



Improvement Action Plan

Healthcare Improvement Scotland: Unannounced acute hospital safe delivery of care inspection

Western Isles Hospital, NHS Western Isles

3-4 September 2024

Improvement Action Plan Declaration

It is the responsibility of the NHS board Chief Executive and NHS board Chair to ensure the improvement action plan is accurate and complete and that the actions are measurable, timely and will deliver sustained improvement. Actions should be implemented across the NHS board, and not just at the hospital inspected. By signing this document, the NHS board Chief Executive and NHS board Chair are agreeing to the points above. A representative from Patient/Public Involvement within the NHS should be involved in developing the improvement action plan.

NHS Board Chair

Signature: *Gillian McCannon*

Full Name: GILLIAN McCANNON

Date: 04th December 2024

NHS Board Chief Executive

Signature: *Gordon G. Jamieson*

Full Name: GORDON G. JAMIESON

Date: 04th of December 2024

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Ref:	Action Planned	Timescale to meet action	Responsibility for taking action	Progress	Date Completed
1.	<p>Domain 1: Clear vision and purpose</p> <p>NHS Western Isles must ensure as a matter of urgency all staff are provided with and complete the necessary paediatric and adult immediate life support training to safely carry out their roles</p> <p>This will support compliance with: The Code: professional standards of practice and behaviour for nurses, midwives and nursing associates (2018) and Health and Care (Staffing) (Scotland) Act (2019)</p>				
1.1	Training dates for ILS and PILS will be published and advertised via NHS Western Isles learning events calendar and weekly team briefs.	Complete	Nurse/ AHP Director and Chief Operating Officer Resuscitation Officer	Training dates for January to March 2025 were published on 21 st October 2024	21/10/2024
1.2	NHS Western Isles will ensure that available places on published dates for ILS and PILS courses from January to March 2025 will be allocated to priority staff groups in acute services which are Emergency Department staff, Clinical Support Nurses and staff working in Medical Ward 1.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Resuscitation Officer Senior charge Nurses		
1.3	NHS Western Isles will ensure that all staff within priority staff groups (ED, CSN, M1) will have a valid ILS and PILS certificate as appropriate to their role.	31/05/2025	Nurse/ AHP Director and Chief Operating Officer Resuscitation Officer Associate Nurse Director		

			Lead Nurse Acute Services Senior charge Nurse		
1.4	The resuscitation training team will distribute quarterly up to date staff training compliance reports to Heads of Service and Senior Charge Nurses. These reports will be presented to the following groups and committees: Quality and safety group, Learning Review Group, Operational Service Delivery Team and Staff Governance Committee.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Resuscitation Officer Associate Nurse Director Lead Nurse Acute Services Senior charge Nurses		
1.5	Senior Charge Nurses will complete and provide the Associate Nurse Director and Lead Nurse Acute Services with a team level action plan to monitor, deliver and resolve non-compliance with ILS and PILS training.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior charge Nurse		
1.6	The progress from team level action plans will be a key objective for SCNs. This will be reviewed by the Lead Nurse Acute Services and Associate Nurse Director with Senior Charge Nurses as part of their quarterly performance reviews, areas where there is no evidence of improvements will be discussed and managed in line with local processes.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior charge Nurse		
1.7	A Learning and Development Standard Operating Procedure will be developed, this will include a guide for staff and managers to follow regarding booking, attending and monitoring of mandatory and essential training.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Human Resources Director Head of Clinical Governance and Professional Practice		

			Organisational Development and Learning manager		
1.8	Should a staff member not attend a booked ILS or PILS course a DNA notification letter will be sent to the individual and their line manager. The line manager would follow agreed processes within the Learning and Development Standard Operating Procedure.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Resuscitation Officer Senior Charge Nurse		
2.	<p>Domain 1: Clear vision and purpose</p> <p>NHS Western Isles must ensure improvement actions within fire risk assessments are carried out, fire safety equipment is tested and maintained to ensure safe working and staff have completed mandatory fire training</p> <p>This will support compliance with NHS Scotland “Firecode” Scottish Health Technical Memorandum SHTM 83 (2017) Part 2; The Fire (Scotland) Act (2005) Part 3, and Fire Safety (Scotland) Regulations (2006)</p>				
2.1	NHS Western Isles will review outstanding actions from fire risk assessments that were completed in September 2014 and ensure any outstanding actions are completed as identified below.	31/03/2025	Human Resources Director Health and Safety Manager Fire Safety trainer Hospital Manager		
2.2	NHS Western Isles will ensure that annual fire extinguisher servicing is completed by the approved external contractor as per agreed work and maintenance schedule.	Complete	Human Resources Director Health and Safety Manager Fire Safety trainer	Fire extinguisher servicing is undertaken by an external contractor, and this was completed on 21/10/2024	21/10/2024
2.3	Approved oxygen signage will be applied to door 2.270 in Medical Ward 2 to ensure staff are aware that oxygen	Complete	Human Resources Director		29/11/2024

