

Sligo Regional Hospital Newsletter



Issue 2 Summer/Autumn 2013

Message from General Manager

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Welcome to the summer edition of our electronic newsletter. On reviewing activity and changes in the hospital over the last 6 months, it is important to reflect on key changes for the hospital during this period.



From a governance perspective, the environment has changed completely since our last edition. We are now part of the West/North West Hospital Group which incorporates Galway University Hospital and Merlin Park, Portiunclula Hospital

Ballinasloe, Roscommon County Hospital, Mayo General Hospital, Letterkenny General Hospital and ourselves. We look forward to being part of this group in terms of enhancing services to our patients and in contributing ourselves to the development and success of the West/North West Group.

You will be all aware that for the last week in July and first three weeks in August, we supported Letterkenny General Hospital following the major flooding which occurred there. We experienced an average of 25 – 30% increase in attendances at the Emergency Department and Acute Assessment Unit with surges up to 50% of increased activity on

some days. This resulted in 10 – 15 additional admissions from the Donegal catchment area on a daily basis and our response to this situation across all departments and

disciplines was exemplary. Huge pressures were placed, particularly on the Emergency Department, Acute Assessment Unit and Radiology and their response was outstanding despite the huge pressures placed on them. I would like to acknowledge the work from all staff across the hospital during this period.

Another significant change for the hospital was our implementation of the Smoke Free Campus Policy. This was formally launched in May 2013 and despite some infringements, the implementation has largely been a success.

Continued on page 2

Mission Statement

Sligo Regional Hospital is committed to the delivery of a high quality, patient centred service in a safe, equitable and efficient manner. We recognise and value the contribution of each staff member and endeavour to support them in their ongoing development.

We have had two visits from HIQA to assess our compliance against the National Standards for Prevention and Control of Healthcare Associated Infections (PCHCAI).

The reports are available on Q Pulse and a Quality Improvement Plan has been developed to address the deficits identified in the reports. The report also contained many examples of good practice which is to be welcomed and noted.



Of importance to note is each person's responsibility to ensure attendance at hand hygiene training annually and ensure compliance with the 5 moments of hand hygiene during patient care.

Looking forward to the next 6 months, the announcement of the Hospital's Group is an opportunity for SRH to develop and contribute across the group. Key priorities for the remainder of 2013 include:

- Ongoing cost containment measures
- Delivery of national inpatient, day case and outpatient waiting list targets
- 9 hour and 6 hours wait times in ED
- Decisions made regarding filling of priority posts for the hospital
- Integration into new West/North West Hospitals Group
- Enabling works for New Surgical/ED Block
- Additional car park (to be completed Dec '13)
- Mortuary development with viewing facilities for families/relatives enabling works commenced and full project completion mid 2014
- ED refurbishment for improved minor injuries area, audio/visual separation for paediatric patients & additional triage space commenced 30th September with completion early December
- CT replacement; due to complete mid November with mobile CT on-site for duration of this replacement project CSSD upgrade has been approved with purchase of equipment to take place in 2013

Some information on new permanent appointments over the past number of months are:

- Garry McMenamin, Clinical Engineering, Technician
- Sinead Bredin, Consultant Anaesthetist
- Sohel Ahmed, Consultant Anaesthetist
- Wouter Reinier Jonker, Consultant Anaesthetist

I would also like to take this opportunity to acknowledge the role of Mr Paul Mullaney who held the role of Clinical Director for the past 8+ years. Paul was one of the first Clinical Directors in the country and has played a key role in progressing services and dealing with challenges over this time. Mr Fergal Hickey has taken up this role with effect from 2nd September 2013. However, it should be noted that the Clinical Directorate structures are changing across the West/North West Group and further details of this will emerge later in 2013. In the context of the new Group structures, I would also like to acknowledge the role of Damien McCallion as ISA Manager over the past 2 years as reporting relationships have now shifted into the new Group management structure.

Grainne McCann Acting General Manager

Nursing & Midwifery Update

Dear Colleagues,

It is hard to believe how quickily our summer is coming to a close as I welcome you to the nurse & midwifery developments for the autumn edition of Sligo Regional Hospital Newsletter.

Chief Diretor of Nursing and Midwifery

Firstly, we extend our congratulations to Ms Colette Cowan the Chief DoN/M for West North West Hospital Group. The Group Directors of Nursing from within the seven

Acute Hospitals had our first meeting in May in MGH. In July I organised for Colette to come & meet the Senior Nurse & Midwife Team in SRH. The aim of the visit was to provide an opportunity to communciate present priorities for nursing & midwifery in 2013 & capture key areas to move forward on our journey in 2014. A number of our front line nursing and support staff met with Colette on the day when we facilitated an orientation to a number of departments & wards on the day.

Performance Management

This was one key area identified by Colette that will take a clear focus for nursing & midwifery & all health care professionals in the future. In August I organised for Mr Padddy Duggan Human Resource Directorate to facilitate an informative workshop in SRH to which twenty nursing staff attended. Ms. S Patten in Performance & Development office will progress future nurse supports for us in directing this practice within all nurse line structures.

Quality Patient Safety Strategies was another key priority for nursing identified by the Chief Director of Nurisng. Now more than ever there is a greater focus on measuring patient safety performance. On June 25th I supported a number of nurse grades to attend a UK conference – "*Effective Ward Manger – Implementating the Francis Recommenations*" & the learning from this will be re-engineered into facilitating local nurse workshops in October in SRH. In May 2013 I commissioned an external facilitator Ms Eithne NiDomhnall funded by the Regional NMPDU to work with the NPDU staff in SRH in progressing a 'Review of Nursing Standards' in our Hospital. The report is imminent & Eithne will communciate findings to EMT & all staff on wards & departments in coming weeks.

Nurse metrics continue to take a monthly nurse & midwife focus & presently, we await an evaluation report on the 'Regional Nursing Metrics' led by Dr Randal Parlour Regional NMDDU.

Productive Ward & The Productive Operating Theatre initiatives

We continue to progress significant work on PW and TPOT - releasing time for patients in our care. *Watch this space* – PW and TPOT Leads will be updating us on outcomes at a national conference planned in Dublin on October 2013.

Advanced Nurse Practitioners are key nurse roles for our hospital & as I write, comprehensive documentation is finalised in preparation for the Nursing & Midwifery Board of Ireland to review, in advance of a site visit for the Diabetic ANP site approval. Also, we have staff in ED on the journey to meet the acedemic standard to progress two(2) ANP's posts for our Emergency Department in 2014.

Leadership in Nursing & Midwifery

In today's working environments a good level of technical knowledge & intellectual ability is taken for granted. Emotional intelligence (EI) is becoming the differentiator: the way in which great leaders & professionals can stand out. Over the summer SRH focused positive energies & achieved a total staff attendance of thirty eight (38) Clinical Nurse Managers & Middle Nurse Line Managers on a Leadership Programme-Emotional Intelligence, facilitated in the CNME. Well done in supporting nurse colleagues to attend this contineous professional development. I can confirm that two Assistant DoN's have commenced a 'National Leadership Programme' for middle line managers supported and led by the ONSD. **"The future depends on what we do in the present"** Mahatma Gandhi .



The CNM2 Role and Safe Patient Discharge

In May 2013 a number of "patient discharge workshops" were co-ordinated by Ms M Harkin-Kelly CNME and led out by Discharge Co-ordinators & all key staff involved in the ISA patient discharge processes. The CNM2 and Registered Nurse attendance at the afternoon workshops reflected a total of an 50 approx attendees'. This attendance was commendable led & managed by CNM2's at ward level. The workshops focused on empowering staff, providing information and facts relevant to ensure good quality, safe & caring patient discharge process be practiced.

We are now looking forward to leading out on an 'Open Day' event with an aim to raise awareness for the public on the importance of early patient discharges. We will communicate with the local radio and the local newspapers on the local patient discharge policy "Home by 11am". While there is some evidence of good practices in Sligo, over time the vision is, "early patient discharge will become a transformational culture practice within Sligo/Leitrim area". Fundamentally, this ensures that patients are discharged from the acute setting early in the day and have time to avail of medications etc and settle into their place of discharge e.g. home or step down PCCC facility.

