

 **ADMISSION TO HOSPITAL**

| AREA FOR IMPROVEMENT   | SPECIFIC QIP   | QIP ACTIONS   | WHAT WILL IMPROVE?   | TIMELINE |
|--|--|---|--|----------|
| Doctors and nurses do not always give patients' family or someone close information. The patient is not always given information about how to manage their condition. Doctors in ED do not always explain the patient's condition and treatment. | <ul style="list-style-type: none"> <li>Roll out of the National Healthcare Communication Programme for staff in the Emergency Department and inpatient wards in the Midland Regional Hospital Portlaoise.</li> </ul> | <ul style="list-style-type: none"> <li>Train Peer Facilitators in the delivery of the NHCP.</li> <li>Schedule Training dates.</li> <li>Issue invitations to workshops.</li> </ul> | <ul style="list-style-type: none"> <li>Staff will further develop communication skills and interactions with our patients and their families.</li> <li>Improvement in communication skills.</li> </ul> | Q1 2023  |

 **CARE ON THE WARD**

| AREA FOR IMPROVEMENT   | SPECIFIC QIP  | QIP ACTIONS  | WHAT WILL IMPROVE?  | TIMELINE |
|--|---|--|---|----------|
| Patients do not know whom to talk to about their worries and fears. Patients do not know how their family or someone close can talk to a doctor. | <ul style="list-style-type: none"> <li>Introduction of a Hospital Patient Information leaflet.</li> </ul> | <ul style="list-style-type: none"> <li>Develop a Patient Information Leaflet.</li> </ul> | <ul style="list-style-type: none"> <li>Hospital information will be provided to patients on admission.</li> <li>Patients will know who to talk to about their worries and fears when in hospital. Patients will know how their family or someone close can talk to a doctor.</li> </ul> | Q4 2022  |

 **DISCHARGE OR TRANSFER**

| AREA FOR IMPROVEMENT  | SPECIFIC QIP   | QIP ACTIONS   | WHAT WILL IMPROVE?   | TIMELINE |
|---|--|---|--|----------|
| Patients are not advised of who to contact if they require information or support after discharge. Patients need to be Involved more in decisions about discharge, Patients are not informed what danger signals to look out for after discharge. | <ul style="list-style-type: none"> <li>Embedding Patient Discharge Information Leaflet.</li> </ul> | <ul style="list-style-type: none"> <li>QPS develop Patient Discharge Information Leaflet.</li> <li>Share leaflet with the discharge working group and the Senior Management Team (SMT).</li> <li>Share leaflet with staff for feedback and comment.</li> <li>Incorporate feedback into the leaflet and agree with the discharge working group and the SMT.</li> <li>Provide The Discharge Information Leaflet to all patients on admission to hospital to enable them to plan for their discharge and prepare any questions they would like to ask prior to discharge.</li> </ul> | <ul style="list-style-type: none"> <li>Patients will be prepared for discharge equipped with a tool to advise them of how to plan for their discharge, by writing down questions.</li> <li>Patients will know who to contact after discharge if they require assistance or need more information about their medications.</li> </ul> | Q4 2022  |