



HEALTHCARE INSPECTORATE WALES (HIW) SPOT CHECK VISIT

CLEANLINESS, ENVIRONMENT & INFECTION CONTROL

ACTION PLAN

C7 West / Theatres
4th December 2009

Purpose –

- To achieve prompt responses and turn around with respect to HIW's recommendations. This includes hand hygiene compliance, cleaning, infection control
- To improve patients' environment
- To adopt a proactive approach
- To ensure patient satisfaction
- To empower the ward sister/ ward charge nurse and the team to implement the required changes

Process –

- Bi-weekly ward inspections
- Education & Training to continue with Infection Prevention & Control Team
- Corporate Nursing Team have adopted sites across the organisation to support local teams
- Involvement of Community Health Council and Public Patient Involvement/Experience Panels

People –

- Corporate Nursing Team will support the organisation in meeting action plan expectations
- Chief Nurses and Senior Nurses
- Ward Sisters/Charge Nurses
- Infection Prevention and Control Team
- Zonal Leads/Locality Managers
- Cleaning Manager and her team
- Works & Estates
- Facilities
- Governance Leads
- Education & Training

Timescale –

Weekly ward visits/spot checks by Sisters and Cleaning Staff

- Periodic spot visits/spot checks by designated Corporate Nurses

Problem	Action	Responsibility	Progress To-date	Review Date
WARD C7 WEST				
ROOM USAGE				
There is confusion of bathroom use on ward C7W	Bathroom must be clearly labelled as to type of room.	Senior Nurse	Work completed by Works and estates (signage).	Official signage requested Dec 8 th 2009. Room clearly identified as 'storeroom' Jan 2010.
Clinical area cluttered	<p>All equipment to be stored in an appropriate location.</p> <p>Boxes to be disposed of as per Organisational policy.</p> <p>Adequate shelving to be installed in store room.</p> <p>Store room signage to be in situ.</p>	<p>Nurse in Charge</p> <p>Cleaning Supervisor</p> <p>Works and Estates</p>	<p>HD to approach League of Friends regarding costing for shelving.</p> <p>Store room cleanliness to be monitored daily. Staff allocated 'areas to clean' in new cleaning rota. Failure to comply to be reported to HD.</p> <p>Store room to be utilised appropriately. JW to monitor equipment/items stored.</p> <p>JW to ensure signage in situ.</p>	<p>Shelving placed in store room Dec 2009.</p> <p>Staff allocated 'cleaning zones'. Compliance documented in nursing kardex (cleaning rota).</p> <p>Cleaning rota agreed with RJ/JW. JW to adapt infection control cleaning rota according to service need. Infection control cleaning rota located in nursing Kardex for reference.</p>

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CLEANING				
<p>Cleaning schedules are incomplete</p>	<p>Cleaning must be of acceptable standard and must be undertaken by all staff. Staff to ensure they undertake their roles and responsibilities and document on cleaning rota.</p> <p>Implementation of a new cleaning schedule to be discussed with Infection Control.</p> <p>Daily checks by Nurse in Charge must be put in place. Fortnightly HIW Cleaning Audits to be completed by Nursing Team (not exclusively JW)</p> <p>All Nurses will understand their specific responsibilities for cleanliness, decluttering & the environment of care, fulfilling their duties. Non-compliance will be managed by the Ward Sister, with matters escalated to the Senior Nurse if there is further non-compliance...</p>	<p>Nurse in Charge Cleaning Supervisor</p>	<p>JW communicated with all staff via communication board. Daily checks in place</p>	<p>8/12/09</p> <p>Daily checks as documented on daily cleaning chart</p> <p>Daily checks communicated to all staff via white board located in Clinical area. Designated zones identified.</p>

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Commodes not cleaned to acceptable standard	<p>Cleaning of commodes must be of acceptable standard, daily checks by Nurse in Charge must be put in place</p> <p>Commodes must be of an acceptable standard. Commodes to be ordered as required.</p> <p>Failure to comply with commode cleaning routine must be brought to Nurse in Charge/Senior Nurse attention</p>	Nurse in Charge Cleaning Supervisor	<p>Daily checks in place</p> <p>Failure to comply with cleaning routine to be reported to Senior Nurse</p>	<p>Commodes checked. X2 condemned. New ordered.</p> <p>All others considered appropriate for use.</p> <p>Daily checks completed</p> <p>Staff communicated to clean with appropriate cleaning agent (soap and water/clinix wipes).</p>
General Cleanliness				
High and Low levels of dust – and floor contamination noted	<p>Domestic hours to be discussed further with the Hotel Services Manager.</p> <p>Ward Manager to sign cleaning schedule on a daily basis to document that he/she is satisfied with the standard of cleanliness</p>	Ward Manager/ Senior Nurse / Hotel Services Manager		April 2010