	is stored within the room and the associated hazards as identified within departmental fire risk assessment are communicated to staff through departmental safety briefs and the department communication plan.		Health and Safety Manager Fire Safety trainer Senior Charge Nurse		
2.4	<p>Following assessment which is to be completed by an external specialist company, smoke detectors will be fitted in room 2.270 in medical ward 2 and room 3.67 in medical ward 1.</p> <p>In the interim staff will ensure the mitigations identified within departmental fire risk assessments are followed, this will be communicated to staff through departmental safety briefs and the department communication plan.</p>	31/03/2025	Human Resources Director Health and Safety Manager Fire Safety trainer Senior Charge Nurse	External specialist contractor is due to attend WIH within 2 weeks to assess the works required so that accurate timescales for completion can be provided.	
2.5	<p>NHS Western Isles will replace existing electrical boards which have been ordered, work will start in 2025 to install the new electrical boards and test the current wiring</p> <p>In the interim increased vigilance and testing has commenced by the estates team and no causes for concern have been identified with the existing electrical wiring.</p>	31/03/2025	Human Resources Director Health and Safety Manager Fire Safety trainer Estates team	New electrical boards have been ordered, and work will commence in 2025 to install them	
2.6	NHS Western Isles will ensure that emergency lighting testing is completed as per the agreed work and maintenance schedules.	Complete	Human Resources Director Health and Safety Manager Fire Safety trainer Estates team	This is on an ongoing maintenance programme of works as per the estate's teams work plan and schedule.	28/11/2024
2.7	NHS Western Isles will develop and implement a programme of multi-agency fire evacuation drills to	31/03/2025	Human Resources Director		

	ensure that staff understand the processes to be followed in the event of a fire within their department.		Health and Safety Manager Fire Safety trainer		
2.8	NHS Western Isles will increase the number of fire marshals across all sites and will provide the required training ensuring competency is assessed and achieved.	31/03/2025	Human Resources Director Health and Safety Manager Fire Safety trainer		
2.9	Training dates for fire safety will be published for 2025 and advertised via learning events calendar and team brief.	31/12/2024	Human Resources Director Health and Safety Manager Fire Safety trainer		
2.10	NHS Western Isles will ensure that all staff within acute services complete mandatory fire safety training as appropriate to their role via the Turas learning platform.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Human Resources Director Health and Safety Manager Fire Safety trainer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		
2.11	The Health and Safety team will distribute quarterly up to date fire safety training compliance reports to Heads of Service and Senior Charge Nurses. These reports will be presented to the following groups and committees: Quality and safety group, Learning Review Group, Operational Service Delivery Team and Staff Governance Committee.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Human Resources Director Health and Safety Manager Fire Safety trainer		

			Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		
2.12	Senior Charge Nurses will complete and provide the Associate Nurse Director and Lead Nurse Acute Services with a team level action plan to monitor, deliver and resolve non-compliance with fire safety training.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		
2.13	The progress from team level action plans will be a key objective for SCNs. This will be reviewed by the Lead Nurse Acute Services and Associate Nurse Director with Senior Charge Nurses as part of their quarterly performance reviews, areas where there is no evidence of improvements will be discussed and managed in line with local processes.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		
3.	Domain 1: Clear vision and purpose NHS Western Isles must ensure all staff have completed appropriate levels of adult support and protection training relevant to their roles This will support compliance with: NHS Public Protection Accountability and Assurance Framework (2022) and Health and Care (Staffing) (Scotland) Act (2019)				
3.1	NHS Western Isles will ensure that all staff within acute services complete mandatory adult and child support and protection training as appropriate to their role via the Turas learning platform.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		

