

Hygiene Service Quality Improvement Plan Letterkenny General Hospital – Updated 25th March 09

Criterion Number	Significant Risk / Opportunity for improvement identified	07	08	Action	Progress Made	Responsibility	Timeframe to completion
CM 1	Patient Survey / Questionnaire will be completed.	B	C	Consumer Services Officer to pilot patient survey / questionnaire. FMgr following up with Consumer Services Officer & ADON re questionnaires	200 questionnaires have been issued last month. Poor response to date.	Facilities Manager	February 2009
CM 1	Hygiene Services Corporate Strategy will be completed.	B	C	FMgr to give to FMT before next meeting for ratification at next meeting	90% complete	Facilities Manager	March 2009
CM 1	Evaluation Process Template will be adopted for use in Hygiene Services Departments.	B	B	Meeting arranged for 8 th April for follow up.	Template discussed at the Heads of Service Meeting for feedback in 2 weeks time.	Facilities Manager	March 2009
CM 1	Hygiene Services Audit Process will be adopted for use in Hygiene Services Departments.	B	B	Commenced and ongoing.	Ongoing	Facilities Manager	February 2009
CM 1	Hygiene Services Needs Assessment will be completed in all wards / departments.	B	B	Work commenced with Domestic Services Dept to be completed within 6 weeks time and presented at FMT.	Work in progress. Renal Department & Breast Care Unit complete.	Facilities Manager	September 2009
CM 2.1	Hygiene Services will be an agenda item on departmental meetings.	B	B	Ongoing.		Assistant Director of Nursing/Service manager)	January 2009
CM 3.1	Patient Focus Group to be re-established.	C	C	Meeting to take place within the next 6 weeks.	FMgr to get update from DGM	Deputy General Manager	April 2009

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CM 3.1	Operational Plan to be reviewed.	C	C	FMgr has commenced work on this.	Work in progress. To be presented at FMT once complete.	Deputy General Manager	May 2009
CM 4.1	New Governance Framework to be rolled out.	B	B	To be brought to the Hospital Executive Board for ratification.	Terms of Reference & membership agreed with the General Manager. Sent to Clinical Director for input.	Quality Assurance manager	April 2009
CM 4.1	Hygiene Services to be a regular agenda item at HEB and HMB.	B	B		A plan for presenting quarterly reports to the HEB and HMB has been presented to the GM for approval.	Quality Assurance manager	March 2009
CM 4.2	Formal Suite of KPIs to be drafted.	B	C		Hygiene Service KPIs adopted.	Quality Assurance manager	March 2009
CM 4.3	All Hygiene Services Related Policies, Procedures and Guidelines will be reviewed.	B	C	FMgr to get list of all Policies, Procedures and Guidelines requiring review.	All Facilities Staff are emailing lists of PPGs to FMgr for review. These will be added to Q Pulse once reviewed and ratified.	Quality Assurance manager	June 2009
CM 4.4	Action Plan for Q Pulse - roll out.	B	B	Q Pulse Strategic Plan has been drawn up. FMgr and MMgr. to go to Sligo General Hospital to check Maintenance System on Q Pulse.	Training is ongoing for staff and new dates will be circulated to all heads of services /wards. Work in progress.	Quality Assurance manager	April 2009

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CM 4.5	Terms of Reference for Hygiene Services related teams to be reviewed.	B	B	Complete	All Hygiene Services Committee have reviewed their Terms of Reference and reporting relationships.	Quality Assurance manager	March 2009
CM 5.1 *	See 4.1	A	A	Actions as per CM 4.1		Quality Assurance manager	April 2009
CM 5.2 *	A Medical Representative will be invited to join the FMT	A	A	Letter to be sent to Clinical Director inviting a Medical Rep to join the FMT.	P. B drafting letter.	Facilities Manager	March 2009
CM 6.1 *	Review of cleaning services at ward / department level to be completed.	B	B	See CM 1	Ongoing work in progress.	Facilities Manager & Risk Manager	September 2009
CM 6.2	Review Point of Care and Medical Equipment Committees.	C	B	FMgr to follow up with DGM	FMgr has spoke to DGM Asst. General Manager to see if this can be realigned.	Facilities Manager & Risk Manager	March 2009
CM 7.1 *	New Corporate Safety Statement to be drafted.	B	D	Safety Statement has been drafted and circulated to Health & Safety Committee.	Next meeting scheduled for 2 nd April 09.	Risk Manager	April 2009
CM 7.1 *	Hygiene Services related incidents will be a regular agenda item at FMT.	B	D	Risk Mgr to present hygiene services related incidents at next FMT.	Only manual report ready due to backlog of data being inputted into system.	Risk Manager	March 2009

