

Date Reported	Ward/Unit	Number of Outbreaks Patients	Number of Outbreaks Staff	Number of Outbreaks Other (visitors/contractors)	Type of Infection Outbreaks	Action taken to control infection	Action taken to prevent further infection	Who has been contacted	Person Completing this form	Follow up Information and date
30/04/2007	Woodchurch, Thanet Mental Health Unit, 164 Ramsgate Rd Margate	1			MRSA		Universal precautions			Infection successfully contained & treated, patient discharged
30/04/2007	Sevenscore Ward, Thanet Mental Health Unit	5			Gastroenteritis		Universal precautions			Infection Contained
02/05/2007	Learning Disabilities Residential 320 Hempstead Rd	3			Diarrhoea & Vomiting	*2 residents vomited throughout the night. *Residents did not attend college on the following day. *2 residents had diarrhoea anone did not appear too well	*Await advice to ensure conditions do no deteriorate *Maintain all good hygiene controls. *Ensure clients are well before returning to college.	The Head of School		This illness isolated to 3 service users attending college.
11/06/2007	Edmund Ward St. Martins Hosp Canterbury	1			Scabies		Patient treated			Successful treated
01/07/2007	St. Martin Hosp Facilities staff	1			Legionellosis	Required hospitalisation.	Source of infection investigated			Recovered now at work. Remedial Action taken by Facilities

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23/07/2007	Birch Ward, Little Brook Hosp, Dartford	1			MRSA admitted with infection from Nursing Home	Health Protection Agency informed.	Treatment given			MRSA Clear and discharged back to Nursing Home
02/08/2007	Russett Lea Ward Heathside House	1			Eye Infection	Patient developed eye infection and Swab taken	Chloramphenicol treatment commenced immediately			No further action
04/08/2007	Golding Cottage Heathside House	1			Facial Rash	Patient had facial rash for several months, recently became inflamed and weepy. Swab taken	Prescribed creams being less effective. GP prescribed antibiotics. Results phoned late Friday 03/08/07			No further action
24/09/2007	Jasmine Ward Darenth Wood Rd Dartford	1			MRSA - transferred from Daranth Valley with MRSA	Health Protection Agency informed.	All precautions in place. Patient treated.			MRSA cleared within two weeks
10/09/2007	Sevenscore Ward, Thanet Mental Health Unit	1			MRSA	Health Protection Agency informed.	All precautions in place			Discharged to QEQM
25/10/2007	Newington Ward Arundel Unit William Harvey Hospital, Kennington Road, Ashford	1			MRSA - developed after admission	<ul style="list-style-type: none"> •Isolated in room as much as possible •daily changing of dressings. •Liaison with orthopaedics. Antibiotics changed 	Re contact orthopaedics, regular dressings new antibiotics. Tissue Viability nurse Elizabeth Brown, Unit	Mike Curtin, Andrew Dickers, Andy Oldfield, Liz Lloyd, Tissue Viability Nurse Elizabeth Brown, Unit	John Hedges ADWM Newington Ward	4th Jan 08 - not responded to treatment.

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16/10/2007	Woodchurch, Thanet Mental Health Unit, 164 Ramsgate Rd Margate	3			Diarrhoea	<ul style="list-style-type: none"> - Universal Precautions - Relatives to wash their hand before leaving ward - all grab rails, door handles arms on chairs toilets are wiped over with detergent 2 to 3 times a day. - Records to be kept in line with infection control guidelines 	<ul style="list-style-type: none"> - Further phone call from nursing staff refusing to assist in carrying out wiping down of surfaces to reduce infection. - Infection Control Link Nurse to visit ward to speak to ward manage regarding non compliance with infection control on ward. - Sue Whitmore to offer support as Unit Link Nurse 	Kent Protection Andrew Dickers Peter Hasler Jann Gilliland		Andrew Dickers visited and met with Modern Matron Jann Gilliland and Woodchurch Team to discuss Action Plan. Once patients were free from symptoms for 48 hrs ward was deep cleaned and reopened
31/10/2007	Woodlands Ward Little Brook Hosp, Greenacres, Bow Arrow Lane Dartford	1			MRSA admitted with this infection.30/10/07 no open wounds or sores. Patient is physically well.	<ul style="list-style-type: none"> •Trust Policies & Procedures followed. Infection control - use of yellow waste bags, own utensils, RCD linen bags for laundry. •All relevant professionals informed (Domestic staff) 	Infection Control	Angela Shorter Peter Hasler Andrew Dickers	S O'Rourke SN Woodlands Ward	discharged home in Dec 07 into the care of GP.
05/11/2007	Scarborough Ward, The Arundel Unit William Harvey Hosp., Ashford	1			MRSA - transferred with infection from a Mental Health Unit	Infection present on admission	Universal precautions. Treatment given		Ward Manager	Discharged home with + MRSA and Primary Care follow-up
12/11/2007	Woodchurch, Thanet Mental Health Unit, 164 Ramsgate Rd Margate	1			MRSA	MRSA universal precautions followed, room and aids wiped with disinfectant wipes, Kent Health Protection contacted, Infection Control/Wound Care Nurse informed.	Wound covered with actisorb dressing and tegadem	Peter Hasler Jann Gilliland Andrew Dicker Sue Whitmore	Tina Nichols Acting W/M	Patient died 5.1.07 unrelated to MRSA

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21/11/2007	Woodchurch, Thanet Mental Health Unit, 164 Ramsgate Rd Margate	3	3		Diarrhoea & Vomiting	Universal Precautions, Kent Health Protection Agency made aware and ward is now closed to further admissions at this time	All areas cleaned with detergent wipes, toilet seats, hand rails.	Kent Health Protection Agency Infection Control Lead Nurse	Tina Nichols Acting W/M	Re-opened after 2 weeks
24/11/2007	Robert Browning	2	0		MRSA - Both patients admitted from Daranth Valley with infection	Information not available	Universal Precautions and Treatment			Awaiting further information via infection control reporting proforma
27/11/2007	The Orchards Priority House Maidstone	1			MRSA	•Infection notified by doctor late on 24/11/07. •Case discussed. •As infection was first established 7/9/06 advice was that there was no specific action to be taken as infection is 'colonised'.	Continue current management	Kent Health Protection Agency Phil Smith	C Cole	Infection site is healing well.
02/12/2007	Winslow Ward The Arundel Unit Ashford	1			Colonization MRSA found on routine screening whilst at WHH	Universal precautions	Universal Precautions	Public Health Infection Control KMPT and Link Nurse	Simon Lockwood	Discharged to nursing home with GP follow-up
02/12/2007	Groombridge Ward TGU	6	6		Diarrhoea & Vomiting	Barrier Nursing and the ward is closed	The Unit was deep cleaned	The Health Protection Unit	Catherine Makawa Team Leader	re opened 48 hrs after being symptom free.
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03/12/2007	Ramsey Ward St. Martins Hosp Canterbury		5		Diarrhoea & Vomiting	Staff with symptoms off work and informed of need for specimen to go to GP after 3rd episode of Diarrhoea and not to return to work until they have been clear of symptoms for 48 hours	Universal Precautions	Michele Coleman	S Harrison	re opened 17 Dec 07

05/12/2007	Edmund Ward St. Martins Hosp Canterbury	4	1	Diarrhoea	<p>Universal precautions remain in place. Infection Control Link Nurse informed & Health Protection Agency. Ward remains closed to discharges & admissions. Results from both stool samples have come back negative. Staff need to see their GP for advice & after last bout of diarrhoea remain off the ward for 48 hours</p>	<ul style="list-style-type: none"> - Notice to visitors - Universal precautions - Samples from persons affected. - Soiled laundry to be placed in alginet bags. - Ward remains closed to admissions & discharges. - All visitors asked to wash their hand on arrival & departure <p>Management continue with support from HPA and Infection Control Link Nurse.</p> <ul style="list-style-type: none"> - Ward to be deep cleaned on Wednesday 19th Dec. 	<p>Paula Campbell Modern Matron Maxine Love Deputy Ward Mgr Dagmar Whiting Hotel Services Supervisor</p>	<p>Amanda Hatfield- Tugwell, Ward Manager</p>	re opened following deep clean
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18/12/2007	Edmund Ward St. Martins Hosp Canterbury	5	3	N/A	Diarrhoea	<ul style="list-style-type: none"> • Universal precautions remain in place. • Infection Control Link Nurse informed & Health Protection Agency. Ward remains closed to discharges & admissions. Results from both stool samples have come back negative. Staff need to see their GP for advice & after last bout of diarrhoea remain off the ward for 48 hours 	<ul style="list-style-type: none"> • Notice to visitors • Universal precautions • Samples from persons affected. • Soiled laundry to be placed in alginet bags. • Ward remains closed to admissions & discharges. • All visitors asked to wash their hand on arrival & departure • Management continue with support from HPA and Infection Control Link Nurse. • Ward to be deep cleaned on Wednesday 19th Dec. 	Paula Campbell Modern Matron Maxine Love Deputy Ward Mgr Dagmar Whiting Hotel Services Supervisor	Amanda Hatfield-Tugwell, Ward Manager	Reopened on 21/12/07 as 48 hrs clear from our outbreak of diarrhoea. Ward deep cleaned No further episodes of infections this week
31/12/2007	Robert Browning Ward, Medway Maritime Hospital	1	1		MRSA of Nasal area	Nursed in side room	<ul style="list-style-type: none"> • Hand washing and use of alcohol swabe/gel • Had treatment of both nostrils and Bactraband ointment application completed • Awaiting result of nasal swab due 28/12/07 	Health Protection Unit	S/N Nisperos	
03/01/2008	Coleman House CMH Team Dover & Deal, Brookfield Ave., Dover	1			Diarrhoea	<ul style="list-style-type: none"> • Cleaning of individual and area. • Sealed off the room due to possible infection. Soiled waste contained in appropriate bags, awaiting collection. • Haz-tabs delivered for thorough cleaning to be completed 	<ul style="list-style-type: none"> • Action taken to prevent further infection. • Haz-Tabs delivered for thorough cleaning to be completed. • To provide a small supply of clinical waste bags and bags, & bags for soiled materials. 	Trust HQ - Simon Goodwin Dover HC Waste Management Waste Mgt Laura Rai H & S - Jim Michele Coleman Mike Curtin	Naomi Fuller Marion Betts	This patient was attending an OT session at the Day Hospital when she had a bout of diarrhoea. No further episodes reported - Michele Coleman.

