

**AGENDA ITEM 2.2**  
**CARDIFF AND VALE UNIVERSITY HEALTH BOARD**  
**Infection Prevention & Control Outbreak summary Report**  
**Date prepared: 21.08.2020**

<b>Type of Outbreak / Incident</b>	Outbreak Covid -19
<b>Date outbreak / incident commenced</b>	10.06.2020
<b>Number/Name of wards affected</b>	East 2 UHL
<b>Number of staff affected</b>	13
<b>Number of Patients affected</b>	31
<b>Number of beds affected</b>	16
<b>Ward closure</b>	Yes

**SUMMARY OF OUTBREAK / INCIDENT**

A total of 31 patients and 13 members of staff tested positive for Covid-19. 14 patients were deemed healthcare acquired, 13 probable and 4 possible. Cases initially isolated to the Nightingale area. Ward closed for 14 days from the last positive/symptomatic case (23.06.2020)

**SUMMARY OF ACTIONS TAKEN**

- Meeting convened on 11.06.2020 to discuss current situation and draft action plan
- Regular outbreak meetings held, chaired by exec and with broad representation from the health board, microbiology and PHW
- Outbreak reported as SI to WG
- Three beds removed in the Nightingale area to accommodate 2m social distancing
- Early identification, Isolation/cohorting and testing of symptomatic patients
- All patients on the ward tested for Covid -19
- The need for 2m social distancing reinforced and when not possible masks to be worn e.g. hand overs
- Staff break staggered to accommodate 2m social distancing
- Donning and doffing stations reviewed
- Use of PPE reinforced.
- IP&C attended ward daily to offer support and advice and undertake observational audits on use of PPE and hand hygiene
- Situation discussed and reviewed daily in IP&C meeting with senior nurses for medicine and in Outbreak Meetings. Action plan reviewed
- Staff changing facilities reviewed
- Ward decluttered
- Footfall on the ward was high. Email sent to heads of departments to stagger when staff attending ward
- Learning from investigation shared with other clinical boards
- Development and use of Health Care Worker symptom checker
- Cleaning schedules reviewed. Emphasis on cleaning touch points, equipment
- Safety briefings implemented
- Operational leads to consider wider communication strategy regarding social distancing and PPE within UHL
- Shielding guidance to be added to discharge checklist
- Information to be provided for patients to inform them of their responsibilities regarding social distancing
- Individual hand wipes for patients
- Further office space allocated for accessing results and printing

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<b>FURTHER ACTIONS OUTSTANDING TO BE TAKEN FORWARD (if any)</b>	
<ul style="list-style-type: none"> <li>• Nightingale Wards within UHL make it difficult to manage outbreaks. MCB have raised this as a risk</li> <li>• Operational leads to consider wider communication strategy regarding social distancing and PPE within UHL</li> </ul>	
<b>LESSONS LEARNED</b>	
<ul style="list-style-type: none"> <li>• Nightingale Wards not conducive to containing outbreaks</li> <li>• When wards change from red stream to amber stream there is the potential that the risk is seen as diminished and can lead to variable practices in the use of PPE. This emphasises the need for the correct use of PPE and hand hygiene at all times.</li> <li>• The 2m social distancing needs to be adhered to at all times. This was not the case during handovers and staff rooms</li> <li>• Confused and wandering patients can contribute to transmission</li> <li>• Communal areas for staff did not promote social distancing</li> <li>• Footfall on the ward was high particular in the morning periods. Needs to be staggered throughout the day</li> <li>• Patients and staff need to be reminded of their responsibilities regarding social distancing</li> </ul>	
<b>PRESS RELEASE</b>	Communications Team informed as per Outbreak Procedure
<b>DATE OUTBREAK / INCIDENT CLOSED</b>	08.07.2020