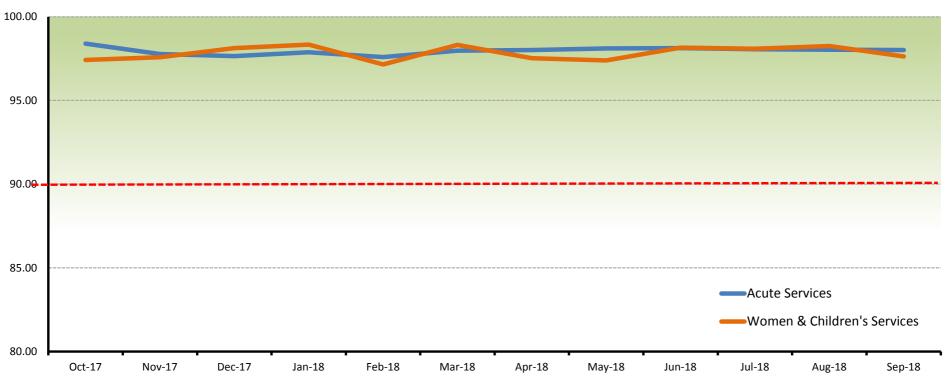


Trust Board Environmental Cleanliness Audit Report Overview July - September 2018

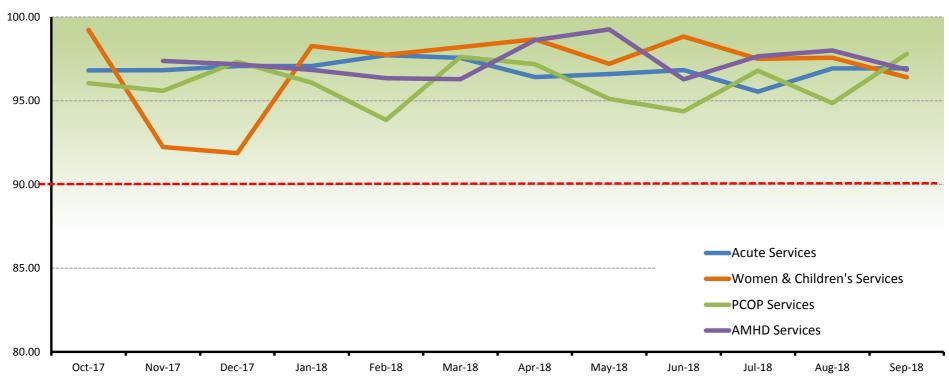
	September 2010
Bi-Monthly:	
July <u>:</u>	
Scores less than 75%:	None
Partial-compliant	ALT-Cath Lab 1
1 out of 2 audits completed	ALT-Endoscopy
and reported:	ALT-Ward 50
Overall Compliance:	87%
August:	
Scores less than 75%:	None
Partial-compliant	SWAH-DPU Theatres
1 out of 2 audits completed	
and reported:	
Overall Compliance:	92%
September:	
Scores less than 75%:	None
Partial-compliant	ALT-Ward 50
1 out of 2 audits completed	
and reported:	
Overall Compliance:	92%
Quarterly:	
Scores less than 75%:	Lisnaskea HC Treatment Room (C = 68%)
No audit done:	ALT-Pharmacy Dispensary Area
	ALT-Ward 1
	OHPCC-Pharmacy Dispensary Area
	OHPCC-Ward 5 Palliative
	SWAH - Ward 6
	SWAH-Pharmacy
End of the quarter	000/
compliance:	90%
6-Monthly:	
Scores less than 75%:	Lisnaskea Health Centre AHP (P = 50%)
	Irvinestown Health Centre Podiatry (C=71%;
	P=65%; E=45%)
No audit done:	Foyle Disability Resource Centre
	Hillside Day Centre, Strabane
	SWAH - Ambulatory Day Care
	-

End of the 6-month compliance:	80%
Managerial:	
Scores less than 75%:	Carrickmore Health Centre (P=70%; E=50%)
	Irvinestown Health Centre (C=72%; P=59%)
	Irvinestown Podiatry (C=71%; P=65%; E=45%)
	Lisnaskea Health Centre (C=73%; P=64%)
	Lisnaskea HC Treatment Room (C=69%)
	Lisnaskea Podiatry (P=50%)
	Rathmore Belleek Health Centre (P=57%)
	Waterside Health Centre (P=72%)
	T&F Erne House (C=69%)
Compliance to date:	44%

