

TRUST BOARD
September 2016

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| AGENDA ITEM NUMBER | 7.2 | |
| TITLE OF PAPER | National PLACE audit report | |
| Confidential | NO | |
| Suitable for public access | YES | |
| PLEASE DETAIL BELOW THE OTHER SUB-COMMITTEE(S), MEETINGS THIS PAPER HAS BEEN VIEWED | | |
| None | | |
| <u>STRATEGIC OBJECTIVE(S):</u> | | |
| Best outcomes | | The general appearance of the environment is important in giving all our stakeholders confidence in the clinical setting they are coming into for the medical treatment and care. |
| Excellent experience | | Having a well maintained and clean environment helps reduce infections and fosters good infection control practices. Appetising and nutritious food encourages patients to eat and helps in their recovery and wellbeing. |
| Skilled & motivated teams | | Patients make up at least 50% of the assessment team and representatives from Patients Panel, Public Governors and Staff made up the team at this year's audit |
| Top productivity | | Cleanliness and food have scored above the national averages at our hospitals whereas privacy, dignity and wellbeing, plus condition, appearance and maintenance were marginally below the national average scoring. |
| EXECUTIVE SUMMARY | | |
| <p>The purpose of this paper is to brief the Trust Board on this year's PLACE results, provide comparison to the national averages and propose some of the necessary works required to address low scoring areas.</p> <p>Food and cleanliness both scored above the national averages at our hospitals whereas privacy, dignity and wellbeing, plus condition, appearance and maintenance were below the national average scoring.</p> | | |
| RECOMMENDATION: | The Trust Board is asked to note the report. | |
| SPECIFIC ISSUES CHECKLIST: | | |
| Quality and safety | The report covers quality and safety issues related to non-clinical risks. | |
| Patient impact | This paper provides assurance that Ashford and St Peter's is a clean and well maintained safe place to visit and receive healthcare. | |
| Employee | This paper provides assurance to its staff that Ashford and St Peter's Trust is a | |

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| | responsible employer providing a clean and well maintained environment to work. |
| Other stakeholder | This paper provides assurance to CCGs, CQC, Monitor, and other agencies that the Trust is meeting its responsibilities. |
| Equality & diversity | There are no specific equality and diversity issues. |
| Finance | There is the need for the Trust to continue to adequately fund cleanliness and a well maintained environment to comply with CQC registration and maintain stakeholder confidence. |
| Legal | There is potential for the CQC to take enforcement action if the Trust fails in demonstrating compliance with the Hygiene code as set out in the Health and Social Care Act 2008 (2015) |
| Link to Board Assurance Framework Principle Risk | |
| AUTHOR NAME/ROLE | William Britton Head of Facilities Support Services. Chris Bell Director of Estates and Facilities |
| PRESENTED BY DIRECTOR NAME/ROLE | Valerie Bartlett, Deputy Chief Executive |
| DATE | September 2016 |
| BOARD ACTION | Receive assurance |

1. Summary of approval sought

The purpose of this paper is to brief the Trust Board on this year's PLACE results, provide comparison to the national averages and propose some of the necessary works required to address low scoring areas

2. Background and scope

This annual summary has been prepared to provide assurance to the Trust Board that it is managing its Estate and Facilities Patients care environment and thereby complying with its statutory duties sets out key areas of current performance and action taken to mitigate risk.

3. Performance highlights

- This year's St Peters PLACE inspection was carried out on the 7th March 2016.
- This year's Ashford PLACE inspection was carried out on the 6th April 2016.

Scores are detailed below in table 1:

| Areas: | Ashford Hospital | St Peter's Hospital | National Average |
|---------------------------------------|------------------|---------------------|------------------|
| Cleanliness | 99.37% | 99.63% | 98.06% |
| Food | 90.21% | 95.86% | 88.24% |
| Organisation Food | 83.56% | 87.83% | 87.01% |
| Ward Food | 96.12% | 98.22% | 88.96% |
| Privacy, Dignity and Wellbeing | 83.59% | 90.05% | 84.16% |
| Condition, Appearance and Maintenance | 92.20% | 92.95% | 93.37% |
| Dementia | 81.33% | 78.02% | 75.28% |
| Disability | 84.51% | 80.65% | 78.84% |

Table 1

Appendix 1 attached is a table that illustrates Trust performance against other Surrey Trusts.

4. Audit reports

The audit findings and reports were divided into eight key areas as follows:

4.1 Cleanliness

The Trust has scored above the national averages at both hospitals for consecutive years and is supported by the recent comments from our CQC inspectors who were also warm in their praise of cleanliness in our hospitals.