	<p><i>(All staff are required to complete child support and protection training level 1 and staff who work directly and regularly with children should complete level 2.</i></p> <p><i>All staff are required to complete adult support and protection training level 1, staff who within their role have direct and/ or substantial contact with adults should complete level 2).</i></p>				
3.2	The public protection team will distribute quarterly up to date adult and child support and protection training compliance reports to Heads of Service and Senior Charge Nurses. These reports will be presented to the following groups and committees: Quality and safety group, Learning Review Group, Operational Service Delivery Team and Staff Governance Committee.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Public Protection Lead Nurse Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		
3.3	Senior Charge Nurses will complete and provide the Associate Nurse Director and Lead Nurse Acute Services with a team level action plan to monitor, deliver and resolve non- compliance with adult and child support and protection training.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		
3.4	The progress from team level action plans will be a key objective for Senior Charge Nurses. This will be reviewed by the Lead Nurse Acute Services and Associate Nurse Director with Senior Charge Nurses as part of their quarterly performance reviews, areas where there is no evidence of improvements will be discussed and managed in line with local processes.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		

4.	<p>Domain 2: Leadership and Culture</p> <p>NHS Western Isles must ensure that senior management and leadership oversight is effective to reduce the risks for staff and patients and support staff wellbeing.</p> <p>This will support compliance with: Health and Social Care Standards (2017) criteria 4.23 & Quality Assurance Framework (2022) criteria 2.3, 2.6 and 5.5</p>				
4.1	<p>NHS Western staff wellbeing group will continue to meet every two months. Membership consists of a variety of managers from different departments and geographical locations and includes representation from subject expert such as Occupational Health, Health Promotion and staff side. Work from the group is taken forward in partnership via Area Partnership Forum and Staff Governance Committee. The Resilience Group will also maintain its standing agenda item on staff wellbeing.</p>	Complete	<p>Human Resources Director</p> <p>Organisational Development and Learning manager</p>		31/10/2024
4.2	<p>NHS Western Isles will continue all current measures in place to support staff well-being which includes the Employee Assistance Programme, continuing programme of awareness surrounding womans health, cycle to work scheme, civility workshops, implementation of mental health contacts and confidential contacts.</p> <p>NHS Western Isles Endowment Committee has recently approved the purchase of reusable cups to be issued to all staff early next year as part of the rest, hydrate and refuel campaign.</p>	31/01/2025	<p>Human Resources Director</p> <p>Organisational Development and Learning manager</p>		
4.3	<p>NHS Western Isles will establish staff focus groups to identify if staff feel that current wellbeing initiatives are</p>	31/03/2025	Human Resources Director		

	effective and if there are additional ideas that could be taken forward by the wellbeing group.		Organisational Development and Learning manager		
4.4	NHS Western Isles will continue to advertise staff wellbeing initiatives via weekly Team Brief, all staff email, social media and ensure posters are in place in physical buildings	31/12/2024	Human Resources Director Organisational Development and Learning manager		
4.5	Staff will be encouraged to raise any staff well-being concerns at hospital huddles where supportive actions can be agreed. The huddle spreadsheet will be amended to include questions regarding concerns for staff wellbeing such as concerns regarding missed breaks or staff late off shift.	Complete	Nurse/ AHP Director and Chief Operating Officer Human Resources Director Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse	December huddle spreadsheet has been amended to include questions regarding staff wellbeing	01/12/2024
5.	<p>Domain 2: Leadership and Culture</p> <p>NHS Western Isles must improve feedback to staff on incidents raised through the incident reporting system and ensure learning from incidents is used to improve safety and outcomes for patients and staff</p> <p>This will support compliance with: Quality Assurance System: Quality Assurance Framework (2022) Criteria 3.1 and Learning from adverse events through reporting and review: A national framework for Scotland (2019)</p>				
5.1	The Risk Management Team will deliver an education session to adverse event handlers and investigators on providing feedback to incident reporters. This education session will be recorded and available on the TURAS Learn platform.	28/02/2025	Nurse/ AHP Director and Chief Operating Officer Head of Clinical Governance and Professional Practice Risk Manager		