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13/01/2008	Birch Ward Little Brook Hospital	7		N/A	Diarrhoea & Vomiting	Normal infection control techniques	Consultants contacted ward is closed/no visitors/other wards informed. Patients nursed in their rooms	Unable to contact Public Health Specialist Mike Curtin informed and will contact PHS Rose Waters Service Manager emailed Duty Doctor Domestic Mgr	V Handley Deputy Ward Manager	Michele Coleman, Infection Control Nurse visited ward on 18/01/08 to discuss action plan with Acting Ward manager Adam Adkins. Michele contacted Birch Ward on 24/01/08 and was informed by S/N Nicolaou that there have been no further episodes of D & V since the 19/01/08 but then said a patient had vomited on the 22/01/08 once the ward has been symptom free for 48 hours they will have the ward deep cleaned and will contact the KHPU to inform them that this has been carried out. Ward has now had a deep clean and has re-opened - Michele Coleman.
14/01/2008	Elmstone Ward Thanet MH Unit		1	N/A	Diarrhoea & Vomiting	Staff member off sick until infection cleared		N/A	Christine Thompson	Staff returned to work after being asymptomatic for 48 hours clear - Michele Coleman

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17/01/2008	Sevenscore Ward, Thanet Mental Health Unit	1			MRSA in wound on his right toe.	<ul style="list-style-type: none"> Full MRSA screen to be completed. Staff to be aware of universal precautions Patient to be seen in fracture clinic next week re underlying cause of wound Patient to be reviewed by the diabetic nurse. 	Dressing changed to silver dressings and wound to be dressed and redressed in his bedroom. Seen by Doctor and his scrub and nasal batroban prescribed.	<ul style="list-style-type: none"> Modern Matron Trust Peter Hasler Andrew Dickers Kent Protection 	Sue Wrintmore	Update 05/02/08 The toe was swabbed and came back MRSA positive on the 17/01/08. Patient was prescribed Bactroban bd and Tricyclin tds. Michele Coleman advised S/N Mange Ndwandwe to reswab toe and asked for a medical review of the antibiotics due to the length of time this patient has been on them. Update 19/02/08 - Swab on toe reported from the lab to be negative for MRSA on the 8/02/08 - Michele Coleman.
17/01/2008	Brocklehurst Ward, Priority House, Maidstone	1 (possible)			Informal patient with HIV (Positive) had unprotected sex with a Section 3 inpatient, some time between 26/12/07 and 07/01/08	Female patient transferred to female ward in Dartford	Review ward procedures/protocols	<ul style="list-style-type: none"> Health Protection Agency Associate Nursing Director Associate Director of Acute Care Services SWK 	Gwen O'Brien	Ongoing treatment and support (counselling). HPA have advised to contact HIV nurse within acute services. Gwen O'Brien telephoned and spoke to Michele on 23/01/08 and enquired about SUI reporting. Gwen to complete the NPSA RCA SUI reporting form for Infection Control - Michele Coleman.
21/01/2008	Fant Oast CAMHS Upper Fant Rd Maidstone	1			Head Lice	Initially used conditioner and nit comb on scalp to treat infestation. Advice given on personal hygiene & the need to use own toiletries, towels, flannels, brushes, combs & headbands. If eggs hatch use lotion	Scalp checks of all patients and staff. Patients reminded of the need not to share towels etc. Head checks of all patients begun on 18/01/08 daily for 7 days & then review. Where possible encourage young people not to sit with heads together to prevent transference of nits.	<ul style="list-style-type: none"> RMO Parents Nursing staff 	Bonita King	Update 04.02.08 Treatment changed to Hedrin as advised by Kent Health Protection Unit continue to monitor for signs of head lice. Update-15/02/08- Michele informed by Bonita King, Team Leader that the child was free from headlice from the 11/02/08.
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21/01/2008	Woodstock Frank Lloyd Unit Bell Road Sittingbourne	1			MRSA	Nursed in room and barrier nursed. Antibiotic nasal ointment & stellisept foam wash used	Universal precautions adhered to.	<ul style="list-style-type: none"> Liaising with Kent HPA 	S S Bowe	Update - Michele informed on 15/02/08 by SN V Harrison that the patients swab returned a negative result for MRSA on the 1st of February.
21/01/2008	Elmstone Ward Thanet MH Unit	Nil	1	Nil	Vomiting	Staff member off sick until infection cleared	N/A	N/A	Christine Thompson	Staff returned to work after being asymptomatic for 48 hours clear.

21/01/2008	Edmund Ward St. Martins Hosp Canterbury	1	Nil	Not known	MRSA on legs (skin)	Patient was transferred to us on 21/01/08 from Winslow Ward, Arundel Unit, WHH. Few hours after transfer HPA contacted the ward & advised us that this pat was MRSA +ve & we should ask our Medical Officer to contact microbiology. Dr Kannagorsium contacted microbiology & spoke with Dr Nash who advised that we do nothing to physically treat this lady as she was well with no pen sores. The patient has been body mapped & marks on her legs have been recorded. Staff continue to use good hygiene & encourage the patient to keep good hygiene where possible. Universal precautions.	Spoke with Trust Infection Control Nurse who advised reswab in 1 weeks time. Patient to be swabbed on Monday 28/01/08. Staff to continue to check patient's body for more marks/open sores. Patient body checked this am, no further marks or sores reported.	<ul style="list-style-type: none"> · All persons connected with Infection Control · Paula Campbell · Modern Matron · Health Protection Agency · Dr Nash · Microbiology WHH · Michele Coleman · Infection Control Nurse 	Amanda Hatfield-Tugwell, Ward Manager	<p>Michele Coleman, Infection Control Nurse telephoned W/M Amanda Tugwell, to discuss plan of action on 24/01/08 (please see action plan)</p> <p>Update 11.02.08 reswabbed MRSA isolated continue universal precautions. MRSA still present once re-swabbed. Michele advised Amanda to wait until the course of antibiotics had finished and re-swab on 20/02/08. Update 06/03/08 - swab returned a negative result for MRSA on 05/03/08</p>
24/01/2008	The Springs 18 Tonbridge Road Pembury	Nil	1	Nil	Vomiting	Staff stayed off work	Advised not to return until clear for 48 hours		Member of staff Manager	Staff returned to work after being asymptomatic for 48 hours clear.

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29/01/2008	Elmstone Ward Thanet MH Unit	3			Diarrhoea	Put up notice for all staff, patients, visitors regarding washing hands	Put up notice for all staff, patients, visitors regarding washing hands	To report to Kent Protection Nurse	Christine Thompson	Update- 15/02/08 - Staff unable to get faecal specimens to send for analysis as all patients were free from symptoms within a day or two. No further bouts of diarrhoea reported.
29/01/2008	Winslow Ward The Arundel Unit Ashford	3			Diarrhoea	One specimen has been sent for culture with an outbreak code of 8HP035 placed on specimen.	The Ward was closed for admissions. Ward manager will contact Medirest housekeeper regarding extra input on the ward	<ul style="list-style-type: none"> - Sheena Fenn from the Kent Health Protection Unit - Michele Coleman Infection Control Nurse - Christine Marsh Service Mgr 	Simon Lockwood and Barbara Morgan	Results from lab state that C.Diff and Noro Virus <u>not</u> detected. Update 5/02/08 Asymptomatic for 48 hrs as of this evening. W/M will contact KHPU this evening to inform. The ward will arrange a deep clean and will reopen. Update - 15/02/08 - Deep clean carried out on 14/02/08 and re-opened on 15/02/08. - Michele Coleman.

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05/02/2008	Littlestone Lodge Dartford	1			Clostridium Difficile	Received Path Lab result of C diff on 1 patient who was transferred from General Hospital. Universal Precautions and patient on a course of metronidazole for 10 days	Isolation of patient. Advice from HPA. Deep cleaning of room.	IC Team. HPA. Daranth valley Hospital. SUI Panel.	Adam Adkins	06.02.08 - Michele Coleman visited the ward to review current practice and patients environment and advice given. Ward closed to admissions and discharges. 11.02.08. Joint RCA organised with Daranth Valley Hospital. Patient continues to be nursed in isolation. Update 19/02/08 - Patients physical health has deteriorated overnight, watery stools, increased temperature. Fluid balance chart maintained. Another faecal specimen sent for analysis today. Last dose of Metronidazole given on 15/02/08. To be seen by medical team today. Update 21/02/08 - Patient transferred to Daranth Valley Hospital during the afternoon of 19/02/08 due to decline in urine output (patient has chronic renal failure) and was reported to be 'chesty'. Update 06/03/08 - patient remains physically unwell at the Daranth Valley Hospital. Ward deep cleaned and reopened. Patient died on 19/03/08 at Daranth Valley Hospital, cause of death is yet to be determined - Michele Coleman.
10/02/2008	Willow Suite Little Brook Hospital Dartford		1		Diarrhoea & Vomiting	Staff was sent home following complaint of diarrhoea & vomiting on 10/02/08 am shift	Staff was contacted by link nurse and advised to send a stool sample to Occupational Health if sickness continues. Due to see OH Nurse on 13/02/08	Mr Venkia W/M Angela Short Modern Matron, Mike Curtin Peter Hasler	Ellen Madora	Staff member returned to work after she had been asymptomatic for 48 hours clear.
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17/02/2008	Amherst Ward Priority House Maidstone	1			MRSA	Patient transferred from Medway Maritime believing 1st swab was negative on checking found to be <u>Positive</u> . Will recommence swabs (Fri 22nd)	To notify her GP if discharged. Chase protocol relating to transfer. Ward Manager has spoken to Medway Maritime voicing concerns	Mike Curtin	Diane Tompsett	Infection control RCA form completed by ward manager. Update 06/03/08 - Patient discharged home on 27/02/08, GP to follow up.

19/02/2008	Edmund Ward St. Martins Hosp Canterbury	4			Diarrhoea	On Sunday 17th we gained 2 samples from the loose foul smelling patient's stools. Samples were sent to microbiology for testing on Monday 18th. Health Protection contacted on Tuesday 19th & advised us to close ward to admissions & discharges. Notices placed on outside of front entrances. Domestic made aware, as intense cleaning needed. Universal precautions and increase hand washing of patients, staff & visitors.	Await results of samples and any new cases to have 8HP052 on the sample bottle & form. Any incidences of staff or others to remain off duty for 48 hrs and to attend Occupational Health. HPA to contact the ward on Friday 22nd February. Domestic to increase cleaning of areas which patients/staff will touch. Universal precautions to be used and ensure good hygiene at all times.	- Michele Coleman - HPA - Ward Domestic & Supervisor - Dagmar Whiting - Paula Campbell, Modern Matron	Amanda Hatfield-Tugwell, Ward Manager	26/02/08 - Update from A Hatfield-Tugwell, Ward Manager - All faecal samples sent to the lab for analysis returned a negative result regarding C-diff and norovirus. WM has contacted the KHPU to inform them of the results. To reopen the ward once it has been deep cleaned, domestic supervisor informed. Update - 06/03/08 - Ward deep cleaned and reopened on the 01/03/08. Michele Coleman.
18/02/2008	Robert Browning Ward, Medway Maritime Hospital	1			MRSA for wound on right lower foot	Daily dressing of wound with stellisept and wound was dressed and covered. Bactraband ointment to nostrils applied	Handwashing & use of alcohol swabe/gel everytime in contact. Also wearing of protective barrier in doing nursing intervention. Clinical waste labelled for disposal. Maintain clean & free from clutter environment		S/N Nisperos	25/02/08 Helath Protection Unit notified. 03/03/08 Stellisept cream application completed. Wound re-swabe and awaiting results. Universal Precautions observed.
25/02/2008	Elthelbert Road, Canterbury		1		scabies	Staff member saw own GP and prescribed cream which was applied once. GP did not advise to refrain from work.	Michele Coleman advised for staff member to refrain from work until topical treatment had been applied and treatment was successful	KHPU, Occupational Health, Michele Coleman, infection control nurse	Kathleen Steeles	No further action. Refer to Occ Health .