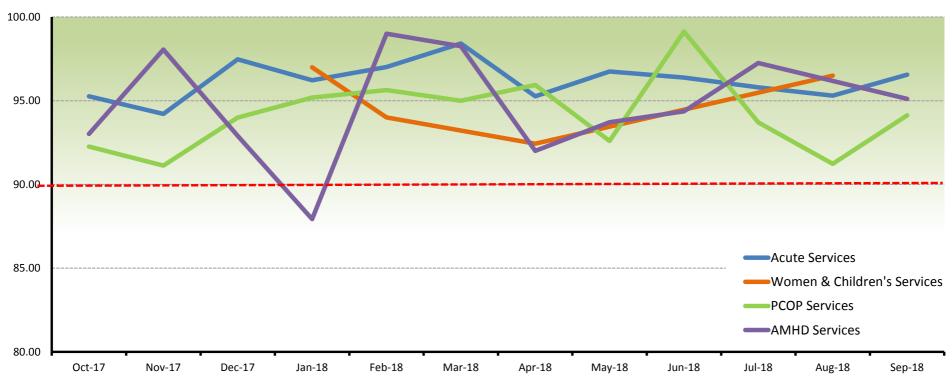
Directorates' Bi-Monthly Environmental Cleanliness Audits Average Scores



Directorates' Quarterly Environmental Cleanliness Audits Average Scores



Directorates' 6-Monthly Environmental Cleanliness Audits Average Scores





Managerial Environmental Cleanliness Audit Report

- 1 The Managerial Audit is an unannounced audit conducted by a team of Senior Staff with the objective of providing check and balance of self-assessed audits.
- 2 One (1) full audit per year per ward / department is required to be completed.
- 3 By the end of each quarter, each Division should have at least accomplished 25% compliance rating.
- 4 Action should be taken against results that have high discrepancy in scores between the managerial audit and ward audit.

Ward / Facility	Date of Managerial	Managerial Composite Managerial Audit Scores to Date						Ward Audit	
	Audit	Overall	С	Р	Е	Overall	С	Р	Е
Acute Services - Surgery									
1 ALT-DESU									
2 ALT-ICU	Apr-18	97	94	97	100				
3 ALT-HDU	Apr-18	97	96	96	100				
4 ALT-Theatre - 1	Jul-18	93	95	86	100				
5 ALT-Theatre - 2	Jul-18	96	95	93	100				
6 ALT-Theatre - 3	Jul-18	95	97	92	96				
7 ALT-Theatre - 4	Jul-18	95	95	98	97				
8 ALT-Theatre - 5	Jul-18	95	97	89	100				
9 ALT-Theatre - 6	Jul-18	96	92	94	100				
10 ALT-Theatre - 7	Jul-18	98	95	98	100				
11 ALT-Theatres - Recovery									
12 ALT-DCU - Theatre									
13 ALT-DCU - Eye Theatre									
14 ALT-Ward 31	Jun-18	97	99	96	96				
15 ALT-EPU									
16 ALT-Ward 2 TOU	May-18	91	91	91	90				
17 ALT-Ward 32 ESU	Jun-18	97	98	98	97				
18 ALT-Ward 7	Jun-18	93	93	96	91				
19 ALT-Head & Neck Ward	Jun-18	91	94	97	83				
20 ALT-Elective Orthopaedics Unit									
21 ALT-Fracture Clinic	Aug-18	96	99	90	98				
22 ALT-Ophthalmology									
23 ALT-Outpatients	Jun-18	97	92	100	100				
24 ALT-Pre-Op Assessment									
25 OHPCC-Main Theatres /Anaesthetic Rooms									
26 OHPCC-DPU Ward Area	May-18	94	90	93	99				
27 OHPCC-Outpatients	Jun-18	94	93	90	98				

