




CARE ON THE WARD 	NUTRITION: Improve hospital food and nutrition.	1. We have improved the menu for patients with renal disease to ensure enough balance, variety and choice.	2018
		2. The creation of high protein, high calorie menu for all patients identified as high risk, for malnutrition continuously being developed and monitored.	2018
		3. Protected mealtimes will continue to be supported and monitored. Improvements have been sustained during 2018.	Q1 2019
		4. Staff rotas have been amended in 2018 to ensure that sufficient support and assistance is provided to patients during meal-times.	
EXAMINATION DIAGNOSIS & TREATMENT 	COMMUNICATION: Improve supply of written patient information.	1. An information booklet for in-patients has been updated and made available to patients. – Patients are encouraged to ask questions about their care and treatment, patient prompts have been incorporated into the revised and improved patient booklet, which all patients received upon admission to hospital.	2018
		2. A patient advocate has been invited to deliver education sessions for staff on communications skills.	ON-GOING
	COMMUNICATION: Increase awareness amongst patients to speak to someone about their worries and fears.	1. Information aimed at patients encourages and invite patients to speak to staff about their worries and fears, this patient prompt is incorporated into the information provided to patients upon admission	ON-GOING
		2. Clinical nurse specialists and staff nurses take more time to ask patients if there is anything they would like to discuss, and they are increasing their visibility across the hospital.	
		3. Leadership through the medication safety committee, promote the importance of staff explaining and providing information on all new medicines to patients.	
		4. Awareness raising amongst staff about providing information to patients in concise and understandable ways and then repeating key information throughout the patient stay to ensure that patients understand all relevant information about their health and follow-up care.	
	COMMUNICATION: Promoting improved communication skills and effective ward round communication amongst staff.	1. Workshops on staff induction continue to will raise awareness and provide information for staff on the importance of communication as a priority for improving patient experience.	ON-GOING
		2. Education Sessions for staff on how to "Break Bad News" will continue.	
		3. Awareness raising in relation to the importance of patient privacy is being promoted. Ensuring that the environment is conducive to discussion and that patients privacy is respected.	
		4. Patient prompts made available to patients encourage patients to ask questions and to seek as much information as they need in relation to their care and treatment.	
DISCHARGE OR TRANSFER 	COMMUNICATION: Improve the Discharge Planning Process.	1. Staff are actively encouraging patient /family involvement in discharge planning process.	ON-GOING
		2. Patient prompts designed to encourage patients and their families are incorporated into information booklets provided to patients and encourage patients to be actively involved and engaged in discharge planning and their arrangements for going home.	
		3. All clinical staff are encouraged to inform patients and nominated family members in accessible language about the patients health condition and invite patients to take part in the care practices to support their competence and confidence in care giving at home.	
		4. The in-patient information booklet informs patients about who the patient is to contact if they have a problem following discharge from hospital. Patients will be provided with written information about the warning signs to look out for and who to contact if there is a problem after discharge.	

PATIENT EXPERIENCE	DIGNITY & RESPECT AND PRIVACY: Improving and sustaining patient experience.	1. Continue to use patient feedback and address areas identified for improvement.	ON- GOING
		2. The Values in Action Programme is actively promoted across the hospital.	
		3. The Healthy Ireland Programme “Every Contact Counts” will be implemented in 2019.	
		4. The hospital CEO will use the NPES 2018 findings to inform Quality Improvement Priorities across the hospital.	
The CEO of UL Hospitals is fully committed to implementing and supporting this plan.			