Welcome

Welcome to the first SICSAG newsletter of 2015. It has been a busy time since the last newsletter so we have lots of news to bring you. We have said farewell to Angela Khan who has recently moved on and welcomed Paul Smith who joined us in September. I am pleased to report that our SICSAG Steering group now has representatives from across medical, nursing and pharmacy disciplines and our plan now is to appoint a patient representative to our group.

We are continuing our established collaboration with Health Protection Scotland to collect, analyse and report on Healthcare Associated Infection (HAI) Surveillance across Scottish ICU and we hope to move to publishing jointly in future years. There have been a number of changes to Wardwatcher with increased data collection on Obstetrics and improvements in data security. The continued success of the audit would not be possible without the ongoing commitment, support and hard work of the Scottish Critical Care clinical community – thank you to you all.

Dr Steve Cole,
Chair, SICSAG Steering Group
Recent Changes to Personnel

Clinical Coordinator Angela Khan has moved to the Scottish Trauma Audit Group (STAG) after being with SICSAG for the last 7 years. She will be much missed by everyone involved with SICSAG who recently recognised Angela for her hard work, dedication and assistance over the years. We wish her well in her new role.

In Angela’s place, we would like to welcome Paul Smith. Paul brings to National Services Scotland and SICSAG over 20 years experience in critical care. Paul worked in the Cardiac Surgery ICU at Glasgow Royal Infirmary before travelling to work abroad. He has worked in several countries including the Middle East, USA and most recently Canada. In Canada Paul continued his work in Cardiac ICU before becoming an integral part of that organisation’s participation in the American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP). Over the last three years he was heavily involved with the implementation of changes in the surgical programme that brought about significant reductions in urinary tract infections and surgical site infections. Paul returned to Scotland in September and is looking forward to the challenges that SICSAG offers.

We are pleased to announce that we now have a full-time analyst with SICSAG. Lorraine Smyth had already been working with SICSAG on a part-time basis, her time being shared with the Scottish Renal Registry. We are very happy to have Lorraine full-time and look forward to developing our reporting and information request service as we move forward.

Lorraine is currently reviewing our monthly reports and would be keen to hear your ideas. Is there anything we could include? Anything we should exclude? Sent your ideas and comments to NSS.sicsag@nhs.net

We have also recently recruited a new Regional Coordinator who will support the audit at a more local level. Ros Hall has been the local coordinator for STAG and SICSAG at Crosshouse Hospital for over ten years and will be a great and valuable addition to the team. We therefore welcome Ros Hall to the team.

Wardwatcher Update

2014 brought several updates to Wardwatcher, the main driver being the changes in the Healthcare Associated Infection methodology for Intensive Care Units. SICSAG now use ECDC definitions for this – you can find out more online at: www.sicsag.scot.nhs.uk/HAI/Main.html.

Changes were made to the core data set, which has had as significant effect on the High Dependency Unit dataset. We have added a question on pregnancy to better determine how many women are admitted to Critical Care with pregnancy related illness. This should help staff recognise the need to involve Obstetrics sooner. An Obstetric working group, which includes representatives from most hospitals in Scotland, are now meeting regularly to progress this Critical Care specialty.

There are also changes that are currently being enabled relating to data security and Information Governance – see ‘Information Governance – Why it Matters.

Information Governance – Why it Matters

Information Governance plays an important part in what we do and how we care for our patients. SICSAG relies on a large amount of patient data to enable the analysis of the care provided. It is essential that this data is managed securely, efficiently and effectively to ensure that the data remains confidential and appropriate to ethical and quality standards. Information security is not a ‘nice to have’ feature of data collection – it is a must. It is mandatory and governed by several legislative and regulatory standards.

SICSAG regularly reviews the way we hold and disseminate the data that is collected as part of the audit and makes recommended changes to our processes to ensure that we all comply with Information Governance standards in NHS National Services Scotland.

SICSAG has included new security measures in the latest version of Wardwatcher. At the moment, most units do not have the features ‘switched on’ but over the coming months the SICSAG audit team will be visiting all sites to enable this. This is an excellent start to increasing our data security.

All staff in all ICUs and HDUs is encouraged to familiarize themselves not only with the new security features in Wardwatcher but also with
the wider implications of Information Governance within their practice. A good resource on Information Governance is the Brief Guide to Information Governance v1.4 April 2010 available from the Scottish NHS Knowledge Network:

http://www.knowledge.scot.nhs.uk/ig.aspx

Quality Indicators in Critical Care – SICSAG Governance

Recently the SICSAG Steering Group decided to expand its governance over the audit by including Quality Indicators in its governance structure. These Quality Indicators have been agreed at a national level amongst colleagues and represent best practice in caring for critical care patients. It is therefore essential that units are meeting these quality indicators consistently.

What does that mean for you and your unit?

Where a unit does not comply with the Quality Indicators (or does not provide that information) the Steering Group will write to your Clinical Lead and Medical Director to seek answers on how your unit proposes to demonstrate improvement.

