

Self-assessment tool for acute hospital groups relating to infection prevention and control arrangements to manage Covid-19

Issued at the request of the Covid-19 National Public Health Emergency Team

Group Name: Ireland East Hospitals Group

About the self-assessment tool

This self-assessment tool comprises a series of specific questions in relation to infection prevention and control preparedness measures required in acute hospital services to manage Covid-19. It has been informed by similar documentation produced by the World Health Organisation, and the European Centre for Disease Prevention and Control.

This tool is designed to assist hospitals in their ongoing efforts to prepare for Covid-19 from the perspective of infection prevention and control. The returned selfassessment will also be used to inform the Covid-19 National Public Health Emergency Team in its deliberations relating to the ongoing national management of this issue.

This self-assessment tool is formatted as an interactive portable document which should be save onto a desktop or laptop computer only. The self-assessment tool must only be completed electronically and not manually.

- The lead respondent completing the self-assessment tool should first check that they can save and store this document using Adobe Reader only on the device they propose to use to complete this self-assessment tool. This will allow the self-assessment tool to be filled out in separate stages and at different times should this prove necessary. All entries in the self-assessment tool should be saved before closing the document to ensure that work is not inadvertently lost.
- Please complete all sections by answering yes or no to each question. If necessary, please provide further information in the comment box at the end of each section. For example, if you do not accommodate mechanically ventilated inpatients in your hospital, please state so in the relevant comment box.
- 3. The Hospital Group Chief Executive Officer must sign the declaration included at the end of this self-assessment tool before submitting it to HIQA. This should be done to verify that the information provided accurately reflects the arrangements in the hospitals within the Hospital Group.
- Please ensure that the documents requested by HIQA are submitted at the same time as the completed self-assessment tool.

The completed self-assessment tool should be emailed to <u>qualityandsafety@hiqa.ie</u>. It is the responsibility of the Hospital Group Chief Executive Officer to ensure that the self-assessment is returned to this address by Monday 13 April.

Lead respondent details

Please complete this section before proceeding to self-assessment questions:

Lead respondents name	Sinead Brennan
Lead respondents role title	Director of QPS
Lead respondents email address	sbrennan@iehg.ie
Lead respondents contact telephone number	087 0945530

1	. Governance and Management		
1.1	Does each hospital in your hospital group have an identified person who	Yes	No
	has overall responsibility for directing the hospital's emergency plan in relation to management of COVID-19?	\checkmark	
1.2		Yes	No
	and arrangements in place for the management of a Covid-19 outbreak in each hospital – inclusive of defined involvement from senior managers and infection prevention and control experts?	\checkmark	

2.	Resources, access to expertise and staff training		
2.1	Does each hospital have access to advice from Medical Microbiology or Infectious Diseases consultants for the management of Covid-19 cases on a 24-hour 7 days a week basis?	Yes 🗸	No
2.2	Are you assured that each hospital has access to necessary levels of infection prevention and control advice and expertise on a 24-hour 7 days a week basis?	Yes 🗸	No
2.3	Are you assured that each hospital has the required amount of testing kits to maintain the required level of diagnostic testing for Covid-19 over the next four weeks?	Yes	No V
2.4	If hospital(s) in your group have an in-house Covid-19 testing service – are you assured that they have the necessary resources, inclusive of reagents and consumables, to continue to meet the required demands placed upon it over the next four weeks?	Yes	No V
2.5	Are you assured that each hospital has sufficient access to testing and in-house contact tracing to quickly identify both close contacts and occupational cases of Covid-19?	Yes	No V
2.6	 Are you assured that each hospital has a comprehensive staff training programme in place and appropriate to the staff role, in for example: Healthcare staff: training on how to recognise signs and symptoms of Covid-19 minimise the specific risks related to the management of suspected or confirmed Covid-19 patient/s Non-healthcare staff: training on how to minimise specific risks related to their jobs in particular the cleaning of area occupied by suspected or confirmed Covid-19 patient/s Standard precautions in infection prevention and control Hand Hygiene Protective personal equipment - who should use PPE, why, when and how doff/don PPE Data protection in relation to patients Sick leave policy Communication pathways (internal and external) 	Yes	No