5.2	NHS Western Isles will continue to share learning from adverse events in Quarterly Adverse Events Reports which are presented at Quality and Safety Groups, Learning Review Group, Operational Service Delivery Team and Clinical Governance Committee.	Complete	Nurse/ AHP Director and Chief Operating Officer Head of Clinical Governance and Professional Practice Risk Manager		31/10/2024
5.3	The Risk Management Team will develop and publish a Quarterly Bulletin in NHS Western Isles Team Brief to share learning themes from Adverse Events Investigations.	28/02/2025	Nurse/ AHP Director and Chief Operating Officer Head of Clinical Governance and Professional Practice Risk Manager		
6.	Domain 2: Leadership and Culture NHS Western Isles must have effective processes in place for communication and dissemination of information from hospital wide huddles This will support compliance with: Health and Social Care Standards (2017) Criteria 2.6				
6.1	NHS Western Isles will ensure that daily department safety briefs are re-established to ensure that all staff who work in the department have access to patient safety concerns, infection prevention control issues, staffing concerns for the upcoming shift. Feedback from the hospital huddle should be recorded here to ensure that all staff feel informed.	Complete	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse	Department safety briefs were re-established on 14 th October 2024	14/10/2024
6.2	NHS Western Isles will ensure that the quality improvement team undertake monthly compliance audits for department safety briefs, and these are fed back to Senior Charge Nurses, Quality and Safety group, Learning Review Group, Operational Service Delivery Team and Clinical Governance Committee.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Head of Clinical Governance and Professional Practice Quality Improvement Team		

			Senior Charge Nurse		
6.3	All departments in NHS Western Isles have an agreed and approved department staff communication plan. Senior Charge Nurses should ensure that all staff have access to this and have signed that they have read it, interdepartmental communications are made through the agreed pathways within the communication plan.	Complete	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse		31/10/2024
7.	Domain 2: Leadership and Culture NHS Western Isles must ensure staff are supported within their roles and that concerns raised by staff are acted upon This will support compliance with: Health and Care (Staffing) (Scotland) Act 2019 (legislation.gov.uk)				
7.1	NHS Western Isles will ensure that all staff are aware of the existing system and process that is in place to raise and escalate concerns by using red flags on safe care and Datix if risks cannot be mitigated. Staff escalation flow charts are available in all departments which advise staff of the actions to follow and who to escalate concerns to in and out of hours.	Complete	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services Senior Charge Nurse	Additional training has been provided to staff on raising and escalating concerns and risks through Safe Care using the red flag system. Staff also identify any patient or staff safety concerns on the huddle spreadsheet which is then discussed and mitigated or escalated to on call executive director	31/10/2024
7.2	NHS Western Isles will ensure that the outcome and/or mitigations resulting from staff raising concerns are implemented and fed back to staff. This would be at the hospital huddle and the department representative would feedback mitigations put in place to the team and record these on the	Complete	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services		31/ 10/2024

	department safety brief or through Datix feedback where the investigator or handler of a Datix will email the staff member who raised the Datix to advise them of the outcome of the investigation and any lessons learnt.		Senior Charge Nurse		
8.	Domain 2: Leadership and Culture NHS Western Isles must ensure effective and appropriate governance approval and oversight of policies and procedures are in place This will support compliance with: Health and Social Care Standards (2017) Criterion 1.24 and Quality Assurance Framework (2022) Indicator 2.6				
8.1	<p>NHS Western Isles will ensure that all staff responsible for writing policies are aware of the governance processes that are already in place for approving policies and procedures.</p> <p>This information is available on the NHS Western Isles intranet page and will also be communicated to staff through weekly team brief and all staff email. Policies are reviewed and approved at clinical policies review group, HR policies review group, Corporate Management Team meetings or Resilience Group.</p>	31/12/2024	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Head of clinical Governance and Professional Practice</p>		
9.	Domain 4.1: Pathways, procedures and policies NHS Western Isles must ensure use of a selection criteria within risk assessments to support placement of patients within additional beds that are used during periods of extreme system pressure This will support compliance with: Health and Social Care Standards (2017) Criterion 1.23, 1.4, 2.11, 2.32, 4.14 and 5.22 and Quality Assurance Framework (2022) Indicator 2.1				