Data Quality

The overall data quality is very good but there is always room for improvement!

Data Extracts – Monthly reporting

It is vital for the analysis and validation of data monthly that the extracts SICSAG required are sent in on a timely manner. Delays with the extracts have an impact in all units receiving their monthly reports on time. If you know you are going to be away at the time extracts are due, please contact the SICSAG team to make alternative arrangements.

We are hoping that eventually we can have a system in place where we can pull these information centrally which would mean that local staff would no longer need to extract and send these reports. We hope to have this available in 2016.

Our Publications

The SICSAG Annual Report “Audit of Critical Care in Scotland 2014” was published in October 2014. We reported on the management of 14,705 patients admitted to ICU and Combined Units (units with a combination of ICU and HDU beds) and 28,975 patients admitted to HDU during 2013. The report and supporting Excel tables are available at: http://www.sicsag.scot.nhs.uk/Publications/Main.htm

The Surveillance of Healthcare Associated Infections in Scottish Intensive Care Units for 2013 was published on Tuesday 12 August 2014. This report was produced and written by Health Protection Scotland and SICSAG. The report provides surveillance data for pneumonia, bloodstream infections and central venous catheter-related infections from January to December 2013 for 23 adult general intensive care units in Scotland. HPS and SICSAG will maintain their collaboration to provide support for surveillance and to develop the surveillance programme in line with changing priorities and public health goals.

Quality Improvement Prizes

SICSAG awarded two prizes to staff who had initiated quality improvement in their area/unit. The winners received a free place to the two day Combined Critical Care Conference along with accommodation and meals. In return they were asked to present their improvement at the SICSAG conference in September 2014. As it was so successful, we plan to do the same in 2015. There will be more information on the SICSAG website in the coming months.

Nurse User Group

The Nurse User Group has evolved from being a meeting to improve nurses’ knowledge of Wardwatcher to a network for sharing ideas about local quality improvement projects. If anyone has been involved with a quality improvement project in their area and would like to share it with other units please contact Paul Smith at psmith44@nhs.net.

You never know, you may even win the SICSAG Quality Improvement prize! Even those projects that weren’t quite as successful are welcome as we can learn from each other’s experiences good or bad, and you never know, maybe someone will hold the answer.

The next meeting will be on Thursday June 25th, please contact Paul if you would like to attend, it’s free of charge! But there is a maximum attendance of 40 places.
Some of the presentations from the last meeting can be found on our website at [www.sicsag.scot.nhs.uk/Meetings/Nurses_group.html](http://www.sicsag.scot.nhs.uk/Meetings/Nurses_group.html).

**Communications**

Posters and leaflets about your units’ involvement with SICSAG are important for ensuring patients and carers are fully informed of how the data collected by SICSAG is being used. Please ensure posters and leaflets are visible and freely available in your unit(s). If you require additional copies of the posters and leaflets please contact the SICSAG team.

**Information Requests**

SICSAG continue to receive frequent requests for data or analysis for publications.

We would like to remind everyone who uses SICSAG data for publication to acknowledge the SICSAG staff who contributed to their paper as outlined in the information request agreement form.

Please find the updated rules for the release of data on the website or contact Paul Smith at [psmith44@nhs.net](mailto:psmith44@nhs.net) if you would like more information.

**Website**

The SICSAG website [www.sicsag.scot.nhs.uk](http://www.sicsag.scot.nhs.uk) is being updated and changes should be live by February 2015. Any suggestions for additions and improvements welcome, please contact Paul Smith at [psmith44@nhs.net](mailto:psmith44@nhs.net).

**eSICSAG**

The web based collection of data for SICSAG known as eSICSAG is back in our sights. This project was put on hold a couple of years ago due to other priorities and the finite resources we all live with in healthcare. We are looking into how we can get appropriate funding and resources to progress this project and exploring the ability to have a cross audit platform for all of the audits within the Scottish Healthcare Audits Team. Whilst we are still at a very early stage any ideas and input is welcome for the future development of this project.

**2015 Dates for your Diary**

**Unit Audit Leads Spring Meeting – Ward Watcher Training and HAI Update**
May 8th, Beardmore Hotel, Beardmore St, Clydebank G81 4SA

**SICSAG Steering Group Meetings**
February 6th, Royal Hotel 55 Henderson Street, Bridge of Allan, FK9 4HG
June 5th, Gyle Square, 1 South Gyle Crescent, Edinburgh, EH12 9EB
Nov 6th, Gyle Square, 1 South Gyle Crescent, Edinburgh, EH12 9EB

**SICSAG Nurse User group**
June 25th, Murrayshall House Hotel, Scone, Perth PH2 7PH

**Annual report publication date**
August 11th

**Annual Conference - 20th Anniversary of collecting SICSAG data**
September 3rd and 4th, Beardmore Hotel, Beardmore St, Clydebank G81 4SA

**Contact us**

[www.sicsag.scot.nhs.uk](http://www.sicsag.scot.nhs.uk)

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