



BRONGLAIS GENERAL HOSPITAL & TREGARON
HIW UNNANOUNCED HOSPITAL CLEANLINESS SPOT CHECK
AREAS OF STRENGTHS & AREAS FOR FURTHER IMPROVEMENT PLAN
Date of Visit: 18TH September 2008

LEARNING AND SHARING PRACTICE				
Standards 4 & 5				
<i>Environment of Care: Disposable curtains ;New Waste bins and poster;</i>				
Findings	Action/Comments	By Whom	By When	Outcome
Bronglais Hospital				
No Infection Control Nurse in post at time of visit.	ICN post to be re-advertised	ADN	October 08	Appointment made – commences on 3/11/08
	Review ICN support options via Associate Director of Quality improvement	ADN	November 08	Picked up with AND&Q (October 08) and on 20 th October regarding support for ICN – Discussed with NPHS infection control team 22 nd October and 29 th October via Dawn Hill
	Risk Assessments to be completed	AND	October 08	Risk Assessment completed and issues raised with Director of Nursing/ Infection Control committee (16/10/08)
Infection control training	Ensure all senior ward staff undertake and complete the infection control E-Learning programme	ICN Lead with ward sisters / CN	March 09 November 08	15 senior staff have commenced on the E-Learning programme Training issues discussed with dawn Hill (ICN -NPHS) on 29/10 for further roll out.

Findings	Action/Comments	By Whom	By When	Outcome
▪ Bronglais Hospital				
Infection control training	Establish an ongoing training programme for infection control	ADN	November 08	<i>3 training events undertaken (August –October 08) via A2Z training with 150+ staff attending events –sessions included a focus on Hand washing, Principles of IC, and waste management.</i>
	Review training requirements of ward staff in infection control	Senior Nurse Professional Development ICN	November 08	Discussion commenced with Sharon Evans (ICN) Carmarthen regarding staff training schedules programme including community hospitals.
Cleaning Schedules for nursing & domestic teams	Ensure that cleaning schedules are in place and reviewed on a monthly basis	DS/ WS/CN	October 08	HON meeting with ward sisters/ CN 23/10 issue was raised. Nursing & Domestic cleaning schedules to be placed in ward notice boards
	Undertake spot audits of cleaning schedules in all clinical areas on a monthly basis commencing in October 08	Senior Nurses	March 09	Commencing from October 08 walkabout completed on 29 th October
Equipment <i>Dirty & Dusty</i>	Re-enforce the importance of cleaning schedules and ward pride	Ward Sisters /CN / DS	October 08	HIW visit was discussed with ward sisters on 2/10 – and 23/10 via HON
<i>Inconsistent use of green tape</i>	Re-enforce the need to use green tape to indicate equipment has been cleaned	Ward Sisters /CN / DS	November 08	
	Undertaken a environmental audit of each ward noting actions for equipment removal / repair, racking, new posters, gel dispensers	WS/CN / ETF	December 08	Issues picked up following walkabout on 29/10 /08 Raised at Task force 30/10/08 and 6/11/08

Findings	Action/Comments	By Whom	By When	Outcome
Llewellyn ward				
Clinical Practice issue – Day patients using Day room for recovery following LA	Clinical practice was stopped with immediate effect (18/9/08)	AND&Q	September 08	Stopped with immediate effect
	Commence investigation in decision making process and report response to DN & HIW	Senior Nurse	October 08	Investigation revealed that this only happened with a few patients. Now stopped.
	Review patient flows and options	Director Manager	November 08	
Cleanliness <i>Carpet in dayroom</i>	Day room carpet to be replaced	ETF / Facilities	November 08	Replaced in October with new vinyl flooring.
<i>Clutter & storage in bathroom</i>	Consider option of removing bath to create additional storage	Facilities / ETF	November 08	Bath to be removed by 20 Nov 08
<i>Shower reported dirty</i>	Undertake spot audit of environment on a monthly basis	Senior nurses / AND&Q	March 09	Commenced
	Shower area to be fully cleaned and reviewed & bell cord replaced	DS/ WS	October 08	Cord replaced Oct 08
Access to Sinks in 4 bedded areas - sinks in poor condition	Review access and consider options. Review and replace if required	Facilities / SN Facilities team/ETF	Dec 08 Dec 08	
Linen Room	Review and remove inappropriate items	WS/CN	Oct 08	29/10 ward reminded to review and re-house ASAP
Commode cleaning not to required standard	Remainder to nursing and domestic staff on cleaning schedules and standards required. Review in walkabouts	W / SCW HON / INC	From October 08	Walkabouts 29/10 found to be acceptable.

