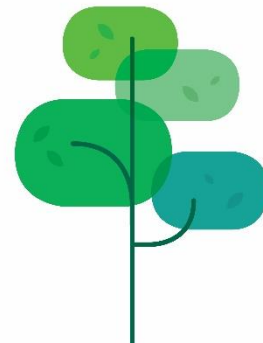


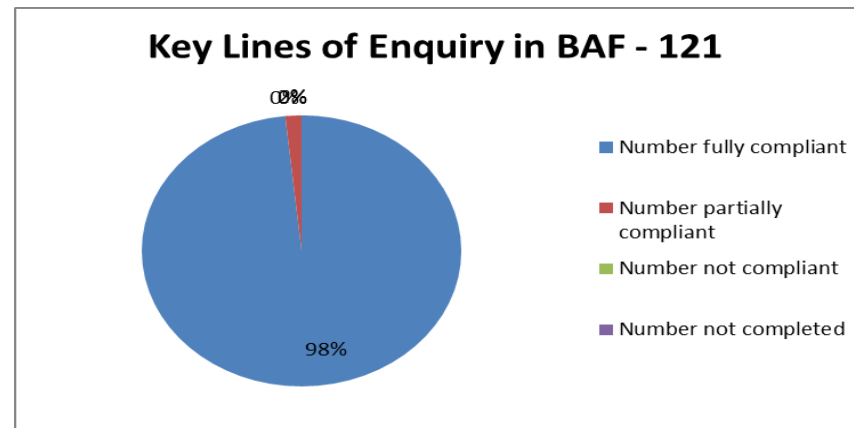
Infection Prevention and Control Board Assurance Framework – Compliance

May 2021



IPC Board Assurance Framework (BAF) - Overview

The current BAF has 10 sections with 121 key lines of enquiry



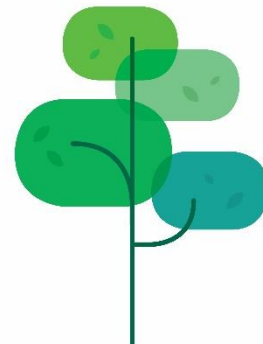
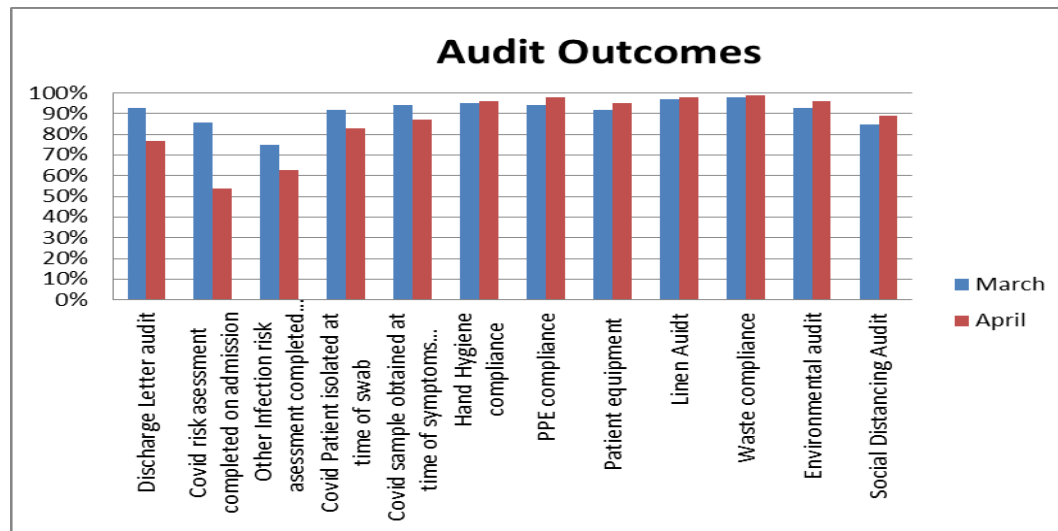
Action plan

Area of reduced compliance	Short Term Action	Long Term Action	Start date	End date
The risk assessment of all patients for other infections	To include a reminder in all training for nursing staff on importance of assessing and documenting a infection risk and status.	To have this available electronically on Nerve Centre	01/10/2021	30/09/2021
Covid-19 status being documented on the patients discharge letter.	To include a reminder in all training for medical staff on importance of documenting a Patients covid status on discharge.	To have an IPC additional information field in the new EPMA system	06/05/2021	30/09/2021



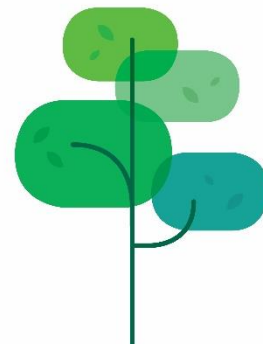
1. Systems are in place to manage and monitor the prevention and control of infection.

