

Mayo General Hospital Quality Improvement Plan

Standard	Criterion	Area	Action	Responsibility	Completion date
<p>Standard 3. Environment and Facilities Management 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.</p>	<p>Genral 3.1 to 3.8</p>	<p>Door of isolation rooms to have continuous access restrictions</p>	<p>Implement an immediate Hospital Wide Action Plan</p>	<p>Hospital Management Team</p>	<p>11/7/2014</p>
<p>Standard 3. Environment and Facilities Management</p>	<p>Genral 3.1 to 3.8</p>	<p><u>Patient equipment, Patient environment, Patient toilets/washrooms</u></p>	<p>1) Audits A) Complete an immediate general Audit of the 2 Wards and use the results to inform action plans. B) Promote a process of systematic Audit at Ward level. C) Enhance the Audit process at hospital level.</p>	<p>Ward Managers/ HS</p>	<p>31/7/2014</p>

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		<u>Personal protective equipment</u>	2) Cleaning Schedule Adjust the current cleaning schedule and practices to specifically target current deficiencies.	Ward Managers/ Domestic Supervisor	31/7/2014
		<u>Compliance with infection prevention and control best practice</u>	3) Minor Capital List :Develop an inventory of minor capital items that require replacment /repair and provide specific timeframes for completion.The list will include patient equipment eg drip stands etc. The list will extend to beds and mattresses where required.	Ward Managers/ Mantence Supervisor /Central Supplies Manager	30/9/2014
			4) Routine Hygiene Awareness: Include a Hygiene related component to the daily "Hand Over" process whereby Hygiene issues are discussed, progress on active projects detailed, and obligations to Hygiene standards reinforced.	Ward Managers/ADONS	31/7/2014
			5) Provide dedicated resources to the patient equipment cleanig task	Ward Manager/ ADON	30/9/2014

<p>Standard 3. Environment and Facilities Management</p>	<p>Criterion 3.6. The cleanliness of the physical environment is effectively managed and maintained according to relevant national guidelines and legislation; to protect service-user dignity and privacy and to reduce the risk of the spread of Healthcare Associated Infections. This includes but is not limited to:</p>	<p>General cleanliness and maintenance</p>	<p>1) Reinforce the requirement to complete signature sheets as the norm following cleaning task.</p>	<p>Ward Manager/ ADON /HST</p>	<p>31/8/2014</p>
		<p>Security of clean utility room.</p>	<p>2) Develop a specific project plan to reorganise the use of the Day Unit in A Ward having consideration for the the functions currently taking place.The project will have a Hygiene focus</p>	<p>Ward Manager /Maintance Supervisor</p>	<p>31/10/2014</p>
		<p>Linen & Linen holding rooms</p>	<p>3) Review Audits to specifically address compliance with the security of the Clean utility room, linen room, and the Cleaning room.</p>	<p>Ward Manager/ ADON /HST</p>	<p>31/7/2014</p>
		<p>Cleaning facilities</p>			
		<p>Sanitary facilities</p>	<p>4) The Audit review process should pay specific attention to dust ,stains ,grills and general clutter that obstructs the cleaning process.etc</p>	<p>Ward Manager/ ADON /HST</p>	<p>31/7/2014</p>
		<p>Ward facilities</p>			

			5) Develop a plan to renovate the Shower Units and toilet area with a clear focus to facilitate easy cleaning.	Ward Manager /Maintance Supervisor	
Standard 3. Environment and Facilities Management	Criterion 3.7. The inventory, handling, storage, use and disposal of hazardous material/equipment is in accordance with evidence-based codes of best practice and current legislation.	Sharps boxes	1) Reinforce the specific requirement regarding the security of Sharps boxes and the filling of rigid yellow boxes. Opportunities include Audit , "Hand overs" (See standard 3) etc.	Ward Managers/ ADON	30/8/2014
		Rigid yellow boxes	2) Improve the vsibility of general signage to include waste segregation.	Ward Managers/ ADON	30/9/2014
		Waste segregation signage	3) Reinforce ,through the opportunities specified,the need to control access to the waste holding units.	Ward Managers/ ADON	30/9/2014
		Sub collection Waste holding area			
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Standard 6. Hand Hygiene Hand hygiene practices that prevent, control and reduce the risk of the spread of Healthcare Associated Infections are in place.	General 6.2 & 6.3	Hand Hygiene Sinks	1) Sink replacement plan Review the existing hospital wide sink replacement schedule to evaluate previously established deadlines.	Ward Managers/Maintenace Dept	31/12/2014

	<p>Observed Hand Hygiene Opportunities "5 moments for Hand Hygiene"</p> <p>Prompting and reminding healthcare workers about the importance of hand hygiene and about the appropriate indications and procedures for performing it.</p>	<p>2) Hand Hygiene Audit follow-up Establish a process whereby the results of hand Hygiene audits are reviewed on a regular basis at Ward level.</p>	<p>Ward Mgrs</p>	<p>31/7/2014</p>	
		<p>3) Hand Hygiene standards Communicate through the opportunities available the principle that vigilance regarding hand hygiene standards is each staff members obligation.</p>	<p>All supervisors /HMT</p>	<p>31/7/2014</p>	
<p>Standard 7 The spread of communicable/transmissible diseases is prevented, managed and controlled.</p>	<p>Criterion 7.6. Evidence-based best practice, including national guidelines, for the prevention, control and management of infectious diseases/organisms are implemented and audited.</p>	<p>Up-to-date risk assessment for the prevention and control of Legionella at Mayo General Hospital</p>	<p>Provide a completed risk assessment on the prevention and control of legionella</p>	<p>Hospital Management Team</p>	<p>31/12/2014</p>