ि CARE ON THE WARD						
AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE		
Staff not having enough time to talk to patients during their stay in hospital.	<ul> <li>Implement Hospital Volunteer programme. Seek psychology resource for patients who need this resource. (The hospital does not have any psychology resource to support patients who need this specialist support).</li> <li>Seek additional social work resource to support patients in relation to fears etc. around discharge etc.</li> <li>The hospital has only 1 pastoral care resource and this service needs to be expanded. Seek cancer nurse funding for support of newly diagnosed and existing cancer inpatients. (The hospital does not have any cancer nurse supports despite many patients being diagnosed and admitted with cancer care support requirements).</li> </ul>	<ul> <li>Instigate a training programme and orientation for Volunteers meet and Greet in Hospital.</li> <li>Review current visiting restrictions to allow visiting to become more patient centred.</li> </ul>	• Better patient experience for the patient.	Q3 2023		

AREA FOR IMPROVEMENT	SPECIFIC QIP	QIP ACTIONS	WHAT WILL IMPROVE?	TIMELINE
Patient unaware of side effects of some medications, paper information not available.	<ul> <li>Promote the use of WHO Med safe APP. (The MedSafe app an initiative of the World Health Organization seeks to educate patients and the general public through the 5 key moments where action taken can reduce the risk of medication- related harm), advertise in ED waiting area and OPD waiting area, perform education piece to patients for those patients who express an interest in downloading APP. Promote support with family members/support person. Implement joint quality imitative with Pharmacy department to promote awareness of side effects with patients.</li> </ul>	<ul> <li>Advertise the use of MED SAFE to patients and their carers, stand in front foyer in hospital during Medication safety week.</li> </ul>	• MED safe can be used as a passport document for patients accessing ED and MAU.	Q3 2023
Communication to family members and patients about their condition, follow up information regarding community care and contacting their G.P.	<ul> <li>Hospital website has been updated to include a digital description of medications and their side effects. A multidisciplinary team huddle should take place for each patient 24-hours prior to the patient being discharged. 24-hours to discharge initiative should include a discharge letter for each patient to be given to them as they leave hospital explaining danger signs in their condition and who in the hospital they should communicate with if they condition deteriorates within 48-hours post discharge.</li> </ul>	Promote the National Communication programme.	Greater MDT     involvement and     community care     involvement for     nursing and HSCP     care of patients     upon discharge     to minimise     unnecessary visits     to acute setting for     patients. Improve     the discharge letter     turnaround times to     G.P.s for patients     upon discharge     from the hospital     including pharmacy     prescriptions.	Q3 2023