



FINAL
HEALTHCARE INSPECTORATE WALES UNANNOUNCED CLEANLINESS SPOT CHECK
IMPROVEMENT PLAN August 2012
WITHYBUSH HOSPITAL, PEMBROKESHIRE COUNTY, HYWEL DDA HEALTH BOARD

HIW SPOT CHECK Finding/Recommendation	Responsibility	Action Required	Time Scale	Improvement Update	County and HB Review Date
A). Environment: <ul style="list-style-type: none"> High Level Dust to be eliminated (Ward 1 and Ward 8/CCU) 	Domestic staff Domestic Supervisors, Ward Sisters, Senior Nurses ICN, ASNM	Eliminate high level dust Ward 1/8/CCU Maintain C4C Programme Senior Nurses to join C4C audits Standard operating procedure for Estates work to be communicated to and with Ward Sister/s prior to work commencing Standardise nursing cleaning regimens, linked to care metrics.	Immediately Resolved following March 21 st Spot Check On-going daily observation weekly monitoring.	-Resolved with immediate action -Daily monitoring Hotel Services Weekly monitoring Senior Nurse and Domestic Supervisor -Business case for Hotel Services Hours to meet C4C - Maintenance Group instated - Business case for change to Micro-fibre system to SMT 14/08/12.	Monthly CPET May/Jun12 6/08/12
<ul style="list-style-type: none"> Trolleys Cluttering Ward Corridors. To be re-housed off corridor 	All Ward Staff. Monitored by Ward Sisters, Senior Nurses , Hotel Services Staff ASNM	Reduce to only essential trolleys in corridor Maintain Transforming Care Programme Direct observation by Senior Nurses.	Immediate and on-going Equipment store Business case completed Bid to Trust Funds.	-Immediate clutter removed -Only essential trolleys in corridor -Further work on-going to improve storage space -Business case for Hospital equipment store.	6/08/12
<ul style="list-style-type: none"> Treatment Room Clutter to be resolved 	All ward Staff Ward Sisters with teams Senior Nurses ICN,ASNM	Immediate tidying of treatment room Daily monitoring by Ward Sister Weekly monitoring by Senior Nurse Maintain Transforming Care Programme across all areas.	Minor estates work on-going.	-Resolved following Immediate tidy and reduction of non-essential clutter -Monitored daily by nurse in charge -Monitored weekly by Senior Nurse.	6/08/12
<ul style="list-style-type: none"> Store Room clutter and Dirty Utility Room clutter to be resolved with no items stored on floor * 	Ward Sisters with teams , including Hotel Services Staff, Senior Nurses ICN and Hospital	Immediate storage of all items above floor level Extra Store room shelves request escalated to Estates Longer Term Plan for Hospital Equipment Store.	Minor estates work on-going. Continue to monitor progress of Hospital equipment store	Resolved following immediate action. No items stored on floor Business case for Hospital Equipment Store. Review 8/ 2012 Monitored via Acute Services Management Team/Estates and	6/08/12

