

Board of Directors (in Private)

Item 2.3b

Subject: Infection Prevention and Control Board Assurance Framework (BAF)
Date of Meeting: September 2025
Prepared by: Nicola Best – Lead Infection Prevention Nurse
 Mr Manoj Kuduvalli – Medical Director/DIPC
Presented by: Mr Manoj Kuduvalli – Medical Director/DIPC
Purpose of Report: For Noting

BAF Reference	Impact on BAF
BAF 1	Potential impact on nosocomial infection

Level of Assurance (please tick) To be used to provide the Board / Committee with a guide on the extent of assurance and evidence of assurance provided within the report		<input checked="" type="checkbox"/>
Level of Assurance	Description	
High	There is a strong system of internal control which has been effectively designed to meet the system objectives, and that controls are consistently applied in all areas reviewed.	<input type="checkbox"/>
Substantial	There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.	<input checked="" type="checkbox"/>
Moderate	There is an adequate system of internal control, however, in some areas weakness in design and/or inconsistent application of controls puts the achievement and some aspects of the system objectives at risk.	<input type="checkbox"/>
Limited	There is a compromised system of internal control as weaknesses in the design and / or inconsistent application of controls puts the achievement of the system objectives at risk.	<input type="checkbox"/>
No	There is an inadequate system of internal control as weaknesses in control, and/or consistent non-compliance with controls could/has resulted in failure to achieve the system objectives.	<input type="checkbox"/>

1. Executive Summary:

This report and attached document details the evidence and level of compliance with the standards identified in the Board assurance framework (BAF) for infection prevention and control. The overall level of compliance is good.

Standards in the BAF are included in the annual plan for 2025/26 to ensure that evidence will be available to demonstrate compliance on an ongoing basis.

2. Background:

The National Infection Prevention and Control board assurance framework has been developed by NHS England for use by organisations to enable them to respond using an evidence-based approach to maintain the safety of patients, services users, staff and others.

The purpose of the framework is to provide an assurance structure for boards against which the system can effectively self-assess compliance with the measures set out in the National Infection Prevention and Control Manual (NIPCM), the Health and Social Care Act 2008: code of practice on the prevention and control of infections, and other related disease-specific infection prevention and control guidance issued by UK Health Security Agency (UKHSA).

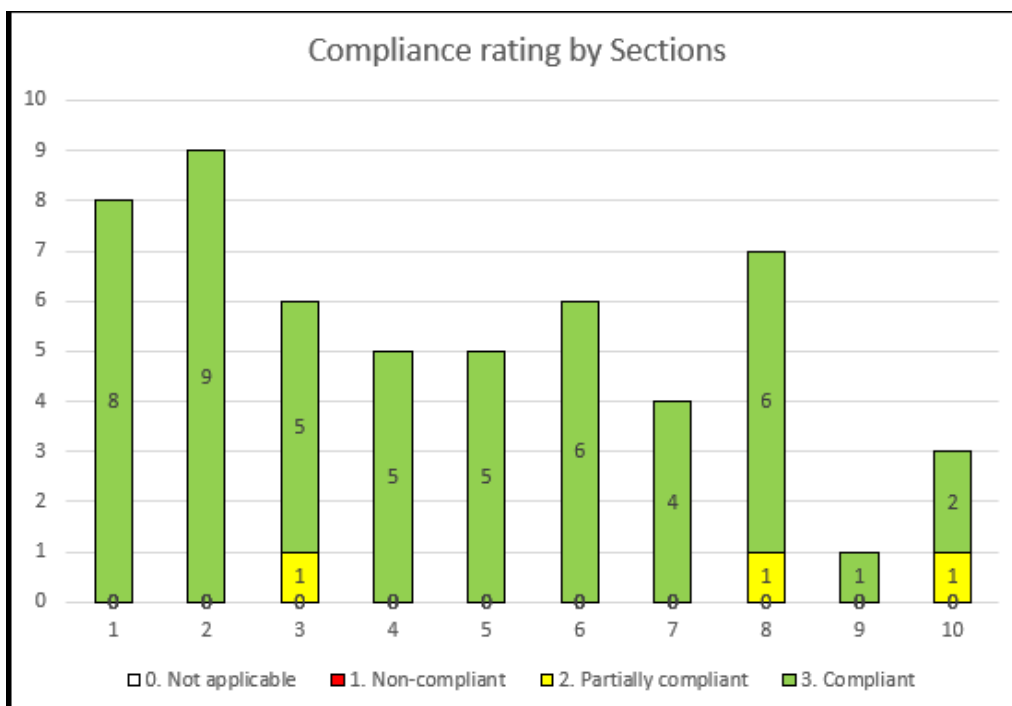
The framework has been updated a number of times. The latest version (5.0) was published in April 2025 and has been reviewed by the Infection Prevention team (IPT).

3. Report

There are 10 key lines of enquiry with a number of standards under each heading as below.

1. Systems and processes are in place to manage and monitor the prevention and control of infection
2. A clean and appropriate environment is managed and maintained
3. Appropriate antimicrobial stewardship arrangements are in place
4. Suitable and accurate information on infections is provided for patients, service users, visitors and carers
5. Systems are in place to ensure early identification of patients who have or are at risk of developing an infection
6. Staff are aware of their responsibilities in relation to infection prevention and control
7. Adequate isolation facilities are provided
8. Secure and adequate support to laboratory/diagnostic services is provided
9. Infection prevention and control policies are in place and adhered to
10. Systems are in place to manage the occupational health needs of staff in relation to infection

Compliance by each line of enquiry is given below.



There is good compliance overall with the standards detailed in the BAF and the supporting evidence is available to demonstrate compliance. However there are some areas where only partial compliance can be demonstrated.

Antimicrobial Stewardship

There is an antimicrobial group and regular antimicrobial ward rounds, audits are performed on appropriate antibiotic use and data collected on prescribing. A new standard has been introduced to monitor interventions against outcomes and length of stay and also to benchmark against other providers. The antimicrobial group is exploring how this information can be collected and analysed.

Laboratory support

There are protocols and processes in place for the transportation of specimens to the laboratory however the standard requires that this is regularly tested. Liverpool Clinical laboratories have advised that they would not be able to provide this information because of the large numbers of providers using their services across the North West region

Occupational Health provision.

It has been previously identified that compliance with staff immunisation and vaccination programmes cannot be fully evidenced and that there are gaps in the staff digital records. A new occupational health provider, Liverpool University Foundation Trust (LUHFT), was appointed in May 2025. There have been difficulties transferring information and data from the previous provider to LUHFT therefore assurances regarding staff immunisations are still not available. However work is now underway to collate all relevant information, identify any gaps and present reports and action plans to relevant Trust committees.

4. Conclusion:

The IPC BAF is being managed proactively and relevant standards are included in the annual programme for 2025/26 to ensure there is evidence available to

demonstrate compliance. There is good compliance with the majority of the standards and where any areas of non-compliance have been recognised actions to address these have been identified. Some actions remain beyond the control of the IPT but these issues have been highlighted to the appropriate departments.

5. Recommendation:

The Board of Directors is asked to note the contents of the report and the accompanying IPC BAF.