Problem	Action	Responsibility	Progress To-date	Review Date
Safe Drug Storage				
Medication cupboards left open and medication left out in clinical area unattended	All staff to be reminded of N.M.C./A.B.H.B. Medicines Management Policy. Staff who fail to comply to be reported immediately to Nurse in Charge. Medication to be stored appropriately. Signage in Clinical area to be reviewed by JW and to comply with A.B.H.B. policy. J.W. to liaise with pharmacy regarding storage of medication and signage.	Nurse in Charge	Medicines Management Policy visible in clinical area. Daily checks in place.	Complete AG to provide costings for door to treatment area. JW/HD liaised with pharmacy regarding storage of medication and signage.
INFECTION CONTROL				
Sharps containers undated and signed	All staff to be reminded of the policy to sign and date sharps containers. Undertake two weekly audits to ensure this task is embedded.	Ward Manager / Infection Control Team	Infection Control Team aware and will audit two weekly	Every two weeks
Sharps Box was overfilled and stored inappropriately in the sluice	Staff must ensure that sharps boxes are changed when required and according to A.B.H.B. policy. Additional sharps boxes to be stored in 'store room'	Nurse in Charge Infection Control Team	Actioned with immediate effect	Completed, daily checks Space allocated for sharps boxes in store room 12/12/10

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Blood on one of the curtains	<p>Cleaning of curtains must be overseen by Nurse in Charge and reported to Domestic Supervisor</p> <p>Replacement curtains to be obtained with effect</p>	<p>Nurse in Charge</p> <p>Cleaning Supervisor</p>	<p>Daily checks in place</p>	<p>Complete, daily checks</p> <p>7/12/09</p>
Fans, air vents and Patient Line systems noted as dusty.	<p>Fans to be cleaned with Immediate effect. Damaged or rusty fans to be replaced. Cleaning responsibility to be brought to the attention of all staff. Fans to be included on cleaning roster. JW to oversee. Failure to comply to be brought to the attention of Senior Nurse</p> <p>Air vents to be cleaned immediately. Works + Estates to ensure regular cleaning.</p> <p>Patient line to be informed of 'dirty' systems. To clean with effect.</p>	<p>Nurse in Charge</p> <p>Works & Estates to prioritise</p> <p>Patient Line Services</p>	<p>Daily checks in place.</p>	<p>Exterior cleaning of fans added to cleaning rota. Completed 7/12/09</p> <p>Completed 8/12/09</p> <p>Completed 8/12/09</p>

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STORAGE				
Linen trolleys on ward not utilised.	To ensure linen trolleys are available at patient bedside.	Nurse in Charge Senior Nurse	All staff reminded to take linen trolley to patient bedside. JW/HD to monitor.	<p>JW informed staff via communication board. Addressed at ward meeting Dec 30th</p> <p>X3 linen trolleys required. JW to order via SM/Procurement.</p> <p>Unable to store x3 linen trolleys (discussed with RJ). X1 linen trolley obtained 20th Dec 2009.</p>

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ENVIRONMENT				
The shower needs regrouting and sealing	Shower must be clean and grout renewed.	Nurse in Charge Works + Estates	Report action to Works + estates. Provide costings to SM for sign off. Daily checks of cleanliness of shower	Tile re-grouting and sink resealing request reported to PP, Works & Estates, 7/12/09 Urgent order via maintenance/help desk H231869 (categorised D to respond by 14/12/09). Reported 1/2/09 as job not done. Re ordered with GM. Complete, daily checks
Two chairs have splits in them allowing fluids, dirt and bacteria to penetrate material	To replace or recover with impermeable material	Nurse in Charge Senior Nurse Cleanliness Manager	Chairs condemned. New chairs ordered.	7 TH December 2009
A number of maintenance issues are apparent	Maintenance issues to be addressed as soon as possible	Ward Manager JW/ Works and Estates SK	Reviewed by Senior Works and Estates Personnel	April 10

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THEATRE				
Back Corridor				
Dirty cleaning equipment in back corridor near electric server	<ul style="list-style-type: none"> Equipment to be moved immediately Discussion with domestic supervisor re cleaning and storage of equipment 	CW JH – domestic supervisor	Cleaning equipment moved	11 th December 2009 Completed
Clog washer room dirty	<ol style="list-style-type: none"> Room floor to be included in evening domestic schedule Prepare schedule for cleaning of shelves by ODO 	CW JM	Discussed with domestic supervisor and JM – supervision required	Ongoing
Inside of rubbish chute between floors is dirty	Discussion with works and estates how chute can be cleaned			
ANAESTHETIC ROOMS				
Mugs and milk in anaesthetic rooms	<ul style="list-style-type: none"> Staff to be reminded that food must not be stored in anaesthetic room Team leaders reminded of importance of adherence to cleaning regimes 	JM	All staff reminded of own responsibilities at audit day meeting	Jan 10 Completed

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No hand washing sinks in anaesthetic rooms. Sinks stained with scale	<ul style="list-style-type: none"> Hand wash sinks bid to be considered as part of environmental bid Scale to be removed by domestics 	JM SK JH	Sinks escalated on hospital plan Domestic services have cleaned sinks and ensure ongoing	Ongoing
THEATRE				
Sluice rooms – actichlor signage not visible in all rooms Buckets not stored separately	Team leaders to display actichlor signage and to ensure equipment appropriately stored	Team leaders CW	All issues discussed at 8 am meeting on 7 th December	12 th December Completed
Assessors noted that staff were wearing watches so not allowing for effective hand washing	<ul style="list-style-type: none"> Raise profile of 'bare below the elbow' campaign Liaise with infection control to arrange 'show and tell' programme and education on audit days Increase awareness through use of link practitioners 	IPCN team Team leaders	IPCN team booked to come and deliver training on audit days	12 th March 2010 Completed

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Assessors raised concerns about system used to hold rubbish bags	<ul style="list-style-type: none"> <li data-bbox="555 343 1077 414">• Liaise with Peter White for further guidance 	CW	To be discussed at Operational Managers Group	Ongoing