



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte

Report of the unannounced inspection at St Michael's Hospital, Dun Laoghaire, Dublin

Monitoring programme for unannounced inspections undertaken
against the National Standards for the Prevention and Control of
Healthcare Associated Infections

Date of on-site inspection: 26 February 2015

About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is the independent Authority established to drive high quality and safe care for people using our health and social care services. HIQA's role is to promote sustainable improvements, safeguard people using health and social care services, support informed decisions on how services are delivered, and promote person-centred care for the benefit of the public.

The Authority's mandate to date extends across the quality and safety of the public, private (within its social care function) and voluntary sectors. Reporting to the Minister for Health and the Minister for Children and Youth Affairs, the Health Information and Quality Authority has statutory responsibility for:

- **Setting Standards for Health and Social Services** – Developing person-centred standards, based on evidence and best international practice, for those health and social care services in Ireland that by law are required to be regulated by the Authority.
- **Supporting Improvement** – Supporting services to implement standards by providing education in quality improvement tools and methodologies.
- **Social Services Inspectorate** – Registering and inspecting residential centres for dependent people and inspecting children detention schools, foster care services and child protection services.
- **Monitoring Healthcare Quality and Safety** – Monitoring the quality and safety of health and personal social care services and investigating as necessary serious concerns about the health and welfare of people who use these services.
- **Health Technology Assessment** – Ensuring the best outcome for people who use our health services and best use of resources by evaluating the clinical and cost effectiveness of drugs, equipment, diagnostic techniques and health promotion activities.
- **Health Information** – Advising on the efficient and secure collection and sharing of health information, evaluating information resources and publishing information about the delivery and performance of Ireland's health and social care services.

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1. Introduction

The Health Information and Quality Authority (the Authority) carries out unannounced inspections in public acute hospitals in Ireland to monitor compliance with the *National Standards for the Prevention and Control of Healthcare Associated Infections*.¹ The inspection approach taken by the Authority is outlined in guidance available on the Authority's website, www.hiqa.ie – *Guide: Monitoring Programme for unannounced inspections undertaken against the National Standards for the Prevention and Control of Healthcare Associated Infections*.²

The purpose of the unannounced inspection is to assess hygiene as experienced by patients at any given time. It focuses specifically on the observation of the day-to-day delivery of hygiene services, in particular environmental and hand hygiene under the following standards:

- Standard 3: Environment and facilities management
- Standard 6: Hand hygiene.

Other Standards may be observed and reported on if concerns arise during the course of an inspection. It is important to note that the Standards are not assessed in their entirety during an unannounced inspection and therefore findings reported are related to a particular criterion within a Standard which was observed during an inspection. The Authority uses hygiene observation tools to gather information about the cleanliness of the environment and equipment as well as monitoring hand hygiene practice in one to three clinical areas depending on the size of the hospital. The Authority's approach to an unannounced inspection against these Standards includes provision for re-inspection within six weeks if standards on the day of the inspection are poor. This aims to drive improvement between inspections. In addition, in 2015, unannounced inspections will aim to identify progress made at each hospital since the previous unannounced inspection conducted in 2014.

An unannounced inspection was carried out at St Michael's Hospital on 26 February 2015 by Authorised Persons from the Authority, Alice Doherty and Leanne Crowe, between 10:15hrs and 15:10hrs. The area assessed was:

- **St Joseph's Ward** which is a 20-bedded surgical and medical ward consisting of two four-bedded rooms, one of which was being refurbished at the time of the inspection, and 12 single rooms which are used for isolation purposes when required.

In addition, the level of progress made in the implementation of the quality improvement plan (QIP) prepared after the unannounced inspection in 2014 was discussed with senior management.

The Authority would like to acknowledge the cooperation of staff with this unannounced inspection.

