

Action Plan – HIW Unannounced Inspection 13th March 2014

Item	Action	Assigned to	Progress to date	Date Action completed
Action 1: There was a lack of Medical Insurance confirmation for 17 medical staff and a lack of staff photographs in personnel notes.	 Chase Medical Indemnity certificates for outstanding consultants for Feb/Mar Ongoing controls on non-compliers Establish photo library for all staff 	Hospital Director HR lead	 Completed Suspension of PPs tightened All existing staff to have photos All new staff photo'd on induction 	17 th March 2014 31 st March 2014 30 th June 2014 Ongoing
Action 2: The weekly regime of fire alarm testing needed to be expanded to encompass the new Endoscopy and Cardiac units.	 Update MW-9 Fire Alarm Call Point Directory; Update M4f Weekly Test of Fire Alarm Call Points & Door Releases 	Risk Manager Hospital Engineer	CompletedCompleted	2 nd April 2014 2 nd April 2014
Action 3: Complete switching relays on emergency generator, to complete testing facilities.	Install relay switch on emergency generator;	Hospital Engineer	Completed	17 th April 2014
Action 4: Ensure completion of code 2 improvements on electrical installation.	Code 2 upgrade following fixed wiring test to be undertaken	Hospital Engineer	Completed	27 th April 2014
Action 5: Obtain and accept a quotation for repairs to the Operating Theatre UPS equipment.	 Obtain quotation for UPS repairs & replacement of batteries; Submit order & schedule works 	Hospital Engineer	CompletedOrder submitted & awaiting delivery;	24 th April 2014 28 th April 2014 TBC
Good Practice Recommendation: Signatures of all staff involved in transfer of care between departments required on patients records.	All clinical staff reminded via Team briefings and Clinical Effectiveness Meeting to ensure staff sign appropriate section of care pathway when transferring care between departments	HOCS Clinical HODS	 Action to be discussed and reviewed at next Clinical Effectiveness Meeting; Departmental Team Briefings 	30 th April 2014 On-going
Good Practice Recommendation: The hospital had a named nurse system with regard to individual patient care. It may be helpful to clarify to individual patients who their named nurse per shift/day will be.	Each nurse assigned patients consistently introduces themselves to their assigned patients at the commencement of each shift and states they are the nurse assigned to care for them (the patient) for that shift. The term 'named nurse' has not been commonly used within Spire Cardiff Hospital.	All clinical staff	 Action to be discussed and reviewed at next Clinical Effectiveness Meeting; Departmental Team Briefings 	30 th April 2014 On-going

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