

Agenda Item: 3.iii

Report to:	Board of Directors	Date: 2 July 2020
Report from:	Chief Nurse and Medical Director	
Principal Objective/	GOVERNANCE: COMBINED QUALITY REPORT	
Strategy and Title:	Patient Safety, Effectiveness of Care, Patient Experience and DIPC	
Board Assurance	Unable to provide safe, high quality care	
Framework Entries:	BAF numbers: 742, 675, 1511 and 1878	
Regulatory	CQC	
Requirement:		
Equality	None believed to apply	
Considerations:		
Key Risks	Non-compliance resulting in poor outcomes for patients and financial	
	penalties	
For:	Information	

1. Purpose/Background/Summary

The Medical Director and Chief Nurse would like to highlight the following in addition to the Papworth Integrated Performance Report (PIPR) to the Board:

2. Quality and Risk Committee Exception report and Escalation June 2020

The Chief Nurse and Medical Director have no matters to escalate to the Board as the information is sufficiently summarised in Chair's Report.

3. DIPC Report (BAF 675)

In addition to the Chair's report the Chief Nurse and Medical Director would like to report the following:

Nosocomial Infection

- Covid-19 nosocomial infections are those acquired within health care. There have been high levels of nosocomial infections across acute Trusts including NWAFT and CUH.
- Track and Trace self-isolation rules apply for any staff positive for COVID-19 but excludes circumstances where PPE is worn in accordance with current guidelines.
- Regional partnership required to effect collaboration of laboratory capacity to ensure adequate testing and quick turnaround for results for any frontline staff testing to achieve swift action to minimise the risk of nosocomial transmission.
- Nosocomial infections at RPH To date we have seen very little in terms of nosocomial infections in the Trust and we have put measures in place to ensure this remains the case.
 - All transfers in from other acute environments are now treated as unknown, as despite testing prior to transfer, we have had 3 occasions where the patient has then become Covid positive. This means these patients will go on a purple pathway (Covid unknown) until they have had day zero, day seven and day fourteen negative test results.
 - Improved social distancing and increased the number of Covid secure environments (Covid secure means a set of criteria is met to minimise risk of transmission between people).
 - Face masks are worn for all direct care interventions that are within the 2 metre boundary.
 - Implemented PHE instruction to insist on face covering (by public) and surgical face mask (by staff) for all people within the hospital building where Covid secure status is not possible.
 - Built environment changes to enable 2 metre distancing where ever possible.
 - o Restricted visiting remains in place.



4. Annual Reports

Please note the following 19/20 Annual Reports for information:

- Appendix 1 Learning from Deaths
- Appendix 2 Q4 & Annual Quality & Risk
- Appendix 3 Safeguarding
- Appendix 4 Antimicrobial Stewardship

5. Inquests/Investigations:

There have been no Inquest hearings since the last Board report.

The Trust currently has 47 open cases – 2 out of area.

Recommendation:

The Board of Directors is requested to note the contents of this report.