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l	3	Specific Infection Prevention and Control Measures				
ſ	3.1	Are you assured that each hospital has clearly defined and effective	Yes	No		
		measures in place to identify and isolate possible cases of Covid-19 at points of entry or transfer into the facility?	√			
ľ	3.2	Are you assured that each hospital has put the required measures in place to protect patients against intravascular catheter related	Yes	No		
		bloodstream infections (policies, procedures, staff training, case surveillance)? (noting a likely increase in critical care cases)	✓			
	3.3	Are you assured that each hospital in your group has the required measures in place to protect patients against ventilator associated	Yes	No		
		pneumonia (policies, procedures, staff training, case surveillance)? (noting the likely increase in critical care cases)	\checkmark			
ſ	3.4	Are you assured that all required measures to mitigate the risk of covid- 19 transmission among healthcare workers (inclusive but not limited to	Yes	No		
		adherence to social distancing during breaks, reduced staff footfall for non-essential services, staff uniform policy and adherence to sickness policies) are being adhered to in each hospital?	✓			
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4.	Environmental and patient equipment hygiene		
4.1	Is there a designated person with delegated responsibility for the management of environmental and patient equipment hygiene in each hospital?	Yes 🗸	No
4.2	Does each hospital have adequate supplies of personal protective equipment (PPE) available in different sizes (gowns, masks, eye protection, gloves) to ensure continuity of availability over the next four weeks?	Yes	No V
4.3	Does each hospital have adequate supplies of alcohol-based hand gel available for staff and patients in locations throughout the hospital to ensure continuity of availability over the next four weeks?	Yes	No V
4.4	Does each hospital have sufficient supplies of hand soap and paper towels next to <u>all</u> sinks in the hospital to ensure continuity of availability over the next four weeks?	Yes V	No

4.5	Does each hospital have sufficient supply of foot-operated bins for infectious waste?	Yes	No
			\checkmark
4.6	Does each hospital have protocols in place to ensure that healthcare	Yes	No
	personnel can readily identify equipment that has been cleaned and disinfected and is ready for patient use (e.g. tagging system, placement in dedicated clean area)?		\checkmark
4.7	Are you assured that each hospital has a cleaning specification or matrix	Yes	No
	that identifies elements to be cleaned, method of cleaning, frequency of cleaning and discipline responsible, in line with national cleaning guidelines?	\checkmark	
4.8	Are you assured that each hospital has identified and put in place the necessary resources and facilities for environmental and patient equipment cleaning in line with expected demands over the coming weeks?	Yes 🗸	No
4.9	Are you assured that each hospital has sufficient stocks of cleaning and	Yes	No
	disinfectant products shown to be effective against Covid-19 to ensure continuity of supply over the next four weeks?		\checkmark
4.10	Are you assured that all hospitals have necessary measures in place to	Yes	No
	prevent against reusable invasive device transmission of Covid-19 (through storage, transport, reprocessing and audit arrangements)?	\checkmark	

5.	 Essential support services, and the management of visitors 		
5.1	Are you assured that each hospital has adequate contingency arrangements in place to support and manage estimated and increased	Yes	No
	demand for essential services: • Waste management	\checkmark	
	Laundry services Catering services Mortuary Facilities		
	 Facility backup arrangements and contingencies Hospital Security 		
5.2	Are you assured that each hospital has appropriate measures in place to manage visitor restrictions, inclusive of special cases?	Yes ✓	No