This timely discharge practices will provide bed capacity for patients who are ill in ED & need to be placed in a ward to commence timely treatments. Ultimately, this practice reflects a significant more effective & safer patient flow process for patients, their relatives and all staff working in Acute and PCCC. Charlotte Lunsford Berry Philanthropist once said, "we won't always know whose lives we touched and made better for our having cared, because actions can sometimes have unforeseen ramifications. What's important is that you do care and you act".

Visit to SRH from the Director of Nursing - National Acute Medicine Programme

In July 2013 *Ms. Avilene Casey, Director of Nursing to Acute Medicine Programme* visited SRH and presented to a group of senior and frontline nurse managers on the following key factors relating to the background on the national acute medicine programme: 1. ensure safe patient care, 2. reduce trolley waits, 3. improve efficiencies, 4. reduce elective waiting times & 5. make real savings.

One national achievement to date illustrates a reduction in medical patients LOS of 0.5 days (from 8.6 days in 2010 to 7.49 days which is a 13% decrease). The opening of our SSU in December 2012 is enabling SRH to manage effectively the % of patients LOS 1 - 2 days and work has further progressed in regards to the % of patients LOS > 14 days.

Finally, Avilene explored in detail the key lead role of the registered nurse and Clinical Nurse Manager at ward level to facilitate timely & safe patient discharge practices. All members of the MDT have a key role to work on a clear focus on patients

Predicted Date of Discharge' (PDD). This practice is supported by the use of the 'White Programme Board' in use at ward level in all areas in SRH. She continued to discuss the importance of



Ms. Avilene Casey, Director of Nursing to Acute Medicine Programme

communicating discharge plans with patients and relatives once the admission process is implemented and the patient is assigned to the ward/unit. Early patient discharge is a fundamental element in the day to day nurse practices in acute settings. It ensures effective patient flow, reduces risk to patients by avoiding delays in patient bed placement and ensures the timely commencement of urgent treatment for patients awaiting admission to the acute hospital setting.

Acknowledgements

I thank the Senior Nurse & Midwife Team, all Registered Nurse, Midwife grades, Health Care Attendants & multidisciplinary team members in our hospital for the levels of professional commitment & hard work in recents weeks, when we provided health services to all patients who attended Sligo Regional Hospital for care, during major events experiecned within the region. Finally, I wish to acknowledge the continued support from all the Directors of Nursing & especially to both the Directors of Nursing & their staff in the local hospitals in Manorhamilton & Garden Hill & all the other Community Directors and staff who supported the efficient patient flow processes which provided the levels of capacity necessary to meet the higher demand of emergency activity. To one and all thank you all again sincerely.

Submitted by AnnMarie Loftus, Director of Nursing/Midwifery, SRH

Emergency Department SRH involvement in National Projects

All of the staff in the Emergency Department (ED) have received updated Triage training in 2012 as part of the Emergency Medicine Programme. It is planned to introduce electronic triage in the future as part of the EMP. The department is one of five hospitals involved in the pilot of the new Monitoring and Escalation protocol and Observation chart for Emergency Medicine.

The pilot ran for two weeks in July/August 2013 and was facilitated by Ms Fiona McDaid from the Emergency Medical Programme (EMP). Based on the findings of the pilot it is planned to roll out the tool to all Emergency Departments Nationally in the coming months. The ED in Sligo Regional Hospital is also involved in the ED Workforce Planning Framework Project which runs from June 2013 to May 2014.

The key aims of the project are to:

To develop a framework and associated training programme to support workforce planning across Emergency Departments Nationally.

One of the recommendations of the EMP Strategy is that "Standardised Staffing Models will be developed to ensure equitable and appropriate staffing for all ED and Emergency Care networks (ECN)" P.230

Submitted by Marion Ryder, UNO/SM, SRH

Irish Maternity Early Warning System (I-MEWS)

The Irish Maternity Early Warning System (I-MEWS) is a bedside track and trigger system for recording vital signs which should be used on all pregnant women and up until 42 days postnatal irrespective of their clinical diagnosis while in hospital (RCPI, 2013). It was developed as part of the Clinical programme in Obstetrics and Gynaecology in recognition of the altered physiological state in pregnancy which can present a difficulty in identifying impending maternal collapse.

The I-MEWS tool was implemented nationally in May 2013 and its supporting guideline was published in June 2013 (This is now available on Q-Pulse). I-MEWS is currently in use in the maternity unit and is now being rolled out across all clinical areas for pregnant Gynae/Medical/Surgical patients. Multidisciplinary educational training sessions have been organised to support its implementation.

The majority of pregnant patients are cared for in the maternity or Gynae units but not exclusively. Therefore, all clinical areas are encouraged to attend for I-MEWS training. Training dates for September and October 2013 have been circulated and further dates will follow.

Training in the clinical areas or at educational forums can also be organised by contacting any of the trainers below:

Geraldine Ballantine, Clinical Placement Co-ordinator, SRH

Juliana Henry A/CMM3, SRH,

Maura McGettrick, CNME

Madeline Munnelly, CMM2, SRH

Enhancing Patient Centred Care in the Medical Specialty

Falls are one of the largest causes of harm in health care and are a national safety and quality priority. The Health Service Executive (HSE) implemented a Strategy to Prevent Falls and Fractures in Ireland's Ageing Population in 2008. While the strategy has been implemented in Sligo Regional Hospital, review of Incident reporting of falls continues to highlight a high prevalence of falls in the medical specialty.

Review of patient notes identified a fragmented multidisciplinary approach to falls management. The Falls Steering group in acknowledgement of the lack of cohesiveness in the management of falls proposed the introduction of a falls link role in the medical specialty to co-ordinate effective implementation of the falls strategy appropriate to patient need. The falls Link nurse was thus introduced in July 2013.

Review of falls and identification of individual risk factors must occur at the time of the event. The role of a falls link nurse may help to ensure that interventions for falls management are put in place in a timely fashion. The role of the falls link is to monitor and ensure that patients presenting with falls risk have:

- Initial assessments completed
- Orange band insitu
- Assessment of individual risk factors eg. Incontinence managment, medication review.
- Falls alarms in use
- Referral to multidisciplinary team as approporiate
- Falls care plan commenced
- Referral to appropriate community supports on discharge
- Ensure tranfer documentation outlines falls management
- Accurate detailed incident report completed in the event of a fall.

Effectiveness of this initiative is evaluated from the safety cross and monthly review of Incident reports. Weekly PDSA (Plan –Do Study –Act) are also completed.

In February 2013 a CNM2 from Practice Development was assigned to take a lead on prioritising quality patient care initiatives in the medical specialty.

To date, a number of initiatives have been introduced to promote safe patient care

- Patient Status at a Glance boards
- Care Bundles
- Falls Link Nurse

Ongoing review of standards of Care has also been incorporated into the working practice of staff to include

- Wound Care Management Review
- Review of Incontinence Management
- Nursing Metrics
- Audit of Discharge Planning
- Falls Management (Safety Cross)
- Audit of Meal Matters
- Adherance to visiting policy (Safety Cross)

The continued professional development of staff is viewed as pivotal to improving staff well being and ensuring that staff have the knowledge, skills and attidudes to fulfil their role competently.



Nursing management & staff, Medical Specialty Sligo Regional Hospital at Metrics Board which displays: Audit results, safety crosses and compliance with Care Bundles

A focus on attendance at mandatory training and the facilitation of ward staff education sessions has remained a priority. To date, there is active engagement with the Clinical Nurse Managers to progress initiatives, evaluate impact and obtain feedback on improvements that have been made possible. A continuous process is in place to promote and sustain the delivery of high quality patient centred care.

Submitted by Eileen Carolan, CNM2, Practice Development, SRH

Minister O'Reilly Visits SRH

The Minister for Health James Reilly visited the hospital in April 2013 to officially open the Ring Road Development and view plans for the new Surgical/Emergency Department Block.

Unfortunately due to adverse weather conditions the cutting of the tape at the Ring Road could not proceed.

During his visit at the hospital as well as viewing plans for the New Surgical Block

he visited the new Short Stay Unit , the Emergency Department and met with staff in the hospital who have been involved with various initiatives such as the Productive Ward and Productive Theatre. The Minister met with contractors and design team representatives working on the new block . He also met with representatives from the Friends of Sligo Regional Hospital . Local TD's , Senators and Councillors were also present during this visit.



