Environmental Cleanliness Annual Report

April 2017 - March 2018

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Western Health and Social Care Trust

1.0 Introduction

The Western Health and Social Care Trust (WHSCT) is committed to ensuring that the standard of environmental cleanliness throughout each of its Health and Social Care sites and facilities, are maintained. The Trust recognizes that high standards of environmental cleanliness ensuring clean, safe and decontaminated areas are not only fundamental in minimizing the risk of Healthcare Associated Infections (HCAIs), but also play a significant role in satisfying the needs of patient and clients by giving them a sense of confidence in our facilities whilst receiving care and treatment.

The Trust Environmental Cleanliness Steering Group's primary objective is to ensure that the environment into which patients, clients, staff and members of the public enter are safe, well presented, hygienic and welcoming.

In the year reported on from 1st April 2017 – 31st March 2018 all Trusts have been set a target of 'substantive' compliance through the Controls Assurance Framework.

The WHSCT approach has been to ensure a strong focus and ownership both at local facility and team level on the development of a 'cleanliness matters' culture combined with the adoption and implementation of Infection Prevention & Control Standards.

2.0 Strategic Context

The DHSSPS (2015) policy for the Provision and Management of Cleaning Services has developed 6 key principles for the future development and delivery of cleaning services in Northern Ireland: -
- Quality
- Training
- Efficiency
- Multi-disciplinary Working
- Governance and Accountability
- Patient, Visitor and Staff Participation.

3.0 Accountability and Culture for Environmental Cleanliness

The Trust has been actively promoting a culture of "Cleanliness Matters" adopting a partnership and collaborative approach that recognises that cleanliness is everyone's responsibility not just the cleaners. This approach that encourages a culture that 'cleanliness matters' is cascaded through the organisation from Trust Board to ward level and across the Trust to community, Mental Health and Learning Disability facilities.

The Executive Director of Nursing is the Director responsible for Environmental Cleanliness and Controls Assurance and has delegated the authority and responsibility to the Assistant Director of Nursing: Governance, Safe and Effective

Care to ensure the development of a corporate system which meets the requirements of Controls Assurance Standards providing monthly reports to the Trust Board.

The Environmental Cleanliness Steering Group meets quarterly and is chaired by the Assistant Director of Nursing: Governance, Safe and Effective Care.

The Environmental Cleanliness Steering Group reports to the Risk Management Sub Committee, Corporate Management Team and Trust Board.

Quarterly Multidisciplinary Accountability meetings on Environmental Cleanliness are held to review scores and performance. Variances are discussed and actions plans agreed to address the outstanding issues. Intractable issues are escalated to the Assistant Director of Nursing: Governance, Safe and Effective Care.

4.0   Environmental Cleanliness Audits

Environmental Departmental Audits (EC Audit) are well established and are on-going in facilities across the Trust. The audits are based upon the DHSSPS "Cleanliness Matters Toolkit" (2005) and the DHSSPS (2015) Policy for the Provision and Management of Cleaning Services.

In 2016 adoption by the Trust of The Regulation and Quality Improvement Authority (RQIA) Audit Tool for EC Audits and subsequent approval by the Corporate Management Team (CMT) confirmed audit frequency following a risk based approach, with very high risk areas bi-weekly and quarterly audits for high risk areas, reducing in frequency based on the risk category and compliance with standards.

4.1 Environmental Cleanliness Managerial Audit

Annual, unannounced environmental cleanliness managerial audits are scheduled to be carried out in all wards and departments. The managerial audit team consists of senior Nursing or senior Allied Health Care Professionals, Infection Prevention and Control (IP&C), Support Services and Estates Services staff and the Ward Sister/Charge Nurse/Department Head. Attendance from IP&C is not always assured as their input is dependent on other competing priorities and in view of this the IP&C team risk assesses to ensure their attendance at the most appropriate audits. The managerial audits are the method by which the Trust will validate the information from the Departmental Audits and identify any areas for improvement.

A comparison with the WHSCT Managerial Environmental Cleanliness Audit & Compliance with unannounced audit schedules in 2009-10 and 2017-18 indicated the Trust has moved from a compliance score of 79% in 2009-2010 to a compliance score of 95% in 2017 – 2018.

4.2 Departmental Environmental Cleanliness Audits

A further exercise comparing the departmental scores during 2009-2010 and those achieved during 2017 – 2018 indicated an improvement from 89% to 97%.

These scores would indicate that during 2017-2018 there was a significant increase in the numbers of departments and wards complying with unannounced inspections with the score overall in respect to the standards achieved showing a steady increase.

