



Improvement Action Plan

Healthcare Improvement Scotland: Unannounced hospital inspection

Midlothian Community Hospital, NHS Lothian

22-24 September 2020

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: _____

Date: _____

NHS board Chief Executive

Signature: _____

Full Name: _____

Date: _____

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Ref:	Action Planned	Timescale to meet action	Responsibility for taking action	Progress	Date Completed
1	<p>Requirement 1 NHS Lothian must ensure that all older people who are admitted to hospital are accurately assessed in line with the national standards. This includes nutritional screening and assessment including oral health assessment. There must be evidence of accurate reassessment, where required (see page 14).</p> <p>Actions Education and training for the correct recording of MUST to be implemented on all wards for all staff.</p> <p>NHS Lothian will review oral health assessment. The requirement for an assessment in the electronic system has been escalated within NHS Lothian.</p> <p>A monthly audit programme is in place whereby Senior Charge Nurses review a selection of care plans from a food, fluid and nutrition perspective. This includes MUST scores.</p>	<p>November 2020</p> <p>June 2020</p> <p>November 2020</p>	<p>Chief Nurse / Service Manager</p> <p>NHS Lothian Patient Outcomes Board</p> <p>Chief Nurse / Service Manager</p>	<p>Staff education implemented</p> <p>Escalated to group</p> <p>Audit programme in place</p>	<p>Nov 2020</p> <p>November 2020</p>

2	<p>Requirement 2</p> <p>NHS Lothian must ensure that mealtimes are managed consistently in a way that ensures that patients are prepared for meals, including hand hygiene. The NHS board should also ensure that the principles of Making Meals Matter are implemented (see page 14).</p> <p>Actions</p> <p>Implement Standard Operating Procedure for preparing all patients for mealtimes.</p> <p>Making Meals Matter is included in the Food, Fluid and Nutritional Care Standards 2014 which also includes Protected Mealtimes. NHS Lothian wards work to these standards and will reinforce within these wards</p>	November 2020	Chief Nurse / Service Manger	Developed and implemented Education for staff completed.	November 2020
3	<p>Requirement 3</p> <p>NHS Lothian must ensure that food record and fluid balance charts are commenced and accurately completed for patients who require them, and appropriate action is taken in relation to intake or output, as required (see page 14).</p> <p>Actions</p> <p>Food, Fluid and Nutritional Care Standards, in particular completion of food records and fluid balance charts, to be reinforced through education sessions for all staff on all wards.</p>	November 2020	Chief Nurse / Service Manager	Education sessions complete	November 2020

	<p>Audit results monitored to ensure consistent approach and accuracy. Part of audit programme detailed above at 1.</p> <p>Food, Fluid and Nutrition Group for Midlothian Community Hospital to be reinstated. This group reports to NHS Lothian Food, Fluid and Nutrition Group.</p>	March 2021	<p>Chief Nurse / Service Manager</p> <p>Chief Nurse / Service Manager / Dietetic Lead</p>	<p>Audit programme in place</p> <p>Planning stages</p>	November 2020
4	<p>Requirement 4</p> <p>NHS Lothian must ensure that where falls alarms are in use that consideration is given to the Mental Welfare Commissions Decisions about technology (Good Practice Guide, September 2015) to ensure that the individual's human rights are met. They must also ensure that systems are in place to ensure the correct maintenance and use of the falls alarms (see page 14).</p> <p>Actions</p> <p>NHS Lothian will ensure that following any falls risk assessment, consent will be gained and recorded, prior to utilising a falls alarm. Where consent can't be gained, the decision will be made following assessment to the risk involved and agreed by the MDT.</p> <p>Staff training is provided by manufacturer.</p>	December 2020	Chief Nurse / Service Manager	<p>Consent process in place.</p> <p>Staff training in place</p> <p>SOP being developed</p>	<p>November 2020</p> <p>November 2020</p>

	SOP to be developed.				
5	<p>Requirement 5</p> <p>NHS Lothian must ensure that all staff perform hand hygiene at appropriate opportunities, as per the World Health Organisation's Five Moments for Hand Hygiene guidelines (see page 16).</p> <p>Actions</p> <p>Hand hygiene standards reinforced with all staff</p> <p>Audit programme in place. Results monitored by SCN / Service Manager</p>	November 2020	Chief Nurse / Service Manager	Complete	November 2020
6	<p>Requirement 6</p> <p>NHS Lothian must ensure that all staff adhere to the guidance for use of PPE when moving between isolation rooms and the appropriate use of gloves (see page 16).</p> <p>Actions</p> <p>Infection prevention and control standards reinforced including site visits by Infection Prevention and Control Nurses. Correct PPE use reinforced with all staff and included in daily safety briefs</p> <p>Compliance will be formally monitored through SCN local HAI audit</p>	<p>November 2020</p> <p>November 2020</p>	<p>Chief Nurse / Service Manager</p> <p>Chief Nurse/Senior Charge Nurses</p>	<p>Complete</p> <p>Ongoing - quarterly</p>	November 2020

	Posters in place to remind staff of standards				
7	<p>Requirement 7 NHS Lothian should ensure that patient identifiable information, such as risk alerts and care needs details, are not on public display. This will ensure that patient privacy and is respected (see page 18).</p> <p>Actions Information on white boards has been removed. As an alternative this information now accessible in the patients records.</p>	November 2020	Chief Nurse / Service Manager	Complete	November 2020