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CM 7.1 *	Governance Committee to be established.	B	D	See CM 4.1		Risk Manager	
CM 7.1 *	Health & Safety Committee to be established.	B	D	First committee meeting was held on Friday 13 th March 2009.	First Meeting went ahead. Next meeting scheduled for 2 nd April 09.	Risk Manager	February 2009
CM 7.1 *	Risk Assessment to be carried out in the Laundry.	B	D	Risk Mgr has completed the Risk Assessment on the Laundry.	FMgr to forward copy of document to FMT members.	Risk Manager	March 2009
CM 7.1 *	A documented process to monitor and manage the hot and cold water systems will be drafted.	B	D	Legionella Prevention Working Group has been established and meet regularly.	Draft Policy, SOPs & documentary evidence no in place. Risk Assessment to be done within next few months.	Maintenance Manager	March 2009
CM 7.2	The inputting of Incidents and Near Misses will recommence.	C	C	Incident and Near Misses Forms are currently being inputted on STARS Database.	This work commenced at end of February, but due to staffing issues is slow.	Risk Manager	April 2009
CM 8.1 *	Documented process for establishing contracts and managing and monitoring contractors will be drafted.	A	C	A/SCE to draw up new Policy for Managing and Monitoring Contracts.	A/SCE to get previous document from P. McG.	Acting Senior Clinical Engineer	April 2009
CM 8.2	Quality improvement activities will be included in service contracts.	B	C	A/SCE to include quality goals in service contracts.		Acting Senior Clinical Engineer	April 2009

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Criterion Number	Significant Risk / Opportunity for improvement identified	07	08	Action	Progress Made	Responsibility	Timeframe to completion
CM 9.1	An action plan in relation to the laundry will be drafted.	C	D		Action Plan complete and with the General Manager .	Facilities Manager	
CM 9.2 *	A risk assessment on the hot and cold water systems will be commissioned.	C	C	M Mgr to direct the successful company to commence the risk assessment.	Work in Progress	Maintenance Manager	April 2009
CM 9.2 *	An action plan will be created from this risk assessment.	C	C	Has been identified on the Minor Works Programme to replace pipe works, clean pipes etc.	Work in Progress	Maintenance Manager	April 2009
CM 9.3	Non-compliances from Hygiene Services Audits will be reported to the FMT quarterly.	B	C	F Mgr following up with Facilities Heads of Service to bed in audits.	Audits currently taking place. Audits to be tracked and trended at FMT.	Maintenance Manager	March 2009
CM 9.4	Feedback from “ <i>Your Service Your Say</i> ” will be reported to the FMT.	B	C	Risk Mgr to get feedback from Consumer Services Officer. Pilot adding Hygiene related questions to “Your Service, Your Say”.	Consumer Services Officer awaiting responses. M Mgr. to review comment cards.	Maintenance Manager	March 2009
CM 9.4	See CM 1	B	C			Facilities Manager	April 2009
CM 10.1	Job Descriptions will be updated to reflect responsibilities in relation to Hygiene Services	C	B	HR to add hygiene services generic sentences into job descriptions.		Asst Director of Nursing	March 2009
CM 10.2	A documented process for reviewing changes in work capacity and volume will be	C	C	Formula in place for reviewing this. F Mgr will forward to FMT members.	Domestic Services are looking at hours required to carry out adequate work.	Asst Director of Nursing	March 2009