Dr. James Reilly, T.D., Minister for Health and Children with staff from Sligo Regional Hospital on his recent visit to the hospital



Dr. James Reilly, T.D., Minister for Health and Children, Domhnall McLoughlin, Assistant General Manager SRH, Damien McCallion, Area Manager, Sligo/Leitrim



Dr. James Reilly, T.D., Minister for Health and Children, Damien McCallion, Area Manager, Sligo/ Leitrim, Grainne McCann, Acting General Manager SRH, Paul Mullaney, Clinical Director, SRH



HIQA National Standards

Work continues on the roll out and implementation of the National Standards for Safer Better Healthcare. These National Standards take immediate effect under section 8 of the Health Act 2007 and apply to all healthcare services provided or funded by the HSE.

Service providers are required to carry out a mandatory self-assessment of where they are currently in relation to compliance with all the

National Standards and put in place progressive implementation plans to address any gaps.

The guiding principle - and one that will be a focus via monitoring by the

Health Information Quality Authority (HIQA), is to create momentum across the National Standards in progressing towards full implementation, while prioritising for immediate action areas of significant deficit or risk to service users.

The National Standards for Safer Better Healthcare aim to give a shared voice to the expectations of the public, service users and service providers. They also provide a roadmap for improving the quality, safety and reliability of healthcare:

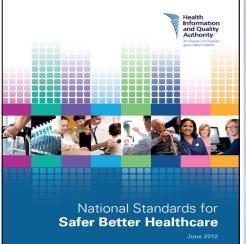
- **1.** Person-Centred Care and Support
- **2.** Effective Care and Support
- **3.** Safe Care and Support
- 4. Better Health and Wellbeing
- 5. Leadership, Governance and Management
- 6. Workforce
- 7. Use of Resources
- 8. Use of Information

The National Standards for Safer Better Healthcare:

- Offer a common language to describe what high quality, safe and reliable healthcare services look like
- Enable a person-centred approach by focusing on outcomes for service users and driving care which places service users at the centre of all that the service does
- Create a basis for improving the quality and safety of healthcare services by identifying strengths and highlighting areas for improvement
- Can be used in day-to-day practice to encourage a consistent level of quality and safety across the country and across all services
- Promote practice that is up to date, effective, and consistent
- Enable providers to be accountable to service users, the public
- and funding agencies for the quality and safety of services by setting out how they should organise, deliver and improve services.

HIQA will monitor the compliance of service providers against the National Standards. These standards will underpin the proposed licensing of designated healthcare providers.

The National Standards will also provide the basis for evaluating and authorising any future transition towards new locally governed arrangements in hospitals.



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Launch of National Standards Quality Assessment & Information Tool

To support the Self Assessment of the National Standards, A National Electronic "Quality Assessment and Information Tool QA & I)" was launched by Dr. Philip Crowley, National Director, Quality and Patient Safety Directorate on 27th June 2013. This tool is available to access via hospital websites for those involved in the self assessment process. In addition individual workbooks are now available to support the implementation of the standards (available for staff via Q Pulse).

Following this our self assessment process is well underway and the completion of the self assessment process a summary analysis report will be made available detailing our compliance with the standards, gaps identified and priority quality improvement plans.

National Standards Workshop

A National Standards Workshop was held at Sligo Regional Hospital on Wednesday 10th July 2013.

The workshop was attended by 42 Senior Managers and Heads of Departments from across the region including staff from Letterkenny, Castlebar and Sligo Regional Hospital.

It covered a variety of topics including completion of Quality Improvement Plans (QIP's) and the use of the QA and I Tool. It also gave an opportunity for hospitals to discuss implementation plans for the standards and give feedback on the process to date.

Local Progress to date includes the establishment of SRH multidisciplinary National Standards Assessment Team. Terms of Reference approved by EMT in July 2013.

Our local self assessment is well underway and work has commenced on implementation of Priority Quality Improvement Plans.

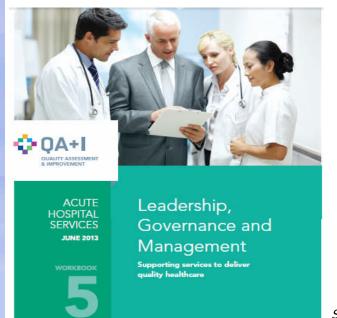
Assessment cycle for National Standards for Safer Better Healthcare

- Self assessments to be completed throughout Q3 and Q4 2013
- HIQA to commence monitoring of National Standards in Q4 2013

For further information, please see:

www.higa.ie

http://www.hse.ie/eng/about/Who/qualityandpatientsafety/qpsfocuson/qpit.html Q Pulse



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Submitted by Karen Reynolds, Accreditation/Quality Co-ordinator, SRH

Sligo Regional Hospital participates in Quality & Safety Clinical Governance Development Initiative

Sligo Regional Hospital is one of 6 hospitals participating in the National Quality and Safety Clinical Governance Development Initiative. Hospitals involved include: Sligo Regional Hospital; Midland Regional Hospital Portlaoise; Connolly Hospital; Wexford General Hospital and Cork University Hospital.

The purpose of the project is to undertake a review of quality and safety (clinical governance arrangements) at SRH and make recommendations for strengthening the arrangements (structures and processes).

This includes:

- Review of current Clinical Governance structures
- Review of Clinical Governance processes (to include patient safety, risk management, quality performance indicators, clinical effectiveness, Clinical Audit etc.)
- Agreement of priority Quality Improvement Plans
- Embedding good clinical governance across the continuum of care
- Leading in the delivery of quality safe patient care
- Contributing to the readiness to implement regulatory standards
- Preparing for the introduction of the National licensing system (National Standards for Safer Better Healthcare).

A local Corporate Governance project team is in place, membership includes; Grainne McCann, Acting General Manager, Domhnall McLoughlin, Assistant General Manager, Paul Mullaney, Clinical Director, AnnMarie Loftus, Director of Nursing and Midwifery, Karen Reynolds, Accreditation/Quality Co-ordinator (Project Manager), John McElhinney, Risk Advisor and Ms. Maureen Flynn, HSE National Lead for Clinical Governance Development.

Overall Objectives of the project:

- To complete an assessment of structures and process for quality and safety (clinical governance) at Sligo Regional Hospital using the Quality and Safety Clinical Governance Development Assurance Check for Health Service Providers (2012)
- To identify gaps, agree priorities and prepare quality improvement plans (with lead responsibilities and time scales) for development.
- Based on the analysis above make recommendations for the overall governance of Sligo Regional Hospital.

An assessment of the structures and processes for clinical governance development, using the 36 statements within the Quality and Patient Safety Clinical Governance Development Assurance Check for Health Service Providers (2012), has been completed. This has resulted in the identification of a number of priority quality improvement plans, all of which are progressing within agreed timescales.



Members of SRH Corporate Governance project team present at the joint National QPS Clinical Governance steering & working group meeting which took place on Wednesday 18th September 2013 in the Royal College of Physicians, Dublin.

Submitted by Karen Reynolds, Accreditation/Quality Co-ordinator, SRH

Quality & Safety Key Quality Improvement resources launched

Three new guidance documents, prepared by the HSE's Quality and Patient Safety Directorate, were launched by the Minister for Health Dr James Reilly TD, at the 3rd National Patient Safety Conference held in May 2013. Dr Philip Crowley, Maureen Flynn and Thora Burgess report

The Quality and Patient Safety Directorate is constantly seeking ways to support health service providers to improve the way they work and thus deliver a safer high quality experience to patients and people who access our services. To that end the Directorate is seeking to promote structures and leadership for high quality compassionate care.

The importance of clinical governance and the quality and patient safety agenda is of critical importance at a time of transition in the health service. Health service providers have a central role in placing quality and safety of patient care at the top of every agenda and creating the leadership structures to support this.

The boards of hospital group trusts and the leadership across our services have a critical role in communicating an inspiring vision for quality and safety and in translating that vision into clear priority objectives. Every clinical and social care action needs to be considered for its likely impact on the quality and safety of care that we provide. The HSE Quality and Patient Safety Directorate wishes to put quality and safety on every agenda at Board, Executive, Directorate and multidisciplinary team level.

