



# Improvement Action Plan

## Healthcare Improvement Scotland: Unannounced acute hospital safe delivery of care inspection

University Hospital Wishaw, NHS Lanarkshire

16 – 18 January 2023

### Improvement Action Plan Declaration

It is the responsibility of the NHS board Chief Executive and NHS board Chair to ensure the improvement action plan is accurate and complete and that the actions are measurable, timely and will deliver sustained improvement. Actions should be implemented across the NHS board, and not just at the hospital inspected. By signing this document, the NHS board Chief Executive and NHS board Chair are agreeing to the points above. A representative from Patient/Public Involvement within the NHS should be involved in developing the improvement action plan.

NHS board Chair

Signature: \_\_\_\_\_

Full Name: Martin Hill  
\_\_\_\_\_

Date: 25<sup>th</sup> July 2023

NHS board Deputy Chief Executive

Signature: \_\_\_\_\_

Full Name: Eddie Docherty  
\_\_\_\_\_

Date: 31.07.2023

File Name: 2023030620230803 20230724 Action Plan - 31.07.2023 (002) UHW NHS LAN v0.2	Version: 0.3	Date: 04/08/2023
Produced by: HIS/NHS LAN	Page: Page 1 of 9	Review Date: 20/12/2024
Circulation type (internal/external): Internal and external		

Ref:	Action Planned	Timescale to meet action	Responsibility for taking action	Progress	Date Completed
Domain 1	<p>NHS Lanarkshire will pilot the implementation of direct feedback to staff who raise a concern through the reporting system</p> <p>University Hospital Wishaw will monitor the closing and communication of active datix</p>	3 Months	Chief Nurse / Risk Manager	<p>Draft version of support letter created with the ability for staff to upload to TURAS as part of appraisal / revalidation</p> <p>Review ongoing to assure staff copied in to response / closing of Datix</p>	Ongoing
Domain 1	NHS Lanarkshire will explore the option of an electronic screen to identify the waiting times for patients in the ED department.	3 Months	Service Manager for Emergency Medicine	Due to capital work ongoing within ED, UHW is currently unable to install a visual screen. However, a sound system has been purchased & implemented to inform patients/relatives of waiting times.	
Domain 1	While awaiting the electronic solution, NHS Lanarkshire will put in place a process to ensure patients and relatives are kept appraised of waiting times within the University Hospital Wishaw emergency department.	3 Months	Service Manager for Emergency Medicine / Senior Nurse for Emergency Medicine	<p>UHW tested use of HSCW solely for the waiting area. This was unsuccessful.</p> <p>There is a sound system in place to inform patients of</p>	

				waiting times, the system offers the ability to provide other messages which can be tailored for different flow groups.	
Domain 2.2	NHS Lanarkshire will ensure that patients who are cared for in non-conventional areas have access to call bell and privacy and dignity are maintained.	3 Months	Serco Facilities Manager /Senior Nurse for each speciality area/ IPC team	All patients have a risk assessment in place, this is standardised across site.  PSSD have costed a virtual call system, which is currently going through the capital investment group.  There are interim call bells available for each bed.	Ongoing
Domain 2.3	NHS Lanarkshire will have in place a process to ensure awareness of all patients in the admission areas with clearly defined roles and responsibilities across emergency and receiving/ medical ambulant care areas.  Establishment of individual areas on Trakcare for all areas	1 Month  Complete	Senior Nurse for Emergency medicine/ Clinical Director for Medicine	SOP created for the admission areas presented and agreed at HMT at March 2023.  Within the Trakcare system there is a section for admission areas to alert ED staff to patients within these areas.	

<p>Domain 5.4</p>	<p>NHS Lanarkshire will support staff in the timely completion of essential documentation to assist in the delivery of person centred care.</p> <p>NHS Lanarkshire will explore the role of Electronic MUST scoring for all adult patients.</p> <p>Commencement of Food, Fluid and Nutrition News Letter raising awareness and documentation.</p> <p>Training and education awareness sessions on AWI will be delivered to all staff across the site.</p> <p>NHS Lanarkshire will explore the role of the ANP in completing AWI where appropriate for patients they have assessed</p>	<p>6 Months</p>	<p>Practice Development Educator/ Food Fluid and Nutrition Nurse</p> <p>Patientrack Coordinator</p> <p>Food Fluid and Nutrition Nurse</p> <p>Senior Nurse Medicine of the Elderly. AWI Data needed</p> <p>Advanced Practitioner Lead Nurse.</p>	<p>Education sessions included with in the Newly Qualified Nurses induction and presentations shared with SCN's</p> <p>MUST and Nutrition TILE on Trakcare due to go live August 2023. Additional TILES due to be launched are Clinical Frailty and PVC.</p> <p>UHW have developed a monthly Food Fluid &amp; Nutrition Newsletter commenced in March &amp; distributed across the site.</p> <p>Initiated education sessions via Acute Care of the Elderly Practitioner. Included in Older peoples' pathway work</p> <p>AWI education delivered and is ongoing, Audit in place to monitor compliance.</p>	<p>Ongoing</p>
-------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------



