

Subject: FW: CQC visit - could be any day now - please read this message!
From: "Ball Jonathan (ST GEORGE'S HEALTHCARE NHS TRUST)" <jonathan.ball2@nhs.net>
Date: 07/08/2013 18:08
To: Jonathan Ball - SGUL <jball@sgul.ac.uk>

From: Communications - St Georges [mailto:unitco00@stgeorges.nhs.uk]
Sent: 07 August 2013 17:52
To: Communications - St Georges
Subject: CQC visit - could be any day now - please read this message!
Importance: High

MESSAGE TO ALL STAFF FROM:-

MILES SCOTT - CHIEF EXECUTIVE

DR ROS GIVEN-WILSON – MEDICAL DIRECTOR

ALISON ROBERTSON - CHIEF NURSE AND DIRECTOR OF OPERATIONS

Dear Colleagues

The CQC (Care Quality Commission) visit could be any day now – are you ready?

In preparation there have been more than 80 cleaning and ‘mock’ CQC inspections. These have ranged from reassuring and insightful to concerning. All the visits have been useful and we are very grateful to everyone involved in organising them and to the staff who have found themselves faced with an inspection team! Thank you.

It was great to note that we have up-to-date infection control posters and notice boards up, hand rub in most beds (needs to be all), good labelling of cleaned equipment and a high level of awareness of the need to screen patients for MRSA on admission.

These areas were particularly noteworthy for their cleanliness and overall appearance:- NNU, CCU, GICU, William Drummond, Ben Weir, Keate and Vernon.

But even the best looking wards/departments will need to follow this checklist in order to be absolutely ready for our imminent CQC inspection. We owe it to ourselves and our patients to achieve this standard every day, irrespective of any inspection.

The checklist below has been compiled as a result of our ‘mock’ inspections. It reflects what has actually been seen and is still happening.

Please work through this list and take action. These actions are not just for nurses! We are all responsible for our environment.

PROBLEM	WHO OR HOW TO SOLVE IT
Dusty and dirty equipment e.g. resuscitation trolleys, drip stands, BP monitors, notes trolleys, dressing trolleys, keyboard and screen of computers on wheels	The cleaning of these items is the responsibility of nursing staff. Responsibility:- ward/department staff
Staff unsure about the CQC and how they conduct their inspections and what you might be asked	Find out more about the CQC here or follow the links from the front page of the intranet.

	Responsibility:- all staff
Dusty patient fans	Responsibility:- Mitie/SGP clean the external surfaces of wired-in electrical fans, internal surfaces are cleaned by Estates and Facilities. Contact Mitie 4000; SGP 4444. Responsibility:- nursing and cleaning staff
Green clean tape/stickers not used to identify clean equipment, not always dated/signed or out of date.	Ward/department staff must use the 'I am clean' tape (signed and dated) to confirm that equipment has been cleaned. ALWAYS check equipment is clean before use. Responsibility:- ward/department staff
Some dirty commodes	In particular, commodes must be thoroughly decontaminated after each use and checked prior to use. Responsibility:- nursing
Name and ID badges not worn or not clearly visible	Responsibility:- all staff
Bare below the elbows, looking smart and adhering to the dress code	The dress code is on the intranet and can also be found here here Responsibility:- all staff – not just those who wear uniforms
Clutter and untidiness with items stored on the floor, particularly in store rooms, sluices and staff changing rooms making it difficult to clean effectively. This was exacerbated by overstocking of items.	Boxes and equipment must be stored on shelves or other surfaces and areas kept tidy and well-organised to facilitate cleaning. Responsibility:- ward/department staff and cleaning staff
Mixed lengths of curtains, hooks missing and curtains missing in treatment and consultation rooms.	Contact bleep 7159/7664 or via MITIE helpdesk Responsibility:- ward/department staff and estates staff
Bathrooms and toilets were not always correctly gender labelled which means that patients do not always know which facility to use.	Responsibility: - Estates and Facilities to action – e-mail requirements, location and cost centre to Jenni Doman, GM Facilities/ Andrea Wright, AGM or via Facilities x1234 Option 1 the option 2. Responsibility:- ward/department staff and estates staff
Broken and unwanted items left and not removed.	Please call x3169 or e-mail Alan Hall, Waste Manager. Make use of dump-the-junk days – see eGgAugust 8 for details . Please be responsible, do not leave equipment out to be fixed without making a call about it. Further details in eG Responsibility:- all staff
Sluice - inappropriate items and storage in the sluice	Clear guidelines regarding storage are available from the infection prevention and control nurses on 2459. Please ensure your sluice is compliant and do not have clean items on open shelves. Responsibility:- ward/department staff

