

COED DU HALL INDEPENDENT HOSPITAL

Action Plan following HIW unannounced inspection visit on 05 June 2013

Regulation 26(2)(a)					
	ISSUE OF CONCERN	ACTIONS	RESPONSIBLE OFFICER	EXPECTED DATE FOR COMPLETION	STATUS
1	There were a number of environmental issues noted during our visit, some of which are still outstanding from our previous visit in February 2013. The standard of cleanliness throughout Coed Du Hall is unacceptable and the issues that require urgent attention include:				
a	The laundry room sink was dirty.	Deep clean of the laundry room. Comprehensive review of housekeeping arrangements. Recruitment to head housekeeper, increased housekeeping/cleaning hours to address identified need. Spot checks have been set up to ensure standards are maintained. Audit introduced to monitor level of cleanliness on a monthly basis.	Housekeeper	24 June 2013	Deep clean completed Review completed Advertisement for position posted. Recruitment ongoing Checks introduced Monthly audit to be introduced.
b	The laundry room floor was stained and marked and there were cobwebs on the ceiling.		Hospital Manager	1 July 2013 30 September 2013	
c	The skirting boards on Beech Unit were full of dust and dirt. The entrance floor was stained and marked as was the carpet on this unit.		Care Staff	Weekly 30 September 2013	
d	The WC on Beech Unit still had a strong smell of urine.	Removal of WC and deep clean of area to remove odour. Flooring replaced with appropriate material. WC replaced.	External contractor/ Responsible Individual	30 June 2013	Completed

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e	The entrance floor to Ash Unit was marked and stained.	Deep Cleaning of entrance area to Ash. Replacement of plinths to kitchen area.	Maintenance House keeper	15 June 2013	Completed
f	The standard of decoration and cleanliness of the smoking room was unacceptable. The walls were stained and the skirting boards had been removed. The flooring and furnishings need urgent attention.	Refurbishment of smoking room. Remove cabinets and sink. Replace flooring. Deliver appropriate furniture. <i>Residents expressed desire to paint a mural and this is being promoted and developed.</i>	Responsible Individual. Manager & External Contractor	30 September 2013	Smoke area cleared and extensive refurbishment has commenced. Walls and ceiling replastered and redecorated. Flooring is on site, awaiting installation Residents to commence art work/mural on completion of refurbishment.
g	There were a number of areas outside that require cleaning as cigarette butts were discarded on the floor.	New cleaning programme to collect cigarette butts implemented with resident participation.	Housekeeper Manager Staff and residents	30 July 2013	External clearing has taken place and the area is much improved. New cleaning Programme has been introduced
h	A specific maintenance plan is required which indicates the actions and expected date for completion	Deliver maintenance plan to address identified areas noted through the inspection process.	Responsible Individual	15 July 2013	A number of rooms have been refurbished; including

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	of all the environmental issues noted above and those outstanding in the February 2013 management letter	Deliver remedial actions as required/recommended. Provide regular status report to HIW to ensure monitoring of actions and activity to ensure compliance.	Manager Maintenance		new carpeting and furniture. Carpet/flooring has been replaced in all communal areas in Beech Unit.
Regulation 15 (5)(a)					
	ISSUE OF CONCERN	ACTIONS	RESPONSIBLE OFFICER	EXPECTED DATE FOR COMPLETION	STATUS
2	There were a number of issues noted in the treatment room and these included:				
a	Some medication was out of stock and this meant that patients were not receiving prescribed medication.	Review of the ordering process to ensure full complement of stock is available at all times. Liaison with GP provider to ensure stock medication is comprehensive.	Manager Clinical Lead	With immediate effect	All medication in stock as per prescription. Regular liaison and review with GP and pharmacy service in situ.
b	Medication withheld by the Registered Nurse (RN) and no reason recorded.	Issue of medication recording and NMC guidelines regarding the appropriate procedures for recording medications withheld addressed in Nurses' meeting and individual supervisions. Increased frequency of medication audit to ensure compliance.	Clinical Lead Registered Nurses	30 June 2013	NMC guidance delivered to all RN. Medication audit quarterly (previously biannually).

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c	The label on a medication box was half missing.	All medication in stock checked to ensure accurate and complete labelling. All new supplies to be checked on receipt and any areas highlighted and amended prior to dispensing. Torn/damaged labels to be returned to GP practise for relabeling and dispensing.	Registered Nurses	17 June 2013	Completed and ongoing.
d	The directions on a drug prescription did not tally with the label on the drugs.	All medication in stock checked to ensure accurate and complete labelling. All new supplies to be checked against MAR chart on receipt and any areas highlighted and amended prior to dispensing. All errors to be reported to the GP and dispensing pharmacy.	Registered Nurses	30 June 2013	Completed and ongoing.
<p><i>To ensure compliance with medication prescribing and administration, the organisation is exploring the procurement of external training for all nurses through an established hospital pharmacy service (Speeds Pharmacy Limited) which will be completed by the end of October 2013. The training will enhance the knowledge, skills of the nursing team and ensure quality improvements in the internal pharmacy arrangements.</i></p>					