	look for cleaning schedule			
Communal items in bathroom	Ensure communal items are removed	Ward team and Domestic Staff	Ongoing	Staff are reminding patients and removing communal items
Air Vent in Drug Preparation area	Air vent to be checked and if cleaned or removed and covered	Facilities team/ ETF	Dec 08	
Findings	Action/Comments	By Whom	By When	Outcome
OG ward				
Flooring Un-refurbished areas look dirty & scuffed	Establish a clear timeframe / options for OG Refurbishment	Environmental Task Force/ Head of Nursing	March 09	Apart of ETF action plan phase 2
Cleanliness	Cleaning schedules to be reviewed and visible for ward staff / team	WS/ DS	October 08	
High / Low surface Dust (Meurig)	Ward areas to be thoroughly cleaned particularly corners	DS/ Domestic Team	October08	Noticed improvement on walkabout 29/10.08
High and Low surface dust	Cleanliness to monitored to ensure compliance with standards	Domestic Supervisions / WS	Oct 08	
Inappropriate items in Clinical Room	Remove Inappropriate items in Clinical room	Ward team and Domestic Staff	Ongoing	
Commode cleaning not to required standards	Reminder to nursing staff on cleaning standards – Introduction of training programme Introduction of new (tuffy wipes) Review on walkabouts and review cleaning schedules	Ward team and Domestic Staff ICN	Ongoing	
Tregaron Hospital				
Re-decoration	Establish a time frame for re-	Facilities / WS	March 09	

Clinical room & sluice	decoration		Nov 09	
Storage	Need for racking / storage options & check stock levels	Facilities / WS	March 09	
Cracked sinks	Replace sinks	Facilities	November 08	Work programme being established for this work
Portering	Review staffing issue with catering manager	AND/ Hotel Services Manager	December 08	
High and Low surface dust	Cleanliness to monitored to ensure compliance with standards	DS/WS	Oct 08	
Communal toiletry items	Areas to be checked and reviewed	DS/WS	October 08 Commenced	
Tregaron: New waste bins	Order new waste bins	ADN		New waste bins being ordered under phase 2
Commode cleaning not to required standards	Reminder to nursing staff on cleaning standards – Introduction of training programme Introduction of new (toffy wipes) Review on walkabouts and reviewing cleaning schedules	Ward team and Domestic Staff ICN	Ongoing	
Meurig Ward				
Clutter and storage in bathroom and Linen room	Remove inappropriate items from bathroom and Linen room area. Review storage arrangements Review on Walkabouts	Ward and Domestic Team Senior Nurses	Ongoing	Nursing Team have reviewed and removed items off the ward to free up space in area.
General Actions				
Kitchen Sink Taps	Review Kitchen Sink Taps and	Facilities	March 09	

	agree a replacement schedule for all ward areas	Team		
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Directorates will review and updated action plan via the Environmental Taskforce Group by January 09 This action plan will be monitored through the Quality & Governance Committee Date Prepared: October 2008 Review Date: January 2009

AND&Q = Associate Director of Nursing
 ICN = Infection control Nurse
 WS = Ward Sister
 CN = Charge Nurses
 DS = Domestic Supervisors