The guidance documents are designed to be a helpful practical resource for health service providers. They can be accessed at <u>www.hse.ie/go/clinicalgovernance</u> and locally via Q Pulse.

A short description of the guidance documents is provided here:

Quality and Safety Committee(s): Guidance and Terms of Reference

The purpose of the document is to provide guidance and sample terms of reference for organisations to use and adapt in the establishment of both i) Quality and Safety Board Committees and ii) Quality and Safety Executive Committees. This guidance document will assist organisations in reviewing their arrangements and/or addressing current gaps. The guidance can be adapted to suit each service's particular context and environment.

Quality and Safety Walk-round: Toolkit

The purpose of the *Quality and Safety Walk-round Toolkit* is to provide a structured process to bring senior managers and front line staff together to have conversations about quality and safety with the intention to prevent, detect and mitigate patient/staff harm. The walk-round can be focused on any location or service that may affect patient care and safety of the organisation.

The Safety Pause: Information Sheet

The purpose of the safety pause information sheet is to heighten safety awareness and to assist teams in being proactive about the challenges they face in providing safe high quality care for patients.

It is based on a practical, why, who, when and how approach. It is focused on one question 'what patient safety issues do we need to be aware of today' resulting in immediate actions.



We strongly recommend that our senior leaders and managers use the guidance to embrace this style of leadership for quality and safety. This allows us to listen to front line staff and ensure that quality and safety is at the top of all our agendas. The Directorate welcomes feedback and learning from the practical application of this approach and we intend to develop the documents further based on your experience.

The Directorate would like to thank the quality and safety clinical governance development steering group, working group, international reference panel, colleges and associations for preparing and endorsing this approach.



At the launch of the three new clinical governance guidance documents prepared by the HSE's Quality and Patient Safety Directorate were L/R: Thora Burgess, Project Manager Clinical Governance Development, Dr. James Reilly, Minister for Health, Maureen Flynn National Lead for Clinical Governance Development and Dr. Philip Crowley, National Director, Quality and Patient Safety Directorate

Submitted by Thora Burgess, HSE Project Manager Clinical Governance Development

Participation in the Scottish Patient Safety Fellowship Programme



Ms. Karen Reynolds, Accreditation/Quality Co-ordinator at Sligo Regional Hospital was successful in being awarded one of two places open to Irish candidates on the Scottish & Patient Safety Fellowship Programme (SPSP).



In collaboration with Healthcare Improvement Scotland, the Office of the Nursing and Midwifery Services Director-National Leadership and Innovation Centre, are providing sponsorship for Karen to participate in a year long

fellowship (part-time) which commenced in November 2012. This initiative is been developed via the HSE

Quality and Patient Safety Directorate led by Dr Philip Crowley, to support capacity building in reducing adverse events and improving quality and patient safety.

The objective of the Fellowship Programme is to grow capacity of leaders to improve the safety of hospital care across the country; through the use of evidence-based tools and techniques, with the specific aim of improving the reliability and safety of everyday health care systems.

The SPSP Fellowship is a 10 month programme focusing on learning, coaching and focused residential seminars covering:

- Project management

- Improvement theory, methods and tools
- Measurement for improvement
 Understanding problems with patient flow
- Reliability, systems and design for safety
 - Working with people, motivation and team building

- Human Factors

- Leading clinicians through change.

All Fellows work on a safety improvement project as part of the programme and gain the opportunity to network with colleagues undertaking similar activities in the UK and abroad. We also participated in the International Quality Forum, London 2013 and will undertake a study trip in the Autumn to an organisation with a successful patient safety and quality improvement programme.





A total of 25 fellows from Scotland, England, Northern Ireland, Denmark, Norway and Ireland took part in the Fellowship Programme 2012/2013 which is built on the experience of successful international quality improvement initiatives such as the Institute for Healthcare Improvement (IHI) Quality Improvement Fellowship and Improvement Advisor Programme (IA).

Participants on the SPSP Fellowship Programme 2012/2013 pictured at the Beardmore Conference Centre, Glasgow, Scotland

Submitted by Karen Reynolds, RGN RM MA, Scottish Patient Safety Programme Fellow Accreditation/Quality Department, Sligo Regional Hospital

Clinical Audit at SRH

Hospital wide involvement in Clinical Audit continues with all areas having participated in Clinical Audits, 15 areas completed 32 audits in 2012, which was an increase from the 20 audits completed in 2010. 2013 sees the highest number of audits in progress with over 70 audits at different stages with 26 audits completed so far this year. The aspects reviewed in the audits include:

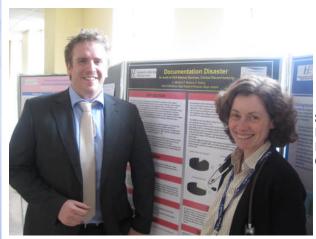
- clinical standards
- patients safety
- outcomes
- resource utilisation
- service organisation

Clinical Audit Forum

A very successful 6th Clinical Audit Forum was held on the 24th May 2013, with an attendance in excess of 100 staff. Those in attendance included staff from Sligo Regional Hospital, Public Health, Child Health, St. Angela's College and Rheumatology - Manorhamilton. The Forum was organised jointly by the Clinical Audit Support Team and The Research and Education Foundation and chaired by Dr. Cathryn Bogan, Consultant Palliative Care who did an excellent job.

The forum provided an opportunity for staff to display their completed audits.

34 audits were presented in poster form all of which were of a very high quality and commended by the judging panel. A 1^{st} and 2^{nd} prize was awarded for the best posters with a further 2 highly commended.



1st Prize Winner - Documentation Disaster - An audit of Sligo Regional Hospital Medical Services Clinical Record Keeping

L/R: Dr. Conor Mitchell, Registrar, Medical. Dr. Paula Hickey, Consultant Physician

2nd Prize: Teresa Donnelly, A/CNM II, Theatre, SRH Audit on Swab, Needle and Instrument Counts in Theatre at Sligo Regional Hospital

Highly Commended posters:

- Audit of Pain Assessment Documentation, Deirdre O'Gara, CNS, Pain Control, SRH

- A Retrospective Audit of Falls in the Surgical/Gynae Ward, Authors: Charlotte Hannon, Clinical Facilitator, NPDU, Kate Bree, NPDU Co-ordinator.

A number of the audits presented were re-audits that displayed that there was an improvement in practice from the initial audit to the re-audit. This is very positive as change post audit is a vital element of any audit and probably the most difficult part.

Undertaking a Clinical Audit

An Audit proposal form must be completed for every audit undertaken. The proposal form can be downloaded from Q Pulse or got from the Clinical Audit Support. Copies of all completed audits are saved to the Clinical audit data base and a summary of each audit is saved in Clinical Audit on Q Pulse.

Contact Details for Clinical Audit Support Team

Patricia Harte, Clinical Audit Coordinator Ext 4255 <u>patriciaf.harte@hse.ie</u> Mary Fitzpatrick, Clerical Support Ext 3151 <u>Marye.fitzpatrick@hse.ie</u>

Clinical Audit — Counting of Swabs Needles and instruments for Abdominal Surgery in General Theatre

An audit forum was held recently in Sligo Regional Hospital. There was a high standard of entrants among 34 posters submitted. It was notable that nursing audits featured prominently at prize giving. Interest in carrying out audits among nursing is increasing with two nursing audits being highly commended and the above winning 2nd prize. We are fortunate in that St Angela's run a clinical audit module at diploma, degree and masters level. Our nursing management and local CNME have supported and facilitated nurses to attend. 6 nurses in theatre alone have recently completed this module.

As we are all aware audit is recognised as a crucial component of improvements to the quality and safety of patient care. It is a quality improvement process that examines all aspects of clinical care. It is valuable in improving professional practice and aspects of care are less likely to be overlooked, leading to a more holistic approach.

The above winning audit investigated adherence to local policy regarding counting procedures in theatre for surgery. Failings in communication within the multidisciplinary team were identified.

Recommendations were proposed as a result and an action plan is currently being implemented. We are left with no doubt about the contributions nurses have to make in conducting audits.





