

Recommendation	Action Required	Measurement / Evidence of Implementation	Responsible Person for Action	Due Date for full implementation
<p>Improve performance in relation to Standard 6 of the Infection Prevention and Control Standards - hand hygiene</p>	<ol style="list-style-type: none"> 1. Maximise attendance to PCHCAI education 2. Achieve national hand hygiene attendance target of 90% 3. Implement penalty system for non attendees of mandatory PCHCAI education 4. Continue auditor training as required 5. Monthly audits against national audit tool in each clinical area 6. Continue to implement hand hygiene strategy 7. Six monthly review of PCHCAI programme 	<p>EMB minutes on unannounced site visit 5th May 2016 Minutes of CEO QIT, Infection Prevention and Control Committee (IPCC) Meeting Monitoring attendance at PCHCAI and report to IPCC and EMB Increase number of PCHCAI sessions to twice monthly until year end</p>	<p>Services Manager ADON Diagnostic Directorate Chair of IPCC Infection Control Nurse Lead for Hand Hygiene Audit</p>	<p>31st December 2016 and ongoing meetings</p>
<p>Improve compliance in relation to Standard 3 of the Infection Prevention and Control Standards - Infrastructure and isolation facilities</p>	<ol style="list-style-type: none"> 1. Allocation of funding for refurbishment on Wards GAN, 3B ,2D 2. Appointment of design team, contractors 3. Environmental walkabouts /audits 	<p>Ward GAN Project Group Minutes of Hygiene Group meetings Minutes of Capital Project meetings Audit records held by Services Manager</p>	<p>Services Manager Project lead GAN project group Estates Department Chair Infection Control Team</p>	<p>31st December 2016</p>
<p>Improve Compliance with Standard 3 of Infection Prevention Control Standards in relation to cleaning practices - Ward GA Neurosurgery (GAN)</p>	<ol style="list-style-type: none"> 1. Targeted training programme for housekeeping staff on Ward GAN and those providing relief in the area. 2. Utilise the competency skills assessment tool for housekeeping staff for use in Ward GAN 3. Daily cleaning checklist with named person identified to check that all equipment is clean 	<p>Training records held by Housekeeping Services Manager Ward GAN Documented Competency Assessment Tool Competency Assessment Records held by Housekeeping Services Manager Local environmental audits Documentation of daily allocation of additional staff responsibility</p>	<p>Services Manager Ward Manager GAN ADON Peri-operative Directorate Housekeeping Services Manager</p>	<p>Week of 6th June and 31st December 2016</p>

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Improve compliance in relation to cleaning practices for patients requiring isolation	Training: All staff in Ward GAN and Ward 3B to be given an overview of isolation precautions and measures to reduce cross infection, including waste location guidelines by Infection Control Nurses.	Attendance Record to be held by Ward Managers and Infection Control Nurses	Infection Control Nurses	31st December 2016
Improve compliance in relation to Legionella control	1. Complete procurement process to award contract of specialist to undertake risk assessment. 2. Site risk assessment to be completed 3. Following risk assessment implement control measures in line with Irish National Guidelines	Minutes of project meetings Minutes of Infection Prevention and Control Committee	Estates Department Chair Infection Control Team	31st December 2016
Improve compliance in relation to prevention of nosocomial aspergillosis	Risk assessment completed and updated during stages of construction Provide education for staff Provide information for patients	Minutes of project meetings Completion of checklist in the draft National Guidelines guidelines Revisit control measures of risk assessment	Estates Department Chair Infection Control Team	31st December 2016
Improve compliance in relation to Infection Prevention and Control Standard 4 HR	Address dual cleaning and catering duties to ensure effective cleaning practices Training and education of staff	Housekeeping Review Group to progress the segregation of housekeeping and catering duties	Chair of Housekeeping Review Group	31st December 2016
Improve compliance in relation to Standard 8 of the Infection Prevention and Control Standards - care bundles	Continue implementation of care bundles Provide education, training. Regular audit to ensure compliance	Attendance records held by Ward managers Audit results to be communicated to Assistant Directors of Nursing and escalated via Directorates	Ward Managers Assistant Directors of Nursing	31st December 2016