	<p>All areas will be inspected to ascertain requirements for additional storage for PPE</p> <p>University Hospital Wishaw will pilot electronic recording of hand hygiene compliance.</p>			<p>Literature Review – Bare Below the Elbow/Hand Hygiene shared with all areas to promote informed conversations with staff.</p> <p>Implementation of Hand Hygiene Action Plan.</p> <p>PPE COVID guidance has been reviewed. National guidance has now been re-instated.</p> <p>Executive Nurse Director has commissioned a Hand Hygiene Campaign across NHS Lanarkshire. Preparatory work is scheduled to commence August 2023</p>	
Domain 5.7	<p>University Hospital Wishaw will provide awareness sessions to promote best practice, disposal at point of use.</p> <p>Random audit of clinical practice to provide assurance of best practice.</p>	<p>3 Months</p> <p>3 Months</p>	<p>IPC Team</p> <p>Senior Nursing Team</p>	<p>Audit of waste disposal across all wards and departments completed, PSSD team.</p> <p>Learning actions, plan being progressed.</p> <p>The Quality Assurance, Improvement and Patient Safety Meetings has a topic of</p>	

				<p>interest section which includes presentations from specialities, previous presenters have been;</p> <p>Neonates, Critical Care, Pharmacy, Gynaecology, Respiratory, Trauma, Antimicrobial and Clinical Audit.</p>	
Domain 5.8	NHS Lanarkshire has a SOP for the cleaning of electronic hand held devices (IPAD) this will this be extended to incorporate all hand devices (for example HEPMA). NHS Lanarkshire will raise awareness of this SOP and monitor its application.	3 Months	Patienttrack coordinator SCN	SOP in place ratified by decontamination group	
Domain 5.8	NHS Lanarkshire will ensure adherence to existing cleaning schedules and process to provide assurance that patient equipment is clean and ready for use.	3 Months	SCN IPC Team	SOP shared with all SCN with request to be filed within cleaning schedules. IPADs and other electronic devices added to cleaning schedules at ward level. SN team undertaking spot check audits.	
Domain 7.9	NHS Lanarkshire will ensure a consistent approach is adopted to reporting and recording staffing risks in line with good governance processes.	3 Months	Senior Nursing Team AHP Leads SCN	<p>Ongoing work to ensure PRAG updated in timely manner with mitigations in place and recorded.</p> <p>UHW has commenced Career Conversation sessions where staff can book in via a QR code</p>	

				<p>to have a session with a member of the senior management team to discuss career opportunities, progression or concerns.</p> <p>Following evaluation, the Career Conversations initiative will be shared across the Acute Division.</p> <p>Implementation of Safe Staffing Legislation.</p> <p>DCN supporting testing of Healthcare Staffing legislation chapters as part of national work.</p>	
Domain 9.10	NHS Lanarkshire will ensure that all new and current policies have appropriate governance oversight and will review the current full capacity protocol	3 Months	Hospital Director Chief Nurse Chief of Medicine Chief Midwife	Agreed process at HMT and Clinical Governance Group.	
Recommendation 30	NHS Lanarkshire will ensure that all appropriate agencies are engaged in review of adverse events.	3 Months	Chief Nurse / Risk Manager SAS Governance Lead	Briefing Notes which relate to SAS are sent to the Board Contact for Consideration /	



				<p>Shared Learning.</p> <p>All Child Deaths are reported to the Child Death Review Service mailbox as per process.</p> <p>All Adverse Events in relation to SAS are shared with the Area Service Manager monthly.</p> <p>Representation is requested for all SAER's involving Multi-Agencies e.g. WEB274875 included Review Group members from GP, Paediatrics and Emergency.</p> <p>There is cross system shared learning for SAER's e.g. SAER WEB273322 was shared for learning with SAS, North and South Partnerships.</p>	
--	--	--	--	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--