

Improvement Action Plan

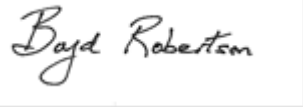

Healthcare Improvement Scotland: unannounced hospital inspection

Cowal Community Hospital, NHS Highland

27 October 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		NHS board Chief Executive	
Signature		Signature	
Name	Professor Boyd Robertson	Name	Pamela Dudek
Date	21 st December 2020	Date	21 st December 2020

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Ref:	Action Planned	Timescale to meet action	Responsibility for taking action	Progress	Date Completed
1	<p><i>NHS Highland must ensure that all older people who are admitted to hospital are accurately assessed in line with the national standards. This includes nutritional assessment including MUST screening and oral health assessment. There must be evidence of reassessment, where required (see page 12). This is to comply with Food, Fluid and Nutritional Care Standards (2014) criteria 2.1, 2.2 2.3 and 2.4.</i></p> <ul style="list-style-type: none"> NHS Highland will continue to deliver education on the revised patient documentation, including electronic nursing records, which was introduced in May 2020. This will include education on MUST and oral health assessment. The use of an electronic nursing document will aid with timely assessment and reassessment and accuracy. Compliance will be monitored by Senior Charge Nurses (SCNs) by way of regular audit of documentation and real-time feedback to 	<p>30/06/2021</p> <p>30/06/2021</p>	<p>Esther Dickinson(Quality Improvement Projects Lead NMAHP)</p> <p>Supported by Lead and Associate Lead Nurses</p> <p>SCNs</p>		

	<p>staff in order to ensure continued quality improvement.</p> <ul style="list-style-type: none"> • With the support of the Lead and Associate Lead Nurses, learning will be collated and shared across the Board area. 	31/07/2021	Lead Nurse and Associate Lead Nurses		
2	<p><i>NHS Highland must ensure that patients have person-centred care plans in place for all identified care needs. These should be regularly evaluated and updated to reflect changes in the patient's condition or needs. The care plans should also reflect that patients are involved in care and treatment decisions (see page 12). This is to comply with The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives (2015); Care of Older People in Hospital Standards (2015) criteria 1.1, 1.4, and 11.2a; Food, Fluid and Nutritional Care Standards (2014) Criterion 2.9a and Prevention and management of Pressure Ulcers standards (2020) Standard 6.</i></p> <ul style="list-style-type: none"> • NHS Highland will continue to deliver education on the revised in- patient documentation which was introduced in May 2020 with an emphasis on all care plans 	30/06/2021	Esther Dickinson(Quality Improvement Projects		

	<p>being person centred and developed in conjunction with the patient.</p> <ul style="list-style-type: none"> Local support and education from Associate Lead Nurses to work alongside staff on person centred care planning in real time. 	30/04/2021	<p>Lead NMAHP)</p> <p>Supported by Lead and Associate Lead Nurses</p> <p>Associate Lead Nurses</p>		
3	<p>NHS Highland must ensure that the SKIN bundles are consistently and accurately completed to ensure the frequency of repositioning (see page 12). This is to comply with Prevention and management of Pressure Ulcers standards (2020) Standard 6</p> <ul style="list-style-type: none"> Commission Tissue Viability Nurse to deliver education sessions on wound assessment and completion of SSKIN A number of early implementer sites currently testing revised Care Rounding tool which will be an aid to ensuring frequency of positional changes 	<p>30/04/2021</p> <p>30/06/2021</p>	<p>Lead Nurse</p> <p>Lead Nurses</p>		

4	<p>NHS Highland must ensure that audit activity is robust and findings acted upon to provide assurance that the environment is being well managed (see page 15). This is to comply with Healthcare Associated Infection (HAI) standards (2015) Criteria 6.4.</p> <ul style="list-style-type: none"> • Any finding from audits should be actioned as soon as is reasonably possible. • Where this is not possible, the issue should be risk assessed, captured with the ward HEI action plan and escalated to local management and Lead Nurse as infection control lead. 	31/02/2021	SCNs		