<ul style="list-style-type: none"> • Non conformant Hand washing sinks to meet HTM 64 requirement • *All require Soap Dispensers and towel Holders • Clean items (incontinence pads and wipes) stored open on shelves in dirty utility to be removed and shelves maintained free from clean items * • A consistent approach to the cleaning of commodes to ensure high standard of cleanliness for every use. This also applies to shower chairs. 	<p>Management Team</p> <p>Acute Services Management Team and Estates</p> <p>All Ward staff, Ward Sisters, Hotel Services staff, Senior Nurses, ICN,ASNM</p> <p>All Staff Ward Sisters Senior Nurses ICN, ASNM</p>	<p>Business case completed for new replacement sinks for in-patient areas of acceptable specification to HTM 64</p> <p>CCU Dirty utility fitted with soap dispenser/towel holder (completed).</p> <p>Items immediately stored away in cupboards (completed) Daily monitoring by Ward Sister Weekly monitoring by Senior Nurse IPC Audits maintained.</p> <p>Immediate action on day of spot check (completed)</p> <p>Daily shift checks by Nurse in charge of shift/Ward Sister Weekly check by Senior Nurses Spot checks ASNM. IP&C link nurses spot check and re-enforcement of commode cleanliness standard.</p>	<p>business case.</p> <p>Review Aug 12 and Oct 12</p> <p>Dispensers immediately Resolved May 12</p> <p>Essential on-going monitoring each shift Weekly Monitoring Senior Nurses Spot Checks ICN, ASNM.</p> <p>March 12. Monthly and July 12 Daily/weekly/Monthly ongoing.</p>	<p>County Patient Environment Team.</p> <p>Joint County and Corporate meeting. Business case accepted. Replacement Programme agreed. Medical Unit Refurbishment Plan.</p> <p>Resolved May 12.</p> <p>-Resolved following immediate action March 12 -Daily monitoring Wards Sister and Hotel Services staff -weekly monitoring Senior Nurses with Domestic Supervisor.</p> <p>-Resolved following immediate action -Daily monitoring Hotel Services weekly monitoring Senior Nurses -Replacement of old commodes - Increase of Senior Nurses inward time into monitoring cleanliness of their service areas.</p>	<p>06/08/12 Ongoing via CPET</p> <p>Ongoing via CPET</p> <p>Weekly and Monthly Audits Monitored at IPC group and CPET 6/08/12</p>
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<ul style="list-style-type: none"> Domestic Rooms A:Cleaning Equipment must be stored clean B: All cleaning products must be locked in the Domestic room Inappropriate storage of "not in use" mattresses <p>B). Linen, waste, sharps handling and disposal:</p> <ul style="list-style-type: none"> Rusty Bins to be replaced * Sharps boxes must be kept free from spillage and immediately replaced as soon as they reach the fill line. 	<p>Hotel Services Staff Supervisor Senior Nurses HPE Team</p> <p>Ward Sister All Nursing staff Portering staff</p> <p>HPE Team</p> <p>Senior Nurses ICN, ASNM Ward Nursing Medical and AHP staff including Hotel Services staff, Senior Nurses, ICN</p>	<p>Immediate action on day of spot check to remove any unclean equipment Hotel services supervisor checks only clean equipment stored. Daily provision via Supervisor of no more than required. All products locked in Domestic room. Weekly check by Supervisor.</p> <p>Immediate action on day of HIW Continued Daily/weekly spot checks.</p> <p>Full replacement of all rusty bins across hospital site.</p> <p>Immediate findings fed back to each Ward and all Hospital Wards Multi-Professional educational Sessions on best practice with sharps box replacement Include New Doctors Induction</p>	<p>Resolved March 12 Ongoing daily and weekly monitoring</p> <p>Resolved March 12 Daily provision of no more than required cleaning products. Monitored weekly.</p> <p>Weekly Monitoring</p> <p>Sept 12</p> <p>Immediately resolved following spot check Monthly IPC Audits Aug 12</p>	<p>Longer term Business case for modernisation of house maid cupboards included in Hospital refurbishment programme.</p> <p>Business case for mattress store Business case in progress for longer term storage solution: Hospital wide equipment store.</p> <p>Funding approved to replace rusty bins Continuous replacement programme.</p> <p>Maintenance of education sessions Ensure multi-professional sessions Immediately resolved March 12 Daily shift sharps box checks Weekly spot checks by Senior Nurses Maintain ICN Education programme.</p>	<p>6/08/12 CPET</p> <p>IPC Committee and CPET Sept 12</p> <p>Sept 12 CPET</p> <p>Monthly IPC Sept 12</p>
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<ul style="list-style-type: none"> Cracked and fraying Linen Trolley Covers to be replaced. 	<p>All Ward staff Ward Sister Senior Nurse IPC Senior Nurses and ICN, ASNM</p>	<p>Maintain noted good practice of storage of linen Full replacement of linen trolleys across acute hospital site.</p>	<p>Sept 12</p>	<p>Agreed hospital wide replacement of new linen trolley covers. Hospital wide stock ordered July 12 Full replacement programme to be complete Sept 12.</p>	<p>CPET Sept 12</p>
<p>C). Equipment and Storage:</p> <ul style="list-style-type: none"> All stored Ward equipment must be free from dust- this also applies to shared equipment - drip stands, dressing and spare procedure trolleys, infusion pumps and resuscitation trolleys. 	<p>Ward Sisters Senior Nurses ICN, Hospital management team.</p>	<p>Maintain Ward cleaning schedules Daily checks by Ward Sister/Nurse in charge Weekly checks Senior Nurse Spot checks ASNM and Hospital Environment Team. Bi -monthly Spot check by Senior ICN-Pembs of specified quality indicators. Bi-annual audit by link nurses.</p>	<p>Ongoing Monthly</p>	<p>Immediately resolved following HIW inspection March 12 Feedback and awareness raising of acceptable storage to all staff of all disciplines who use the area Daily check by Ward Sister Weekly check by Senior Nurse Spot checks ICN and ASNM Business case for hospital equipment store Resus Officer Resus Trolley Monitoring programme commencing Aug 12.</p>	<p>Ongoing and 6/08/12 County IPC Committee ASNM and Resus Committee</p>
<ul style="list-style-type: none"> Clear understanding between staff as to who is responsible for cleaning stored 	<p>Ward Sisters Senior Nurses ICN, Hospital management team.</p>	<p>Strict Cleaning schedules for all stored equipment on weekly basis in Ward Sister absence monitored by Senior Nurses Monitored by ICN and ASNM.</p>	<p>Ongoing Monthly</p>	<p>Business case for hospital equipment store Ongoing Daily and weekly monitoring of equipment storage.</p>	<p>CPET Aug 12 County IPC monthly</p>

