CARE ON THE WARD

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Replacement meal.	• All patients who miss a meal will be offered a substantial replacement meal. • While an all-day menu is available, these meal packs including the salad is the alternative for patients whom miss a meal or who are admitted to the hospital later in the evening. • The salad option is to provide a more substantial meal to patients.	• Communication to all Nursing and HCA on the availability of the all day menu and replacement meal. • A meal pack containing a salad and a small desert is placed in each ward servery fridge once suppers have been served. • Salads available in overnight fridge in all serveries.	• Improved patient experience. • Substantial meal replacement offered as part of daily practice.	This project is currently in progress. The project will be reviewed quarterly and will be completed in Q4 2022.

DISCHARGE OR TRANSFER

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Medication Safety on Discharge.	• All patients will be aware of the side effects of any new medicines commenced during admission.	• Promotion of access to supporting drug information resources via medication Monday updates, ward huddles, weblinks, Med Safety Working Groups and Drugs & Therapeutic Committee feedback to staff. • Promotion by consultants at ward rounds and MDT. • Allocate time for a discharge meeting (sharing & discussion) of information with each patient for discharge: a discharge nurse is identified at each shift who will take responsibility for safe discharge and information giving.	• Staff access to appropriate resources. • Patients/family/carers understand the relevant side effects of new medication. • Where specialist support is needed, staff make relevant referrals.	This project is currently in progress. The project will be reviewed quarterly and will be completed by Q1 2023.
Danger Signals to look out for on discharge.	• All patients are informed of any danger signals to watch out for on discharge.	• Re-education of staff on how to involve patient in safe discharge planning and what danger signs to communicate on discharge. • This will be Led by Practice Development ADON, CPC & CSF with CNM ensuring patient receive & understand relevant discharge leaflets e.g. falls, post op & what to expect upon discharge. • Allocate time for a discharge meeting (sharing & discussion) of information with each patient for discharge. • A discharge nurse is identified at each shift who will take responsibility for safe discharge and information giving.	• Patients will be informed of the danger signals to watch out for when discharged home. • Staff will continue to work with patients and families on safe discharge planning.	This project is currently in progress. The project will be reviewed quarterly and will be completed by Q2 2023.