9.1	NHS Western Isles will develop a Standard Operating Procedure regarding the use of non-staffed contingency beds.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services		
9.2	NHS Western Isles will develop a Patient Placement Standard Operating Procedure, this will include a risk assessment template to allow informed decision making and potential risks and mitigations to be recorded when considering placement of patients.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Lead Nurse Acute Services		
10.	Domain 4.1: Pathways, procedures and policies NHS Western Isles must ensure all patients have access to call bells This will support compliance with: Health and Social Care Standards (2017) Criteria 4.11, 5.2, 5.3 and 5.4 and Healthcare Improvement Scotland Quality Framework (2018)				
10.1	NHS Western Isles Estates department will issue the Emergency Department with temporary call bells as an interim measure when they become available at the end of December 2024. In the meantime, treatment room doors will be kept open unless a clinician is in the room allowing full visibility in the department.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Estates Department Hospital Manager ED Senior Charge Nurse	NHS Western Isles temporary call bell systems are currently being utilised elsewhere whilst improvement works are underway and will deploy to ED at the end of December	
10.2	NHS Western Isles Emergency Department refurbishment is due to be commenced in February 2025 and call bells will be installed in all cubicles	30/05/2025	Nurse/ AHP Director and Chief Operating Officer Estates Department Hospital Manager ED Senior Charge Nurse		

11.	Domain 4.1: Pathways, procedures and policies NHS Western Isles must ensure that all patient care documentation is accurately and consistently completed This will support compliance with: Quality Assurance System (2022) Criterion 4.1 and relevant codes of practice of regulated healthcare professionals				
11.1	<p>Through monthly documentation compliance audits NHS Western Isles identified that despite focussed communication with clinical teams through Quality and Safety group and Friday lunchtime meetings with medical staff regarding poor audit results, little improvement was seen. A documentation short life working group was convened to review existing inpatient documentation.</p> <p>NHS Western Isles Integrated Admission Document which includes patient risk assessments, treatment escalation plans, falls risk assessments, MUST screening tools, use of bed rails assessments and NEWS 2 was reviewed and updated based on feedback from nursing and medical teams and is currently in phase one testing in clinical areas as per the model for improvement through PDSA cycles. This is being promoted on all computer log in screens and has been communicated to clinical teams via Senior Charge Nurses and email.</p> <p>Outcomes of the first PDSA cycle will be reviewed on completion and any required adjustments will be made based on staff feedback and audit results prior to PDSA cycle 2 commencing.</p>	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Head of clinical Governance and Professional Practice Quality Improvement Coordinator Senior Charge Nurse		

11.2	<p>NHS Western Isles will continue to audit and report compliance with documentation within acute wards which will include reporting on compliance with patient risk assessments, treatment escalation plans, falls risk assessments, MUST screening tools, use of bed rails assessments and NEWs 2.</p> <p>Monthly documentation audits are already in place and outcomes are shared at ward level, Quality and Safety group, Learning Review Group, Operational Service Delivery Team and Clinical Governance Committee.</p>	Complete	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Head of clinical Governance and Professional Practice</p> <p>Quality Improvement Coordinator</p> <p>Senior Charge Nurse</p>		31/10/2024
12.	<p>Domain 4.1: Pathways, procedures and policies</p> <p>NHS Western Isles must ensure the safe storage and administration of medicines at all times</p> <p>This will support compliance with the Royal Pharmaceutical Society and Royal College of Nursing Professional Guidance on the Administration of Medicines in Healthcare Settings (2019) and relevant codes of practice of regulated healthcare professions</p>				
12.1	<p>NHS Western Isles will ensure that all staff involved in the administration and storage of medication are aware of the importance of storing and administering medications as per professional regulations and local policy.</p>	31/12/2024	<p>Medical Director</p> <p>Chief Pharmacist</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Senior Charge Nurse</p>		
12.2	<p>NHS Western Isles will continue to report, investigate and share any learning from adverse events regarding storage and administration of medications.</p> <p>Any drug errors (prescribing, administering, storing) will be reported via Datix and learning will be shared at department level and via Quality and Safety Groups,</p>	Complete	<p>Medical Director</p> <p>Chief Pharmacist</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Senior Charge Nurse</p>		31/10/2024

	Learning Review Group, Operational Service Delivery Team and Clinical Governance Committee.				
13.	Domain 4.1: Pathways, procedures and policies NHS Western Isles must ensure that all staff carry out hand hygiene at appropriate moments and use personal protective equipment in line with current guidance This will support compliance with: National Infection Prevention and Control Manual (2023), Infection Prevention and Control Standards (2022)				
13.1	NHS Western Isles will remind all staff of the importance of complying with hand hygiene standards to ensure that national guidance is adhered to.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Infection Prevention Control Team Senior Charge Nurse		
13.2	NHS Western Isles Infection Prevention and Control Team will continue to undertake monthly hand hygiene audits alongside department SCIPS audits and results are reported via ICMAR at department level, SCN meetings, Learning Review Group, Operational Service Delivery Team and Clinical Governance Committee.	Complete	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Infection Prevention Control Team Senior Charge Nurse		31/10/2024
13.3	NHS Western Isles will ensure that all staff are aware of and complying with the use of personal protective equipment in line with current national guidance. This will be communicated via Hospital Huddles,	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director		