<p>Chlor-clean audit trail not signed/dated</p>	<p>Solution (1 tablet per 1 litre) to be made up every 24 hours, the audit trail to be signed and dated daily and displayed in sluice.</p> <p>Please ensure items are out of the reach of patients.</p> <p>Responsibility:- nursing staff</p>
<p>Single-use items not disposed of after use, especially yankeur suckers, oral feeding syringes, single use tourniquets and mouth care packs.</p>	<p>These items should be used once and discarded, including all other unused items in a pack. Yankeur suckers must not be attached to suction tubing until required, as they can gather dust and fall onto the floor. Please throw mouth care items out after use, do not leave them out.</p> <p>Responsibility:- nursing staff</p>
<p>Inappropriate storage of medicines – not all cupboards and fridges were locked and some medicine to be taken later was seen on patient lockers.</p>	<p>All cupboards and fridges to be kept locked, IV fluids to be stored securely. Controlled drug keys to be separate from the main bunch and held by the nurse in charge.</p> <p>Responsibility:- all staff involved in medicines management and administration</p>
<p>Isolation signs – wrong sign displayed, or sign displayed when not required</p>	<p>Ensure that signs are appropriate according to the patient condition. If the patient has no infection control issues the sign should be turned so that it is blank.</p> <p>Replacement signs can be obtained by calling the facilities helpdesk on ext 1234 Option 1 Option 2 or bleep 7159 / 7664</p> <p>Responsibility:- nursing staff</p>
<p>Nutrition boards not always legible</p>	<p>Responsibility:- nursing staff to update and date daily</p>
<p>Patient risk assessments and nursing care plans to be up to date and legible.</p>	<p>Responsibility:- medical, nursing and admin staff</p>
<p>Patient records not properly stored.</p>	<p>Responsibility:- medical, nursing and admin staff</p>
<p>Doors of isolation rooms not always closed</p>	<p>The side-room door must be closed unless a risk assessment has been undertaken in conjunction with the infection prevention and control team. This must be documented, clearly stating the reason why the door cannot be closed.</p> <p>Responsibility:- nursing and medical staff</p>
<p>Mattresses – insufficient evidence of weekly checks for static foam mattresses.</p>	<p>Report any issues or order pressure relieving equipment via bleep 7636. Do not keep equipment that is not in use in the clinical areas. It needs to be collected so that it can be decontaminated and maintained.</p> <p>Responsibility:- nursing staff</p>
<p>Evidence of eating and drinking in clinical areas and food stored in drug fridges.</p>	<p>Eating and drinking by staff, with the exception of water, is not permitted in clinical areas. Staff food and drinks should be stored in staff fridges, never in patient or medication fridges. If your staff fridge is not working, please report to Estates and Facilities via x1234.</p>

	Responsibility:- ward/department staff
Bins – broken or unlabelled, labels in need of replacement.	Email Alan Hall, waste advisor for advice on replacement bins and the provision of labels. Responsibility:- ALL Staff
Patient status at a glance board and other patient information on display.	Boards must be kept up to date but with the minimum amount of identifiable patient information possible, eg. substitute with symbols Responsibility:- nursing staff
Sharps bins not signed/dated or overfilled.	Close and seal sharps bins when two thirds full. Do not overfill the bins. Sign and date on assembly and closure. Responsibility:- medical and nursing staff
Bottles of fluids e.g. Betadine and Chlorhexidine opened but not dated	These must be marked with time and date of opening and disposed of 24 hours after opening. Bottles should be stored in a designated cupboard. Responsibility:- medical and nursing staff
Out-of-date posters/notices and tatty hand-written signs	Infection prevention and control notice boards should be tidy, clutter-free and up-to-date. These should display, as a minimum; the side-room priority list; saving lives annual schedule; latest saving lives action plans; latest MRSA and C. diff. ward graphs; link nurse information. Please remove any out-of-date soiled or damaged posters from walls. Responsibility:- nursing staff
Interpretation posters	More can be ordered from Jessica Barnard, Corporate Nursing Team Administrator, 020 8725 5947 or via the facilities helpdesk on the second floor, Lanesborough Wing, SGH.

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