L/R: Ms Teresa Donnelly A/CNM 2, General Theatre, SRH with Ms Mary Cooke, Audit module leader

SRH Staff at Clinical Audit Forum 2013 L/R: Ms AnnMarie Loftus, Director of Nursing/Midwifery, SRH, Ms Anna Burke, A/CNM 3 Surgical Specialities, SRH, Ms Teresa Donnelly A/CNM 2, General Theatre (2nd prize winner) and Ms Margaret Given, CNM 2 General Theatre, SRH

Submitted by Anna Burke, A/CNM III & Teresa Donnelly, A/CNM II, General Theatre SRH

Nursing Internship Students - Academic Posters

On Wednesday 17th July, the current cohort of Pre-registration Nursing Internship Students presented their Academic Posters in Sligo Regional Hospital. In addition, two students, Michelle Brady and Edel Gormley, delivered a Powerpoint Presentation. The students had completed this work as part of their *Transition to Professional Practice Module* in St. Angela's College.

Content of the session was as follows:

Presentations:

- Michelle Brady – Gestational Diabetes - Edel Gormley – Mens' Attitude to Healthy Eating.

Posters:

Laura Taheny - Are You Dying for a Tan?MichellCarol Foley - Obesity in Children in IrelandAideenLorna McDermott - Breastfeeding – off to a good start.Jane MRachel Duffy - The Health Status of Irish TravellersLorrainBernadette Ruane - Be Breast Aware - Breast Cancer Awareness

Michelle Gavin - Weighing in on Obesity Aideen Gillooly - Breastfeeding: Why Breast is Best. Jane Monaghan - A Fatal Attraction – Women & Tobacco Lorraine Griffin - Let someone know You are not alone. areness

Sean O'Ceallaigh - Hand Hygiene – Reducing Healthcare Associated Infection

Niamh Mulvanerty - Till death do us part - End of Life Care for the Elderly

The presentation took place in the Research & Education Foundation, Sligo Regional Hospital. There was a large attendance of clinical and academic staff on the day, further events of this kind are anticipated for the future.



SRH Student Nurses: L/R: Michelle Brady, Edel Gormley, Tara Mc Gowan, Danielle Collins



Internship 2009 Group



The Internship Group pictured with Ms. Ann Marie Loftus, DoNM, Ms Michele Glacken, Head of Nursing Studies Department, St. Angelas College and NPDU Staff

Submitted by Charlotte Hannon, Clinical Facilitator, NPDU, SRH

Theatre Admission Area - Poster presentation

An A3 poster was designed and submitted to the Launch of **The Model of Care for Acute Surgery and The National Policy and Procedure for Safe Surgery** in the RSCI on 17th July 2013.

We compared the pathway for the Adult ENT Patient Pre and Post the introduction of the Theatre Admission Area (TAA) on Level 8. The Delays identified prior to the introduction of the TAA were:

- not all adult patients were pre assessed
- they were sitting for up to 60 minutes awaiting admission by the teams
- medication may need to be administered
- Geographical location of the ENT ward near the orthopaedics wing and General Theatre on Level 8.

With the introduction the TAA the first adult pre-assessed patient is admitted directly to a designated area at the back of theatre where they are admitted in a timely manner by the multidisciplinary team.

Audit Results

Patients stated that it is a more efficient direct route, Staff stated that it has improved patient outcomes and that the TAA has been effective.

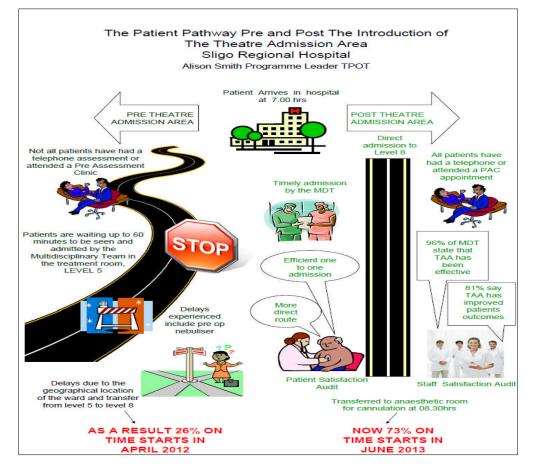
Results

26 % on time start pre TAA. 73% on time starts in June 2013

Future Plans

Reconfiguration of an area between theatre and ICU on level 8 has started for the TAA to admit the second adult ENT patient.

For further information, see Winning TPOT poster illustrated below.



Submitted by Alison Smith, Programme Leader, TPOT

Dermatology Research wins at Irish Association of Dermatologists Annual Conference

Research conducted by Dr. Dermot McKenna, Dr. Kara Heelan and Dr. Richard Watchorn in Sligo Regional Hospital won the much sought after poster prize at the annual I.A.D. conference in Belfast this year. The research examined the impact of the Dermatology service on melanoma detection and prognosis over a 16 year period.

The study concluded that since the establishment of a Dermatology service in SRH

- There has been a four fold increase in melanoma diagnosis
- There has been a doubling in diagnosis of new cases of invasive melanoma mainly due to greater detection in females
- Unfortunately there is still a high proportion of patients diagnosed with thick lesions >4mm

Research with regard to attitudes towards UV exposure has also been carried out among the 5 secondary schools in Sligo. This research also incorporated the first roll out of a 'Sunawarness' programme for the Sligo secondary schools which was delivered by Selene Daly Dermatology CNS. Data from this research will be available in the Autumn.

Submitted by Selene Daly, Dermatology CNS, SRH

National Patient Safety Culture Survey for Staff in Acute Hospitals



Sligo Regional Hospital is participating in the "National Patient Safety Culture Survey for Acute Hospitals". This survey will be facilitated in collaboration with the HSE Quality and Safety Directorate & commences on **Monday 30th September 2013** for a four week period.

The purpose of the survey is to facilitate:

- · organisations' understanding of staff perceptions of the existing culture of quality and patient safety
- awareness and strengthening of quality and patient safety within healthcare organisations
- development of quality and safety improvement initiatives.

Each member of staff is invited to take part in the survey & an analysis of the survey results for each hospital will be returned to each participating hospital & hospital group once the results have been analysed by the HSE Quality and Patient Safety Directorate. A national summary report, which will not identify individual hospitals, will be prepared at the end of the survey.

*Note: Survey link is available to all staff via email & hospital intranet (please inform staff in your area who do not have access to email).

If you have any related queries, please contact local lead Karen Reynolds, Accreditation/Quality Co-ordinator, <u>karen.reynolds@hse.ie</u> Ext: 4210/2609.

or **Ms. Elaine Fallon Project Officer PSCS,** Quality & Patient Safety Directorate, Room 101, Dr. Steevens' Hospital, Dublin 8 E-mail: elaine.fallon<u>@hse.ie</u> | Landline: +353 01 635 2238 Mobile: +353 86 0490528 | Website www.hse.ie



WE INVITE YOU TO

Participate in the Patient Safety Culture Survey

COUNT

Commencing on Monday 30th September 2013 Survey link available to all staff via hospital intranet

Or for further information contact local lead: Karen Reynolds, Accreditation & Quality Co-ordinator 071 9171111 Ext 4210/2609 or email: <u>karen.reynolds@hse.ie</u>

Tús Áite do Shábháilteacht Othar Patient Safety First

Hospital Environmental Hygiene & National Standards for the Prevention & Control of Healthcare Associated Infections

The Health Information and Quality Authority (the Authority or HIQA) commenced Phase 2 of the monitoring programme for the *National Standards for the Prevention and Control of Healthcare Associated Infections* in all acute hospitals in Ireland. This focused on announced and unannounced assessments of all acute hospitals' compliance with the national standards.

In order to focus on the delivery of the national standards hospital staff in Sligo Regional Hospital made tremendous efforts to ensure improvements in the environmental cleanliness, patient equipment and facilities management. Environmental upgrades to existing services such as renovation, repairs, painting, fixtures and fittings, equipment and storage facilities provided support to staff in meeting hygiene requirements. Improvements in this area remain ongoing, funded by minor capital investment were carried out across a range of departments through ward upgrades such as the Orthopaedic and Medical Department, repairs to fixtures and fittings in other areas and a painting programme covering areas identified in audits.

