



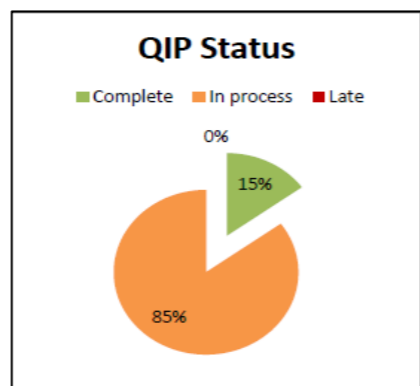
National Hygiene Services Standards

QIPs Log for:

Connolly Hospital Unannounced Inspection 8th March 2016



QIP Status	
Complete	3
In process	17
Late	0



Today's date: 17/05/2016

- Standard 3: The physical environment, facilities and resources are developed and managed to minimise the risk of service users, staff and visitors acquiring a Healthcare Associated Infection
- Standard 6: Hand hygiene practices that prevent, control and reduce the risk of spread of Healthcare Associated Infections are in place
- Standard 8: Invasive medical device related infections are prevented or reduced

Number	Entry Date	Standard	Identified Item for Quality Improvement	Actions	Due Date	Person Responsible	Completed Date	QIP Status
1	17/05/2016	3	Medication Preparation	A designated medication preparation area will be identified in each ward/department	31st May 2016	Directorate Assistant Directors of Nursing (ADON)		In process
2	17/05/2016	3	Hospital waste holding area for Healthcare Risk Waste & Non Healthcare Risk Waste	2 a) The waste holding area will be secured at all times	8th March 2016	General Services Manager	8th March 2016	Complete
				2 b) The area will be regularly checked & documented evidence of compliance that the area is secure will be recorded	31st May 2016	General Services Manager		In process
				2 c) Employees who access the waste holding area will be informed of the need to keep the area locked at all times	31st May 2016	General Services Manager		In process
3	17/05/2016	8	Decontamination of Blood Glucose Monitoring Equipment	3 a) Develop a procedure to ensure blood glucose monitors are decontaminated routinely and between patients after each use	31st May 2016	Directorate ADONs		In process
				3 b) Develop a procedure to prevent the contamination of blood glucose monitoring equipment and hence prevent potential spread of blood borne viruses	31st May 2016	Directorate ADONs		In process

4	17/05/2016	8	Decontamination of Patient Equipment	4 a) Equipment cleaning will be managed between patients as per ward cleaning schedule	8th March 2016	Consultant Microbiologist & Infection Prevention and Control Clinical Nurse Specialist	8th March 2016	Complete	
				4 b) The existing Infection prevention and Control Hospital Policy will be reviewed and updated to include robust guidance for staff on the decontamination of patient equipment	End of Quarter 3 2016			In process	
5	17/05/2016	3	Review of existing management of bodily fluid/matter waste in event of bed Pan macerator breakdown	5 a) Develop a procedure to guide staff how to deal with bodily waste in the event that a bed pan macerator is broken down in a clinical area	30th June 2016	Infection Prevention and Control Clinical Nurse Specialist		In process	
				5 b) The Estates department to ensure repairs are expedited and a contingency plan is put in place to replace the macerator if repairs are not possible in a timely manner	30th June 2016		Environmental Manager (Estates Dept Rep)		In process
6	17/05/2016	3	Maintenance schedule for enhanced cleaning of Patient beds (Including undercarriage & hydraulic mechanisms)	6 a) A Risk Assessment will be undertaken in line with evidence of best practice for enhanced cleaning of patient beds	31st May 2016	Household Services Manager & Consultant Microbiologist		In process	
				6 b) A proposal/Business case will be developed for an enhanced cleaning & maintenance programme in line with the findings of the risk assessment	30th June 2016				In process
				6 c) Develop a procedure for cleaning beds in Connolly Hospital	30th June 2016				In process
7	17/05/2016	3	Maintenance of Patient Chairs	A plan to for an ongoing maintenance programme to ensure integrity of patient chairs	30th June 2016	General Services Manager		In process	
8	17/05/2016	3	Cleaning of Health Care Risk waste bins	A plan will be developed and implemented for the cleaning of health care risk waste bins	End of Quarter 3 2016	Household Services Manager		In process	
9	17/05/2016	3	Curtain exchange programme	The existing system will be improved with regard evidence of compliance with curtain exchange programme	31 st May 2016	Household Services Manager		In process	
10	17/05/2016	3	Intensive Care Unit (ICU)						

