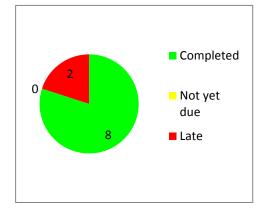
| QIPs LOG FOR: | Hygiene | | | | |
|-----------------------------|---------------|------------|--|--|--|
| St. Luke's General Hospital | | | | | |
| | TODAY'S DATE: | 30/11/2016 | | | |

Completed 8 Not yet due 0 Late 2



Surgical Medical Unit

Note: Please ensure you enter the 'Entry Date' (i.e. date that QIP is entered into the log), 'Due Date' (i.e. date that the QIP is due for completion), and, when appropriate, the 'Completed Date' (i.e. date that QIP has been fully implemented).

| Entry Date | Standard | Criterion | Description of Quality Improvement Plan (QIP) | Responsible Person | Due Date | Completed Date | QIP Status | Comments |
|------------|----------|-----------|--|------------------------------------|------------|-------------------|---------------|---|
| 18/01/2016 | | | Practice to be adhered to to ensure compliance with the SLGH Carlow/Kilkenny policy on medication management | CNM | 20/01/2016 | 24/05/2016 | Completed | |
| 18/01/2016 | | | Place appropriate wall dispenser at the WHB & refill | Housekeeping/Technical Services | 30/04/2016 | 24/05/2016 | Completed | |
| 18/01/2016 | | | Ensure compliance in relation to IPC guidelines on Transmission Based Precautions | CNM | 18/01/2016 | 18/01/2016 | Completed | Ongoing supervision and education |
| 12/02/2016 | | | The design of the WHB on SMU does not conform to health building regulations | Technical Services | 04/09/2016 | | Late | Ongoing emails to Technical Services by CNM2 |
| 18/01/2016 | | | Appropriately labelled products to be available at WHBs | CNM | 18/01/2016 | 18/01/2016 | Completed | |
| 18/01/2016 | | | Two bottles of alcohol gel attached to the B/P monitors on SMU exceeded the stated expiry date | CNM | 18/01/2016 | 18/01/2016 | Completed | Replaced and ongoing weekly checks in place |
| 18/01/2016 | | | A number of hand hygiene advisory posters were not fixed to the wall in SMU | CNM | 25/01/2016 | 29/02/2016 | Completed | |
| 12/02/2016 | | | Limited storage space, bags of IV fluids were stored on wall mounted dispensers on the corridor. | CNM | 12/02/2016 | 12/02/2016 | Completed | Removed |
| 17/02/2016 | | | Wheelchairs x 2 observed in corridor with organic contamination | CNM/Porter Security | 12/02/2016 | 12/2/1016 | Completed | Cleaned/SOP on wheelchair cleaning to be adhered to |
| 17/02/2016 | | | Audit of compliance in relation to care bundles of peripheral venous catheters, same to be recorded and audited within agreed timeframes | CNM | 15/04/2016 | | Late | Ongoing |