Similarly, other aspects of hygiene were also addressed. These included:

- Hand hygiene facilities
- · Catering, including ward kitchens
- Linen
- Water outlet flushing
- Patient isolation rooms
- · Management of patient equipment with attached the cleaning status labels

Emphasis was placed on the proper segregation, transportation and storage of waste. This process was aided by the introduction of magnetic bin labels to assist in the appropriate streaming and disposal of waste.

There was a renewed focus on ward cleanliness and thanks to all staff for supporting same. Detailed auditing procedures were maintained by ongoing local and senior managerial audits. Issues raised from the audit findings were followed up by pro-active Action Plans. Systematic decluttering of Wards/Departments to enable optimal cleaning was undertaken using LEAN principles.

A HIQA monitoring survey took place at Sligo Regional Hospital with an unannounced assessment on 28th February 2013 followed by an announced assessment on 30th April 2013. Quality Improvement Plans have been developed to address deficits identified and these are published on the Sligo Regional Hospital website.

In acknowledging the challenges of restricted resources, heartfelt appreciation is attributed to all staff who contributed in their own way to complying in the surveys.

With the National Standards for the Prevention and Control of Healthcare Associated Infections, Hand Hygiene is a simple but basic step we can all improve upon in reducing infections;

Adherence to hygiene policies and practices is key also, carrying out of audits and following up on action plans. All have an important part to pay if we are to achieve compliance.

SRH Goes Smoke Free

The 31st May 2013 marked another landmark day for Sligo Regional Hospital with the launch of the Smoke Fee Campus initiative. The launch day was a great success with a number of invited guests present. The hospital were delighted that the two champions and faces of the campaign both Louise O'Kennedy and Michael McGloin were available to attend the day and speak about what no longer been exposed to passive smoking as the enter and exit the hospital following treatment means to them.

A number of schools also participated in the art competition the theme of which was "Clean air at Sligo Regional Hospital". The art work was extremely colourful and added to the positive energy that was present on the day. Prizes were presented by Louise to the top 3 Art works on the day.

The Hospital committee worked diligently on the project but they were also greatly assisted by Maintenance/ground staff, Security and Euro Car Parks. A number of months since the launch date and the feedback has been enormously positive with the greatest impact been the main entrance to the hospital which is clean and uncluttered and welcoming to anyone having to enter the main building.

We would like to commend all who support the initiative in particular those who smoke be it patient/visitor or staff as without their support the initiative would not be as effective as it has been to date.

The Smoke Free Campus initiative would like to express their appreciation to one and all.

Pictured at the launch of SRH Smoke Free Campus:

L/R: Robbie Mahon, Security Officer, Grainne McCann, Acting General Manager, Ann McGowan, CNS, Cardiac Rehab, Patricia Dolan, Clinical Admin/Medical Records Manager, Willie Hudson, Euro Car Parks, Maria Ryder, Smoking Cessation Researcher, Eamon Doyle, Security Officer, Pauline Kent, Smoking Cessation Co-ordinator





Pictured at the launch of SRH Smoke Free Campus:

L/R: Pauline Kent, Smoking Cessation Co-ordinator, Louise O'Kennedy, Champion for campaign, Dr. Amjad Khahn, Medical Registrar, Michael McGloin, Champion for campaign and Dr. John Doherty, Consultant Physician.



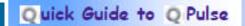


Pulse update at SRH

Sligo Regional Hospital continues the roll out and implementation of a Quality Management Information System (QMIS), utilising Q-Pulse Quality Management System software, to assist with the control, co-ordination and communication of numerous quality and safety activities across the organisation. Q Pulse is accessible to all staff on any internal computer.

The following Q Pulse modules are utilised:

- **Document Control**: provides a secure framework for all Internal and External Policy, Procedure and Guideline documents. A monthly summary report detailing all new and review documents uploaded to Q Pulse is circulated via email to all staff.
- Corrective and Preventative Action facilitates hospital wide electronic Incident Reporting via a purpose built wizard. A variety of CAPA Reports





Quality Management Information System at Sligo Regional Hospital

are now produced via Q Pulse and circulated to key staff, committees and Specialty Management Teams. These reports include monthly summary reports, SMT monthly reports and full CAPA reports as required.

- Electronic Maintenance requesting and reporting. The "CAPA" facility also allows all staff to view their maintenance calls logged or their respective departments.
- Audit Management details all Internal and External audit activity
- Equipment/Assets: details all asset information including location, service/calibration and maintenance records.
- Analysis: facilitates a wide range of analysis reporting.

Logging of Maintenance Calls

When logging maintenance requests for all equipment, please ensure that the Hospital Asset number is recorded in the details section. This will help the Maintenance department locating the equipment and records associated with this equipment can be updated to Q-Pulse.

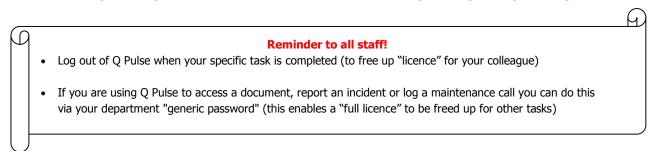
All Mattresses are now tagged with the hospital asset number at the foot of the mattress (towards the corners), please quote the Asset tag number when disposing of mattress.

In order to keep the Asset module up to date, please inform the Accreditation/Quality Dept of any new equipment/assets or any equipment that has been disposed.



Sample of an Asset Tag

*See our new "Q Pulse Quick User Guide/Leaflet" available on Q Pulse (COR-QP-0018).





Pulse update at SRH

Q Pulse Training & Support

There are a variety of Q-Pulse training movies available on the hospital intranet. These can be accessed by logging onto www.sgh.ie and clicking on the following:

Sligo Regional National HR Forms Hospital NCHD E-mail Reader Drugs & NCHD Bleeplist 2012 **Therapeutics** Safety Performance Information T Committee **QPulse Training Movies** Application Centre Radiology Training Information Self Help Guide to ICT/Microsoft Applica Services SRH Telephone Directory

eam

This facility is available to all SRH staff and accessible via all computers throughout the hospital.

The Accreditation/Quality Department have created a list of dates for Q-Pulse Training at SRH September - October 2013.

Each Training Session will last approx 30minutes and cover the following topics:

- Logging into Q-Pulse
- Searching for Documents
- Logging Maintenance Calls
- Incident Reporting

This training is suitable for staff new to Q-Pulse or any member of staff who requires Refresher Training. Please inform all staff in your area.

Q-Pulse Training/Refresher Training 2013 Sligo Regional Hospital								
Date	Time	Venue						
Tuesday 24 th September	10 - 10.30am & 11 - 11.30am	IT Training Room, ETC Building						
Thursday 26 th September	2 - 2.30pm & 3 - 3.30pm	IT Training Room, ETC Building						
Tuesday 1 st October	12 - 12:30pm	Small Board Room, Level 6						
Thursday 3 rd October	2 - 2.30pm & 3 - 3.30pm	Video Conference Room, ETC Building						
Tuesday 8th October	10 - 10.30am	Small Board Room, Level 6						
Thursday 10th October	3 - 3.30pm	Block A, 1A (Behind Doctors Res)						
Tuesday 15th October	12 - 12:30pm	Lecture Theatre, Level 6						
Thursday 17th October	2 - 2.30pm & 3 - 3.30pm	Video Conference Room, ETC Building						
Thursday 24th October	2 - 2.30pm & 3 - 3.30pm	Video Conference Room, ETC Building						

If you are interested in booking a place, please contact Accreditation/Quality Dept, Ext: 4302/2609

Submitted by Accreditation/Quality Dept, SRH

Friends of Sligo Regional Hospital

Address from Chairperson of Friends of Sligo Regional Hospital

2013 has been a very busy time for the Friends of Sligo Regional Hospital. There have been numerous events across the entire region including the An Post Cycle , Summer Bar B Q, Golf Classic, to name but a few. In addition proceeds from the Hospital Musical Society's production of "The Little Mermaid" as well as many other donations were gratefully received.