- This section has 21 key lines of enquiry.
- These include implementing all IPC guidelines in accordance with national guidelines, provide training , assessing patients for their infection risks and lateral flow testing.
- On going monitoring of compliance is monitored by weekly and monthly audits



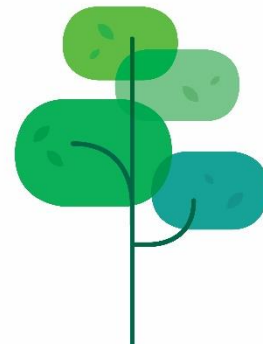
2. Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections

- 18 key lines of enquiry
- These include ensuring that cleaning is carried out in line with national guidance and decontamination of the environment and equipment is maintained.
- On going monitoring of compliance is monitored again by weekly and monthly audits and joint audits with the estates team
- Medirest provide all of their team with specific training for Covid-19, including PPE usage, cleaning requirements and the Trust also provide them with fit test training



3. Ensure appropriate antimicrobial use to optimise patient outcomes and to reduce the risk of adverse events and antimicrobial resistance

- 2 key lines of enquiry
- These include maintain process's for antimicrobial stewardship and maintain mandatory reporting requirements.
- Microbiology ward rounds involving the Consultant Microbiologist and Antimicrobial Pharmacist have continued sometimes virtually to monitor patients on antibiotics
- The Antimicrobial Pharmacists have continued to monitor the usage levels of antibiotics in the Trust and the Infection Control Team have continued to monitor all infection rates and report to PHE where required.



4. Provide suitable accurate information on infections to service users, their visitors and any person concerned with providing further support or nursing/ medical care in a timely fashion

- 5 key lines of enquiry
- This includes clear signage where patients are being treated for Covid-19, prompts for patients and visitors about hands, face and space
- The Trust send out regular communications on social media with updates on Trust procedures and reminders of precautions required.

Mid-Northamptonshire Integrated Care Partnership
Creating better health services together

Sherwood Forest Hospitals
NHS Foundation Trust

WELCOME TO OUR WARD

We have put a lot of measures in place to help keep you safe:

- 1. On arrival at the hospital you will have:**
 - Put on a surgical mask
 - Sanitised your hands with gel
- 2. On arrival at the Ward you will have to:**
 - Sanitise your hands
 - Put an apron and gloves on
- 3. On leaving your loved one, in the bay or side-room:**
 - Remove gloves and apron and place in bin
 - Wash your hands
- 4. On leaving the hospital:**
 - Remove mask and place in bin
 - Sanitise your hands

Please respect social distancing
Keep 2 metres away from others

Thank You
For helping us to keep everyone safe
and for visiting your loved one today

Best NHS Acute Trust in the Midlands (2018 and 2019 NHS Staff Survey) | CCO Outstanding hospital (2019) |

Stop
Do not Enter
Speak with nurse in charge before entering

RESPIRATORY ISOLATION PRECAUTIONS

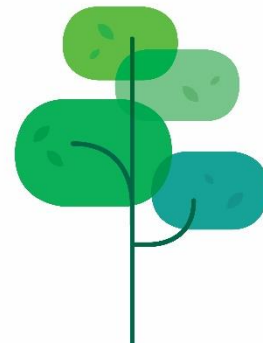
Visitors must report to the nurse in charge BEFORE entering the patient's room.

	Single Room	Door must be kept closed at all times.
	Staff	Visiting staff must report to the nurse in charge BEFORE entering the room. Staff should be aware of their own immune status, e.g. 'F, B, S' (Fare Below the Elbow's) policy MUST be adhered to. DO NOT TAKE MEDICAL NOTES INTO THE ROOM.
	Aprons	MUST be worn by all staff entering the room. Aprons must be removed before leaving the room.
	Gloves	MUST be worn by all staff entering the room. Gloves must be removed before leaving the room.
	Masks	MUST be worn before entering the room. These must be removed before leaving the room.
	Waste	All waste must be disposed of as clinical waste, inside the patient's room.
	Linen	Must be bagged inside the patient's room using red plastic bag and then placed in a second red plastic bag outside of room.
	Hands	EVERYONE MUST WASH HANDS THOROUGHLY BEFORE AND AFTER LEAVING THE ROOM WITH SOAP AND WATER OR ALCOHOL GEL.
	Cleaning	Daily clean with chlor-clean. Avoid clutter. On de-isolation, the room must be cleaned using chlor-clean and curtains changed. Nil. Use Chlor-clean for cleaning of blinds.