Part 6: Infection Prevention and Control Workforce: Ireland East Hospitals Group

HOSPITAL	Consultant Microbiologists	Microbiology NCHDs	Consultant Infectious Diseases Physicians	Infectious Diseases NCHDs	Infection Control Nurses	Surveillance Scientists	List other infection prevention and control team members	Have these i been supple due to Covid	mented
The Mater Misericordiae University Hospital, Dublin	4	2	4	3	6	.5	1 admin	Yes 🗸	No 🗌
St Vincent's University Hospital, Dublin	5.1	4	4.5	4	4	.8	1.5 admin. 1 AM	Yes 🗸	No
Midland Regional Hospital Mullingar	.5	0	0	0	2.5	1	0	Yes 🗸	No 🗌
St Luke's General Hospital, Kilkenny	.4				2.5		.6	Yes 🗸	No 🗌
Wexford General Hospital	0.6	0	0	0	1.7	0	0	Yes	No
Our Lady's Hospital, Navan		0	0	0	1	1	0.5	Yes 🗸	No 🗌
St Columcille's Hospital Loughlinstown, Dublin	.18	0	0		1			Yes	No 🗌
St Michael's Hospital, Dun Laoghaire	.1	0	0		2.5			Yes	No 🗌
Orthopaedic Hospital of Ireland, Clontarf, Dublin	.25				1.5			Yes	No 🗌
Royal Victoria Eye and Ear Hospital, Dublin	0.5	0	0	0	2	0	0	Yes	No

Please note: the data request has been developed with the understanding that the data requested should already be in existence and in use by the Hospital/Hospital Group/HSE. Please submit data as whole time equivalents (WTEs) currently in position.

2.2 Are you assured that each hospital has access to necessary levels of infection prevention and control advice and expertise on a 24-hour 7 days a week basis?

Resources have been increased during Covid period in recognition of resource deficits have been highlighted. Challenges issues in the area are raised at daily huddles are addressed. The also IEHG continues with its IEHG HCAI Oversite Committee chaired by the Group CEO and representation from a national level.

2.3 Are you assured that each hospital has the required amount of testing kits to maintain the required level of diagnostic testing for Covid-19 over the next four weeks?

The IEHG Laboratory Covid 19 Group review and monitor testing kits on daily and weekly basis in conjunction with the National Clinical Programme for Pathology and the HSE. The Mater Hospital and St Vincent's Hospital have indicated they have enough testing kits for the next four weeks. Both Our Lady's Hospital in Navan and the Regional Hospital Mullingar have commenced testing, Navan have kits until the end of next week and Mullingar will have enough for the next 4 weeks. St Lukes Kilkenny and Wexford General Hospital send swabs to Waterford University Hospital.

2.4 If hospital(s) in your group have an in-house Covid-19 testing service – are you assured that they have the necessary resources, inclusive of reagents and consumables, to continue to meet the required demands placed upon it over the next four weeks?

There are well published challenges to the supply chain in this area. As above, the IEHG Laboratory Covid 19 Group review and monitor resources, reagents and consumables on daily and weekly basis

in conjunction with the National Clinical Programme for Pathology and the HSE. Currently resources are sufficient. Although challenges and limitations exist around reagents and consumables, the Mater Hospital and St Vincent's Hospital have indicated they will have enough if the current once a week delivery by the HSE continues. Both Our Lady's Hospital in Navan and the Regional Hospital Mullingar have commenced testin. Navan have enough consumables and reagents until the end of next week. Mullingar are ok for reagents (extraction kits) but are low on Consumables. St Lukes Kilkenny and Wexford General Hospital send swabs to Waterford University Hospital.

2.5 Are you assured that each hospital has sufficient access to testing and in-house contact tracing to quickly identify both close contacts and occupational cases of Covid-19?

All IEHG lab sites have access to testing either internally or externally via NVRL or IEHG labs supporting other IEHG labs. Kilkenny and Wexford labs are supported by University Hospital Waterford.

