



18 Week Update Improvement Action Plan

Healthcare Improvement Scotland:

Unannounced Infection Prevention and Control Inspections of Mental Health Services

St John's Hospital, NHS Lothian

24 October 2023

Requirements and Recommendations	Action Taken/Progress	Completed Yes/No	Further action if applicable
1 NHS Lothian must ensure all staff carry out hand hygiene in line with guidance and have access to alcohol-based hand rub.	As per action plan.	Yes	
Paper towels must be stored to prevent contamination.	Escalation to IRIC, National Procurement & ARHAI Scotland 6th Feb 2024. Considered as part of wider work to reduce suicide and ligature risk in line with HSE requirements. No suitable ligature safe paper towel options available. Local risk assessed solution in place.	No	Advised on 10 th April 2024 that a national short life working group planned by NSS Scotland. Await response & guidance from National Advisors.

<p>2. NHS Lothian must ensure the care environment and patient equipment is in a good state of repair and is stored and maintained to support effective cleaning</p>	<p>As per action plan.</p> <p>Mental Health representation invited to site Programme of works meeting. This ensures new and emerging environmental issues are considered. No new or significant issues identified to date.</p>	<p>No - iterative</p>	
<p>3. NHS Lothian must review current domestic provision to ensure sufficient resources are in place to meet the cleaning requirements</p>	<p>As per action plan.</p> <p>Training for all domestics and domestic supervisors on 2016 NCSS will be complete by June 2024</p>	<p>No</p>	<p>Review of domestic staffing and schedules aligned to 2015 NCSS by end Aug 2024. This will happen once domestic training completed.</p>
<p>4. NHS Lothian must ensure that domestic staff have the relevant required knowledge to use the correct cleaning products</p>	<p>As per action plan.</p>	<p>Yes</p>	
<p>5. NHS Lothian must have effective governance that provides assurance of robust infection prevention and control measures, including adherence to an audit programme that ensures audits are fully and consistently completed with action plans developed to address any areas for improvement</p>	<p>Target completion date for review of Standard 1 has been extended until end March 2025.</p> <p>As per action plan – completion of IPC audit programme is aligned to workforce capacity and clinical priorities.</p>	<p>No</p> <p>No- iterative</p>	<p>Review and implementation of IPC workforce strategy as per DL (2024)11 in progress.</p> <p>Review of HAI/IPC corporate risk register in progress. Risk framework approach in development and supported by Healthcare Governance Committee May 2024.</p> <p>Review of wider governance structures will align to the output from the above work.</p> <p>Next update on progress with IPCT audit programme will be provided to Pan Lothian ICC in July 2024 and quarterly thereafter.</p>

	All IPCT mental health ward audits at SJH programmed for completion by end July 2024.		Input from LACAS team to support ward teams with care assurance audit processes and action planning ongoing.
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