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From Population Health Directorate

By email:

Niall McCracken [nmccracken@thedetail.tv]

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Our Ref: FOI DHSSPS 119/2012

Date: 22 October 2012

Dear Mr McCracken

## **FREEDOM OF INFORMATION ACT 2000**

I am writing to confirm that the Department of Health, Social Services and Public Safety has now completed its search for the information which you requested via email on 8 October 2012. For ease of reference your request has been copied below:

"Under FOI legislation can the department please give me an update on the current status of the 17 recommendations, as detailed in annex 1 and 2 of [CMOs letter dated 14 June 2012]. Including a breakdown and details on whether or not each trust has individually achieved implementation by the required dates outlined and if not, what action is being taken".

A copy of the information you requested is appended to this letter - namely a summary of progress (as at 11 October 2012) made on the 17 recommendations contained in the Final Report of "Independent Review of Incidents of *Pseudomonas aeruginosa* Infection in Neonatal Units in Northern Ireland". I have also provided a summary of progress (as at 11 October 2012) made on the 15 recommendations contained in the Interim Report.

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If you feel that the information we have provided does not fully meet your request please contact us at 028 90 520784 in the first instance. You have the right to request a formal review by the Department within two calendar months of the date of this letter. If you wish to do so, please write to Mrs Charlene McQuillan, Departmental Information Manager, Room A.3.5b, Castle Buildings, Stormont, Belfast BT4 3SQ.

If after such an internal review you are still unhappy with the response, you have the right to appeal to the Information Commissioner at Wycliffe House, Water Lane, Wilmslow, CHESHIRE SK9 5AF, who will undertake an independent review.

If you have any queries about this letter, please contact me. Please remember to quote the reference number above in any future communications.

Yours sincerely



S Tallentire  
Local Information Officer

**INDEPENDENT REVIEW OF INCIDENTS OF *PSEUDOMONAS AERUGINOSA*  
INFECTION IN NEONATAL UNITS IN NORTHERN IRELAND**

**FINAL REPORT: SUMMARY OF PROGRESS ON IMPLEMENTATION OF  
RECOMMENDATIONS - 11 OCTOBER 2012**

	<b>Recommendation</b>	<b>Status</b>
1	All Trusts should develop a communications plan for incidents including arrangements for engaging with families. The plans should ensure that clinical staff are provided with sufficient support to allow them to concentrate on clinical matters, with other roles taken on by non-clinical staff.	<b>Completed.</b>
2	Trusts should establish arrangements for independent validation of their self-assessment processes for water management compliance with statutory requirements and guidance.	<b>Completed.</b>
3	Trusts should maintain an evidence file of compliance with L8 and HTM 04-01.	<b>Completed.</b>
4	Trusts should maintain up to date registers of all those with named responsibilities under Approved Code of Practice L8 and that each is provided with written authorisation to carry out their statutory functions in water management.	<b>Completed.</b>
5	Trusts should ensure that their written schemes for water management are kept up to date to reflect changes in procedures and facilities.	<b>Completed.</b>
6	Trusts should review the training needs of staff with prescribed functions in water management and ensure appropriate accredited training is provided when required.	<b>Completed.</b>



	<b>Recommendation</b>	<b>Status</b>
7	Trusts should develop Water Safety Plans for Legionella, Pseudomonads and other opportunistic water pathogens as recommended in DHSSPS Circular HSS (MD) 16/2012 issued on 30 April 2012.	<b>Completed.</b>
8	Trusts should develop an annual action plan for water management which should be submitted to Trust Board for approval.	<b>Partially Completed.</b>  All Trusts have confirmed compliance with this recommendation except Belfast Trust whose Action Plan is awaiting its Trust Board approval on 1 November 2012.
9	Trusts should review their governance arrangements for infection prevention and control in accordance with the NICE Quality Improvement Guide: "Prevention and Control of Healthcare Associated Infections".	<b>Completed.</b>
10	The Public Health Agency should establish a weekly health protection alert bulletin for health protection professionals across Northern Ireland.	<b>Completed.</b>
11	All HSC organisations should review their systems to ensure that any unusual incidents or intelligence related to infectious diseases are promptly shared with the PHA Duty Room.	<b>Completed.</b>
12	All organisations should review their arrangements for sharing and documenting information received in relation to infectious disease incidents.	<b>Completed.</b>
13	A joint plan across relevant organisations for the regional response to the management of outbreaks, affecting more than one organisation, should be developed, which clearly identifies the roles of each organisation.	To be completed by <b>31 December 2012.</b>