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03/03/2008	Brooke Ward, A Block, Medway Maritime Hospital	9	1		Diarrhoea & Vomiting	Affected patients were isolated to prevent spread of infection. Staff was advised to improve ward hygiene. KHPU informed. Infection control nurse informed. Specimen sent to lab.	Ward was closed to admissions and transfers. No Visitors allowed on the ward. All appointments for in-patients outside the hospital was cancelled. Infected Patients Not allowed to go to Smoking room on Shelly ward. Patients not allowed to use kitchen.	Kent Health Protection Agency. Infection and Control Nurse. Site Practitioner. Louise Clack (Modern Matron)	Lystra Madhoo Deputy Ward Manager Brooke Ward	Update 07/03/08 - ward remains closed to admissions and discharges. No further episodes of D & V since 06/03/08. Awaiting results of faecal specimens sent. Update 10/03/08 - Remains D & V free since 06/03/08. Discussed with MM Louise Clack. Deep clean to commence today, after which the ward can be reopened. Michele Coleman.
05/03/2008	Shelly Ward, A Block, Medway Maritime Hospital	2	2		Diarrhoea & Vomiting	Ward closed to new admissions, signs posted at the door. Local infection control office informed, alcohol gel deposited at strategic positions and the ward. Initially closed to visitor but advised to reopen and advise them of the risk. Patients infected have been put in a side room.	Sign posted at the front door to encourage hand hygiene. All staff have been made aware of the infection and have been advised to wash hands regularly. All patients has been made aware and have been advised to wash hands regularly. Signs posted on the ward to encourage hand hygiene. Alcohol gel deposited at strategic positions around the ward.	Kent Health Protection Unit. Service Manager	Peterkin Ofori	Update 07/03/08 - ward remains closed to admissions and discharges. More staff are off sick due to D & V. Awaiting results of faecal specimens sent. Update 10/03/08 - Modern Matron Louise Clack stated that the ward reported a further episode of diarrhoea today (Currently 7 patients & 3 staff with D & V). No further reports for 48hrs after last episode. Ward deep cleaned and reopened. Michele Coleman.

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05/03/2008	Anselm Ward, St Martins Hospital	1			Suspected Tuberculosis	<p>On 02.03.08 Patient GW was transferred to KCH with suspected chest infection. On the 04.03.08 KCH reported that GW was suspected of having TB. Adagnosis of TB is yet to be confirmed. Dr R. Hart has been informed that a sputum will be sent today – cultures will take 8 weeks but a smear result will be within 24 hours. If smear is positive this will mean he is positive. They will then begin treatment.</p>	<p>Advised by Dr Nash and Cathy Southwold (Kent health protection unit) at point where they confirm infection they will consider people who have been in contact with GW. These will usually be just home contacts. Explained circumstances of GW being an inpatient. People who could possibly be at risk would only be imuno suppressed patients IE: people with HIV/ Aids or on imuno depressing medication. All advised that until we have confirmation there is no need for action with patients or staff. Occupational health Dept visited ward today to speak to staff and reassurance given. A list of staff/ patients who have had contact with GW is being compiled in event of infection.</p>	<p>Dr Nash & Cathy Southwold, Infection control- Michele Coleman & Andrew Dickers. Rosarri Harte, ward team, David Tamsitts secretary</p>	<p>WM Clare Balman</p>	<p>Update on 10/03/08 - WM Clare Balman informed (on the 07/03/08) that the recent test for TB have returned a negative result. The patient has a chest infection.</p>

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05/03/2008	Woodlands ward, Little Brook Hospital	1			Suspected MRSA. Pressure sore to left foot with oozing blisters	Swab taken of foot and sent to Daranah Valley Hospital lab. Applied Tegaderm dressing. Reported to Tissue Viability Link nurse. Discussed with specialist.	Wound is covered with a dressing, client is advised and encouraged to continuously wear slippers when walking around	Tissue viability link nurse expected to assess today 05/03/08. Michele Coleman on 05/03/08	RN Lorna Whitton	Update 10/03/08 - Telephoned ward and spoke to Lorna. She will email a weekly reporting form with details of the swab result tomorrow. Update 11/03/08 - Patient prescribed antibiotics as follows Flucloxacillin 500mgms QDS and Erythromycin 500 mgms QDS for infection. The infection is Staphylococcus Aureus and Beta Haemolytic Streptococcus group G and <u>NOT</u> the Methicillin-resistant strain (MRSA). Michele Coleman.
11/03/2008	Crisis Team, Priority House, Maidstone		1		Clostridium Difficile	Staff member was a patient on Foster Clark ward, Maidstone Hospital undergoing surgery and whilst there he contracted C Difficile. He was not prescribed treatment for C difficile.	Staff member will refrain from work until he is asymptomatic for 48 hours. He will contact his GP & Occupational Health Department before returning to work.	Peter Hasler, Occupational Health, Michele Coleman	Lorraine Trainor (wife)	Update 11/03/08 - Staff member remains off sick. He is due to have another operation on the 11th of April. He will not return to work prior to his retirement at the end of May - Michele Coleman.
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14/03/2008	Cranmer Ward, St Martins Hospital, Canterbury	7	3	1	Diarrhoea & Vomiting	Ward closed to admissions, transfers and discharges until free from further episodes for 48 hrs. Affected patients nursed away from main public areas where possible, and encouraged to take copious clear fluids only until clear of symptoms. Reviews by ward doctors. Affected staff to stay off-duty until symptom-free for 48 hrs. Enhanced cleaning regime instituted (door handles etc. cleaned with mild bleach solution for duration of outbreak). Universal precautions emphasised to staff. Samples sent to Path. Lab. for viral studies. Notice displayed outside ward. Explanatory letter and leaflet from Kent Health Protection Agency displayed inside ward. Specific relatives contacted.	Ward to be deep-cleaned once free from further episodes for 72 hrs. Outbreak code is 8HP081.	Michele Coleman (Infection Control Link Nurse); Health Protection Agency - Katie Allen; Paula Campbell (Modern Matron); Donna Eldridge; Peter Hasler [message left to ring ward] Dagmar Whiting (Domestic Supervisor).	WM Bob Watkinson	Update 17/03/08 - Weekly reporting form received today states that incidents of diarrhoea & vomiting have now increased to 8 patients, 5 staff & 2 visitors. Update 25/03/08 - No further cases of D & V for 72hrs. Ward is being deep cleaned today and will be open to admissions and discharges as of tomorrow (26th) - Michele Coleman.

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20/03/2008	Woodlands ward, Little Brook Hospital	1			Heel infection with Heavy Growth of Anacrobies as described on the path lab result dated 14/03/08	Antibiotic prescribed as follows Metronidazole 400 mg TDS for 7 days. Continue applying Tegaderm Dressings. Seen by Tissue viability Link Nurse who continues to assess progress	Dressing is replaces as necessary by ward team when it become detached otherwise dressing been changed by Tissue Viability Link Nurse S/N V Daus. Client now wearing slippers when walking around on team advice	Tissue Viability Link Nurse and Modern Matron A Shorter	L Whitton R/N	26/04/08 Result reviewed by ward SHO & discussed with Tissue Viability Link Nurse. Plan made not to prescribe further antibiotic, topical or systemic. Continue to change dressing on alternate days and continue regualr monitoring of progress by ward team & Tissue Viability Nurse
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25/03/2008	Willow Suite, Littlebrook Hospital, Dartford	1			MRSA in groin area and colonisation of abdominal wound.	<ol style="list-style-type: none"> 1. Advice taken from East Grinstead Burns Unit. 2. Anti-biotics prescribed. 3. Patient advised to wash hands prior to leaving his room. 4. Bed linen to be changed daily and taken away in dissolvable red linen bags within red linen bags as infected linen. 5. Personal Clothing laundered according to protocol. 6. Protective clothing to be worn as per policy 	<ol style="list-style-type: none"> 1. Administer prescribed medication 2. Information given to nursing staff and housekeeping staff. 3. Raise awareness of infection and the use of universal precautions 	<ol style="list-style-type: none"> 1. Peter Hasler, 2. Infection Control Team 3. Mike Curtain 4. Michelle Coleman 5. Ellen Madora 6. Angela Shorter 	Ellen Madora on behalf of Val Kiell	<p>Update 26/03/08 - Lead Nurse, Mike Curtin visited the ward on 25/03/08. Awaiting the NPSA RCA form. Update 31/03/08 - NPSA RCA form completed and emailed to infection control from the ward.</p> <p>06/04/08 Advice from Burns Unit to continue with nasal cream and groin cleanser until 5th April then swabs taken until 8th April. Had skin graft on 2nd April & currently being held in place by staples. Will attend the Burns Unit on 8th April for surgical removal of staples</p> <p>13/04/08 Result of swab taken on 8th April NEGATIVE further swab taken on 12/04/08 Stapholococcus Aureus (infection around the burn wound on his lower abdomen) swab taken on 8th April result 10th April POSITIVE started on antibiotics. Dressings to both abdominal wound and left thigh where skin was taken from skin graft carried out by the Burns Unit on 12/04/08 and advised for dressings to be changed 5-7 days.</p> <p>7/05/08 No further swabs required as all three swab results are negative of MRSA</p>
27/03/2008	Woodlands ward, Little Brook Hospital	1			Self inflicted wound on neck	Wound swab taken, awaiting results. Prescribed broad spectrum antibiotics as follows: ERYTHROMYCIN 500mgms TDS for 5 days	Advised patient not to tamper with wound/dressing also advised regular hand washing.	<ol style="list-style-type: none"> 1. Infection Control Link Nurse 2. Modern Matron 3. Infection Control Team 	L Whitton R/N	Results negative for MRSA, wound successfully treated
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27/03/2008	Jasmine Ward Jasmine Centre Darenth Wood Road, Dartford	1			MRSA swab result from both legs have shown heavy growth of staphylococcus aureus	<ol style="list-style-type: none"> 1. Prescribed on a course of antibiotics - erythromycine 250 mg TDS. 2. Universal Precautions to be used at all times to prevent the spread of infection 	<ol style="list-style-type: none"> 1. Ensure that staff are aware of the infection control policy and that appropriate measures are taken to manage infection 2. To repeat swab - post treatment. 	<ol style="list-style-type: none"> 1. Mike Curtin 2. Director of Nursing 3. Rose Waters 4. Nominated Infection control resource nurse 	K Dullip	Swab was negative for MRSA, patient successfully treated and discharged to Residential Care.
28/03/2008	Neuro rehab, Darrant House, Sevenoaks	3	1		Diarrhoea & Vomiting	Patients remaining in there own rooms. Universal precautions.	Information given to patients and visitors via leaflets	Kent Health Protection Unit	T A POWELL	Tests negative for Norovirus. Ward deep cleaned after 48hours since last episode