<p>equipment and who deputises when these staff are off duty.</p> <ul style="list-style-type: none"> Inappropriate storage of equipment in store rooms and ineffective use of storage space Torn and worn Visitor chairs to be recovered/replaced 	<p>Ward Sisters Senior Nurses ICN, Hospital management team.</p> <p>Ward Sisters/ ASNM.</p>	<p>Maintain Ward cleaning schedule Daily checks by Ward Sister/Nurse in charge Weekly checks Senior Nurse Spot checks ASNM and Hospital Environment Team. Bi -monthly Spot check by Senior ICN-Pembs of specified quality indicators. Bi-annual audit by link nurses.</p> <p>Replace/Recover all torn chairs.</p>	<p>Ongoing Daily/weekly</p> <p>Monthly schedule</p>	<p>Business case for Hospital Equipment store.</p> <p>All worn/torn chairs have been removed from clinical Ongoing monitoring of wear and tear and replacement programme.</p>	<p>Monthly IPC Audits Monthly HPE Team Audits</p> <p>CPET Aug 12</p> <p>CPET Aug 12</p>
<p>D). Staff Knowledge and Practice: This was found to be good with conformity with All wales dress code, hand hygiene and good infection prevention and control knowledge.</p>	<p>Hospital Director of Clinical Care, Clinical Leads, ICN, Ward Sisters, Senior Nurses, ASNM County Therapy Leads and all AHP staff</p> <p>Hotel Services Managers and all staff. Monitored via Hospital Management</p>	<p>-Maintain Mandatory training to maintain good staff knowledge in relation to hand hygiene, cleanliness and IPC. -Maintain good practice of conformity with All Wales dress code -Ensure application in practice on daily basis - Monitored via Ward Sister, Senior Nurse IPC, ASNM, IP&C link nurses, HDCC. - use of March 2012 HIW Spot Check findings for teaching on all Ward areas Presentations at Service management meetings Hospital Grand Round</p>	<p>Ongoing monthly</p>	<p>Maintenance of all education Multi-professional education sessions ICN co-ordinated audits Install peer review system Information for patients and relatives in ward information booklets to be discussed at July County Patient Environment Team meeting.</p>	<p>IPC CPET Whole Hospital Audit Quarterly</p>