Version 2 April 2020

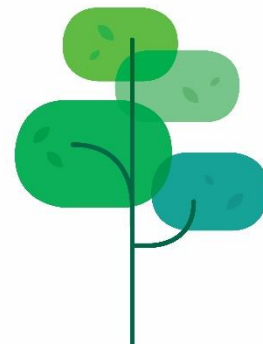
hand in hand
fighting infection together

Sherwood Forest Hospitals
NHS Foundation Trust



5. Ensure prompt identification of people who have or are at risk of developing an infection so that they receive timely and appropriate treatment to reduce the risk of transmitting infection to other people

- 14 key lines of enquiry
- This includes testing all patients on admission, triaging patients and limiting movement of positive and symptomatic patients, all patients wearing face masks and adhering to 2 meters social distancing and compliance with routine Covid testing
- On going monitoring of compliance is conducted through weekly audits



6. Systems to ensure that all care workers (including contractors and volunteers) are aware of and discharge their responsibilities in the process of preventing and controlling infection

- 22 key lines of enquiry
- These include having separate entry and exit points, adherence to PPE guidance, hand hygiene facilities available, staff social distancing, ongoing surveillance of Trust associated cases and outbreak management.
- Weekly reviews of these areas are carried out.

Sherwood Forest Hospitals - Covid RCA Position

Trustwide Overview - Last Updated:

26/05/2021 at 14.00pm

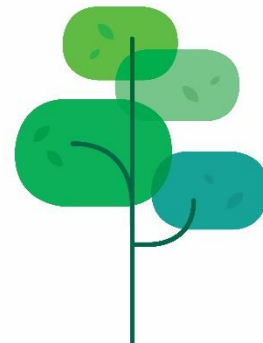
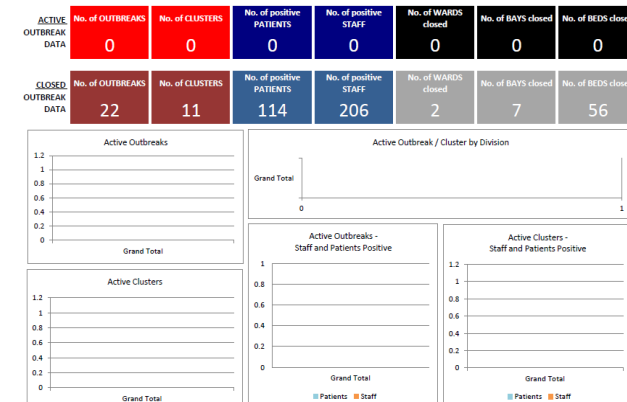
Trust Total RCAs		217		No. Returned		216		Trust Learnings	
Total RCAs	No. Returned	Total RCAs	No. Returned						
Medicine				Surgery					
Ward 22	16	Ward 22	16	Ward 31	11	Ward 31	11	* Increase compliance with Covid screening	
Ward 23	1	Ward 23	1	Ward 32	10	Ward 32	10	* Environmental cleaning and increasing frequency	
Ward 24	20	Ward 24	19	Ward 11	0	Ward 11	0	* Correct use of PPE in all areas - posters being printed.	
Ward 21	6	Ward 21	6	Ward 12	14	Ward 12	14	* Support & monitoring of visitors using PPE	
Ward 33	16	Ward 33	16	Ward ITU	1	Ward ITU	1	* Increase compliance with patients wearing masks	
Ward 34	11	Ward 34	11	Ward DC	0	Ward DC	0	* Improve social distancing for staff (related to outbreaks)	
Ward 36	1	Ward 36	1	Ward SSU	12	Ward SSU	12	* Minimise bed moves / ward moves / site moves	
Ward 41	10	Ward 41	10	Women & Childrens					
Ward 42	0	Ward 42	0	Ward 14	1	Ward 14	1	*	
Ward 43	7	Ward 43	7	Ward Mat	0	Ward Mat	0	*	
Ward 44	3	Ward 44	3	Ward 25	0	Ward 25	0	*	
Ward 51	7	Ward 51	7	Ward NICU	2	Ward NICU	2	*	
Ward 52	17	Ward 52	17	Newark & MCH					
Ward 53	17	Ward 53	17	Ward Science	34	Ward Science	34	*	