03/04/2008	Willow Suite, Littlebrook Hospital, Dartford	1			Head Lice	<p>1. Advice taken from Medical Team 2. Permethrin prescribed 3. Patient assisted and observed with washing hair with shampoo 4. Personal clothing laundered according to protocol 5. Protective clothing to be worn as per policy</p>	<p>1. Seek further advice from medical team 2. Information given to nursing staff and housekeeping staff 3. Raise awareness of infection and the use of universal precautions</p>	<p>1. Peter Hasler, 2. Infection Control Team 3. Mike Curtain 4. Michelle Coleman 5. Ellen Madora 6. Angela Shorter</p>	<p>Michael Beebeejaun</p>	<p>06/04/08 To be reviewed on 7th April my medical team to review treatment. Universal precautions continue. 13/04/08 reviewed on 7th April and advised from Pharmacist to wash with shampoo twice a day and if by the 16th April head lice continues then to re-treat with Permethrin (Lyclear). 27/04/08 No evidence of nits this week. Patient assisted & observed with washing & wet combing hair on a daily basis with conditioner and nit comb. Will be reviewed on 28/04/08 and if head lice still apparent then contact Pharmacist for further advice for treatment. 7/05/08 Seen & examined by Ward Dr. on 29/04/08 and there was no evidence of head lice all cleared.</p>
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07/04/2008	Ramsey Ward St. Martins Hosp Canterbury	1			Suspected Herpes zoster (shingles). Not confirmed but treating as.		Universal Precautions	1. Health Protection Unit Jill Ashford 2. Paula Campbell Modern Matron 3. Woodside Residential Home (to inform precaution with ex room mate) 4. Dermatology K&C 5. Care Manager Marion Chubb 6. Consultant Dr Scott	Sharon Harrison	14/04/08 NOW CONFIRMED AS SHINGLES 29/04/08 Infection as reported now resolved (Shingles) infection notices on doors removed
17/04/2008	Edmund Ward St. Martins Hosp Canterbury	2			Diarrhoea	First patient has had 2 bouts of foul smelling diahorea 1 yesterday & 1 today (17/04/08) & staff will gain a sample. Second patient has had 1 bout of diahorea today, however this is not foul smelling as this lady was admitted for high up constipation concerns, which we are investigating & treating	1. Universal precautions in use as per policy 2. Sample to be gained & sent to lab for testing 3. Informed HPA who have advised us to isolate 1st patient which we are able to do and monitor other patients & inform staff to be aware & take greater precautions especially with hand washing etc. 4. If we have further concerns about 2nd patient contact them for advice & await the results of the sample, inform them of results & inform them of further outbreaks.	1. Paula Campbell Modern Matron 2. Michele Coleman 3. Health Protection Agency	Amanda Hatfield-Tugwell, Ward Manager	22/04/08 - On the 17th April 08 stool sample sent to Microbiology William Harvey Hosp., requested results via telephone, nothing abnormal detected. No further action taken.
19/04/2008	Woodlands ward, Little Brook Hospital	2			Conjunctivitis	Cleanliness and hygiene awareness: patients are empowered to look after their own hygiene and encouraged to wash their hands after touching their eyes. They are also having eye drops.	Hygiene awareness and treatment in progress (eye drops)	Ward Doctor	L Whitton R/N	26/04/08 Patient seen by ward SHO. Prescribed and commenced treatment with Chloromycetin Eye Drops. Objective and subjective monitoring of progress of infection by ward team.
19/04/2008	Sevenscore Ward, Thanet Mental Health Unit	3			Diarrhoea	Patients with symptoms encouraged to remain in their own bedroom. All surfaces in patients own bedroom wiped down with detergent and floors mopped daily in patients room.	1. Handrails, toilets, handles/seats/rails wiped down with detergent 2. Toilet identified for those patients with diarrhoea 3. Handwashing facilities identified for visitors so that they can use the soap and water. 4. Signs put up to explain to visitors.	1. Peter Hasler 2. Andrew Dickers 3. Michele Coleman 4. Infection Control Team	Sue Wrintmore	04/06/08 The ward was not closed as it was not infectious because 1 was due to medication, 1 to his general illness and the other they were not sure about.

21/04/2008	Gillingham CMHT, Kingsley House Balmoral Road, Gillingham		2		Diarrhoea & Vomiting	Staff members rang in sick and advised not to return until they have been clear for 48 hours	Advised not to return until clear for 48 hours		Jacqui Jefferson	Two cases not related no specimens obtained asymptomatic for 48 hours returned to work
21/04/2008	Elmstone Ward Thanet MH Unit		1		Diarrhoea & Vomiting	Staff of sick until symptoms cease	Promote hand washing		Christine Thompson	No action.
28/04/2008	The Orchards Priory House Maidstone	5	1		Vomiting	Universal Precautions Clinical Service Manager informed	1. Front door signage 2. Minimum movement of patients 3. Ward closed to admissions	1. Kent Protection Agency 2. Infection Control Team 3. Hotel Services 4. Phil Smith 5. Peter Marsh	S.F. Murray	29/04/08 Patients no new cases 1 member of staff 30/04/08 No new cases 04/05/08 3 patients and 1 member of staff 06/05/08 No patients 2 staff 07/05/08 1 patient 11/05/08 1 staff

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29/04/2008	Edmund Ward St. Martins Hosp Canterbury	5	Not known	Not known	On Sunday 27th April 08 three patients had D&V we gained a sample from 1 patient. On Monday 28th no reported outbreaks, however overnight 2 patients had a foul smelling diarrhoea & 1 of them also had vomiting, this particular patient is currently on antibiotics & a stool sample has been gained & sent to the William Harvey Hospital microbiology dept. for testing. On Tuesday 29th so far 3 patients have also developed foul smelling diarrhoea & 2 have had vomiting. We gained another sample for 1 of these ladies.	1. Samples to be gained as episodes occur to both patients and staff & outbreak code is 8HP117. 2. Staff if affected to remain off ward for 48 hrs & to send samples to Occupational Health for testing. 3. Staff are using gloves, aprons & masks, universal precautions as per Trust Policy. Regular hand hygiene & hand gel usage in place. 5. Notices on entrance points for visitors & staff & we are closed to admissions & discharges until further notice. 6. Domestic staff aware & using precept cleaning tablets.	1. Awaiting the results of the samples taken. 2. Where possible we are able to isolate the patients, however some patients do have wadersome traits & this may not always be possible. 3. Staff will move all affected patient to one area. 4. Staff to use universal precautions & good hand hygiene for both staff & patients. 5. Ward Closed until further notice. 6. Domestic supervisor aware as ward will need a deep clean once we are infectious free. 7. HPA will contact us mid week for further update.	1. Infection Control Team 2. Michele Coleman Infection Control Link 3. HPA 4. Paul Campbell 5. Microbiology WHH 6. Dagamar Whiting, Domestic Supervisor	Amanda Hatfield-Tugwell, Ward Manager	04/06/08 The ward has been cleaned and has now been open for admissions and discharges since 19th May 08
05/05/2008	Woodlands ward, Little Brook Hospital	1			Chest Infection	Commenced Broad Spectrum antibiotics and monitoring temperature & signs & symptoms of infection	Monitor outbreak or spread of similar infections in the ward environment	1. Infection Control Team 2. Ward SHO 3. Infection Control Link Nurse 4. Modern Matron	L Whitton R/N Infection Control Link	

08/05/2008	Edmund Ward St. Martins Hosp Canterbury	10	8	1	Diarrhoea & Vomiting	<p>1. Results of samples have come back as clear</p> <p>2. Samples to be gained as episodes occur to both patients & staff - outbreak code 8HP117</p> <p>3. Staff if affected to remain off ward for 48 hrs & to send samples to Occupation Health for testing.</p> <p>4. Staff are using, gowns, aprons, masks & universal precautions as per Trus Policy</p> <p>5. Regular hand hygiene & hand gel usage in place</p> <p>6. Notices on entrance points for visitors & staff & we remain closed to admission & discharges until further notice.</p> <p>7. Domestic staff aware & using precept cleaning tablets</p> <p>8. HPA & Trust Infection Control Nurse have been informed & have made regular contact with ward.</p>	<p>1. Results of samples taken have come back as clear</p> <p>2. Where possible we have been able to isolate the patients, however some patients do have wandersome traits & this may not always be possible.</p> <p>3. Staff remove all affected patients to one area.</p> <p>4. Staff to use universal precautions & good hand hygiene for both staff & patients</p> <p>5. Ward remains closed until further notice.</p> <p>6. Domestic supervisor aware as ward will need a deep clean once we are infectious free</p> <p>7. HPA have been contacting us every few days</p>	<p>1. Infection Control Team</p> <p>2. Michele Coleman</p> <p>3. HPA</p> <p>4. Paul Campbell</p> <p>5. Microbiology WHH</p> <p>6. Dagamar Whiting, Domestic Supervisor</p>	Amanda Hatfield-Tugwell, Ward Manager	<p>No outbreaks reported. Visit to ward on 11th June to assess situation and support staff. Discussed with ward manager the need for review of cleaning staff protective clothing and hand washing for patients. 11th June PM ward manager has meeting with RW from hotel services to discuss training and support for staff. No outbreaks reported. Visit to ward on Monday 16th June to review situation. Discussed with Ward Manager hand washing training. MC has agreed to provide training to hotel and care staff on Thursday 19th June. Andrew Dickers. Update 03/07/08 - Training given to 14 staff at St Martins Hospital on the 19th/06/08 - Michele Coleman.</p>
12.05/08	Ramsey Ward St. Martins Hosp Canterbury		3		Diarrhoea & Vomiting	Staff staying off work for 48 hours after last bout of D&V	Universal Precautions	<p>1. Paula Campbell Modern Matron</p> <p>2. Infection Control Team</p> <p>3. Health Protection Agency</p> <p>4. Donna Eldridge</p>	Sharon Harrison	<p>14/05/08</p> <p>2 patients with D&V as well as 3 staff and ward closed to admissions and discharges</p> <p>19/05/08 2 patients now resolved 1 patient with symptoms</p> <p>22/05/08 3 patients now resolved 3 patients with symptoms. 3 staff now returned to work.</p> <p>27/05/08 No further patients with symptoms, all others now clear and a deep clean being arranged for this week to enable ward to reopen.</p>
19/05/2008	320 Hempstead Road	2			Chronic Diarrhoea	Service Users kept at home from college, bland foods and fluids given, high observations. Hygiene regime increased and all outside visitors to the house cancelled.	All linen washed separately to prevent further infection. Gowns remain to be worn for all personal hygiene. Contact G.P. if no improvement within 24 hours.	<p>1. Chris Kennedy, Infection Control Nurse</p> <p>2. Families have been advised.</p>	Sarah Tsigarides	
8.05.08	Elthelbert Road, Canterbury	1			MRSA to Susan Smith foot	referred to consultant. Anti biotics prescribed.	universal precautions	HPA. MH care team.	Samantha Davies	20.05.08 Contacted home and signs of improvement to wound. Susan Seeing Consultant this PM. AD 17th June 2008 Progressing well no issues. AD