4.3 Electronic Audit Systems

The "C4C" electronic system for recording environmental audits is now embedded for use across the Trust and ensures all wards/departments can view their audits and complete actions required.

5.0 Regional Review of Cleaning Service / Cleaning Standards

In January 2015 the DHSSPS issued a new policy for the management of cleaning services "Policy for the Provision and Management of Cleaning Services".

Acute cleaning plans have been completed in June 2016. These plans are reviewed on an ongoing basis as changes are made to services or new services are introduced. A sub group has been established including representatives from IP&C, Professional Nursing and support Services staff to review cleaning plans in areas of high patient throughput and greater risk. This group meets quarterly.   Community cleaning plans remain a work in progress.

6.0 Environmental Cleanliness Controls Assurance Standard (CAS)

In 2017 – 2018 the WHSCT achieved Substantive Compliance with the CAS with a score of 90%. (Appendix 1) This score reflects the concentrated effort and commitment of all staff involved in delivering the Environmental Cleanliness agenda. An action plan has been developed for approval by the EC Steering group to take forward the recommendations for year 2018 – 2019. In 2018 – 2019 revised assurance arrangements to replace CAS have been agreed to ensure appropriate assurance governance structures, operational systems and procedures are in place for environmental cleanliness. There will be seven rather than twelve assurances but current assurance and governance processes in the WHSCT will not need altered.

7.0 Ward Sisters' Charter / Our Commitments to You

In October 2006 the Minister launched the Wards Sisters' Charter. In summary this highlights that cleanliness/cleaning is part of the Ward Sisters' responsibility and that

cleaning staff should be part of the ward team in so far as cleaning staff are permanently placed in the same ward. This Charter raises awareness of the Cleanliness Strategy and highlights the input required from Nursing Staff, re-emphasising the roles and responsibilities of all staff.

In 2015 the Chief Nursing Officer undertook a regional review of the Ward Sisters' Charter replacing it with the document "Our Commitments to You". (Appendix 2) The commitment that staff will deliver care on a ward that is clean and safe was retained.

8.0   Human Resources / Training

A total of 479 Support services staff has received COSHH training in 2017 – 2018. This was delivered by the Training and Quality Department team.

A total of 479 Support services staff has received Health and Safety Awareness training in 2017 – 2018. This was delivered by the Training and Quality Department team.

8.1 British Institute of Cleaning Science (BICS's)

Support Services Staff continue to avail of the on-going British Institute of Cleaning Science (BICSc) Training programme delivered by the Training and Quality Managers and Support Services.   87% (534) staff completed their BICS's training, 644staff were inducted into the BISCs Training Scheme and 105 are currently in progress, including 10 Theatre Orderlies who are in the process of completing the BICS's training.

8.2 Environmental Cleanliness Audit and C4C training

In December 2017 training workshops on how to complete an Environmental Cleanliness audit, the use of the C4C tool and the specific responsibilities for staff in relation to RQIA standards were held across the Trust. This training highlighted to staff how to complete an environmental audit and was delivered by staff from Professional Nursing, Infection Prevention and Control, Estate Services and the Support Services Training and Quality Manager.

9.0   Estate Schemes

The Estates Department continued their focus on Environmental Cleanliness with the audit program carried out throughout all facilities. Throughout the year Estates supported the managerial audit program and addressed minor deficiencies identified through the audits using Operations and Maintenance staff. A major refurbishment scheme was carried out on Ward 43, Altnagelvin, Glenside and Maybrook Day Centres.

Works to the following areas were also completed:

Hospital/Site	Ward/Department	Repairs Completed
Altnagelvin	Ward 41, 44, 45,46, 49 & Labour Theatre	Repainting and new floors to some rooms in these wards
	Ward 31, 32 and Theatre 1	Repainting to hospital street ground and first floor; new flooring to rooms in Ward 31 & 32
	HSDU	Repainted to packing room
	Medical Imaging	Painted and flooring
	DESU	Repainted; new doors; new flooring to some areas
	Ward 20	Repainted to some areas
	Spruce House	Repainted to most areas
	Renal Unit	Repairs to defective floors and some painting
Waterside	Ward 1 & 2	Repainted ward and support block
Roe Valley	Outpatients	Some treatment rooms repainted
Residential Homes	Thackeray	Some flooring replaced
Health Centre	Strabane	Treatment and some areas downstairs
	Shantallow	Repainted and flooring to some areas
	Great James Street	Full external repaint
Other	Rossdowney House	Internal repaint and flooring upgrades

10.0   Additional work undertaken in 2017 – 2018

In 2017 – 2018 three subgroups were set up related to environmental cleanliness. These were: -
* to confirm recommendation on cleaning commodes
* to confirm recommendations on ensuring clean mattresses in wards and
* to confirm how best to ensure wash basins for patients are kept clean.

