measures we inspected, we had no areas for concern about 12 and found areas for improvement in the remaining two. The following tables provide further information.

For this inspection, we:

- Analysed information on how the trust manages infection prevention and control, such as its risk registers, the frameworks used to assure the board that plans are happening in practice, and the results of audits.
- Examined policies and procedures.
- Visited
  - A medical ward at Tavistock Hospital
  - A medical ward at Ottery St Mary Hospital
  - Dart Ward at Totnes Hospital
  - Twyford Ward and Blackdown Ward at Tiverton and District Hospital
  - Doris Head Ward at Exmouth Hospital
  - Budelake Ward and Poltimore Ward at Whipton Community Hospital
- Had discussions with staff including matrons, ward sisters, ward managers, health care assistants, domestic staff, the senior infection control nurse, the head of patient safety, the deputy assistant director of professional practice, a lead pharmacist, the assistant director for health and social care, the director of provider service and the director of infection prevention and control. Two patients also spoke to our assessors.

### Measures where we had cause for concern on inspection

**Providing and maintaining a clean and appropriate environment that facilitates the prevention and control of infections.** This includes: designating lead staff; involvement and responsibility of key staff; cleaning and maintenance of the care environment; cleaning arrangements for premises; adequate hand-cleaning facilities; cleaning of equipment used for care; and supply of linen and laundry.

(For full wording see Code of Practice criterion 2 and guidance 2.1).

#### What we found on the inspection

At Totnes Community Hospital, we saw that there was no guidance on colour coding of cleaning equipment. Housekeepers only had access to one colour of bucket and mop and these were used to clean all areas. We saw two toilet risers that were slightly soiled. Two of the eight commodes, which were marked as clean and ready for patient use, were checked and found to be slightly stained under the seats. At Whipton Community Hospital, we saw two out of 16

## Care Quality Commission

commodes that were slightly soiled and stained on the underside. We also found four commodes with tears on the cushion.

At Tiverton and District Hospital, Blackdown Ward, we saw four commodes that were ready for use and all were dirty. One had brown stain on the underside. Three had yellowish stain on the underside.

At Ottery St Mary's Hospital, we observed seven commodes that were ready for use and all had light yellow staining on the underside of the commode.

The trust decontamination policy does not identify who is responsible for the cleaning of what equipment. Documents were seen for recording cleaning of equipment but these had not been completed.

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**Following appropriate policies, as outlined in the Code of Practice, on the prescription of antimicrobial drugs that ensure prudent prescribing and stewardship, including appropriate audit and review.**

(For full wording see Code of Practice criterion 9 and guidance 9.3L).

### What we found on the inspection

At Totnes Community Hospital and Tavistock Hospital, we found no access to any antibiotic prescribing guidance and no audit of antibiotic prescribing being undertaken. The trust informed us that it has a draft antibiotic policy. It confirmed that so far, antibiotic audits have only been undertaken at one inpatient site. It has recently appointed to one of two community services pharmacists posts which include antimicrobial advice and audit in the job descriptions. The trust has also recently approved a new prescription chart that is going to be rolled out in the next six weeks that will have in place an automatic stop order after an appropriate duration.

## Our response

**We have taken formal regulatory action under Regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 by:** requesting a report showing how the trust will maintain compliance with regulation 12.

## Measures where we had no cause for concern on inspection

**Using appropriate systems to manage and monitor the prevention and control of infection.** This includes: collective agreement on risk minimisation; designation of lead staff; ensuring sufficient resources; information, training and supervision of workers; auditing; and information sharing.

(For full wording see Code of Practice criterion 1 and guidance 1.1).

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**Using appropriate systems to assess reduce and control risks of infection for people receiving care.**

(For full wording see Code of Practice criterion 1 and guidance 1.2).

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**Having a lead for infection prevention and control, who fulfils the role specified in the Code of Practice.**

(For full wording see Code of Practice criterion 1 and guidance 1.3).

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**Using a system for quality assurance to check that the trust's aims for infection prevention and control are being met, including regular reporting to the NHS board or registered provider.**

(For full wording see Code of Practice criterion 1 and guidance 1.5).

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**Running a programme for infection prevention and control with set objectives, priorities for action, evidence of policy implementation and, if appropriate, reporting on progress.**

(For full wording see Code of Practice criterion 1 and guidance 1.7).

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**Having an infrastructure (network of staff) for infection prevention and control with an appropriate mix of expertise and 24-hour access to specific infection control advice.**

(For full wording see Code of Practice criterion 1 and guidance 1.8).

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**Having appropriate arrangements for cleaning services.** This includes: clearly defined roles, responsibilities and routines; sufficient resources; expert input for contract preparation; and a process for additional cleaning.

(For full wording see Code of Practice criterion 2 and guidance 2.4).

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**Providing suitable accurate information on infections to service users and their visitors.**

This includes relevant information on: general principles of infection prevention and control; the roles of carers, relatives and advocates; awareness and empowerment; visitors' hand hygiene; policies on visiting; reporting failures; and explaining incidents or outbreak management.

(For full wording see Code of Practice criterion 3 and guidance 3.1).

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**Providers of inpatient care providing, or securing the provision of, adequate isolation precautions and facilities sufficient to minimise the spread of infections.**

(For full wording see Code of Practice criterion 7 and guidance 7.1).

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**Following appropriate policies that are designed for the individual's care and provider organisations, prevent and control infections, and fulfil the requirements set out in the Code of Practice regarding policy format, monitoring, and review.**

(For full wording see Code of Practice criterion 9 and guidance 9.3).

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**Following appropriate policies, as outlined in the Code of Practice, on the safe handling and disposal of sharps.**

(For full wording see Code of Practice criterion 9 and guidance 9.3e).

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**Following appropriate policies, as outlined in the Code of Practice, on the handling of devices designed for single use only, using these devices only once, and disposing of them safely.**

(For full wording see Code of Practice criterion 9 and guidance 9.3k).

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**Following appropriate policies, as outlined in the Code of Practice, for uniforms and work wear to ensure that clothing worn by staff is clean and fit for purpose, with consideration given for contact of clothing with the person being cared for and the support of good hand hygiene.**

(For full wording see Code of Practice criterion 9 and guidance 9.3x).

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