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	drafted.						
Criterion Number	Significant Risk / Opportunity for improvement identified	07	08	Action	Progress Made	Responsibility	Timeframe to completion
CM 10.2	A review of catering services, cleaning services and maintenance services will be undertaken.	C	C	TBPM Maintenance Group to be established within 2 months. F Mgr and M Mgr following up.	Catering Team Based Performance Management Group and Catering Review Group in place. Catering 70% complete. Domestic Services to be complete within 6 weeks.	Asst Director of Nursing	
CM 10.3	Training Plans, Skills Matrix and Attendance Records will be created for all hygiene services staff.	B	B	All groups except security are complete. Each group set target for year. To be tracked and trended through FMT.	Meeting arranged with Security staff on 31 st March 09.	Deputy Catering Manager	March 2009
CM 10.4	Contracts for service providers will be reviewed.	C	C	Complete		Asst Director of Nursing	March 2009
CM 10.5 *	Hygiene Services Annual Report will be completed.	C	C	Based on set of KPIs, new initiatives etc.	End of year report	Asst Director of Nursing	December 2009
CM 11.1 *	The Induction Program for all Hygiene Services Staff will be reviewed.	C	B	Being implemented at local level eg hand hygiene.	IC Mgr, & domestic supervisors looking at establishing 1 day training courses.	Deputy Catering Manager	April 2009
CM 11.2	See CM 10.3	C	B	Up and running.	Training Report to be presented at FMT on a quarterly basis	Deputy Catering Manager	February 2009
CM 11.3	Attendance levels at all training will be evaluated.	C	C	Built into training plans at year end – quarterly reviews documented.	Monitored and tracked through the FMT.	Deputy Catering Manager	February 2009
CM 11.4	Yearly Hygiene Services Staff	C	C	Ongoing	All Hygiene Services Staff	Deputy Catering	March

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Criterion Number	meeting will be commenced. Significant Risk / Opportunity for improvement identified	07	08	Action	to get yearly meeting. Progress Made	Manager Responsibility	2009 Timeframe to completion
CM 12.1	An Action Plan will be developed from the recommendations of the Human Resources Staff Satisfaction Survey.	C	B	Ctring Mgr to do template on the recommendations and action plan of survey.	Human Resources Staff Survey done in 2008.	Catering Manager	
CM 13.1	All Audit results will be reported to the FMT.	C	C	On a quarterly basis.	IC Mgr has created 2 reports on overall findings of the environmental audits for 2008 and 2009 to date for the FMT/Risk Groups.	Infection Control Manager	February 2009
CM 13.2	Relevant Infection Control Reports will be submitted to the FMT on a quarterly basis.	B	C	This information will be submitted on a quarterly basis.		Infection Control Manager	April 2009
CM 13.2	All reports will be tracked and trended with Action Plans drafted where necessary.	B	C	Audit Scores submitted on a quarterly basis.		Infection Control Manager	March 2009
CM 14.1	The Informal “walkabouts” will be recommenced.	B	B	All FMT members to do 1 hour walkabout every month, using S.D. 4 as template.	Follow up actions of walkabout report to be sent to FMT, Head of Dept / Ward and FMT members to keep copy themselves. FMT will trend informal walkabouts quarterly.	Facilities Manager & Quality Assurance Manager	February 2009
CM 14.2	See CM 4.2	B	C	Ongoing	Hygiene Services KPIs	Facilities Manager	February

