Roscommon University Hospital Quality Improvement Plan following HIQA Unannounced Inspections 2016

| No | Issue Highlighted | Quality Improvement Plan | Responsible Person: | Completion Date |
|----|--|--|--|---|
| 1. | Infrastructure of decontamination area not in line with national standards and relevant guidelines | Decontamination remains number one risk on hospital risk register | General Manager | |
| | | Decontamination Risk Assessment Completed | Risk Manager Clinical Nurse Manager | Completed October 2016 (updated in November 2017) |
| | | Immediate investigation of alternatives to decontamination onsite Outsourcing meetings in progress SLA with transport company agreed | General Manager Risk Manger | Q1 2018 |
| | | Brief submitted for purpose built CSSD | General Manager HSE Estates | November 2016 |
| | | Reconfiguration of packing area | Maintenance Manager Clinical Nurse Manager | November 2016 |
| | | Renovation of cleaning store room | Maintenance manager Clinical Nurse manger | Q1 2018 |
| | | Finger Print installation - 2 phases In house building works Installation of finger print system by external company | General Manager | Q3 2017 |
| 2. | Flexible Nasopharyngeal Endoscope Decontamination | • The interim process which had been in place in the Out Patients Department ceased and Nasopharyngeal scopes are now decontaminated in the Endoscopy Unit | General Manger Director of Nursing | Completed December 2016 |
| 3. | Review of all aspects of management of environmental hygiene delivery | Appoint Household service manager who will oversee and manage the hygiene services. Domestic supervisor position will then become a supervisor post. Monthly report to Hospital Management Team, issues outside of local control (e.g. resources and funding and capital projects) escalated to Saolta Executive team via performance meetings | General Manager Director of Nursing | Interim Appointment Q2 2017, a/w NRS to advertise for substantive post. |
| 4. | Environmental Hygiene and Equipment cleaning | Reallocation of duties to ensure maximum cleaning time and efficiency of same Monthly audit of all cleaning check lists Full systematic review of cleaning Application for additional cleaning resources to met RUH patient activity part of discussions with HR Resources to provide assurance in relation to IP&C standards currently under review | Domestic Supervisor Cleaning Staff Director of Nursing | Ongoing |
| 5. | Surfaces and Finishes | All bathrooms to be upgraded to meet standards 1 sluice room outstanding for upgrading | General Manager Maintenance Manager HSE Estates | Q4 2018 |
| 6 | Environmental hygiene results | Environmental audits had been reconfigured from March 2016, Environmental Service Team working through process monitoring and closing off actions of QIP's from each audit Process is at advanced stage currently and expect the oversight and closing out of QIP's from audits to become streamlined by Q3 2017 Environmental Services Team reports to Hygiene Committee and Infection Control Committee whose chair reports to Hospital Management Team | Director of Nursing Chair Environmental Services Team Chair Hygiene Committee Chair Infection Control Committee Infection Prevention and Control CNS | Ongoing |
| 7. | Ventilation extract grille | Vacuuming of outside of the ventilation grilles part of regular cleaning schedule and audit schedule | Cleaning Staff Domestic Supervisor | Q1 2017 |

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| | | Cleaning of inside of ventilation grille via contractor commenced | | |
|-----|---|--|--|---------------------------|
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| 8. | Patient equipment stored on corridor | New linen and waste collection trolleys in place Equipment storage review in progress | Domestic Supervisor Clinical Nurse Managers Assistant Directors of Nursing | Q1 2017 Ongoing |
| 9. | Lack of a dedicated cleaning equipment room on St Bridgets | Immediate works to identify a space for cleaning equipment Works carried out by maintenance department New cleaning equipment room in place | Maintenance Manager Domestic Supervisor Clinical Nurse Manager | October 2016 |
| 10. | Equipment replacement programme | Bed Tables, locker replacement programme in place - immediate replacement of furniture and equipment All items which cannot be repaired to be replaced on a phased basis dependant on funding | CNM's, ADON's, DoN, DS | Ongoing |
| 11. | Bed Spacing | Relocation of the Clinical Observation Unit Unable to remove any beds from service due to inadequate spacing in other areas Brief for new 50 bed ward block submitted to Saolta | HSE Estates General Manager Infection Control Committee | Q4 2017 - near completion |
| 12. | Remedial works - ceiling tiles | Process in place for Infection Prevention and Control approval of building works All works recorded on IPCN daily report | Maintenance Manager Infection Prevention and Control Clinical Nurse Specialist | January 2017 |
| 13. | General Maintenance Works | Replacement or sealing of Window sill Boards - St Bridgets Ward Replacement or sealing of Window sill Boards - St Comans Ward | Maintenance Manager Maintenance Manager | October 2016 Q1 2017 |
| | | New cleaning equipment room on St Bridgets | Maintenance Manager Domestic Supervisor Clinical Nurse Manager | October 2016 |
| | | Cladding of doors with stainless steel - phased basis | Maintenance Manager | Q1 2018 |