The Trust currently has an in-house Housekeeping team of 142wte who are well managed motivated and this is evidenced in the excellent staff satisfaction surveys, 95% compliance rates for mandatory training and appraisal levels that are the best in the Trust. Sickness rates are 2.8% below the Trust average and particularly low for an ancillary workforce.

The Housekeeping team were also highly commended in the Building Better Healthcare Awards in the category of Facilities Team of the Year in November 2015.

4.2 Ward Food

This section evaluated Ward food including the service, presentation and tasting and also includes, whether menus are easy to understand, and hydration. Both hospitals far exceeded the national average scores.

4.3 Organisation Food

This is a new category that covers a wide range of questions such as nutritional and hydration questions, mealtimes, choice, and government buying standards along with other service

questions. St Peters scored above the national average whereas Ashford was below due to a couple of questions with a high weighting being different, for example meals service commencing before 12pm and how many hot meal choices are available for lunch and supper. Since the audit changes have been made to comply with the new standard.

4.4 Food

This section is a combination of the above two elements Organisation Food and Ward Food scores amalgamated. This exceeds the national average and is consistent with previous inspections, surveys and the continuous improvement associated to this service.

4.5 Privacy and dignity

St Peters hospital scored well above the national averages; however Ashford was slightly under as patients do not have access to their own TV, or radio, which they do at St Peters.

4.6 Condition Appearance and Maintenance

Both hospitals scored marginally below the national averages. Our hospitals have been undergoing a programme of painting and refurbishment over the last couple of years. We continue to identify areas for improvement, have plans in place to carry out further works over the coming year and are aware of the areas in need of refurbishing.

Ward environment is an important part of the PLACE audit and there are environmental improvements that have been highlighted. There is a priority list of ward upgrades and refurbishments identified and programme over 3 years, however the lack of decanting facilities are impacting on the ability to deliver the programme. This has been raised as a risk and options / solutions are being considered, however further delays to ward investment and access will continue to see a deterioration of our ward environment.

4.7 Dementia

Dementia scored above the national averages and following the recent exemplar wards bay works on Swift and Holly wards this should improve further. An audit of the bays will take place early 2017 to establish outcomes and this will inform future capital projects and improvements. The environment associated with dementia is included in the Trust dementia strategy and is monitored through the bi monthly dementia steering group.

4.8 Disability

This is a new section to the PLACE audits and covers access, plus questions under the Equality Act 2010. The Trust scored above the national averages at both our hospitals.

5. Action plans

Actions are already underway to address some of the public condition and maintenance issues such as public toilets, replacing some of the worn entrance mats and repainting some public areas.

The action plans were developed with the assistance of the patients and public governors who lead the PLACE inspections to address some of these areas and to bring them up to the required standards. **These are attached as Appendices 2, & 3.**

6. Governance

There are quarterly Environmental Clinical Nurse meetings that include Estates and Facilities, Infection Control, and Dieticians with a set agenda covering all the PLACE topics. The meeting has minutes and actions and reports to the Patient Experience Monitoring Group.

The Health and Social Care Information Centre (HSCIC) have received the results and published the data. The data will be shown in Official Statistics and shared with the Care Quality Commission, DoH, NHSCB, CCGs (when requested) National Audit Office (when requested) and the HSCIC (for clinical quality indicators).

The results illustrate how hospitals are performing nationally and locally. Trusts are required to publish their PLACE results and to produce a short local improvement plan, indicating how the PLACE report will be used to drive improvements. The improvement plan will be managed through the Patient Experience Monitoring Group.

7. Conclusion

The Trust has continued to demonstrate high standards in cleaning and food that promote good quality service to our patients.

Environmental dementia standards are improving and the plans and future actions will continue to raise standards further in the future.

However, ward environments will continue to cause concern until there is access to wards to make improvements and significant capital investment.

8. Recommendation

The Board is asked to note the contents of this report.

Appendix 1

| | Cleanliness | Food | Organisation Food | Ward Food | Privacy, Dignity and Wellbeing | Condition Appearance and Maintenance | Dementia | Disability |
|---|---------------|---------------|----------------------|---------------|-----------------------------------|---|---------------|---------------|
| ASHFORD AND ST. PETER'S HOSPITALS TRUST | 99.61% | 95.33% | 87.43% | 98.02% | 89.44% | 92.88% | 78.33% | 81.01% |
| EPSOM AND ST HELIER HOSPITALS TRUST | 99.36% | 90.92% | 83.15% | 93.63% | 76.32% | 89.05% | 71.78% | 74.92% |
| FRIMLEY HEALTH HOSPITAL NHS | 98.16% | 84.00% | 84.41% | 82.88% | 73.93% | 89.58% | 62.19% | 68.18% |
| SASH | 99.50% | 89.95% | 86.88% | 89.42% | 81.48% | 95.57% | 68.31% | 72.77% |
| KINGSTON HOSPITAL TRUST | 96.32% | 92.13% | 93.18% | 91.95% | 88.50% | 89.88% | 58.12% | 69.83% |
| ROYAL SURREY COUNTY HOSPITAL TRUST | 99.82% | 92.21% | 91.03% | 92.61% | 88.44% | 96.43% | 89.90% | 86.30% |
| NATIONAL AVERAGES | 98.06% | 88.24% | 87.01% | 88.96% | 84.16% | 93.37% | 75.28% | 78.84% |