Group Director of QPS and Director of Nursing are monitoring and working closely with hospital sites and Occupational Departments to address and support capacity, resource and demand issues for contact tracing and service delivery. This is also reviewed at daily Group huddles and hospital huddles

2.6 Are you assured that each hospital has a comprehensive staff training programme in place and appropriate to the staff role, in for example:

- Healthcare staff: training on how to recognise signs and symptoms of Covid-19 minimise the specific risks related to the management of suspected or confirmed Covid-19 patient/s
- Non-healthcare staff: training on how to minimise specific risks related to their jobs in particular the cleaning of area occupied by suspected or confirmed Covid-19 patient/s
- Standard precautions in infection prevention and control
- Hand Hygiene
- Protective personal equipment who should use PPE, why, when and how doff/don PPE
- Data protection in relation to patients
- Sick leave policy
- Communication pathways (internal and external)

Issues regarding the above are reviewed at daily Group and Hospital huddles and followed up with hospitals if there are identified challenges and requirements.

4.1 Is there a designated person with delegated responsibility for the management of environmental and patient equipment hygiene in each hospital?

In some organisations this may not be a designated person and there would be a designation to ward managers and Heads of Department.

4.2 Does each hospital have adequate supplies of personal protective equipment (PPE) available in different sizes (gowns, masks, eye protection, gloves) to ensure continuity of availability over the next four weeks?

- Stock levels of PPE are sufficent to cover 24-48 hours.
- Shipments of PPE are been received by IEHG Level 3 and 4 hospitals on a daily basis from central HSE stores.
- Level 2 and speciality hospitals are ordering PPE via the national HBS portal as required.
- It is recognised that stock levels of appropriate PPE is a challange therefore the IEHG CEO hosts daily huddle with the hospitals GM/CEOs with PPE as a standing agenda item.
- The IEHG has established a PPE work group with procurement/stores personnel from each of the 11 hospitals, the IEHG HBS Business Manager and HBS Logistics.
- The Group has a conference call 3 times per weeks to monitor PPE stock levels.
- Potential shortages are managed via esclation to HBS Logistics and rotatating stock among the hospitals to prevent stock out.
- The IEHG has retained a courier who operates 5 days a week rotating stock.
- In addition the Voluntary hospitals in the group are purchasing PPE where available from suppliers directly which is used to provide contingency to the whole group.

4.3 Does each hospital have adequate supplies of alcohol-based hand gel available for staff and patients in locations throughout the hospital to ensure continuity of availability over the next four weeks? As per point 4.3

4.5 Does each hospital have sufficient supply of foot-operated bins for infectious waste?

Hospitals requiring more are on order.

4.6 Does each hospital have protocols in place to ensure that healthcare personnel can readily identify equipment that has been cleaned and disinfected and is ready for patient use (e.g. tagging system, placement in dedicated clean area)?

Awaiting confirmation from all hospital processes and will revert.

4.8 Are you assured that each hospital has identified and put in place the necessary resources and facilities for environmental and patient equipment cleaning in line with expected demands over the coming weeks?

Awaiting confirmation from all hospital of process in place

4.9 Are you assured that each hospital has sufficient stocks of cleaning and disinfectant products shown to be effective against Covid-19 to ensure continuity of supply over the next four weeks?

This is dependent on supply and will review in line with PPE approach

5.1 Are you assured that each hospital has adequate contingency arrangements in place to support and manage estimated and increased demand for essential services:

- Waste management
- Laundry services
- Catering services
- Mortuary Facilities
- Facility backup arrangements and contingencies
- Hospital Security

The IEHG are working to confirm with each hospital that they have adequate contingency arrangements in place for these services. This exercise has been completed for the Mater Hospital and Mullingar Hospital and is underway for the remaining 9 hospitals. In the case of any gaps in contingency the IEHG will support the hospital's in establishing appropriate arrangements.

Declaration to be completed by the hospital group Chief Executive Officer

I declare, that to the best of my knowledge and belief, all of the information that I have given in connection with this self-assessment, is full and correct.

For Hospital Group Chief Executive Officer					
Name:	Mary Day				
Signed:					
Date:	15042020				