	team/County Patient Environment Group.	-Maintain presentation of IPC audit at Whole Hospital Audit meetings			
HIW SPOT-CHECK FINDING Findings Specific to Ward Areas now resolved	Responsibility	Action Required	Time Scale	Resolved	Review Date
<i>Call Bell Ward 12 with tied apron</i>	Ward Sisters	Estates to extend call bell system with a wipe-able cord.	Resolved May 12	Resolved: Estates actioned May12	Resolved March 12
<i>Soap dispenser and towel dispenser CCU Dirty Utility</i>	Estates	Soap and towel dispenser to be fitted.	Fitted: Resolved May 12	Immediately actioned March 2012 Resolved May 12	Resolved May 12

<p><i>Communal Toiletries Wd 12</i></p> <p><i>Washing Machine, no tumble dryer ward 12 for manual handling slides and hoist slides</i></p> <p><i>A shortage of Toilet and washroom facilities in the CCU/Ward 8 area was noted.</i></p>	<p>Ward Sisters Senior Nurses and ICN</p> <p>ASN/Hotel Facilities</p> <p>Hospital Management Team and Estates.</p>	<p>To remove and monitor compliance Bi-monthly IP&C quality indicator by Senior ICN to check on communal items.</p> <p>Stop Practice. Ensure all items tumble dried. Immediate effect as of March 12</p> <p>New linen contract proposal.</p> <p>Fit extra toilet and washing facility CCU/Ward 8.</p>	<p>March 12</p> <p>Aug 12</p> <p>Sept 12</p>	<p>Resolved immediately March 12</p> <p>March 12. Resolved through use of tumble dryer on ward 7. New linen contract to contain these items for washing and drying</p> <p>The refurbishment of the medical floor includes the fitment of extra toilet and washing facilities on CCU/Ward 8. This work commences September 2012.</p>	<p>Resolved March 12</p> <p>Resolved March 12 and continually monitored</p> <p>Sept 12</p>
<p>Ward to County Senior Management Team and Health Board reporting and performance monitoring Systems:</p> <p>a) Clear lines of reporting to the County Management Team and up to Health Board for infection control & cleanliness.</p>	<p>HDCC/County AMD/County Nurse through County SMT</p>	<p>Exception reporting from County Patient Environment Group and County IPC Committee through performance reports to County Management Team.</p> <p>Outlined in Job Descriptions</p> <p>Focus in ward and Department meetings</p> <p>Focus in individual IPR</p>	<p>On-going</p>	<p>County Performance Framework Upward reporting via:</p> <ul style="list-style-type: none"> o Ward meetings o Departmental meetings o HMT o County Patient Environment Team o County Q and S o County Director SMT o Health Board IPC o Health Board Q and S 	

<p>b) All staff to be constantly aware of their responsibility for cleanliness and IPC</p>	<p>Ward Sisters/ Senior Nurses/Dept. Managers</p>	<p>Included in job descriptions and PDR process. All IP&C audits, link nurse audits, monthly hand hygiene compliance, C4C compliance, and senior managers walk about audits fed back to all staff and displayed at Ward and department level.</p>	<p>Monthly Department meeting Agenda item Monthly Nursing dashboard sign off.</p>	<p>o Integrated Governance Committee (Executive & Independent Members). Ward Sisters, Senior Nurses, ICN observation and audits. Nursing Dashboard performance Monitoring. IPC training attendance. Interview and Induction.</p>	
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Glossary:

HMT

HDCC

County PET

ASNM

AMD

ICN

IPC

SMT

County Patient

Environment/Experience

Group

Hospital Management Team

Hospital Director of Clinical Care

County Patient Environment Team

Acute Services Nurse Manager

Associate Medical Director

Infection Control Nurse (Senior County ICN)

Infection Prevention and Control

Senior Management Team

CPEG