			10 a) Provision of Negative Pressure Isolation facilities (ICU)	10 a) Funding to be sought from regional estates to upgrade existing isolation room to negative pressure isolation room	End of Quarter 4 2016	Hospital Manager		In process
			10 b) Provision of Patient bathroom	10 b) Funding to be sought from regional estates to install a patient toilet facility	Quarter 1 2017	Hospital Manager		In process
11	17/05/2016	3	ICU - Storage Facilities	Options for improved storage solutions will be review and implemented	Quarter 3 2016	CNM 3 ICU		In process
12	17/05/2016	8	ICU- Surface cleaning of Arterial Blood Gas Machine (ABG) and surrounding environment	Develop a procedure to ensure routine and between use cleaning of ABG machine	Quarter 3 2016	CNM 3 ICU		In process
13	17/05/2016	6	ICU - Provision of Hand Hygiene sink in vicinity of ABG Machine	A proposal will be developed and implemented to provide access to a Hand Hygiene Sink in the vicinity of the ABG machine	Quarter 3 2016	CNM 3 ICU		In process
14	17/05/2016	3	Management of Ward Treatment Room stock/stores at times of additional capacity when the area serves as patient accommodation.	A plan will be developed and implemented to ensure sterile/clean stock and supplies are stored appropriately when the treatment room is utilised to accommodate patient care in times of additional capacity	End of Quarter 3 2016	Directorate ADONs		In process
15	17/05/2016	3	Legionella Prevention	The Connolly Hospital Water Committee will develop a plan in line with existing improvements that further reduces the risk of Legionella	End of Quarter 4 2016	Environmental Manager (Estates Rep)		In process
16	17/05/2016	3	Maintenance of door closure in Isolation rooms when utilised for Infection Prevention & Control purposes	16 a) A system will be put into place to ensure room doors are closed if required for infection prevention and control purposes	End of Quarter 3 2016	Directorate ADONs & CNMs		In process
				16 b) A risk assessment will be conducted if closure of room doors is not in the interest of overall patient safety	End of Quarter 3 2016			In process

17	17/05/2016	8	Evidence of compliance with European Sharps Devices Directive 2010/32/EU	A review of the current status in relation to compliance with EU Directive will be undertaken and necessary changes implemented to reach required standards	End of Quarter 4 2016			In process	
18	17/05/2016	3	TPN Fridges – security/location/temp control	18 a) A plan will be developed to ensure TPN fridges are secure at all times	8th March 2016	Head of Pharmacy	8th March 2016	Complete	
				18 b) Options will be reviewed for relocation of TPN Fridges	End of Quarter 4 2016			In process	
				18 c) A procedure will be implemented for monitoring TPN fridge temperature				In process	
19	17/05/2016	6	Promotion of Hand Hygiene						
			19 a) Sink Replacement	19 a) A Sink replacement programme will be undertaken in line with service development/ refurbishment	Ongoing in line with service developments	Environmental Manager (Estates Department)		In process	
			19 b) Dispensers and cleanliness	19 b) A procedure will be developed to ensure hand gel dispensers are kept clean in clinical and non clinical areas	End of Quarter 2 2016	General Services Manager/ ADON's		In process	
			19 c) Evidence of local hand hygiene audits & staff knowledge of audit results	19 c) The Hand Hygiene Taskforce will develop a plan to ensure hand hygiene audits are conducted at local level & staff have access to audit results	End of Quarter 3 3016	Director of Nursing		In process	
			19 d) Need to re-audit in areas of non compliance	19 d) A strategy will be developed to repeat audits in area's of non compliance in a timely manner	End of Quarter 3 2016	Director of Nursing		In process	
20	17/05/2016	8	Urinary Catheter Care bundle (UC)	UC Care bundle will be reviewed to reflect standardisation in line with existing Peripheral Catheter Care Bundles	End of Quarter 3 2016	CNM 2 ICU & Urology Clinical Nurse Specialist & Infection Prevention and Control Clinical Nurse Specialist		In process	