	<b>Recommendation</b>	<b>Status</b>
14	The review team recommends that trusts should ensure that high impact interventions related to key clinical procedures are implemented and assured using a standardised common approach across all neonatal units.	To be completed by <b>31 December 2012.</b>
15	Guidelines should be developed for the organisation of, and participation in, regional teleconferences for future incidents.	To be completed by <b>31 December 2012.</b>
16	All organisations should review their arrangements for supporting staff during incidents including outbreaks and ensure that incident plans include provision for support for staff both during and after incidents.	<b>Completed.</b>
17	The recommendation on using sterile water in the interim report should be kept under review in relation to babies in Level III neonatal units (Special Care Baby Units) as new evidence emerges.	<b>Completed - ongoing</b>



**INTERIM REPORT: SUMMARY OF PROGRESS ON IMPLEMENTATION OF RECOMMENDATIONS - 11 OCTOBER 2012**

	<b>Recommendation</b>	<b>Status</b>
1	The current interim guidance that sterile water should be used when washing all babies in neonatal care (Levels 1, 2 and 3) should be continued pending early consideration of the Department of Health (England) guidance issued on 30 March 2012.	<b>Completed.</b>
2	Tap water should not be used in maternity and neonatal units during the process of defrosting frozen breast milk.	<b>Completed.</b>
3	The current arrangements for testing water in neonatal units in NI for pseudomonas should be continued pending early consideration of the Department of Health (England) guidance issued on 30 March 2012. This guidance sets out recommendations for water testing for all augmented care units including neonatal care.	<b>Completed.</b>
4	The presentation of test results of water samples should be standardised across the laboratories which undertake this for HSC organisations.	<b>Completed.</b>
5	Guidance on cleaning sinks should be reviewed so that practice is standardised across all clinical areas.	<b>Completed.</b>
6	Regional guidance on the cleaning of incubators and other specialist equipment for neonatal care should be produced.	<b>Completed.</b>
7	Independent validation of hand hygiene audits should be carried out on a regular basis, supported by robust action plans where issues of non-compliance are identified.	<b>Completed.</b>



8	The intensive care accommodation in the neonatal unit at Antrim Area Hospital should be expanded to allow more circulation space around cots.	<p><b>Partially Completed.</b></p> <p>The Northern Trust has been given conditional approval to proceed with their plans to extend the existing Neonatal Unit at Antrim Hospital - the capital cost of this work is expected to be £700k.</p>
9	<i>Pseudomonas aeruginosa</i> should be identified as an alert organism for neonatal intensive and high dependency care. When identified from a sample from a baby, taps and sinks should be tested in rooms which had been occupied by that baby since birth.	<b>Completed.</b>
10	Surveillance arrangements should be established for <i>Pseudomonas aeruginosa</i> for augmented care settings including neonatal care.	To be completed by <b>31 October 2012.</b>
11	All relevant organisations should work to an agreed regional protocol for the declaration of outbreaks.	<b>Completed.</b>
12	Arrangements for the typing of strains of <i>Pseudomonas aeruginosa</i> should be established in Northern Ireland.	To be completed by <b>31 December 2012.</b>
13	A regional neonatal network should be formally established in Northern Ireland.	<p><b>Partially Completed.</b></p> <p>Processes are in place to ensure the neonatal network was established by end of September 2012 however a lead-in period for implementation of the network is required to allow for the appointment of posts costing £130k per annum.</p>

14	<p>The hours of availability for the regional transfer service for neonates should be expanded with plans put in place to move to a 24 hour service.</p>	<p><b>Partially Completed.</b></p> <p>This service will be expanded to 12 hrs per day, seven days a week in the first instance which will cost £114k per annum.</p>
15	<p>The development of the new Regional Neonatal Intensive Care Unit at Royal Jubilee Maternity Service should be expedited as soon as possible. In the interim period, improved accommodation for the purposes of isolation and for the cleaning of equipment should be made available for the current unit. Steps to improve the space around each cot should be considered.</p>	<p><b>Partially Completed.</b></p> <p>Proposals developed and funding of £495k provided.</p> <p>Some preparatory work has been carried out and the building alterations will be carried out under a multi-phased project completing within the financial year 2012/13.</p> <p>The additional new building is due for completion by December 2015.</p>