20/05/2008	Sevenscore Ward, Thanet Mental Health Unit	1			MRSA	All staff informed and Kent Protection Agency notified. NPSA learning through action form completed and sent to appropriate contacts. Medical team notified and Mupirocin cream prescribed	Universal Precautions and treatment as prescribed	1. KPA 2. SUI 3. Infection control team	Michele Booth, Deputy W/M	04/06/08 A swab was taken on the 3rd June and awaiting result. Recommended bactrobram
21/05/2008	Edmund Ward St. Martins Hosp Canterbury	1			SHINGLES	Universal Precautions and single room	Universal Precautions	1. Health Protection Agency (Katie Allen) 2. Michele Coleman , Infection Control Link Nurse	Paula Campbell	29/05/08 Shingles although affected patients skin at present looks clear Ward Dr needs to check her over & inform ward if outbreak is cleared. Patient with condition isolated to double room on own and has been prescribed relevant
27/05/2008	Willow Suite, Littlebrook Hospital, Dartford	1			Diarrhoea	Advised to seek medical attention and take a stool sample	Member of staff off sick and will contact the ward when given the all clear	1. Infection Control Team 2. Karen Dorey-Rees Associate Director for Acute Services 3. Angela Shorter Acute Care Service Mgr 4. Ramanah Venkiah, W/M	Ellen Madors	No sample provided staff member symptom free after 48hours and returned to work
04/06/2008	Sevenscore Ward, Thanet Mental Health Unit	1			MRSA	All staff informed and Kent Protection Agency notified. NPSA learning through action form completed and sent to appropriate contacts. Medical team notified and Mupirocin cream prescribed	Universal precautions and treatment prescribed	1. KAP 2. Infection Control Team	Michele Booth, Deputy W/M	This is in addition to one reported on the 20th May 08 17th June 2008 Unannounced visit to Sevenscore on 11th June. Discussed both MRSA case. Both being managed. Ward Manager dealing well with treatment. Ward teams now using a Vacation Cleaning Approach to tackling cross infection. Followed up on RCA report which stated staff are too busy. Clarified meaning which was that it was a busy day when more than one admission took place and staff could not assess infection status of patients on entry to the ward. Outcome for this is to ensure that Ward Transfer form is being used. Andrew Dickers.
06/06/2008	Rosewood Lodge Dartford	1			MRSA	Transferred from Redwood Ward, Darent Valley Hospital, Dartford	Universal Precautions	Infection Control Team and Donna Eldridge	Ranji Canty	17/06/2008 Tests done since her return shows that NO MRSA was isolated.
16/06/2008	Ramsay Ward St. Martins Hosp Canterbury	1			MRSA (only in nose)	Specimen sent	Universal Precautions	Infection Control and Paula Campbell	Sharon Harrison	No further action at present, MRSA in nose not an outbreak. Andrew Dickers

17/06/2008	Riverhill Ward Tarentfort Centre Dartford	1 confirmed 1 query	1 (not confirmed by GP)		Diarrhoea	1. Patient on observations instructed to maintain personal hygiene 2. Patient moved to empty room to allow bedroom to be deep cleaned 3. Next stool sample to be sent to DVH	1. All staff maintaining universal precautions & washing hands as well as alcohol gel 2. All soiled clothing to be washed on a sluice cycle 3. Instructions put up to all staff on Gastroenteritis infections	1. Gillian Ashford 2. Steve Driver Service Mgr 3. Dr clare Dunkley RMO 4. Mandy Arnett Site Manager	James Whittle	Update- 9th July 08- SN Niyi Jimoh reported that patients have been asymptomatic since the 1st july. Staff unable to obtain faecal samples - Michele Coleman.
30/06/2008	Elmstone Ward Thanet MH Unit	3			Diarrhoea & Vomiting	Promotion of hygiene with patients	Promotion of hygiene with patients		Christine Thompson	Update - 9th July 08 - Patients have been asymptomatic since 6th July 08. Unsure as to whether loose stools were due to alcohol abuse or infection. Unable to obtain faecal samples - Michele Coleman.
03/07/2008	Edmund Ward St. Martins Hosp Canterbury	1			MRSA	Patient admitted on 27th June 08 with MRSA up both nostrals. She is currently prescribed treatment & HPA are aware. Universal precautions maintained	Nostrals to be reswabbed 07/07/08	1. Paula Campbell 2. Health Protection Agency 3. Michele Coleman	Amanda Hatfield-Tugwell, Ward Manager	10th July 08 patient has been reswabbed on 07.07.08 and awaiting results 17th July 08 (a.m) still awaiting results of swab, Ward Doctor chased up result on the 14/07/08 yet they were not in the dept? Lost in transit, have asked staff to chase up results this afternoon. If results or swab not in microbiology dept then staff to reswab on Friday 18/07/08. Update- 22/07/08 - Recent swab returned a negative result on the 17/07/08 (p.m) - Michele Coleman.
07/07/2008	Rivendell, Residential Rehab Mill Lane, Eastry, Sandwich	1			Viral Gastroenteritis	Client transferred to CDU at QEQH nursed in side room. Awaiting confirmation of diagnosis from stool specimen	All areas disinfected. Toilet seats, taps, flush+handles disinfected daily. Handwashing policy strictly adhered to - clients also instructed on handwashing & food hygiene. Universal precautions used.	Consultant Psychiatrist and Rehab Manager	S/N Rached Harris	Update - 22/07/08 - Patient has been asymptomatic since returning from the Queen Elizabeth Queen Mother (QEQM) Hospital (patient returned to the ward after 2 days) - Michele Coleman.

14/07/2008	Winslow Ward, The Arundel Unit, William Harvey Hospital, Ashford	1			MRSA	Ward closed to admissions/discharges, increased signage, infected patients isolation, good hand hygiene	Universal Precautions	Ward Contacted by KHP to inform of infection in patient and to give advice on treatment and management of infection	Joan McWilliams	Update - 22/07/08 - contacted ward on 18/07/08 to clarify ward closure as reported, as this is not necessary. WM Barbara Morgan informed me that the ward has not been closed to discharges and admissions - Michele Coleman. Update- 15/08/08 - Discussed with WM Barbara Morgan today. Patients infected burns healed and was discharged home on 04/08/08. Michele Coleman.
16/07/2008	Ruby Ward Block Medway Maritime Hospital Gillingham	1			MRSA	Universal precautions are being taken by MDT and cleaning staff. Family have been notified and are aware of need to carry out universal precautions. Patient is prescribed Bactroban and Stillasept. The patient has been admitted to Medway Maritimes since the 02/10/07 and was transferred to Ruby Ward early April 2008. the patient has been in sideroom since admission due to very disturbed mental state, aprons and gloves have been used continuously for the care of this patient due to daily personal care needs. Wound is covered. Infection control team and Clinical Services Manager alerted 16/07/08	Continue to treat patient for the next 5 days and re-swab. Continue to carry out universal precautions	1. Nicky Dawber 2. Louise Clack 3. Peter Hasler 4. Donna Eldridge 5. Micelle Collins 6. Sapphire + Emerald Wards	Shelley Carley, Acting Ward Manager (AWM)	Update - 22/07/08 - Discussed with AWM on the 17/07/08. Patient is currently being treated with Bactroban and Stellasept and will be re-swabbed on the 24/07/08 (which is 3 days after treatment has ceased) - Michele Coleman. Update - 30/07/08 - Another course of bactroban & stellasept has been prescribed for 5 days. Re-swab of wound to take place on the 5/8/08 and a review of medical treatment. Update - 11/08/08 - Swab results show that groin, nasal area, right wound to leg and mouth not isolated, but the left leg wound remains MRSA positive. Discussed with AWM Shelley Carley and advised that the medics contact the Consultant Microbiologist for advice as prior treatment has not been effective. Michele Coleman. Update - 15/08/08 - Contacted by WM to inform IP & C that the medics had contacted the Consultant Microbiologist. No further treatment was recommended. The WM reports that the wound has almost healed. She will consult microbiology as to whether they want her to re-

