





RAISING AWARENESS	We are continuing to engage with different groups of staff to brief them on the findings of the survey and facilitate workshops where there are robust discussions regarding actions for improvement to the system.			ON- GOING
ADMISSION TO HOSPITAL 	<p>WAITING TIMES: Reduce Emergency Department waiting times.</p> <p>Waiting times measured and reported.</p>	<ol style="list-style-type: none"> 1. In our Emergency Department activity and waiting times are actively measured at 6 and 9 hour intervals by the Senior Management Team. Any issues identified for patients are escalated. 2. Each day we have a meeting where activity levels for our Emergency Department are reviewed. 3. We have a process in place to oversee patient flow within the hospital on a daily basis. 4. Patients are informed of waiting times in ED. 5. A double triage system is proposed which will enable us to selectively review patients waiting in the Emergency Department. 		ON- GOING
CARE ON THE WARD 	<p>NUTRITION: Improve hospital food and nutrition.</p>	<ol style="list-style-type: none"> 1. We are briefing all disciplines of staff on the findings of this survey: <ul style="list-style-type: none"> – We have actively posted survey results on digital media and results are also displayed on posters throughout the hospital. – We have an active Nutritional Steering Committee in place in our hospital. – We have put a process in place for provision of replacement hot meals to alleviate missed meals. – The menus have been reviewed & changed to ensure lunches are now freshly cooked. – All menus have been reviewed to contribute to the overall well-being & recovery of our patients. – We have provided education on nutrition for Healthcare Assistants and Catering staff. – We have introduced a new snack round for patients. – We are continuously auditing & surveying patient satisfaction on their nutritional needs and making appropriate changes. – Staff have been trained to provide for patients who require specific Feeding, Eating, Drinking & Swallowing needs in our hospital. 2. Senior Management are in the process of working on a system to ensure that patients will be undisturbed during Protected Mealtimes, Medical staff will be encouraged to take their own meal breaks at this time. 3. The National Draft Policy for Nutrition will be ready for implementation in the hospital in 2019. 		ON- GOING
EXAMINATION DIAGNOSIS & TREATMENT 	<p>COMMUNICATION: Information on medication effects and side effects will be provided to patients while in hospital.</p>	<ol style="list-style-type: none"> 1. We have put in place an education programme to enable medical staff to counsel patients on newly prescribed medications. 2. Patient information leaflets are now available on the Hospital Staff Hub which is accessible by staff on every computer terminal within departments ensuring easy printing. These information leaflets can be used by staff to counsel patients on the medications. 3. We have introduced Anticoagulation Counselling Service throughout the hospital for patients who require this service. 4. Clinical Nurse Specialists continue to support their patient cohort with good communication on medication. 5. There is an ongoing inventory of medication leaflets being compiled. All patient information leaflets are in the process of being standardised. 		ON- GOING

DISCHARGE OR TRANSFER 	COMMUNICATION: Provide more information to patients at discharge.	1. We have a multidisciplinary group to focus on the discharge letter and discharge prescriptions for patients on discharge.	ON- GOING
		2. We have in place a policy on the management of patients who are commenced on New Oral Anticoagulant (NOAC), Direct Oral Anticoagulants (DOAC) and Warfarin medications. Where possible Pharmacy Staff provide counseling services to patients on NOAC & DOAC medication. Hospital approved information leaflets on NOAC & DOAC are available in the clinical areas.	
		3. We have added patient information leaflets when available to our Hospital Medicines Management Policy.	
		4. We now have contact details for the hospital in all Discharge letters should patients have any concerns upon discharge.	
		5. We have established a "Getting you home" campaign.	
		6. Audit of GP's re discharge letter planned	
		7. Discharge policy needs to be completed and implemented	
		8. Information leaflet drafted for patients on preparing for discharge	
CONTINUOUS IMPROVEMENT	COMMUNICATION: Winter flu vaccine actively promoted.	1. There is a major campaign to encourage all staff to participate in the Active flu campaign.	ON- GOING