

# Report to the Public Board Meeting of the Oxford Health NHS Foundation Trust

45/2020

(Agenda item: 09)

**22 July 2020**

**Update and recommendations from the Quality Committee:**

**Infection Prevention and Control Board Assurance Framework; Infection Prevention and Control annual report; and Complaints annual report**

**For Assurance**

**Executive Summary**

This paper is to give an update and to highlight the recommendations from the Quality Committee held on 8th July 2020.

The key reports below were discussed at the Quality Committee and are included in the reading room by way of supporting information to this agenda item:

* Infection, Prevention and Control Annual report
* Infection, Prevention and Control (IPC) Board Assurance Framework (BAF)
* Complaints Annual report

The IPC Annual report for the year 2019/20 was presented to the Quality Committee. All measures undertaken to prevent and control infection across the Trust were in place during the year and monthly collaborative health economy meetings were noted to take place to establish any system learning. The Board has a statutory duty to receive the annual IPC report. The Quality Committee is recommending to the Board that this report gives assurance that the statutory Trust IPC response and actions were in place during 2019/20. It was noted that as COVID19 only became an area of focus during late March 2020 this report did not give a detailed account of the Trust actions in relation to its response to the pandemic. However, the IPC BAF will outline this below.

The IPC committee will continue to oversee all aspects of infection prevention and control and escalate, if necessary, any issues to the Quality Committee when required.

The IPC BAF was received by all provider Trusts on 4th May 2020 to support compliance with all aspects of IPC with particular reference to the COVID19 pandemic. Both NHSE/I and the CQC are requiring a copy of the BAF for assurance.

In the context of COVID-19, there is an inherent level of risk for NHS staff who are treating and caring for patients and for patients and service users themselves in a healthcare setting.  It is important the Board ensures that risks are identified, managed and mitigated effectively and as such, the Quality Committee is recommending to the Board that the self-assessment provides reasonable assurance that organisational compliance has been systematically reviewed and that risks are being appropriately managed and mitigated.

The IPC BAF will continue to be monitored through the IPC committee and the Quality Committee.

The Complaints Annual report was presented to the Quality Committee. The Board has a statutory duty to receive this report to ensure the Trust is compliant with its obligations to patients or families wishing to raise concerns and formal complaints about services and care provided by the Trust. The Quality Committee was assured that the Trust was meeting its statutory compliance with all aspects of the complaint process and follow up actions including any raised by the PHSO. There were areas which need further focus however the report gave the Committee reasonable assurance.

All complaints will be monitored through the Trust governance structure and escalations raised to the Quality Committee where appropriate.

**Governance Route/Approval Process**

Quality Committee 8th July 2020

**Statutory or Regulatory responsibilities**

The Trust has a statutory and regulatory duty to complete an annual IPC report and an annual complaints report and ensure Board oversight.

**Recommendation**

The Quality Committee recommends the Board of Directors receives, agrees and adopts each Report given the assurances attained by this Committee with regards to the following:

* The IPC Annual report
* The IPC BAF
* The Complaints Annual report

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