Ward / Facility	Date of Managerial	Composi	te Manageria	al Audit Scor	es to Date	Previous Ward Audit			
	Audit	Overall	С	Р	Е	Overall	С	Р	Е
28 OHPCC-Pain Clinic	Jun-18	93	97	86	95				
29 OHPCC-Pre-Op Assessment									
30 SWAH-Critical Care	Jul-18	98	100	99	96				
31 SWAH-DPU Ward	Sep-18	92	94	88	94				
32 SWAH-Ward 8	Apr-18	88	84	91	89				
33 SWAH-Ward 9	Jul-18	92	87	94	94				
34 SWAH-Main Theatres	Apr-18	91	92	87	94				
35 SWAH-Outpatients	Apr-18	91	88	93	94				
36 SWAH-Pre-Op Assessment	Apr-18	91	88	93	94				
37 Roe Valley-Outpatients	· ·								
38 Urology Specialist Nurses Clinic									
Number of Audits This Month			'	1	•				
Compliance Rating Todate			68	3%					
Acute Services - Emergency									
1 ALT-A&E			l	I	T T		I		
2 ALT-AMU (Ward 41)				1			1		
3 ALT-Anderson's House	Sep-18	97	94	98	98		1		
4 ALT-Cardiac Investigations	3 9 9 1 9		<u> </u>				1		
5 ALT-Cath Lab	May-18	84	84	74	94		1		
6 ALT-Cath Lab 2	May-18	84	84	74	94		1		
7 ALT-CCU		<u> </u>	<u> </u>		<u> </u>		1		
8 ALT-ACU	Jul-18	97	94	100	97		1		
9 ALT-Medical Ward 1	May-18	96	97	93	98		1		
10 ALT-Renal Unit							1		
11 ALT-Ward 20 General Medicine									
12 ALT-Rheumatology Ward									
13 ALT-Ward 21 Respiratory Nurse Specialists									
14 ALT-Ward 3	Sep-18	92	93	94	89				
15 ALT-Ward 44	Jun-18	97	99	93	97				
16 SWAH-Accident & Emergency	Apr-18	86	92	78	88				
17 SWAH-Cardiac Unit	Jul-18	87	82	84	94				
18 SWAH-Medical & Surgical Assessment Unit	Jul-18	90	91	87	93				
19 SWAH-Ward 2	May-18	92	90	89	96				
20 SWAH-Ward 3	May-18	89	96	77	93				
21 SWAH-Cardiac Investigations	May-18	86	81	92	85				
22 OHPCC-Cardiac Assessment Unit									
23 OHPCC-Cardiac Investigations									
24 OHPCC-Renal Unit	May-18	98	96	99	99				
25 OHPCC-Urgent Care Centre	Jun-18	94	97	85	100				

Ward / Facility	Date of Managerial	Composi	te Manageria	al Audit Scor	es to Date		Previous V	Vard Audit	
	Audit	Overall	С	Р	E	Overall	С	Р	Е
Number of Audits This Month	•			2					
Compliance Rating Todate			6	0%					
Acute Services - Diagnostics & Clinical Support	:								
1 ALT-Biochemistry									
2 ALT-Breast Screening Unit									
3 ALT-Cancer Centre Radiology									
4 ALT-Cancer OPD									
5 ALT-Endoscopy									
6 ALT-Laboratory									
7 ALT-Medical Imaging									
8 ALT-Body Store									
9 ALT-Sperrin Suite	Sep-18	96	95	94	99				
10 ALT-Ward 50	Aug-18	97	97	94	99				
11 Roe Valley-Xray Dept									
12 SWAH-Laboratory									
13 SWAH-Medical Imaging									
14 SWAH-Body Store	May-18	91	93	85	95				
15 SWAH-DPU Endoscopy	Sep-18	94	92	96	96				
16 OHPCC-Endoscopy									
17 OHPCC-Outreach Chemotherapy									
18 OHPCC-Medical Imaging									
Number of Audits This Month				2				•	
Compliance Rating Todate			2:	2%					
Acute Services - Pharmacy									
1 ALT-Pharmacy	Jun-18	93	87	91	100				
2 OHPCC-Pharmacy	Jun-18	94	99	84	100				
3 SWAH-Pharmacy		<u> </u>							
Number of Audits This Month				0					
Compliance Rating Todate			6.	 7%					
Women & Children's Services - Health Care									
1 ALT-Ward 48 (Labour Ward)	T							I	
2 ALT-Ward 47 (Midwifery Led)	+			 					
3 ALT-Ward 45 (Ante-natal)	+			 					
4 ALT-Ward 46 (Post-natal)	 								
5 ALT-Ward 43 Gynaecology	1								
6 OHPCC-Womens & Family Health	1								
7 SWAH-Delivery Suite	1			1					
8 SWAH-Women's Health Centre	1								