24/07/2008	Ramsey Ward St. Martins Hosp Canterbury	1			MRSA	Univerasl precautions.	Universal precautions	Michele Coleman, Kent Health Protection Unit, Paula Campbell, Modern Matron	Sharon Harrison DWM	Update - 24/07/08 - Michele Coleman was informed this morning by Sandra Tomlin, Clinical Nurse Specialist of results of recent swabs carried out within acute trust (KCH) on this patient. Immediately contacted the ward and informed WM P Gregson. Infection SUI form completed. Informed DWM S Harrison that the patient does not need to be isolated as the MRSA is colonized (nose & axilla). Also advised to inform medical team. Michele Coleman. Update - 15/08/08 - Patient was discharged to home address on the 04/08/08, GP is aware of MRSA colonization. Michele Coleman.
28/07/2008	Emerald Ward Medway Martime Hospital Gillingham	1			Fungal Infection on finger nail	Cream applied on infected area	Hand washing after direct contact with patient. Care on the fingernails by podiatry	Ward Doctor	Adela Nisperos	Update - 15/08/08- Discussed with WM. She informed me that the patient still has this infection and is currently undergoing treatment for it. Michele Coleman.
01/08/2008	Anselm Ward, St Martins Hospital	1			MRSA	Advised received from infection Control Nurse. Seen by Dr. Ogada and prescribed Doxycycline x 5 days. Ward staff informed and document all laundry to be put in appropriate (red) laundry bag. Care plan for wound dressing completed using universal precautions. Wound to be dressed daily using aseptic techniques. Apron and glove to be worn during procedure. Patient informed of MRSA and the above procedures and copy of care plan given. Information leaflet given to patient. Patient encouraged to use Purell hygienic hand rub before and after carrying out any activities. Provide support to staff in team meeting.	Ensure everyone is aware of the infection and follow instructions as per care plan. Ensure staff wear protective equipment when dealing with identified potential infection risks/hazards. Ensure that staff wear green apron when serving meals. Ensure that staff report all incidents, record accordingly	Psychiatry Consultant Dr. A. Ismail, SPR Dr. Ogada, Microbiologist Mr. Nash, Modern Matron D. Weatherall, Infection Control Nurse M.Coleman Kent Health Protection Unit	DWM Kiran Gunnoo	Update - 04/08/08 - MRSA is isolated to several abdominal stab wounds. Update - 15/08/08 - patient was tranferred to Scarborough ward at the Arundel Unit last week. Discussed with both wards, relevant IC tranfer documentation had been completed. A swab sent to microbiology on 14/08/08 returned a 'MRSA not isolated' result on the 19/08/08. Michele Coleman.
15/08/2008	Emerald Ward Medway Martime Hospital Gillingham	1			Fungal Infection (skin)	Univerasl precautions.	Seen by ward doctor, Clostrimazole cream applied on affected area, universal precautions, proper disposal of bed linen.	1. Michele Coleman 2. Martine Fante, Emerald Ward Manager 3. Infection Control Department	Adela Nisperos	Update - 1/9/08 - Patient was deemed infection free from the 28/8/08 and was taken out of a side room. Patient discharged home on the 08/09/08. Michele Coleman.

28/08/2008	Emerald Ward Medway Maritime Hospital Gillingham	1			SHINGLES	Advice given to patient to cover up the area of shingles. Medication prescribed for the condition. Advice sought from infection control. IRIS form completed.	ENSURE PATIENT COVER UP AREA AT ALL TIME MONITOR AND REPORT TO MEDICAL TEAM IF THERE IS ANY FURTHER DETERIORATION INFORM AND REPORT TO INFECTION CONTROL CONSIDER MOVING IF NECESSARY	MARTINE FANTE – WARD MANAGER SARAH BLAKE – KENT PROTECTION AGENCY MIKE CURTIN- INFECTION CONTROL	PETER RODRIGUE S – DEPUTY WARD MANAGER	16/09/08 - Patient is still undergoing treatment for shingles. Aciclovir cream applied on affected areas. Vesicles have been reported to appear dry, therefore no longer infectious. Michele Coleman.
09/09/2008	Sevenscore Ward, Thanet Mental Health Unit	1			MRSA	Staff member Jay Stubbings is due to have surgery on his nose in a few weeks time. He had preo op swabs taken last week and they indicate that he is MRSA positive in his nose.	To dispose of tissues used to wipe his nose in the clinical waste bin To adhere to universal precautions	Kent Health Protection, Andrew Dickens, Jann Gilliland, Michele Coleman	WM Sue Wrintmore	09/09/08 - Staff member does not have to refrain from work whilst receiving treatment as MRSA is colonised. Michele Coleman.
14/09/2008	Woodlands ward, Little Brook Hospital	1			Lymph Node TB Patient was admitted following treatment in Darenth Valley	Patient was not infectious and usual infection control techniques used	N/A	Kent Health Protection Dr Mustley, Medical Consultant treating patient for TB	Barbara Stone	
15/09/2008	Anselm Ward, St Martins Hospital	1			Vomiting	Staff member off sick for 1 day, until 24 hours of no vomiting	Hand hygiene promoted with nursing staff	Modern Matron	Christine Thompson	16/09/08 - Staff member has returned to work. Discussed with WM (for future reference), staff are required to remain off of work until asymptomatic for 48 hours. Michele Coleman.
17/09/2008	Willow Suite, Littlebrook Hospital, Dartford	1			MRSA	Universal Precautions	Repeat swabs/blood	Infection control nurse on Willow Suite	Usha Auchoybur	17/09/08 - Contacted the ward and informed them that they also need to contact the KHPU. Michele Coleman. Update - 30/09/08 - Nasal swabs sent to microbiology on the 24/09/08 returned a negative result for MRSA on the 29/09/08. Michele Coleman.
22/09/2008	Willow Suite, Littlebrook Hospital, Dartford	1			MRSA colonisation in nose	Patient had her last dose of bactroban and is due for another nasal swab 22-09-08. Patient informed of the colonisation and advised to maintain a good personal hygiene. Patient given hand hygiene leaflet containing most frequently missed areas.	Patient is to inform us of any wounds in the nose or nose-bleed. Teaching was carried out to all staff and to patient. Especially information on MRSA and difference between infection and colonisation	Infection Control Team via Infection Control (e-mail). Karen Dorey-Rees, Associate Director for Acute Services. Angela Shorter, Acute Care Services Manager Ramanah Venkiah, Ward Manager	Ellen Madora	15/10/09 - Discussed with Ellen Madora today. Nasal swab sent to the lab returned a negative result for MRSA on the 29/09/08. Michele Coleman.

01/10/2008	Gatland house tier three CAMHS		3		Diarrhoea & Vomiting	staff advised not to return to work until 48 hours after last symptoms	staff advised not to return to work until 48 hours after last symptoms	Donna Eldridge, Michele Coleman, KHPU	Jacqui Wilson, Service Manager	09/10/08- No further episodes of diarrhoea or vomiting for over a week. KHPU happy to close this case. Michele Coleman.
03/10/2008	Emerald Ward Medway Martime Hospital Gillingham		1		Scabies	Consulted her GP and prescribed cream for the scabies. Went home and advised to call Occupational Health for advice as suggested by Health Protection Unit	To follow advice of OH/GP. To ensure that all areas affected will be treated with anit scabies cream. Advise that all family members in contact with her will undergo treatment. To repeat the treatment after a week of first treatment.	Michele Coleman and KHPU	Adela Nisperos	Consulted her GP and prescribed cream for the scabies. Went home and advised to call the Occupational Health for advice as suggested by Health Protection Unit. Advise that all family members in contact with her will undergo treatment. Further treatment after a week of first treatment.
05/10/2008	Scotney Ward Trevor Gibbens Unit, Maidstone		1		Patient vomitted three times shortly after eating breakfast and again three times after eating midday meal. No episodes of diarrhoea.	Physical observations checked. Duty Doctor contacted to assess situation. Treatment plan put in place. Patient's room thoroughly cleaned/disinfected. Toilet and bathroom cleaned/disinfected. Other wards informed.	Staff to wear disposable overshoes when in Scotney. This to be reviewed tomorrow. Toilet/bathroom surfaces to be wiped with antiseptic/spirit wipe after use by patients.	On Call Manager Clinical Manager who is lead on infection control informed and agreed above measures	Barbara Alston	06/10/08 - Discussed with Barbara Alison, Senior Service Manager. Patient has been commenced on a fluid balance chart. No further episodes of vomiting today. Michele Coleman.
06/10/2008	Sevenscore Ward, Thanet Mental Health Unit		1		suspected scabies	Patient PB as seen by the dermatology nurse on 04.09.08. She has documented that she suspected that PB has scabies. Derbac cream was prescribed	Cream applied. Infection control set up	Staff Nurse contacted HPA and ws told that the situation to be monitored and if there was a second case to contact them again	Sue Wrintmore	15/10/08 - SN Sean Orouke stated that the patient is still undergoing treatment. No further cases reported. Michele Coleman
06/10/2008	Emerald Ward Medway Martime Hospital Gillingham		1		Conjunctivitis	Seen by SHO on call and prescribed chloramphenicol eye drops. Chloramphenicol eye drops to be applied regularly as prescribed	Staff to folow universal precautions when in contact with Linda. To encourage Linda to clean her eyes or if she cannot do it by herself then staff to clean it daily or when required. Proper disposal of materials used in cleaning the eyes	Michele Coleman	Adela Nisperos	15/10/08 - SN stated that treatment had been successful. Michele Coleman.
13/10/2008	Ramsey Ward St. Martins Hosp Canterbury		2		Diarrhoea - 2 had diarrhoea but may well not have been caused by infection 1 is prescribed suppositories and is given senna ,the other has IBS no further episodes since 11/10/08	UNIVERSAL PRECAUTIONS	UNIVERSAL PRECAUTIONS	KHPU, Michele Coleman, Paula Campbell	Sharon Harrison	15/10/08 - Discussed with DWM Sharon Harrison and Gill from the KHPU. Due to pre-existing medical conditions being reported and no further episodes of diarrhoea, this was not treated as an outbreak. Michele Coleman.

