



# Improvement Action Plan

Healthcare Improvement Scotland:

Unannounced Infection Prevention and Control Inspections of Mental Health Services

Kingsway Care Centre, NHS Tayside

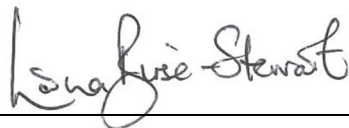
16 January 2024

## 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: Lorna Bise-Stewart  
\_\_\_\_\_

Date: 18 March 2024 \_\_\_\_\_

**NHS board Chief Executive**

Signature:

  
\_\_\_\_\_

Full Name: Professor Caroline Hiscox  
\_\_\_\_\_

Date: 18 March 2024 \_\_\_\_\_

Ref:	Action Planned	Timescale to meet action	Responsibility for taking action	Progress	Date Completed
<p>Ref1</p> <p>NHS Tayside must ensure infection prevention and control information is recorded within patients care plans to inform patient care (see page 9). This will support compliance with the National Infection Prevention and Control Manual (2022) and Standard 3.1 of Healthcare Improvement Scotland's Infection Prevention and Control Standards (May 2022)</p>	<p>Infection prevention and control information/advice will be documented within patients care plans to inform patient care, supporting compliance with the National Infection Prevention and Control Manual. This will be monitored through patient documentation audit processes.</p> <p>Added to next Senior Charge Nurse (SCN) forum</p> <p>Added to next Dundee Health &amp; Social Care Partnership (DHSCP) Infection Prevention and Control Group.</p>	<p>March 2024</p> <p>02/04/24</p> <p>15/04/24</p>	<p>SCN/Lead Nurse</p>		

<p>Ref 2</p> <p>NHS Tayside must ensure that there are effective systems in place to ensure the care environment is maintained and is in a good state of repair to support effective cleaning (see page 10). This will support compliance with the National Infection Prevention and Control Manual (2022) and Standard 8.1 of Healthcare Improvement Scotland's Infection Prevention and Control Standards (May 2022).</p>	<p>NHS Tayside is currently implementing the Computer Maintenance Management System(CMMS) across Tayside.</p> <p>Patient associated care equipment and the environment will continue to be monitored through monthly Infection Prevention and Control (IPC) Tool for Environmental Auditing of the Clinical Area HAI (TEACH) audits, as well as through and annual IPC audit programme and managerial walkabouts.</p> <p>Rolling programme of review and replacement of furniture and equipment that is a risk to patients (relating to standard 8.1). This will be done with an awareness of financial constraints with support from Infection Prevention and Control.</p>	<p>2025</p> <p>Ongoing</p> <p>Ongoing</p>	<p>Estates</p> <p>SCN/Lead Nurse/IPCT</p>	<p>A staged approach is being taken to role CMMS out across the 65 sites within Tayside, prioritising inpatient areas.</p> <p>Monthly monitoring programme in place.</p> <p>Itinerary collected of items deemed below the standard and prioritise for maintenance or early procurement. Completion aim May 2024.</p>	<p>March 2024</p>
---	---	---	---	--	-------------------

	Escalation using established risk assessments through agreed managerial routes, thereafter through DHSCP IPC Group through to Strategic Infection Prevention and Control Committee.	Established		Completed.	March 2024
Ref 3  NHS Tayside must ensure extraction fans are clean (see page 10). This will support compliance with the National Infection Prevention and Control Manual (2022) and Standard 8.1 of Healthcare Improvement Scotland's Infection Prevention and Control Standards (May 2022).	Extraction fans added to estates pre planned maintenance, roles and responsibilities are clarified.	March 2024	Estates	Fans at Kingsway Care Centre cleaned on 10/11 March 2024.  SOP in place and implemented incorporating roles and responsibilities and tasks performed to SFG20 standard. Completed.	March 2024  March 2024
Ref 4  NHS Tayside must ensure clinical waste is stored in a designated, safe and lockable area whilst awaiting uplift. General and clinical waste must be always segregated at the source (see page 10). This will support compliance with	Ensure practice compliant with Scottish Health Technical Note 03: NHS Scotland Waste Management Guidance October 2023 through the development and implementation of an SOP around clinical waste regarding roles and responsibilities.	April 2024	Operational Waste Manager	Audit of process completed by Operational Waste Manager.  Clinical waste bins ordered March 2024, delivery imminent. This will support	February 2024  April 2024

<p>the National Infection Prevention and Control Manual (2022), Standard 6.1 of Healthcare Improvement Scotland's Infection Prevention and Control Standards (May 2022).</p>				<p>the correct segregation of clinical and general waste.</p> <p>Estates to provide bin recess area; meeting planned on 20 March to review implementation plan and progress.</p>	<p>May 2024</p>
--	--	--	--	--	-----------------