Sherwood Forest Hospitals - Outbreak Position

Trustwide Overview

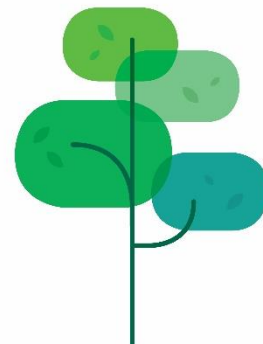
Last Updated:

18/04/2021 at 09:30pm



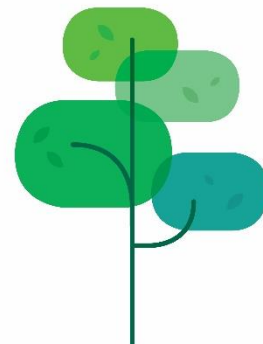
7. Provide or secure adequate isolation facilities

- 5 key lines of enquiry
- This includes restricting access between pathways, isolating patients in side rooms and if cohorting is required the facilities are appropriate.
- We are fortunate to have 50% on suite side rooms on the wards at KMH which has enable isolation of most positive patients
- The bays have their own bathroom facilities allowing for appropriate cohorting.
- These process are reviewed every time we identify a positive patient for any organism.



8. Secure adequate access to laboratory support as appropriate

- 13 key lines of enquiry
- This includes screens being taken and report within 24 hours, monitoring of turn around times, guidelines are followed on timing of tests, continue to test for other infections and testing elective patients with 72hours before admission.
- Monitoring of these elements is on going. Turnaround times have to be reported nationally everyday and we remain within the 24 hour turn around time. Process in place for elective patients to come in for testing.
- Audits undertaken of admission testing compliance.

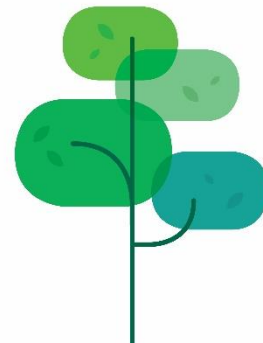


9. Have and adhere to policies designed for the individual's care and provider organisations that will help to prevent and control infections

- 4 key lines of enquiry
- This includes communication of guidance updates, waste management, PPE stock monitoring and supporting staff to manage other alert organisms.
- On going monitoring is undertaken through audits , additional training and regular updates at the Incident Control Meeting

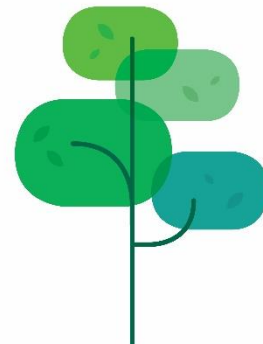
Week Commencing 31st May

	Aerosol generating PPE				General PPE			
	Visors	FFP3 Respirator	Gowns	Long Sleeve gloves	Goggles	Type 2R Face mask	Apron	Gloves
Stock (24th May)	10,728	21,500	12,553	12,600	6,670	313,000	339,000	248,000
Push Stock Estimates	0	3,000	2,000	0	0	21,000	63,000	150,000
Standing Order Deliveries	0	0	0	0	0	0	0	0
Total	10,728	24,500	14,553	12,600	6,670	334,000	402,000	398,000
Volumes Required (RAG Rated)	13,700	3500	3,000	2000	8,200	112,000	162,000	110,000



10. Have a system in place to manage the occupational health needs and obligations of staff in relation to infection

- 17 key lines of enquiry
- This includes completing individual staff risk assessments, fit testing, reducing movement of staff, staff wearing face masks, monitoring staff absence relating to Covid and staff having access to correct information if they test positive.
- A weekly fit testing report and staff absence levels are presented to ICT. Occupational Health speak to all staff who test positive and give them the information require and it is available on the intranet.



Governance

- All audits results are reported to the Nurse in Charge at the time of the audit and also sent out to the Ward Leaders and Matrons.
- The incident control team receive a weekly IPC report
- The BAF is reviewed and updated every month – it is reviewed by the Infection Prevention and Control Committee and Patient Safety Committee and