	Department Safety Briefs, all staff emails and Team Briefs.		Infection Prevention Control Team Senior Charge Nurse		
14.	Domain 4.1: Pathways procedures and policies NHS Western Isles must ensure all staff comply with the safe management of waste including sharps This will support compliance with: National Infection Prevention and Control Manual (2023)				
14.1	NHS Western Isles will remind all staff of the importance of safe use and storage of waste including sharps to ensure that national guidance is adhered to.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Infection Prevention Control Team Senior Charge Nurse		
14.2	NHS Western Isles Infection Prevention and Control Team will continue to undertake monthly safe storage of waste including sharps audits alongside department SCIPS audits. Results are reported via ICMAR at department level, SCN meetings, Learning Review Group, Operational Service Delivery Team and Clinical Governance Committee.	Complete	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Infection Prevention Control Team Senior Charge Nurse		31/10/2024
15.	Domain 4.1: Pathways, procedures and policies NHS Western Isles must ensure cleaning products are stored safely and securely This will support compliance with: National Infection Prevention and Control Manual (2023)				

15.1	NHS Western Isles will ensure that all staff are aware of and comply with the published COSHH guidance regarding the safe storage of cleaning supplies.	31/12/2024	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Infection Prevention Control Team Senior Charge Nurse		
15.2	Infection Prevention and Control Teams and Senior Charge Nurses to undertake spot checks to ensure that cleaning supplies are stored correctly. Outcomes will be fed back to Senior Charge Nurses at department level and Lead Nurse Acute Services escalating if required to Quality and Safety Group, Learning Review Group, Operational Services Delivery Team and Clinical Governance Committee.	31/03/2025	Nurse/ AHP Director and Chief Operating Officer Associate Nurse Director Infection Prevention Control Team Senior Charge Nurse		
16.	<p>Domain 4.3: Pathways, procedures and policies</p> <p>NHS Western Isles must ensure that decisions making regarding staffing risks and mitigations are open and transparent and aligned with patient acuity</p> <p>This will support compliance with: Health and Care (Staffing) (Scotland) Act 2019</p>				
17.	<p>Domain 4.3: Pathways, procedures and policies</p> <p>NHS Western Isles must consider skill mix, dependency and complexity of patients to support staff to apply professional judgement when declaring safe to start</p> <p>This will support compliance with: Health and Care (Staffing) (Scotland) Act 2019</p>				
18.	<p>Domain 4.3: Pathways, procedures and policies</p>				

	<p>NHS Western Isles must ensure a robust system in place consistently to assess and capture real time staffing across all professions to ensure clear management oversight</p> <p>This will support compliance with: Health and Care (Staffing) (Scotland) Act 2019</p>				
19.	<p>Domain 4.3: Pathways, procedures and policies</p> <p>NHS Western Isles must ensure clear real time staffing data is consistently recorded and communicated and clear escalation processes and any mitigations/ inability to mitigate are recorded clearly and accurately</p> <p>This will support compliance with: Health and Care (Staffing) (Scotland) Act 2019</p>				
16-19.1	<p>NHS Western Isles will review existing huddle processes and ensure when staffing concerns are raised any mitigations put in place or staff deployment between departments takes into consideration patient acuity and skill mix and that this is recorded in Safe Care at least twice daily.</p>	Complete	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Clinical Support Nurses</p> <p>Department Leads</p>		18/11/2024
16-19.2	<p>NHS Western Isles will ensure that all staff disciplines who are covered by the Health and Care (Staffing) (Scotland) Act 2019 are using Safe Care to record Real Time Staffing Assessment and will apply professional judgement to Safe Care at each census period to confirm that they agree with the RAGG status or amend as appropriate.</p> <p>Staff groups covered by the HCSA are Nursing and Midwifery, Medical and Dental, AHPs, Pharmacy, Healthcare Scientists and Chaplains.</p>	31/03/2025	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Clinical Support Nurses</p> <p>Department Leads</p>	<p>Safe Care and use of Professional Judgement is fully embedded in acute services and work continues with other teams and services to fully implement the use of Safe Care across all staff groups covered by the HCSA.</p>	