2. St Michael's Hospital Profile[‡]

St Michael's Hospital was founded in 1876 and was governed by the Sisters of Mercy. Transfer of ownership of St Michael's to the Religious Sisters of Charity took place in March 2001. In 2001, additional public beds were opened in the former St Michael's Private Hospital in conjunction with the then Eastern Regional Health Authority to further reduce patient waiting lists in the region. St Michael's Hospital is now part of the St Vincent's Healthcare Group which includes St Vincent's University Hospital and St Vincent's Private Hospital. St Michael's Hospital is an acute general hospital serving the community and patients of South County Dublin and Wicklow. The hospital has 120 inpatient beds incorporating seven-day, five-day and day care options. The hospital provides facilities for acute medical and surgical patients, outpatient clinics and an enhanced 8am-8pm daily Emergency Department service, in association with St Vincent's University Hospital. The hospital also provides a varied range of general and specialist services which include:

- anti-coagulant monitoring services
- cardiac rehabilitation programme
- diabetes unit
- heart failure unit
- pulmonary rehabilitation care
- pelvic floor unit.

St Michael's is a teaching hospital and is affiliated with University College Dublin as part of the St Vincent's Healthcare Group for Medical and Nursing training.

[‡] The hospital profile information contained in this section has been provided to the Authority by the hospital, and has not been verified by the Authority.

3. Findings

This report outlines the Authority's overall assessment in relation to the inspection, and includes key findings of relevance. A list of additional low-level findings relating to non-compliance with the standards has been provided to the hospital for completion. However, the overall nature of all of the findings are fully summarised within this report.

The report is structured as follows:

- **Section 3.1** outlines the level of progress made in the implementation of the QIP prepared after the unannounced inspection on 19 February 2014.
- **Section 3.2** presents the key findings of the unannounced inspection on 26 February 2015.
- **Section 3.3** describes the key findings relating to hand hygiene under the headings of the five key elements of the World Health Organization (WHO) multimodal improvement strategy³ during the unannounced inspection on 26 February 2015.

3.1 Progress since the unannounced inspection on 19 February 2014

Following the unannounced inspection in 2014, St Michael's Hospital established a sub-committee to draft and implement QIPs that would resolve issues identified during the inspection. For example, construction staff and some hospital staff received training on aspergillosis from May 2014, and since the beginning of 2015 training on aspergillosis will be provided for all staff. The hospital's tissue viability nurse is conducting an audit of all mattresses and cushion foams in the hospital, and damaged items will be replaced accordingly. Some action plans are also still ongoing throughout the hospital, such as painting, refurbishment of wheels on equipment, the replacement of sinks and the refurbishment of bathrooms. The Authority acknowledges that the hospital has taken on board the recommendations of the 2014 unannounced inspection and is working towards improving the general facilities and clinical environments throughout the hospital.

3.2 Key findings of the unannounced inspection on 26 February 2015

Patient equipment

Patient equipment on St Joseph's Ward was generally clean with some exceptions. The interior surfaces of three temperature probe holders were unclean, and one holder contained two used covers, suggesting that the equipment had not been cleaned after patient use. The interior edges of three oxygen saturation probes were also unclean. Cleaning records for patient equipment were viewed and it was noted that some records prior to the inspection were not completed for both temperature and oxygen saturation probes. This matter should be reviewed.

Patient environment

The patient areas on St Joseph's Ward were generally clean and well maintained. Varying levels of dust were observed on ledges over some patient beds, on the wheel areas of bedside tables and on the undercarriage of a patient bed. While two mattresses inspected were clean, pinprick holes were observed on a third mattress cover and the mattress was heavily stained. This was reported to the ward manager during the inspection, and the Authority was subsequently told that the mattress had been taken out of circulation and the condition of all other mattresses on the ward was being checked.

Water flushing

Water flushing records viewed by the Authority showed that they had not been fully completed on St Joseph's Ward on three days in January and February 2015. The Authority was subsequently informed that the hospital was assured that the flushing had been done in line with hospital policy on these days. In response, an action plan was implemented by the hospital and records will now be signed and counter signed by the responsible persons.

3.3 Key findings relating to hand hygiene

3.3.1 System change³: *ensuring that the necessary infrastructure is in place to allow healthcare workers to practice hand hygiene.*

- The design of some clinical hand wash sinks on St Joseph's Ward did not conform to Health Building Note 00-10 Part C: Sanitary assemblies.⁴ The Authority was subsequently informed that this will be addressed in phase II of the ward refurbishment which is scheduled to be completed by Quarter 3 2015.
- There was no alcohol hand-rub in one patient zone in the four-bedded ward.

