

North East and North Cumbria ICB MRSA Reduction Strategy Plan on a Page 2024/25

To reduce healthcare associated incidents of MRSA.

Objective 1: Education of Health and Social Care Staff

What are our priorities?

- Consistent training resources across the ICB
- Deliver training to ensure knowledge of MRSA throughout the **whole NENC ICB** workforce
- Deliver targeted training to ensure a high level of knowledge including screening, isolation, treatment and patient placement. Training should include all healthcare disciplines including medics and AHPs
- Training for device management and ANTT
- Develop a network of IPC Champions to help support education
- Education and support for patients, relatives and carers for MRSA

Outcomes:

- Improved workforce knowledge.
- Improved personal practice.
- Improved quality assurance.
- Improved learning across the system.
- Reduced infections.

Objective 2: Improve physical environments

What are our priorities?

- Ensure that estates are maintained and improved to a quality standard
- Maximise isolation facilities
- Clear barrier nurse guidance when isolation is not achievable
- Standardise cleaning practice for MRSA
- Provide quality assurance of cleaning measures
- Training and Education of estates and domestics staff in IPC
- Collaborative approach to managing all healthcare facilities within our estate
- Community teams to be supported to maintain safe working environments

Outcomes:

- Improved collaborative working
- Increased assurance in service delivery.
- Cleaner healthcare environments
- Improved patient experience
- Reduced transmission of infections
- Empowered staff who are proud to work in their environment.

Objective 3: Screening and Patient Pathways

What are our priorities?

- Robust and clear screening criteria including agreed high risk groups
- Ensure that prompt prescription of decolonisation therapies is monitored
- Awareness of complex skin conditions and the risk and challenges these pose to screening, decolonisation and treatment
- Assist with appropriate decolonisation prescribing in community
- Adherence and implementation of the blood culture guidance to minimise the number of contaminant samples
- Improved antibiotic prescription pathways for all infections in line with recommended best practice
- Collaborative working for treatment of high-risk patients both in hospital and community
- Promote IV to oral switch and embed Start SMART and FOCUS methodology

Outcomes:

- Improved workforce knowledge.
- Improved personal practice.
- Reduction in unsuitable prescribing.
- Reduced infections.
- Reduced harm to patients
- Reduction in AMR

Objective 4: Surveillance and intelligence to inform action.

What are our priorities?

- Robust surveillance and intelligence for MRSA and AMR
- Impact and utilisation of PSIRF at local and ICB level to identify new and emerging themes
- Review of MRSA data, identifying trends, patient outcomes, mortality rate, postcode location, prescribing practices
- Further intelligence on demographics to inform targeted interventions for the population we serve
- Outbreak guidance specific to MRSA built on shared experiences and learning

Outcomes:

- Evidence led service delivery and improvement
- Reduced infections
- Interventions that are fit for the population that we serve

Objective 5 and Outcomes: Raising awareness and communications

- To raise awareness of infection prevention and control, and supporting communications aimed at inappropriate prescribing of antibiotics.
- Improved communication pathways between NENC ICB partners
- Whole system approach to MRSA reduction
- Improved communication and engagement with community teams and GP surgeries
- Improved awareness at all levels of the MDT