14/10/2008	Sevenscore Ward, Thanet Mental Health Unit	5	2		Diarrhoea	Universal Precautions	Universal Precautions	Infection Control contacted & KHPU	Victoria Awe	15/10/08 - Discussed with Staff nurse initially, then with WM Sue Wintmore on 13/10/08. Outbreak code given to the ward by the KHPU, code to be stated when faecal samples are sent to lab. SN Sean Orouke stated this morning that the ward had been closed to admissions and discharges and a notice is displayed on the door to the ward informing visitors. Update - Last bout of diarrhoea was on the 15/10/08. Ward was deep cleaned and re-opened on the 17/10/08. Michele Coleman.
22/10/2008	Amberwood Ward Dartford	1			Scabies	Patient was examined by the Doctor and prescribed calamine lotion and derbac cream	Nursing staff to use gloves and apron when applying cream or lotion	Mike Curtin	Vera Dookeran	07/11/08 - Patient had been successfully treated and discharged home today. No further episodes reported. Michele Coleman.
01/11/2008	Anselm Ward, St Martins Hospital	3	1		Diarrhoea & Vomiting	Advised received from infection Control Nurse Gillian Ashford Ward staff informed and document all laundry to be put in appropriate (red) laundry bag. Care plan for diarrhoea & Vomiting to be placed in patients notes. Apron and glove to be worn when attending to patients. Patients to be nursed in own room whenever possible. Information leaflet to be given to patient the patients. Patients to be encouraged to wash hands before and after carrying out any activities and to also use Purell hygienic hand rub. To clean toilet twice daily including door handles & flushes and check toilet after every use. Day area carpet to be deep cleaned. Nursing Staff affected need to remain off until symptoms free for 48 hours. Provide support to staff in team meeting. Advice sought from Consultant Microbiologist.	Ensure everyone is aware of the infection and follow instructions as per care plan and as per Infection Control Manual. Ensure staff wear protective equipment when dealing with identified potential infection risks/hazards. Ensure that staff wear green apron when serving meals. Ensure that staff report all incidents, record accordingly & incidents forms are completed. Ensure Infection Control Policy is adhered to. Staff to be aware the need for increased hand hygiene. Posters displayed in prominent areas on the ward. Ensure Hygienic Hand Rub gel is accessible for everyone. Visitors to be advised of same.	KHPU (Sophie Parson). Consultant Microbiologist. Duty Manager Peter Gregson & Modern Matron D. Weatherall. KHPU Nurse on call Gillian Ashford. DMO Khalifa.	Kiran Gunnoo, DWM	03/11/08 - Telephone report given to me by Gill Ashford, KHPU who was contacted over the weekend by Anselm ward. Suspected viral gastroenteritis reported and advised to obtain faecal specimens and send to the lab for analysis. Discussed with Yoon Drew, DWM who stated that one patient has had no further episodes of diarrhoea and vomiting today. Update 07/11/08 - Ward re-opened after a deep clean on 06/11/08 as no further episodes of diarrhoea or vomiting for 48 hours. One patient has had diarrhoea today (07/11/08), therefore Anselm ward is closed to admissions and discharges (no vacant beds at present) until asymptomatic for 48 hrs of D & V and the ward has had a deep clean before re-opening. Discussed with Modern Matron, Debbie Weatherall. 10/11/08 - Visited ward today and discussed situation with WM. Ward deep cleaned after being asymptomatic for 48 hrs and reopened on 12/11/08. Michele Coleman.

03/11/2008	Woodchurch Thanet Mental Health Unit Margate CT9 4BF	1			MRSA	MRSA positive screening (groin) by Acute Hospital - not informed except by pack prescribed on prescription chart on admission.	Ensured universal precautions taking place. Prescribed wash being used.	Family informed. Infection Control Lead	Janet Hatch, WM	Discharged back to William Harvey on 30/10/08 due to current issues with physical health (not MRSA). Discussed with WM, who assured me that an infection transfer form had been completed prior to admission and upon transfer back to WHH. Michele Coleman.
10/11/2008	Woodchurch Thanet Mental Health Unit Margate CT9 4BF	6	3		Diarrhoea & Vomiting	Staff sent home - To be 48 hrs clear of episode of D&V. Any patients having symptoms to use separate commode and not be in main ward area where possible. Clear fluids encouraged. Universal precautions	<ul style="list-style-type: none"> • Universal precautions • Cleaning of ward areas – door handles, phones etc • Ward closed to admissions, discharges, reduced traffic to essential only • Outpatient appts., postponed. • Visitors discouraged to unit and where possible seen in reception area • Notice displayed on ward door 	<ul style="list-style-type: none"> • KHPA – outbreak code 8HP226 • Matron • Andrew Dickens 	Janet Hatch, WM	13/11/08 - WM contacted the Senior Infection Control Nurse (SICN) as the number of staff and patients experiencing symptoms of D & V had increased to 8 staff and 4 patients. SICN visited the ward on the 13th. Outbreak Management meeting to be held on 17th/11/08. On 17/11/08 an infection reporting form sent to IC reports that 12 out of 15 patients and 8 staff had experienced D & V. The lab has identified Noro virus. Management meeting held and items on the agenda were discussed (short report to follow). Deep clean to commence once ward has been symptom free for 48 hrs. 18th/11/08 - WM telephoned to inform SICN that a female patient had vomited 3 times, therefore deep clean will take place on 21/11/08 if no further episodes reported. 19/11/08 - WM phoned, no further episodes reported. 21/11/08. Deep clean carried out today. Ward will reopen on 22/11/08. Michele Coleman.

11/11/2008	Sevenscore Ward. Thanet Mental Health Unit. 164 Ramsgate Road Margate Kent. CT9 4BF.	3	1		Diarrhoea & Vomiting	Ward Closed to admissions transfers and discharges. All staff aware of infection control measures and these are being utilised. Access to ward is restricted. Persons are not permitted unless absolutely necessary. A notice has been displayed at the front of the ward advising the staff and visitors of the outbreak. Agency and bank staff will nurse clients who are infection free only. Hand gell sanitizer is located at various points throughout the ward. Hand washing posters displayed.	As stated in actions to prevent infection	Kent Protection Agency. Infection Control Dept. Service director. Modern Matron. Ward Managers at Thanet. Community staff. Staff visitors and carers	Cathy Dannahy Ward Manager	19/11/08 - Faecal specimens returned negative results from the lab for noro virus/C diff. On the 17/11/08 the WM stated that there had been no further episodes of D & V since the 12/11/08. 21/11/08 - Deep clean carried out on 19/11/08 and re-opened on the 20/11/08. Michele Coleman.
11/11/2008	Dudley Venables house	1			Diarrhoea & Vomiting	Advised received from infection Adrew Dickers, Donna Eldridge & Kent Health Protection Unit. - Ward staff informed and document all laundry to be put in appropriate (red) laundry bag. - Care plan for diarrhoea & Vomiting to placed in patients notes. - Apron and gloves to be worn when attending to patients. - patients to be nursed in own room whenever possible. - patients to be encouraged to wash hands before and after carrying out any activities and to also use Purell hygienic hand rub. - to clean toilet twice daily including door handles & flushes and check toilet after every use. - Provide support to staff in team meeting.	Ensure everyone is aware of the infection and follow instructions as per Care plan and as per infection Control Manual. Ensure staff wear protective equipment when dealing with identified potential infection risks hazards. Ensure that staff wear green Apron when serving meals. - Ensure Infection Control Policy is adhered to. - Staff to be aware the need for increased hand haygiene. - Posters dplayed in prominent areas on the ward. - Ensure Hygienic Hand Rub gel is accessable for everyone. - Visitors to be advised of same	KHPU. Modern Matron D. Weatherall. Donna Eldridge & Andrew Dickers Message left with Michelle Coleman	Daniel Lee	11/11/08 - SICN visited DVH. 25/11/08 - No further episodes reported. Ward deep cleaned and reopened on the 14/11/08 after being asymptomatic for 48 hours. Michele Coleman.

26/11/2008	Willow Suite, Littlebrook Hospital, Dartford		1		Chicken Pox	Staff was at home on the day that the infection was confirmed. However had been on shift 3 days previously. Kent HPU was contacted and we are awaiting feedback. Michele Coleman was contacted for advice. All staff to be informed of a potential outbreak. All vulnerable individuals were contacted by link nurse and advised to contact GP	Staff was contacted by link nurse and advised to stay at home until the Doctor gives her the all clear. Patients are to be observed for signs and symptoms of infection. Appropriate use of universal precautions to be maintained during patient contact. The staff have to complete a (Transfer of infections on discharge form) No restrictions regarding patient movement as advised by Infection Control Lead Nurse.	Mr Vekia Angela Shorter Mike Curtin Sheena Fenn Michele Coleman Occ Health	Ellen Madora	28/11/08 - Contacted SN Ellen Madora on 26/11/08 to advise that all staff that have not had chicken pox and are worried that they may contract it can contact Occupational Health to have their blood tested for antibodies. 1 pregnant member of staff has already had chicken pox, but unsure of the other staff members. Also advised to inform all staff and patients of chicken pox case. Transfer of patients from this ward to others was discussed with the KHPU. This was deemed okay to do so as long as the admitting ward was informed of the chicken pox case and to complete an infection transfer form. 08/12/08 - Staff member remains off of work with chicken pox. Michele Coleman.
12/12/2008	The Birches, 16 Salisbury Road, Tonbridge	4	3		Diarrhoea & Vomiting	Outings/appointments kept to minimum. Visitors kept to minimum. Increased awareness of hand hygiene, including use of personal protective clothing, alcohol gel after handwashing, cleaning of all hard surfaces with anti bacterial, use of alginate bags for contaminated clothing/towels. All staff off reminded to be 48 hours clear before returning to work. Staff on shift reminded to go off sick, at first indication of either diarrhoea or vomiting.	Outings/appointments kept to minimum. Visitors kept to minimum. Increased awareness of hand hygiene, including use of personal protective clothing, alcohol gel after handwashing, cleaning of all hard surfaces with anti bacterial, use of alginate bags for contaminated clothing/towels. All staff off reminded to be 48 hours clear before returning to work. Staff on shift reminded to go off sick, at first indication of either diarrhoea or vomiting.	Mike Curtin Lead Nurse KMPT, Wendy Barnes Service Manager, Sue Bromley, Assistant Director, GP Dr Bench	Sue Marsden	22/12/08 - No further episodes of D & V from patients and staff since the 14/12/08. Deep clean carried out after 48hrs from the last episode. Staff unable to obtain faecal specimens. Michele Coleman.

14/12/2008	Sapphire Ward, A Block, Medway Maritime Hospital	1			Diarrhoea & Vomiting (No further episodes of D&V reported by Milton Ward since her transfer on the 17/12/08. She was transferred for treatment of other physical health difficulties).	Barrier nursing, Isolation, Use of universal precautions.(use of aprons, gloves, hand-washing with soap and water) , stool sample taken for analysing, and still awaiting results	We are still awaiting results from sample taken. However In the event that the sample is confirmed to be noro-virus, or any more service users develop D&V the ward will be closed. There should be no further admissions to the ward, including movement of patients between wards. A sign will also be placed at the door advising all visitors, or staff entering the ward, that the ward is under Infection control procedures, and alcohol gel will be placed at the entrance and exit to the ward for all visitors to use. Side room to be deep cleaned when patient has recovered from D&V or room is vacated.	Michelle Coleman Louise Clack	Trader Chikoto	22/12/08 - Result from faecal specimen has returned a negative result for C diff on the 19/12/08. Patient transferred back from Milton Ward on the 19/12/08 without symptoms of D & V. No other person has been symptomatic. Michele Coleman.
22/12/2008	Scarburgh, Arundel unit	3	3		Diarrhoea & Vomiting	Ward Closed for transfers, Infection Controls Procedures implemented, notice put up on ward door advising of outbreaks. Staff off sick who have contracted infection.	Ward Closed for transfers, Infection Controls Procedures implemented, notice put up on ward door advising of outbreaks.	Jill Ashford, Public Health Protection Agency Oncall.	Guy Powell, MM	22/12/08 - Andrew Dickers contacted by WM this morning to discuss outbreak. 09/01/09 - After all patients and staff had been asymptomatic for 48 hrs, ward was deep cleaned and re-opened on 31/12/08. Michele Coleman.
23.12.08	Windslow ward Arundel Unit	5	0		Diarrhoea & Vomiting	Ward closed as from today. Sign on the entrance to increased awareness of hand washing particularly staff that move form ward to ward.	Ward to inform of any further outbreaks via reporting form	HPU contacted with an outbreak code given	Barbara Morgan WM	23/12/08 - Telephoned WM at 1300hrs for update. A further patient has vomited (total now 6 with D or V). Update - After all patients and staff had been asymptomatic for 48hrs, the ward was deep cleaned and re-opened on the 06/01/09. Michele Coleman.
23/12/2008	Woodlands Ward, Littlebrook Hospital, Dartford	1			Chicken Pox	Barrier Nursing, Aqueous cream prescribed, monitoring of signs and symptoms	Barrier nursing Staff and patients informed of infection Poster at entrance of the ward informing visitors of infection (confidentiality maintained)	Angela Shorter (Acute Care Services manager), Dr Nwosu (Consultant), KPHU, Staff Occupation Health Dept, Infection Control Team.	Raj Kutowaroo (DWM)/ L Whitton (S/N)	09/01/09 - Treatment received and no further cases of chicken pox reported. Michele Coleman.