16-19.3	<p>NHS Western Isles will share monthly Safe Care compliance rates with Senior Charge Nurses in inpatient areas to monitor and ensure that staff are completing Safe Care census data twice daily.</p> <p>Completion of Safe Care census data will be checked by Lead Nurse Acute Services/ Associate Nurse Director during office hours and Clinical Support Nurses out of hours and departments prompted if census data has not been inputted.</p>	Complete	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Senior Charge Nurses</p>	<p>Weekly Safe Care compliance rates have been shared with SCNs in inpatient areas since 07/10/2024.</p> <p>Compliance in October 2024 was an average of 80% in inpatient areas.</p>	07/10/2024
16-19.4	<p>NHS Western Isles will ensure that any staffing mitigations put in place as a response to concerns raised are recorded in Safe Care and if unable to mitigate the risk this will be escalated to the appropriate manager and a red flag applied as per NHS Western Isles Safe Care Standard Operating Procedure and staffing escalation flowcharts.</p> <p>Any unmitigated staffing risks will be escalated to the on-call Executive Director.</p>	Complete	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Clinical Support Nurses</p> <p>Department Leads</p>		31/10/2024
16-19.5	<p>Alongside the mandated quarterly Board HealthCare Staffing Act reports NHS Western Isles will present a quarterly Safe Staffing report to Quality and Safety Groups, Strategic Workforce Group and Staff and Clinical Governance Committees.</p> <p>This will report on Safe Care compliance across the organisation, application of Professional Judgement, number of red flags raised and mitigated and any consequences of risks that could not be mitigated.</p>	31/01/2025	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Workforce Lead</p>		
20.	Domain 4.3: Pathways, procedures and policies				

	<p>NHS Western Isles must ensure that there are processes in place to support the consistent application of the common staffing method, demonstrating triangulation of quality, safety and workforce data to inform staffing requirements and where appropriate service improvements. This includes that the principles of the common staffing method are applied including having a robust mechanism for feedback to staff about the use of the common staffing method and staffing decisions made as a result</p> <p>This will support compliance with: Health and Care (Staffing) (Scotland) Act 2019</p>				
20.1	<p>NHS Western Isles will develop a Standard Operating Procedure for the application of the Common Staffing Method.</p> <p>Once completed it will be reviewed and approved through the Strategic Workforce Group and Clinical Policies Group.</p>	31/03/2025	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Workforce Lead</p>		
20.2	<p>NHS Western Isles workforce lead will continue to support clinical team leads to apply the common staffing method following workload tool runs.</p> <p>Workload tool run and common staffing method reports will be presented to the Strategic Workforce Group and Clinical and Staff Governance Committees.</p>	31/03/2025	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Associate Nurse Director</p> <p>Lead Nurse Acute Services</p> <p>Workforce Lead</p>		
21.	<p>Domain 6: Dignity and respect</p> <p>NHS Western Isles must ensure that patient dignity is maintained at all times. This includes but is not limited to access to shower facilities for all patients</p> <p>This will support compliance with: Quality Assurance Framework (2022) indicators 6.1 and 6.4 and Health and Social Care Standards (2017) criteria 1.4, 1.19 and 5.2</p>				
21.1	<p>NHS Western Isles will reassess the timescales for improvement work/refurbishment in Medical Ward 2 however Erisort ward can be utilised as additional showering facilities when not in use.</p>	31/03/2025	<p>Nurse/ AHP Director and Chief Operating Officer</p> <p>Estates Department</p>	2024/25 Capital funding is already fully allocated, assessment would be for	

			Hospital Manager	allocation of 2025/26 capital funding.	
22.	Domain 6: Dignity and respect NHS Western Isles must ensure safe and effective policies and procedures are in place for all CCTV cameras in use. CCTV cameras must be operated in line with national regulation, guidance and local policy and staff are aware of and apply correct procedures This will support compliance with: Quality Health and Social Care Standards (2017) criterion 2.7				
22.1	NHS Western Isles will review and update existing CCTV policy, this will be approved through Resilience Group.	28/02/2025	Chief Executive Resilience Officer	Final draft of an updated CCTV policy has been completed.	