11.0   Patient Satisfaction/Experience

Review of anonymous direct patient feedback to the 10,000 Voices project has highlighted 12 specific comments re cleanliness for the period of this report. Five positive comments directly referred to wards in Altnagelvin, three positive to wards in the South West Acute Hospital and three did not specify ward or hospital. There was only one negative comment and this was as with all the comments reported back to the individual area.

There were two complaints relating to environmental cleanliness in the period of this report. Action was taken and those complaints are now closed.

12.0   User Experience

In 2017–18 it has not been possible to get a user to commit to attendance at the Environmental Cleanliness Steering Group. Moving forward on how to address this has been discussed at the Steering Group and potential solutions are now being considered for 2018 – 2019.

13.0   Regulation Quality Improvement Authority (RQIA) Inspections

During 2017-2018 the Trust had 2 unannounced RQIA Inspections in Altnagelvin that also included the Regional Healthcare Hygiene and Cleanliness Standards and Audit Tool. These inspections were undertaken in the Renal Unit and in Ward 20. The inspections included how clean and uncluttered the environment was and what guidelines were in place. Department audits and staff competency based training were reviewed. Whilst good practice was reported and there were no recommendations for the Renal Unit there were a number of recommendations for Ward 20 that were actioned and RQIA returned in May 2018 to repeat the inspection.

The RQIA reports, while highlighting some areas for improvement, indicated that standards relating to infection prevention and hygiene are of an extremely high standard and all staff are commended for this.

14.0   Reduction in Cleaning Services

Reduction of cleaning services in some areas is still the case during 2017-2018 with reduced cleaning services in certain areas.

WHSCT Controls Assurance Environmental Cleanliness Scores 2017- 2018

1	**95%**	Trusts are able to demonstrate strong and clear leadership at the highest level of management that encourages a culture of "cleanliness matters". Clear accountability arrangements for environmental cleanliness, linked to infection prevention and control, risk management and to corporate and clinical and social care governance are in place.
2	**90%**	A consistently high standard of environmental cleanliness is delivered in all Trust facilities.
3	**66%**	Service user's views on environmental cleanliness standards are integrated into the planning, implementation and monitoring process.
4	**95%**	The most appropriate cleaning methods and frequencies are applied to specific functional areas within health and social care facilities proportionate to the relative risks.
5	**85%**	Trust facilities and fixtures are maintained to an acceptable condition to enable the effective and safe cleaning of the service user environment and new facilities are designed to provide easier "cleanability".
6	**95%**	The risk management process contained within the risk management system standard is also applied to the management of improvement of Standards of Environmental Cleanliness.
7	**95%**	Staff recruitment, retention, education and development programs are developed so that staff are recruited and trained to undertake their duties in ensuring that the necessary levels of environmental cleanliness standards are achieved.
8	**95%**	Key indicators capable of showing improvements in the Standard of Environmental Cleanliness are used at all levels of the organisation, including the Board.
9	**90%**	The organisation participates in benchmarking its performance of Environmental Cleanliness.
10	**95%**	The system in place for Standards of Environmental Cleanliness, including risk management arrangements, is monitored and reviewed by management and the Board in order to make improvements to the system.
11	**95%**	The Standard of Environmental Cleanliness is assessed by appropriate internal monitoring and audit and reported to the Trust Board.
12	**90%**	The organisation's board should seek independent assurance that an appropriate and effective system of managing Standards of Environmental Cleanliness is in place, that the necessary level of controls and monitoring are being implemented and that there is visible evidence that Standards have improved.
Overall Score:	**90%**	

Our commitments to you

Welcome to
Name of ward

My name is **Angela Smith**
and I am the **Ward Sister**

Appendix 2

While you are on my ward, my team and I will do everything we can to make sure you are comfortable and well cared for.

Here are the seven commitments we make to you:

1 You will receive individual, safe, uninterrupted and high-quality care that meets your personal needs and is given by competent members of staff.

2 We will treat you with dignity, respect and compassion on a ward that is clean and safe.

3 We will behave with courtesy and consideration to your visitors.

4 You will know who you are speaking to. We will communicate with you confidentially and in a way that best suits you and your needs.

5 You will feel respected and listened to. You will have the opportunity to share your opinions about the care we provide.

6 Our decisions about your care will be made with you and with the people you wish to include. You will receive the information you need to make informed choices about your care.

7 You will be cared for by a team who are inspired by these commitments and have the authority to fulfil them.

Clear English Standard
PLAIN LANGUAGE COMMISSION
WINNING DOCUMENT