Ward / Facility	Date of Managerial	Composi	te Manageria	al Audit Score	es to Date	Previous Ward Audit			
	Audit	Overall	С	Р	Е	Overall	С	Р	Е
9 ALT-Ward 49 (NNICU)									
10 ALT-Ward 6									
11 ALT-Butterfly Lodge									
12 ALT-Ward 16									
13 OHPCC-Childrens Centre	Jul-18	96	92	98	96				
14 SWAH-Neonatal Unit	Aug-18	98	98	99	96				
15 SWAH-Childrens Ambulatory Care	Jun-18	96	97	91	98				
16 SWAH-Childrens Ward									
17 SWAH-Childrens Outpatients	Sep-18	92	94	87	94				
18 ALT-GUM Clinic									
19 SWAH-Milk Bank									
Number of Audits This Month				<u>.</u>	•		•		
Compliance Rating Todate			2	1%					
Women & Children's Services - Physical Disabilit	v								
1 ALT-Spruce House									
Foyle Disability Resource Centre									
3 Drumcoo Day Centre, Eniskillen						1			
Number of Audits This Month				0					
Compliance Rating Todate			0	<u> </u> %					
PCOP Services - Primary & Community Care				70					
Carrickmore Health Centre	Sep-18	65	76	50	70				
Castlederg Health Centre	00p 10	00	10	00	10				
3 Claudy Health Centre									
4 Claudy Health Centre Treatment Room									
5 Dungiven Health Centre									
6 Dungiven Health Centre Treatment Room									
7 Erne Health Centre Treatment Room									
8 Great James St Health Centre	Aug-18	88	85	87	92				
Great James St Health Centre Treatment Room	Aug-18	99	97	100	100				
10 Irvinestown Health Centre	Aug-18	69	72	59	75				
11 Irvinestown Health Centre Treatment Room	Aug-18	94	90	95	96		1		
12 Irvinestown Podiatry	Aug-18	61	71	65	45		†		
13 Limavady Health Centre	Aug-18	91	98	80	96		1		
14 Lisnaskea Dental	Jul-18	91	93	86	95				
15 Lisnaskea Health Centre	Jul-18	76	73	64	91				
16 Lisnaskea Health Centre Treatment Room	Jul-18	83	69	85	96				
17 Lisnaskea Podiatry	Jul-18	83	100	50	100				
18 Omagh HC Treatment Room	May-18	97	96	97	98				
19 Rapid Response Omagh	, i								

Ward / Facility	Date of Managerial	Composi	te Manageria	I Audit Score	es to Date		Previous V	Ward Audit	
	Audit	Overall	С	Р	Е	Overall	С	Р	Е
20 Rapid Response Derry									
21 Rathmore Belleek Health Centre	Jun-18	94	97	85	100				
22 Rathmore Belleek Health Centre Treatment Roo	Jul-18	80	89	57	93				
23 RRN Fermanagh	Jul-18	97	96	96	100				
24 Shantallow Health Centre									
25 Strabane Health Centre	Jun-18	88	92	81	90				
26 Strabane Health Centre Treatment Room	Jun-18	90	85	92	93				
27 Waterside Health Centre	Jul-18	80	76	72	94				
28 Waterside Health Centre Treatment Room	Jul-18	92	89	95	93				
Number of Audits This Month			•	1					
Compliance Rating Todate			68	3%					
PCOP Services - Secondary Care									
1 ALT-Ward 19 OPALS									
2 ALT-Ward 40 (22)									
3 ALT-Ward 42 (21)									
4 SWAH - Ambulatory Day Care									
5 SWAH - Ward 5	May-18	89	87	93	86				
6 SWAH - Ward 6	Jun-18	92	95	87	93				
7 SWAH - Ward 7	May-18	92	91	91	93				
8 OHPCC-Rehab Ward									
9 OHPCC-Ward 5 Palliative									
10 Ward 3 - Waterside	Jun-18	97	97	98	97				
11 Ward 4 - Waterside	Jun-18	93	88	93	98				
12 Waterside Hospital Main Areas	Sep-18	86	87	85	86				
Number of Audits This Month			•	1					
Compliance Rating Todate			50)%					
PCOP Services - Mental Health									
1 T&F-Ash Villa (formerly Larch A)	May-18	92	92	90	94				
2 T&F-Oak A&B (formerly Pine A&B)	May-18	91	92	89	91				
3 Waterside-Ward 1	May-18	99	100	100	98				
4 Waterside-Ward 2	May-18	99	100	99	97				
Number of Audits This Month				D					
Compliance Rating Todate			10	0%					
PCOP Services - HSDU									
1 ALT-HSDU									
2 OHPCC-HSDU									
Number of Audits This Month				Ò					
Compliance Rating Todate			0	%					

