

ACTION PLAN – ST. COLUMCILLE’S HOSPITAL, LOUGHLINSTOWN, CO. DUBLIN.

NON COMPLIANCE Lourdes Ward	ACTION	TIMEFRAME	PERSON RESONSIBLE	COMMENTS
Over-bed electrical fixtures’ casement were unclean	Ensure household staff are fully compliant with existing cleaning schedule	Immediate	Ms. Anne Harper	
Temporary closure mechanism for protection not in place on two sharp bins	Continue education & training programme for staff emphasising the need to ensure that the temporary closure mechanism is in place in accordance with Hospital Policy	Ongoing	Mr. Kumar Nair Mr. Martin Doyle	
One hand gel dispenser broken	Broken dispenser replaced. Instruction issued to household staff to advise supervisor of broken hand gel dispensers on a daily basis.	Resolved		
Unauthorised access to ‘dirty utility room’ due to the door remaining unlocked	Keys to the cleaning chemical cupboard have now been provided to the ward staff. Signage has been placed on cupboard door instructing that the door must be locked at all times.	Resolved		
Nurses station was cluttered	Reconfiguration of Nurses station layout is under review.	Ongoing	Ms. Jackie Kelly Mr. Darryl Litton	
NON COMPLIANCE Lourdes Ward	ACTION	TIMEFRAME	PERSON RESONSIBLE	COMMENTS
Two bins were full to the brim. Best practice states that bins should be filled no greater than 2/3 to enable secure closure.	Ensure compliance with existing policy and best practice. Education sessions to be provided to staff to reinforce best practice.	Ongoing	Ms. Anne Harpur	
Linen Trolleys stored on the main corridor when not in use	Alternative storage space for linen trolleys has been sourced	Resolved		
Sink in housekeeping room had no signage to remind staff of Hand Hygiene practices	Signage Replaced	Resolved		
NON COMPLIANCE ST. ANNE’S WARD	ACTION	TIMEFRAME	PERSON RESPONSIBLE	COMMENTS.
Grit & dirt observed at the corners of metal bed-frames underneath mattress	Ensure household staff are fully compliant with existing cleaning schedule	Immediate	Ms. Anne Harpur	
One mattress perished and cracked	Mattress replaced. Ensure inspection of all mattresses while being cleaned. Schedule of audit of mattresses to be introduced on quarterly basis. Inspection of mattresses to be included in education sessions for all staff	Resolved/Ongoing	Ms. Anne Harpur	

NON COMPLIANCE ST. ANNE'S WARD	ACTION	TIMEFRAME	PERSON RESPONSIBLE	COMMENTS.
Moderate amounts of dust observed on high surfaces in bathrooms	Ensure household staff are fully compliant with existing cleaning schedule	Immediate	Ms. Anne Harpur	
Mould like substance observed on metal grid in hand wash sink in bathroom.	Instruction issued to Maintenance Manager to replace metal grid	Resolved		
Interior of large blue bin was unclean	Bin Replaced	Resolved		
Some wall tiles in the linen room were loose and partially detached from the wall	Instruction issued to Maintenance Manager to replace wall tiles	Resolved		
Dust observed at the floor edges in linen room.	Ensure household staff are fully compliant with existing cleaning schedule	Immediate	Ms. Anne Harpur	
Non Compliance Hand Hygiene	ACTION	TIMEFRAME	PERSON RESPONSIBLE	COMMENTS
External Contract Staff were unaware of Hand Hygiene Safety Precautions	Education and training programme in Hand Hygiene and Safety Procedures to be provided for external contractors.	Ongoing	Mr. Kumar Nair Infection Control Nurse Mr. Darryl Litton	
Ceiling tiles removed by external contactor and safety measures not in place	Education and training programme in Hand Hygiene and Safety Procedure to be provided for externals contractors. Ensure compliance with agreed dust control measures as per contractors method statement.	Immediate	Mr. Kumar Nair. Mr. Darryl Litton	
Best practice not followed in hand-washing technique, wearing of wrist watches and length of time taken to complete hand hygiene.	Continue hand hygiene education and training programme.	Ongoing	Mr. Kumar Nair	
	Review and revise content of education sessions	Jan 2014	Mr. Kumar Nair	
	Continue audits of compliance with hand hygiene policy.	Ongoing	Mr. Kumar Nair	
	Plan and implement new promotional campaign to raise awareness.	March 2014	Infection Prevention & Control Committee.	
	Continue to engage with Consultant Body to lead by example.	Ongoing	Mr. Tom Mernagh, Hospital Manager	
	Reassess Hospital against the WHO Hand Hygiene self assessment framework, devise and implement action plan to address any deficiencies identified.	End Dec 2013	Dr. Susan FitzGerald Ms. Hilary Flynn	
	Plan and implement a 'Sleeves up' campaign	March 2014	Infection Prevention & Control Committee	