31/12/2008	Emerald Ward, Medway Maritime Hospital	5	1		Respiratory problems	Sputum samples to be obtained from all patients/staff with symptoms who have not previously given a sample to ascertain nature of infections	1. Ward closed following discussion with Nicky Dawber, lead nurse. 2. Public notices displayed at entry. 3. All ward staff reminded to wear and use personal hand gel and to use correct hand washing technique. 4. Universal precautions to be used. 5. Isolation nursing if necessary	1. All ward staff made aware of suspected outbreak. 2. Ruby Ward and Sapphire Ward managers made aware of suspected outbreak and ward closure. 3. Medway and Swale CRHT Teams made aware of suspected outbreak and ward closure to admissions. 4. MASTT Team made aware of suspected outbreak and ward closure to admissions.	Alexander Bridge, Acting Ward Manager, Emerald Ward.	09/01/09 - It was reported on the 05/01/09 that the sputum samples had returned negative results for bacterial infection, but 2 patients have a greenish coloured sputum. This indicates a bacterial rather than a viral infection - antibiotics (amoxicillin prescribed). The remainder of the patients are no longer symptomatic. Ward has now re-opened. Michele Coleman.
06/01/2009	Newington ward, Arundel unit	5	1		Diarrhoea & Vomiting	Ward Closed for transfers, Infection Controls Procedures implemented, notice put up on ward door advising of outbreaks. Staff off sick who have contracted infection.	Ward Closed for transfers, Infection Controls Procedures implemented, notice put up on ward door advising of outbreaks.	Oncall Manager, CRHT, Health Protection	Guy Powell, MM	09/01/09 - Telephoned ward for update - Only 1 patient is symptomatic on the ward (vomited last night). 12/01/09 - After being asymptomatic for 48 hrs, the ward has been deep cleaned and has re-opened today. Michele Coleman.
13/01/2009	Sevenscore Ward, Thanet Mental Health Unit	1			MRSA in open wound	1) All staff involved in care informed of infection and aware of universal precautions and KHP guidelines 2) Doctor responsible for care contacted and awaiting appropriate treatment to be prescribed 3) Kent Health protection notified. Awaiting return call and advise on action to be taken. 4) Wound covered as per KHP policy	1) All staff involved in care informed of infection and aware of universal precautions and KHP guidelines 2) Doctor responsible for care contacted and awaiting appropriate treatment to be prescribed 3) Kent Health protection notified. Awaiting return call and advise on action to be taken. 4) Wound covered as per KHP policy	1) Kent Health Protection Agency 2) Responsible Doctor 3) Michele Coleman	Michele Booth, DWM	19/01/09 - NPSA's RCA SUI form completed and sent to infection control and SUI as it has been discovered that the patient does NOT have an open wound with MRSA present. Lab report had been poorly written (according to DWM) which caused confusion regarding results. Michele Coleman.

14/01/2009	Sevenscore Ward, Thanet Mental Health Unit	2			Scabies	1) All staff involved in care informed of infection and aware of universal precautions and KHP guidelines 2) Doctor responsible for care contacted and awaiting appropriate treatment to be prescribed 3) Kent Health protection notified. Awaiting return call and advise on action to be taken.	1) All staff involved in care informed of infection and aware of universal precautions and KHP guidelines 2) Doctor responsible for care contacted and awaiting appropriate treatment to be prescribed 3) Kent Health protection notified. Awaiting return call and advise on action to be taken.	1) Kent Health Protection Agency 2) Responsible Doctor	Cathy Dannahy Ward Manager	19/01/09 - Contacted the ward on the 16/01/09 to discuss this. Informed DWM that the ward should be closed to admissions, transfers and discharges until outbreak has been resolved. Advised to contact Occupational Health as all staff will have to carry out treatment on the same day as all patients. Ward team, Medical team and pharmacy to arrange for the treatment of all patients on the same day as staff. Treatments may need to be repeated approximately 7 days later. 27/01/08 - On the 21/01/08 the ward was contacted. All patients and staff had undergone treatment the night before. 11/02/09 - No further cases reported. Michele Coleman.
20/01/2009	Scarburgh Ward, Arundel Unit, WHH, Ashford	3			Repeated Vomiting x 2 Diarrhoea x 1	Ward Closed for Transfers / Admissions. Infection Control Procedures implemented. Notice displayed advising staff / patients of outbreak.	Notice advising of outbreak. Reminder to staff / patients re importance of handwashing. Ward 'closed'.	KHPU Infection Control Lead – Michelle Coleman Modern Matron (Arundel Unit) Bed Management Team.	Kevin Friel, W/M, Scarburgh Ward	27/01/09 - Ward have been in daily contact with the IC team. All those reported with D & V have been asymptomatic for 48 hrs. Deep cleaned planned for 28/01/09, then to re-open. 02/02/09 - Deep clean carried out and ward re-opened on 29/01/09. Michele Coleman.

01/02/2009	Winslow Ward, The Arundel Unit, William Harvey Hospital, Ashford	6			Diarrhoea	WARD CLOSED ,UNIVERSAL PRECAUTIONS,RESTICTED VISITING,EXTRA WARD CLEANING SCREENING,EXTRA SIGNAGE TO ENTRANCES OF WARD	WARD CLOSED ,UNIVERSAL PRECAUTIONS,RESTICTED VISITING,EXTRA WARD CLEANING SCREENING,EXTRA SIGNAGE TO ENTRANCES OF WARD	KENT HEALTH PROTECTION AGENCY ,KMPT INFECTION CONTROL NURSE ,ASHFORD OPMHN LOCALITY MANAGER	Simon Lockwood Deputy Ward Manager	02/02/09 - Contacted the ward and spoke with WM. 2 faecal specimens have been sent for analysis with outbreak code on the samples. Attempted cohorting of patients. Ward closed to admissions/discharges/transfers at present. 11/02/09 - Only 1 patient (male) is symptomatic at present (2000hrs last night). All faecal specimens have returned a negative result for clostridium difficile and norovirus, but awaiting a result for the symptomatic male patient faecal specimen (3rd specimen sent). On the 16/02/09 it was reported that 1 patient and 1 staff member were symptomatic. After being asymptomatic for 48 hours the ward was deep cleaned and reopened on the 19/02/09. Michele Coleman.
05/01/2009	Woodstock Unit at the Frank Lloyd, Sittingbourne	2	3		Diarrhoea & Vomiting - Patients: One patient (HD) vomiting on 3/02/09 • One patient experiencing diarrhoea today however was given Senna yesterday and does have Crohns Disease. • Staff: Two staff phoning in sick today with vomiting (JM & MB) • Another staff member is experiencing diarrhoea, whom has been working this morning, on her way home.	Closed the unit and have advised visitors of this. Samples have been requested from sufferers. One patient experiencing diarrhoea today however was given Senna yesterday and does have Crohns Disease. However we have implemented barrier nursing and isolating her in her room. Patients/staff encouraged to ensure they have good hand hygiene at all times.	I have notified the Continuing Care units and we have ensured no cross working by staff, throughout the unit, and for them to be aware of symptoms.	Health Protection have been notified, as has Christine Marsh – Locality Manager. Notified CMHT so no team members visit	Jayne Loader, Ward Manager	06/02/09 - Contacted the unit and discussed with SN Debbie Chapman the need to wash hands with soap and water, rather than use alcohol gel as a precautionary measure and to ensure that faecal specimens are obtained and are to identify the HPA's outbreak code and to request testing for noro virus and clostridium difficile toxins as well as other gastrointestinal infections. Notices placed on main entrance and inside ward alerting visitors/staff of outbreak. I requested that they should report to infection control team daily using the reporting form (as per Trust policy). 11/02/09 - All patients asymptomatic, no further cases reported. Deep clean arranged and ward re-opened. Michele Coleman.

19/02/2009	Sevenscore Ward TMHU	1			Herpes Z (Shingles)	1. All Staff involved in care informed of infection and made aware of universal precautions KHP guidelines 2. Dr responsible for care aware. 3. KHPU notified and gave advice as stated in KHP folder. 4. Infected site to be checked twice daily to ensure dry and not exudate.	Infection to be discussed with all Consultants in order for them to assess whether individual patients have compromised immunity.	Kent HPU Responsible Doctor Infection Control Team (via this document as not available on phone) Modern Matron	Michele Booth	03/03/09 - Vesicles have dried up, patient is now well and no cases of chicken pox reported as a result of this case of shingles. Michele Coleman.
02/03/2009	Ramsey Ward St. Martins Hosp Canterbury	2			Diarrhoea	Universal precautions/ward closed as instructed by infection control specimens to be collected and sent to lab/signs	Universal precautions and treatment prescribed	Infection Control Team HPA Paula Campbell	Sharon Harrion	03/03/09 - Contacted the ward re update. The ward is closed to discharges/admissions/transfers. SN Beverley to contact the KHPU to ask for an outbreak code to put on any faecal specimens sent for analysis. 2 patients have been symptomatic today, no further cases reported. Michele Coleman.
02/03/2009	Anselm Ward, St Martins Hospital	1			Possible TB	Advice sought from HPA as patient currently has no insight into either MH or possible physical concerns, she has complained that Dr's have referred her for a chest X-ray as she does not see she has a problem. TB specialist contacted and they will contact the ward tomorrow. HPA advice is until TB is diagnosed nothing can be put in place.	Patient advised to cough into a tissue if needed and dispose	HPA, TB Specialist Nurse, Donna Eldridge	WM Christine Thompson	