This is very important to us in that, without the support of the local community, our success to date would not have been possible. The beneficiary from our fund raising drive for 2013 is **Cardiac Services**. This will help us improve patients' chance of survival and avoid the need to travel outside the region for vital cardiac services. The 2013 target is €200,000 which will go towards funding for a Cardiac Catheter Laboratory/equipment in Sligo.

Fundraising for this commenced in earnest in late 2012 and the Friends are delighted to announce that funds raised to date are in excess of €130,000.

On behalf of the Friends, I would like to thank all of you who have contributed to our successful fundraising to date and hope that this will continue into 2014 in our strive to achieve the aim of a Cardiac Catheter Laboratory on site in Sligo.

As we go forward there is a greater requirement for the involvement of staff from the Hospital. We are getting a very positive response from the public to our fundraising but we believe staff involvement is vital to grow the profile and the fundraising activities. If you would like to help us please contact Deirdre Staunton at <u>deirdre.staunton@hse.ie</u>

I would also like to take this opportunity to pay tribute to our partner for 2012- Pet Stop and more who have been key to our achievements over the past 12 months.

Photographs from some of the events are outlined below:but please refer to the website <u>www.friendsofsligohospital.ie</u> for further details and please continue your support of the Friends.

Yours sincerely,

Gerry McManus Chairperson – Friends of Sligo Regional Hospital



Members of Drumcliffe ICA presenting a cheque for €2,800 To Gerry McManus, Chairperson Friends of SRH and Mary Tighe, Administrator Friends of SRH.



People of Ballinamore, Co. Leitrim supporting fundraising appeal for Cardiac Services at Sligo Regional Hospital



Friends of SRH — Charity Events



Mr. John McKeon, PetStop, Main Sponsor of the **Ladies Mid-Summer BBQ** pictured with the organising committee at the Radisson Hotel, Sligo Saturday 22nd June, 2013



On Your Bikes: Launching the 400 Charter Fun Cycle which took place Good Friday, 29th March. **Back row L/R:** Gerry McManus, Friends of SRH, Gavin Dykes, Mayor of Sligo, Clr. David Cawley, Hugh Keaney, Clr. Hubert Keaney, Jo Shortt, Friends of SRH, Noel Kennedy, Tony McLoughlin TD, Senator Marc MacSharry, Joe Shannon, Mary Tighe, Friends of SRH and Eddie McHale.

Front row L/R: Eamon O'Hara and Paul Deering, The Sligo Champion.



Mayor of Sligo, Clr. David Cawley **400 Charter Fun Cycle** on Good Friday



Abbott Diagnostics Sligo cycle for Charity. 18 participants from Abbott Diagnostics facility in Sligo took to the roads for the An Post Cycle Series Tour of Sligo. This challenging event entailed cycling routes of 60km, 100km or 160km. The event raised funds for **'The Friends of Sligo Regional Hospital'** which went towards the development of the Cardiac Services at the hospital.

Pictured on left: Employees from Abbott Diagnostics Division in Sligo, presenting The An Post Cycle cheque to Gerry McManus, Chairperson of Friends of Sligo Regional Hospital. Also in photo: Mary Tighe, Administrator, Friends of SRH; Deirdre Lavin, Sports Coordinator, Sligo Sport and Recreation Partnership.

For all information and upcoming events please visit: www.friendsofsligohospital.ie

Submitted by Friends of Sligo Regional Hospital

Volunteer Service Update

Our Volunteer programme continues to evolve at SRH and has been very successful over the past 3 years. We currently have a team of 20 volunteers in place. The Volunteer service is provided Monday to Friday in the main reception area, Out Patient Department and other areas as required.

The main role of the volunteer service is to provide a friendly welcome and reassuring first impression to all who enter the hospital and to assist and guide visitors and patients to the various wards, departments and clinics in the hospital.

All Volunteers receive induction, training and support is ongoing as required.

A Volunteer Policy and Volunteer Service Agreement is in place for all Volunteers. Voluntary input is regarded as complementary to the work of the hospital staff and is in no way a substitute for same. Links are also well established with Sligo Volunteer Centre.

The ongoing roll out of the Volunteer Service is a way for the hospital to encompass community involvement in ensuring all patients receiving treatment in Sligo Regional Hospital receive their care in an integrated manner. It also helps to make the experience whilst in the hospital as pleasant as possible in what can be a worrying, overpowering experience for some patients, families and visitors.

Pilot Volunteer Programme in Clinical Areas

A Pilot Volunteer Programme in Clinical Areas commenced in June 2013 with Medical South being the pilot area. Volunteers visit Medical South on a daily basis assisting patients with any messages they may need from the shop etc.

The aim of the pilot is to support our patients and to make their hospital visit or stay as comfortable as possible and help to make the hospital a friendlier place for everyone.

Many patients may not have any visitors throughout the day, therefore this initiative is very much welcomed from staff, patients, and their families. To date, the pilot has been running successfully and it will be reviewed and analysed after 3 months.





Volunteer Service Update

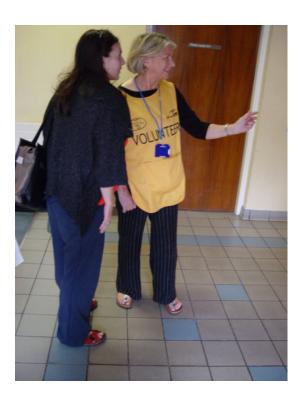
WHAT ARE THE MAIN ROLES/DUTIES OF THE VOLUNTEER?

To:

- Give a friendly welcome & reassuring first impression to all who enter the hospital.
- Seek out patients & visitors who look lost or unsure of where they are going.
- Have a professional & approachable manner to patients & visitors.
- Assist with accompanying patients to various wards, departments or clinics in the hospital.
- Escort families to their destination
- Be actively involved in engaging in a friendly manner in talking with patients.
- Provide directions & general information.
- Assist Patients with messages from shop.
- Supply information & answer queries e.g. visiting times, shop, catering, church etc.
- Maintain strict confidentiality with patients & visitors details in accordance with the hospital's Confidentiality Policy.



For further details please contact: Accreditation/Quality Department Ext 2609/4210 or email: <u>volunteer.coordinator@hse.ie</u>



Submitted by Accreditation/Quality Dept, SRH

Foundation Course in Stoma Care

A Foundation Course in Stoma Care for Nurses is being run between the Stoma Care Service at Sligo Regional Hospital and Coloplast, Ostomy Product Manufacturers. The course is designed to provide nurses with an opportunity to extend their knowledge and skills as a ward or community nurse caring for patients with a stoma.

The course comprises of 4 modules:

- 1. Anatomy, physiology and colorectal conditions
- 2. Stoma types, surgery and related nursing
- 3. Stoma Care
- 4. Psychological, emotional and lifestyle issues.

On successful completion of the 4 modules candidates are invited to attend a 1 day clinical workshop which is run locally. The course is free and candidates are required to have basic computer skills. The course is An Bord Altranais approved and feedback to date has been very positive.

Anyone interested in undertaking the course should contact course mentor: Susan Moore, Clinical Nurse Specialist Stoma Care, Sligo Regional Hospital. <u>susanp.moore@hse.ie</u> or 071 9171111 Ext 4193

Pictured below are Candidates and facilitators pictured at the first Foundation Course in Stoma Care Workshop held on December 5th 2012 at The Sligo Park Hotel at which each candidate was certified as having successfully completed the course.



L/R: Ms. Barbara Twinem, Coloplast, Course Facilitator, Ms. Jeanette Carty, ICU SRH, Ms. Catherine Cunningham, Endoscopy Unit, SRH, Ms. Lucy Byrne, Endoscopy Unit, SRH, Ms. Siobhan Surlis, ICU, SRH, Ms. Grace Fox, ICU, SRH, Ms. Dolores Davey, Surgical North, SRH, Ms. Mary Kinirons, Surgical Gynae. SRH, Ms. Catriona Clancy, Surgical Gynae, SRH, Ms. Susan Moore, CNS Stoma Care SRH, Course Facilitator, Ms. Ann Walsh, ICU, SRH, Mr. Niall Walsh, ICU, SRH.

