

**Hygiene Quality Improvement Plan (QIP)**

**Action Plan based XXYY report  
Cork University Hospital**

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<b>Role:</b>	<b>Co-Chair of Hygiene Services Committee &amp; Chair Hygiene Services Team</b>
<b>Hospital:</b>	<b>Cork University Hospital</b>
<b>Date:</b>	<b>2<sup>nd</sup> April 2009</b>

Ref. Nr	Issue	Deliverables	Commence ment date	Finish date	Lead Responsibility name and role	References / links	Comments
	<b>Learn from those who have performed well in terms of their experience of the assessment process and share best practice</b>	Place CUH in a position to benchmark it self against a similar hospital in terms of size and service capacity and share relevant information	Jan. 2009	Ongoing	Hygiene services Committee		
	<b>All staff need to see hygiene as their responsibility. It is not just the responsibility of those involved in the committee/team or those who work directly in hygiene related services</b>	Hygiene committee and team to foster culture change hospital wide in relation to hygiene, to include: <ul style="list-style-type: none"> <li>• Responsibility led by the EMB</li> <li>• Cascading of hygiene related information</li> <li>• Roles and Responsibilities clarified within organisation</li> </ul>	Jan 2009	Ongoing	EMB and Hygiene services Committee		
	<b>Absence of patient representation on Hygiene Services Committee</b>	Patient representative to sit on hygiene services committee	Feb. 2009	March 2009	Chair Hygiene Services Committee		
	<b>Lack of a structured documented process for, receiving and acting on Hygiene related issues e.g. Environment, waste handling, hand hygiene, to include ward/department results</b>	Implementation of a structured audit process to enable data collection on the specific hygiene related areas. This will be twofold in deliverables: <ol style="list-style-type: none"> <li>1. Identifying exemplars of excellence and areas that require improvement</li> <li>2. Problem solving under a structured framework permeating up and down the governance in CUH</li> <li>3. Hygiene related tasks/goals to be incorporated into Divisional/Departmental EMB reports</li> </ol>	Jan. 2009	End of May 2009	Hygiene services Committee		
	<b>Organisation of compliance documentation</b>	Enhanced compliance documentation in terms of: <ol style="list-style-type: none"> <li>1. Appropriateness</li> <li>2. Access and presentation</li> </ol>	Jan 2009	Ongoing	Hygiene Services Committee		
	<b>Enhance cleaning of prioritised areas and facilitate responsiveness in turnaround of beds</b>	Implementation of Isolation and Discharge Cleaning Team	Feb 2009	June 2009	Hygiene Services Team		
	<b>2008 Hygiene assessment score disappointing, optimise performance.</b>	Engage with HIQA in terms of learning from previous assessments and identify methodology that optimises demonstration of organisations performance on assessment	April 2009		Chair Hygiene Services Committee		