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Criterion Number	Significant Risk / Opportunity for improvement identified	07	08	Action	Progress Made	Responsibility	Timeframe to completion
					adopted.	& Quality Assurance Manager	2009
SD 1.1	See CM 4.3	B	B		All Hygiene Service PPGs are being reviewed.	Quality Assurance Manager	June 2009
SD 1.2	The Evaluation Template will be used in assessing new hygiene services interventions.	C	B	Ongoing.	Template has been adopted	Asst Director of Nursing	March 2009
SD 2.1	A plan will be drafted in relation to hygiene services related information and education sessions.	C	C	ADON to schedule training session template for the year. Information sessions to be held at front hall for staff, patients and public.	Information leaflets on Infection Control, Waste Management, Safety, Health & Welfare, don't sit on beds etc. to be given at Information stands.	Asst Director of Nursing	March 2009
SD 2.1	A review of hygiene related promotional information will be carried out.	C	C	As above	Session for Hygiene Services Related topics.	Asst Director of Nursing	March 2009
SD 3.1	Medical Representation will be sought for the FMT.	C	B	F Mgr to write to doctor		Facilities Manager	March 2009
SD 3.1	A representative from Consumer Services will be sought for the FMT.	C	B	ADON to seek Rep from Consumer Services	F Mgr to follow up with ADON	Asst Director of Nursing	March 2009
SD 4.1 *	The completion of cleaning	B	C	Check list completion		Risk Manager &	March

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	checklists will be a priority.			reports will be sent to FMT quarterly.		Facilities Manager	2009
Criterion Number	Significant Risk / Opportunity for improvement identified	07	08	Action	Progress Made	Responsibility	Timeframe to completion
SD 4.1 *	An audit schedule will be drafted for all hygiene services related internal audits.	B	C	Laundry – to complete	Patient Environment – complete. Waste – Complete. Catering –complete	Risk Manager & Facilities Manager	
SD 4.2 *	The “division of duties” document will be agreed.	A	B	To be included on agenda at next Quality Circle Meeting	On agenda for Meeting 11 th May ‘09	Risk Manager & Facilities Manager	April 2009
SD 4.3 *	All cleaning products will be stored in locked cupboards.	A	C	Domestic Supervisors to ensure all cupboards are locked.	Ongoing. Maintenance to install locks.	Risk Manager & Facilities Manager	April 2009
SD 4.4	HACCP compliance will be monitored by the Catering Department	B	A	Ongoing.		Risk Manager & Facilities Manager	Ongoing
SD 4.5	It was agreed that the current situation in relation to Waste Holding Rooms cannot be improved within current ward configurations.	A	C			Risk Manager & Facilities Manager	Complete
SD 4.6	As per CM 7.1, an Action Plan will be created for the Laundry.	A	D	Ongoing.		Risk Manager & Facilities Manager	March 2009
SD 4.7 *	SARI Guidelines will continue to be adhered to.	A	A	Work in progress.		Risk Manager & Facilities Manager	Ongoing
SD 4.8	Trended reports will be sent to	B	B	Risk Mgr to present		Risk Manager &	February

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	the FMT.			hygiene related incidents every month starting in April 2009.		Facilities Manager	2009
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SD 4.9	As per CM 3.1, the Patient Focus group will be re-established.	B	B	Meeting to take place within the next 6 weeks.		Risk Manager & Facilities Manager	April 2009
SD 5.1	A documented process for maintaining patient dignity during hygiene service delivery will be drafted.	C	B	A/DON/SMgr has got NHS documentation and a sub-group will be created.	A/DON/SMgr to arrange first meeting with F Mgr, IC Mgr, Domestic Supervisor and Consumer Services Officer.	Assistant Director of Nursing/Service Manager	April 2009
SD 5.2	As per CM 3.1, the Patient Focus group will be re-established.	B	B	Meeting to take place within the next 6 weeks.		Deputy General Manager	April 2009
SD 5.3	A quarterly report of complaints relating to hygiene services will be presented to the FMT.	C	C	Consumer Services Department will send quarterly report to FMT	A/DON/SMgr to get report from Consumer Services Officer	Assistant Director of Nursing/Service Manager	April 2009
SD 6.1	As per CM 3.1, the Patient Focus group will be re-established.	B	C	Meeting to take place within the next 6 weeks.		Quality Assurance Manager & Facilities Manager	April 2009
SD 6.2	Formal benchmarking of audit results will take place.	C	C	Site visit currently being arranged.	LGH are teaming up with Waterford General.	Quality Assurance Manager & Facilities Manager	April 2009
SD 6.2	Hygiene Services Annual Report will be completed.	C	C	As per CM 10.5		Quality Assurance Manager & Facilities Manager	December 2009

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