3.3.2 Training/education³: *providing regular training on the importance of hand hygiene, based on the 'My 5 Moments for Hand Hygiene' approach, and the correct procedures for handrubbing and handwashing, to all healthcare workers.*

- The majority of staff currently working on St Joseph's Ward (nine out of 11) had completed hand hygiene training within the previous two years. Overall, 91% of staff in the hospital had completed hand hygiene training between January 2014 and the time of this inspection.

3.3.3 Evaluation and feedback³: monitoring hand hygiene practices and infrastructure, along with related perceptions and knowledge among health-care workers, while providing performance and results feedback to staff.

National hand hygiene audit results

- St Michael's Hospital participates in the national hand hygiene audits which are published twice a year.⁵ Compliance at the end of 2014 was just below the Health Service Executive's (HSE's) national target of 90%.⁶

Period 1-7	Result
Period 1 March/April 2011	83.3%
Period 2 October/November 2011	81.4%
Period 3 May/June 2012	85.9%
Period 4 October/November 2012	85.1%
Period 5 May/June 2013	89.0%
Period 6 October/November 2013	90.0%
Period 7 May/June 2014	89.0%
Period 8 October/November 2014	89.5%

Source: Health Protection Surveillance Centre – national hand hygiene audit results.⁵

Local hand hygiene audit results

- St Joseph's Ward was included in the national hand hygiene audit in October/November 2014 and achieved 93.3% compliance, surpassing the HSE target of 90%.

Observation of hand hygiene opportunities

Authorised Persons observed hand hygiene opportunities using a small sample of staff in the inspected areas. This is intended to replicate the experience at the individual patient level over a short period of time. It is important to note that the results of the small sample observed is not statistically significant and therefore results on hand hygiene compliance do not represent all groups of staff across the hospital as a whole. In addition results derived should not be used for the purpose of external benchmarking.

The underlying principles of observation during inspections are based on guidelines promoted by the WHO⁷ and the HSE.⁸ In addition, Authorised Persons may observe other important components of hand hygiene practices which are not reported in national hand hygiene audits but may be recorded as optional data. These include the duration, technique^γ and recognised barriers to good hand hygiene practice. These components of hand hygiene are only documented when they are clearly observed (uninterrupted and unobstructed) during an inspection. Such an approach aims to highlight areas where practice could be further enhanced beyond the dataset reported nationally.

The Authority observed three hand hygiene opportunities in total during the inspection. Hand hygiene opportunities observed comprised the following:

- two before touching a patient
- one after touching patient surroundings.

The three hand hygiene opportunities were taken.

3.4.4 Reminders in the workplace³: *prompting and reminding healthcare workers about the importance of hand hygiene and about the appropriate indications and procedures for performing it.*

- Hand hygiene advisory posters were available, up-to-date, clean and appropriately displayed in the areas inspected at St Michael's Hospital.

3.3.5 Institutional safety climate³: *creating an environment and the perceptions that facilitate awareness-raising about patient safety issues while guaranteeing consideration of hand hygiene improvement as a high priority at all levels.*

- The average compliances achieved by St Michael's Hospital in the national hand hygiene audits in 2013 and 2014 were just below the HSE's national target of 90%. The hospital needs to continue to build on hand hygiene compliances achieved to date to ensure that good hand hygiene practice is sustained.

4. Summary

Patient equipment and the patient areas on St Joseph's Ward were generally clean and well maintained with some exceptions. The majority of staff are up-to-date with hand hygiene training and the hospital's compliance in national hand hygiene audits is just below the HSE's national target.

^γ The inspectors observe if all areas of hands are washed or alcohol hand rub applied to cover all areas of hands.

5. Next steps

St Michael's Hospital must now revise and amend its QIP that prioritises the improvements necessary to fully comply with the Standards. This QIP must be approved by the service provider's identified individual who has overall executive accountability, responsibility and authority for the delivery of high quality, safe and reliable services. The QIP must be published by the hospital on its website within six weeks of the date of publication of this report and at that time, provide the Authority with details of the web link to the QIP.

It is the responsibility of St Michael's Hospital to formulate, resource and execute its QIP to completion. The Authority will continue to monitor the hospital's progress in implementing its QIP, as well as relevant outcome measurements and key performance indicators. Such an approach intends to assure the public that the hospital is implementing and meeting the Standards, and is making quality and safety improvements that safeguard patients.

6. References[‡]

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[‡] All online references were accessed at the time of preparing this report.

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