Ward / Facility	Managerial	Composi	te Manageria	al Audit Scor	es to Date	Previous Ward Audit			
	Audit	Overall	С	Р	E	Overall	С	Р	Е
PCOP Services - Care & Accommodation									
1 Beragh Day Centre									
2 Creggan Day Centre									
3 Dromore Day Centre									
4 Drumhaw Day Centre									
5 Foyleville Day Centre	Sep-18	88	89	96	80				
6 Gortin Day Centre									
7 Gortmore Day Centre									
8 Greenfield Residential Home									
9 Newtownstewart Day Centre									
10 Rectory Field Residential Home	Sep-18	93	92	93	93				
11 Seymour Gardens Residential Home	Sep-18	91	89	94	89				
12 Strabane Day Centre	·								
13 Tempo Road Day Centre									
14 Thackery Day Centre									
15 Thackery Place Residential Home									
16 William Street Residential Home	Sep-18	87	89	83	88				
Number of Audits This Month				4	•			•	
Compliance Rating Todate			2:	5%					
PCOP Services - AHP									
1 ALT-AHP Centre Adults				1					
2 ALT-Orthoptic Room									
3 ALT-Podiatry	Aug-18	93	87	92	100				
4 Bridgeview House Child Development Centre	- J								
5 OHPCC-Adult's AHP									
6 OHPCC-Children's AHP	Jul-18	96	93	96	99				
7 OHPCC-Orthoptic	May-18	84	78	77	95				
8 OHPCC-Podiatry		<u>-</u>	_						
9 RV-Physiotherapy									
10 SWAH-Adult's AHP	May-18	91	95	83	94				
11 SWAH-Children's AHP	Sep-18	92	94	87	94				
12 SWAH-Orthoptics	May-18	83	87	77	95				
13 SWAH-Podiatry	May-18	75	77	63	85				
14 Woodview Assessment Clinic									
Number of Audits This Month				1					
Compliance Rating Todate			5(0%					
Adult Mental Health & Disability Services - Menta	l Health								
1 Acute Day Care, Gransha			l	I				I	
Alcohol & Drugs, Woodlea House									

Ward / Facility	Date of Managerial	Composi	te Manageria	al Audit Score	es to Date		Previous \	Ward Audit	
	Audit	Overall	С	Р	Е	Overall	С	Р	Е
3 Alcohol & Drugs (ATU), Omagh									
4 Arden Centre, Limavady									
5 Beech Villa, T&F									
6 CMHT Key Worker Accommodation, SWAH									
7 Cityside Recovery Team, Slievemore House									
8 Grangewood-Carrick	Jul-18	98	99	99	95				
9 Grangewood-Evish	Jul-18	98	98	98	97				
10 Elm Ward, T&F	Sep-18	89	95	86	87				
11 Erne House, T&F	Sep-18	81	69	79	95				
12 Forensic Service, T&F	Sep-18	90	91	88	90				
13 Hillside Day Centre, Strabane	·								
14 Limavady Recovery Team									
15 Lime Ward, T&F	Sep-18	97	99	98	94				
16 Lisnamallard Industries, Omagh	·								
17 Lissan House, Omagh									
18 Melrose Day Centre									
19 Primary Care Liaison, Oldbridge House									
20 Psychiatric Intensive Care, T&F	Sep-18	84	79	86	89				
21 Psychological Therapies, Oldbridge House	·								
22 Rowan Villa, T&F	Sep-18	96	96	100	92				
23 Strabane Recovery Team									
24 Waterside Recovery Team									
Number of Audits This Month	•			6	•		•		
Compliance Rating Todate			33	3%					
Adult Mental Health & Disability Services - Lear	ning Disability								
Beltany Respite Facility	Sep-18	92	95	90	89				
2 Benbradagh ATC	1 2 2 2								
Berryburn Centre, Lakeview Hospital	Sep-18	95	97	92	97				
4 Cottage Adult Respite			-	-					
5 Creamery Residential Facility									
6 Evergreen Centre									
7 Glenside ATC	Sep-18	99	98	98	99				
8 Lackaboy 2									
9 Lakeview Support Area	Sep-18	98	100	95	100				
10 Lakeview									
11 Lisnaskea									
12 Mantlin Residential Facility									
13 Maybrook ATC							1		
14 Omagh Centre									

Ward / Facility	Date of Managerial	Composi	te Manageria	al Audit Score	es to Date	Previous Ward Audit			
	Audit	Overall	С	Р	Е	Overall	С	Р	Е
15 Ralphs Close									
16 Strule Lodge	Sep-18	89	93	81	92				
Number of Audits This Month				5					
Compliance Rating Todate			3′	1%					
TOTAL NUMBER OF AUDITS THIS MONTH		23							
OVERALL COMPLIANCE RATING			44	4%					