

## Trust Board Public and Confidential meeting – 27 October 2020

### Infection Prevention and Control Board Assurance Framework update

#### Purpose of the report

NHS England and NHS Improvement (NHSE/I) issued an Infection Prevention and Control (IPC) Board Assurance Framework (BAF) to support all healthcare providers to effectively self-assess their compliance with PHE COVID-19 related IPC guidance and to identify risks as a source of internal assurance to support and maintain quality standards.

The IPC BAF version 1.2 included sixty-six Key Lines of Enquiry (KLOE). The self-assessment against the BAF/KLOE identified ten gaps that required further action to strengthen assurance.

#### Analysis of the issue

The action plan is monitored through the Trust IPC group, updated monthly, and progress shared through IPC reporting to the Trust Quality Forum and regular updates to the CQC.

Seven of the ten actions are complete with evidence embedded within the action plan for assurance. A summary table is included below;

KLOE	Action to improve assurance	Status
1. Infection risk is assessed on admission and documented in patient notes	Complete an audit of patient notes to check infection status is assessed	<b>On track</b> Audits due for completion the end of October 2020
2. All staff clinical and non-clinical are trained in putting on (donning) and removing (doffing) PPE,	Level 1 & 2 training completed available on uLearn and compliance reported.	<b>Complete</b>
3. Adherence to PHE national guidance on the use of PPE is regularly audited	Develop a system and process to monitor adherence  Tool developed	<b>Action re-opened</b> To review the system and process to monitor adherence and review audit results
4. Staff regularly undertake hand hygiene and observe standard infection control precautions	To improve the total number of audits from 561 audits per month to 909 audits.	<b>Complete – remains on the work plan</b>
5. Increased frequency, at least twice daily, of cleaning in areas that have higher environmental contamination rates	To develop a cleaning service specification to meet the PHE national cleaning guidance for in-patient areas	<b>Complete</b>

<b>KLOE</b>	<b>Action to improve assurance</b>	<b>Status</b>
6. Review and ensure good ventilation in admission and waiting areas to minimise opportunistic airborne transmission	Survey work now included within the year one commission for the Ventilation AE. Updates to be provided through the IPC group	<b>On track</b> Surveys to be completed end of October 2020
7. Ideally segregation should be with separate spaces, but there is potential to use screens	Zoning plans completed. To note currently under review and refresh following IPC remobilisation guidance	<b>Complete</b>
8. Patients with new onset symptoms – instigation of contact tracing as soon as possible	Managing a Covid-19 Increased incidence/Outbreak/Cluster within LPT (Patients and Staff) policy	<b>Complete</b>
9. Guidance on drying should be displayed in all public toilet areas as well as staff areas	Revised poster in areas	<b>Complete</b>
10. Consistency in staff allocation is maintained, with reductions in the movement of staff between different areas	HoN provided assurance through the risk managed pathways and separation of staff, limited movement risk managed	<b>Complete</b>

In response to feedback from the CQC self-assessment of the KLOE, action number three has been reopened to further strengthen assurance, to introduce a revised system and process for auditing PPE adherence.

Following discussion at the Trust IPC group meeting on 6 October 2020, it has been agreed to develop a specific PPE adherence and social distancing audit tool to be completed at the end of October/early November 2020. Further work to agree, on-going reporting system and process to review all collated data.

## Proposal

It is proposed that the IPC BAF action plan continues to be monitored through the Trust IPC group, progress against the actions included in the bi-monthly IPC updates to the Quality Forum and six monthly IPC update to Trust Board.

## Decision required

For the Trust board to confirm a level of assurance and agree proposed oversight and governance going forward as detailed above.

## Governance table

<b>For Board and Board Committees:</b>	
<b>Paper sponsored by:</b>	Anne Scott, Interim Executive Director of Nursing, AHPs and Quality
<b>Paper authored by:</b>	Emma Wallis, Associate Director of Nursing and Professional Practice
<b>Date submitted:</b>	7.10.20
<b>State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):</b>	Infection Prevention and Control Group 6.10.20
<b>If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:</b>	Assured
<b>State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning</b>	Further update to be provided in the Trust IPC 6 monthly report due in December 2020
<b>STEP up to GREAT strategic alignment*:</b>	High Standards v
	Transformation
	Environments v
	Patient Involvement
	Well Governed
	Single Patient Record
	Equality, Leadership, Culture
	Access to Services
	Trustwide Quality Improvement
<b>Organisational Risk Register considerations:</b>	List risk number and title of risk 1: High standards The Trust's clinical systems & processes may not consistently deliver harm free care
<b>Is the decision required consistent with LPT's risk appetite:</b>	Yes
<b>False and misleading information (FOMI) considerations:</b>	None
<b>Positive confirmation that the content does not risk the safety of patients or the public</b>	Yes
<b>Equality considerations:</b>	Access to training Hearing difficulties Learning difficulties

Version 1.0