(Absent from picture is Ms. Margaret Healy, ICU, SRH)

Sligo Stoma Support Group

The Sligo Stoma Support Group is celebrating 13 years in existence. To mark its achievements, raise awareness of its existence and the challenges faced by people living with a stoma the group embarked on a campaign of public awareness this summer. This included a 2 page article about "*Life with a Stoma*" in The Sligo Weekender on August 22nd and a 30 minute interview with Margaret Carr-Flynn and 5 group members on Ocean FM on August 19th 2013. The group was established in 2000 by Susan Moore, Clinical Nurse Specialist in Stoma Care and five stoma patients. The purpose of establishing the group was for people to support each other practically and psychologically through a challenging period of their lives. It is widely acknowledged that in many cases people with bowel disease find it difficult to discuss their problems even with their doctor and even more difficult with peers and society in general. This is even truer of people with a stoma. The aim of the group was to provide an understanding, safe and confidential place for people to explore day to day challenges they face while living with a stoma.

The group formed an alliance with The Sligo Cancer Support Centre and began to hold their meetings on a monthly basis at the centre. This proved to be a natural home for the group and over time the relationship has proven to be mutually beneficial. Both groups work together for the benefit of all. The Stoma Support Group members can avail of therapies provided by the centre, in addition to having the use of the centres facilities for meetings.

The group continue to work closely with Susan Moore, Stoma Care Nurse Specialist at Sligo Regional Hospital and have come a long way in 13 years. The group has in excess of 40 members and is in contact with other groups around the country. They lobby for improved services for people with a stoma, continue to organise events including their annual Christmas Dinner which is taken up as an opportunity by some members with a new stoma as a first social outing. The group were delighted to host The National Ileostomy and Internal Pouch Association National meeting in Sligo on April 27th of this year.

Meetings are open to anyone with a stoma, their partners, carers and family. For more information contact group secretary, Mary 086 3608798 or Susan Moore, CNS Stoma Care, Sligo 071 91 71111 ext: 4193



L/R: Jack Kennedy, Andy Higgins, Daniel Kilgannon, Perpetua Harte, Mary Gilhooley, Phil Gilmartin, Noreen Mulligan, Kathleen Hannon and Mary McLoughlin, Secretary Sligo Stoma Support Group.

Paediatric and Neonatal Fundraiser

The annual Paediatric and Neonatal bake sale was held recently for the Children's Cancer Charity for the West 'Hand in Hand'.

There were cakes of all shapes and sizes on sale. There were other 'goodies' including a 'Santa Biscuit basket' and a 'Gingerbread House' which soon got snapped up. Many cakes were sold before they even reached the table!!

Many thanks to all who raised a total of \in 850 for families of childhood cancer.

Pictured at the Paediatric & Neonatal Bake Sale at Sligo Regional Hospital:

Back row L/R: Marie Walpole, Staff Nurse, Ann Marie Hegarty, Staff Nurse

Front row L/R: Siobhan Dooney, Staff Nurse, Attracta Kilkoyne, Staff Nurse, Mary Doohan, Staff Nurse, Sheila Bourke, Staff Nurse



Submitted by Paediatric/NICU Department, SRH

Quiz Night in memory of Gary Henry



There was a great turn out for a quiz night on Friday 21st June 2013 in 'The Village Inn, Sligo' in memory of Gary Henry who worked in the Catering Department at SRH who sadly passed away in July 2012.

There was a vast range of topics covered in the quiz. A good knowledge of Sports, music and local towns were not essential but helped. There were a number of prizes including; whiskey, Avonmore hamper, hotel vouchers, wine, chocolates, petrol voucher and fruit hampers. Entertainment was provided by the excellent Robbie Mahon and Naomi Nibbs. Congratulations to the winning team of the quiz; Brid Meehan, Helen Watters, Pat Mullane, Carol Mullane and Catherine Kelly.



A huge thanks to everyone who donated prizes, money and time to this special night in memory of Gary Henry.

The total amount raised was €2000. All the money raised was donated to both the Cardiac Services, Sligo Regional Hospital and other local charities. A great night was had by all.

A special thank you to Gary's wife Dr. Ann Murray for coming to the quiz night and for the lovely and moving speech.

Submitted by Catering Department, SRH

A Personal reflection on winning Sam from a Donegal perspective

Even though exiled in Sligo for the past 26 years I'm still a true Donegal woman at heart. No more so when it comes to GAA. I suppose being married to a Donegal man who is deeply immersed in the game it is difficult to escape from the hype which comes with our national game.

Growing up on the Inishowen Peninsula (Moville) and because of the proximity to the border with Northern Ireland, Gaelic games were virtually non existent in that pocket of Donegal and soccer was the only game played in our town. It was only in my early twenties when I met my husband (who is from the South of the county) that I actually started taking an interest in the game. Back then it was rare for girls to play and I think it is wonderful now that they are learning the skills from a young age.

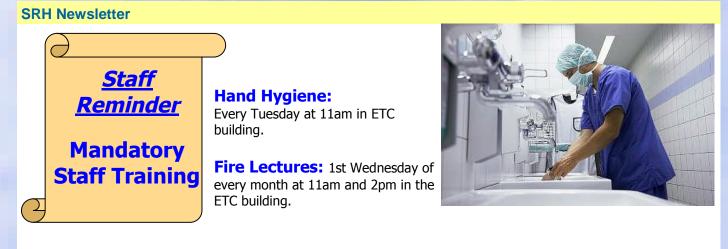
1992 was a special year. I was working in the Health Board headquarters in Manorhamilton and had the summer off as I was on maternity leave with my second child. The excitement and anticipation in the county was palpable, and indeed, because it was the first time that Donegal had reached an all Ireland and people were getting fed up with Kerry domination, every other county in Ireland bar Dublin were shouting for the boys in gold and green. In fact, the Sam Maguire cup came to Sligo first that year en route to Donegal. They stopped at the Southern Hotel which is owned by the then manager Brian McEniff before heading north to cross the Leitrim border into Bundoran. The celebrations went on for weeks that year and the memories are ones which will be cherished for ever.

Roll on 20 years (and a few more wrinkles!!) to 2012 and we were celebrating again although I felt myself that there just wasn't the same euphoria as 92. Nonetheless, it was a distraction badly needed by the people of Donegal due to the dire summer weather and the doom and gloom of the recession.

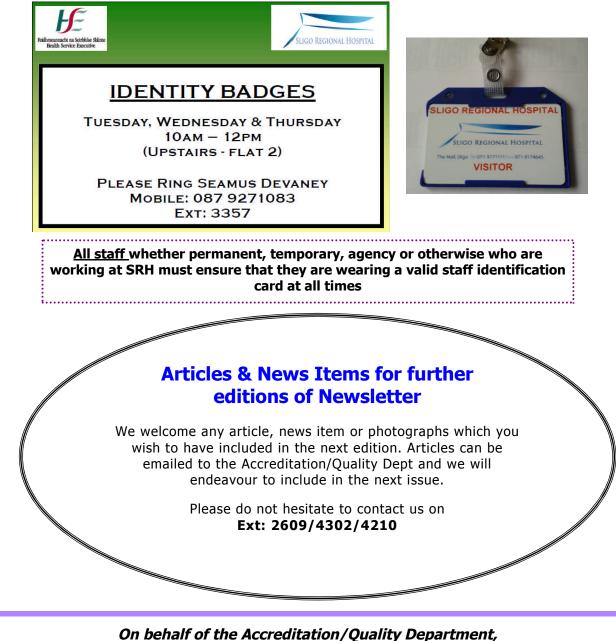
Sadly our reign was short lived with Mayo hammering us in the quarter finals. The memories of 1992 & 2012 will remain. Here's hoping Mayo will finally reach the summit this summer. No one will begrudge them after years of heartbreak.



Back row L/R: – Niamh Fowley, Management Information,
 Michele Griffin, Finance Dept, Regina Gallagher, Management
 Information, Ruth Cox, General Payments, Gillian McGowan,
 Laboratory, Marion Prendergast, Finance Dept, Geraldine Gray,
 Finance Dept
 Front row L/R: Bernardine McGauran, Finance Dept, Grainne
 Cawley, Inventory Project



Please Note: It is mandatory for all staff to attend on an Annual basis



On behalf of the Accreditation/Quality Department, We wish to thank all staff who contributed to the production of the 2nd edition of the Hospital electronic newsletter