Comparison with local Trusts

Appendix 2

PLACE Assessment – Action Plan

Monday 14th March 2016
St Peters Hospital

Areas assessed

Cherry Ward
Holly Ward
Cedar Ward
Falcon Ward
Cherry Ward
MSSU Ward
Ash Ward
Oak Ward
Swift Ward
Kingfisher Ward
Aspen Ward
Accident and Emergency Department
Outpatients Audiology
ENT
OPD area 3
X-Ray
External Areas
Communal Areas

| Area | Work Needed | Timescale | Responsibility | Progress Status |
|-------------------|---|--|---|--|
| Holly Ward | <ul style="list-style-type: none"> Flooring inside of the bays is very damaged and in need of replacing Walls throughout the ward and back of beds damaged and in need of repair Bath shower room being used as a storeroom convert to storeroom 4C 07 | Schedule into Capital ward refurbishment program 2016/17 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| Maple Ward | <ul style="list-style-type: none"> Flooring throughout the ward is very damaged and in need of replacing Ceiling tiles need replacing in central core of the ward Walls throughout the ward and back of beds damaged and in need of repair Shower room being used as a storeroom convert to storeroom | Schedule into Capital ward refurbishment program 2016/17 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| Aspen Ward | Under bay sinks, water damage and poor damage of wood | 1 st July 2016 | Keith Hayward Estates Manager | Completed |
| Aspen Ward | Large sections of the central flooring is cracking down the middle | Assess scale of work required 1 st June 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| Swift Ward | Toilet 4D07 has dirty floor | Completed | Maciel Vinagre Housekeeping Manager | Completed |
| Swift Ward | All bays require painting | Assess scale of work required 1 st June 2016 | Graham Bigger Head of Estates and Infrastructure | Completed |
| Swift Ward | Toilet 4D07 room being used as a storeroom convert to storeroom and needs conversion of use | Assess scale of work required 1 st June 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| | | | Claire Conlan | Reported to the |

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|-------------------|--|---|--|--|
| Cedar Ward | Not all beds had hand gel on them or within easy reach | Immediately | Clinical Nurse Lead | ward manager |
| Cedar Ward | Bathroom used for storage convert to storeroom through capital bid | 1 st July 2016 | Claire Conlan Clinical Nurse Lead | Change of use temporary signage on store door |
| Cedar Ward | Visiting times signs have 2010 and need updating | Immediately | Clinical Claire Conlan nurse Lead | Completed |
| Cedar Ward | Door to bay 3 marked with tape assess whether can be cleaned off or requires painting | 1 st May 2016 | Maciel Vinagre Housekeeping Manager | Completed |
| MSSU Ward | Large sections of the central flooring is cracking down the middle | Assess scale of work required 1 st June 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| MSSU Ward | B Bay leaking sink tap | 1 st May 2016 | Keith Hayward Estates Manager | Completed. |
| MSSU Ward | B Bay toilet walls damaged | 1 st May 2016 | Keith Hayward Estates Manager | Completed. |
| MSSU Ward | Not all patients beds had antibacterial hand rub-b available | 16 th March 16 | Daniela Amy Ward Manager | Completed. |
| MSSU Ward | Bay B,E,D & C the wall panel under the sink is damaged needs replacing | 1st May 2016 | Keith Hayward Estates Manager | Completed. |
| MSSU Ward | Lights on M3 39 bathroom and 3 lights on the main corridor are not working | 1 st May 2016 | Keith Hayward Estates Manager | Completed. |
| MSSU Ward | Waste bin on C Bay needs replacing | 1 st May 2016 | Daniela Amy Ward Manager & Maciel Vinagre | Completed. |
| MSSU Ward | Privacy/confidential- medical computers screens left on and unattended by the medical staff and ward clerk not complying with below the elbow infection control policy | Immediately | Daniela Amy Ward Manager | Completed |

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|------------------|---|---|--|-----------|
| | | | | |
| MSSU Ward | Notices board not updated | 1 st May 2016 | Daniela Amy Ward Manager | Completed |
| Ash Ward | Skirting board damage on toilet 3c02 | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Ash Ward | Curtain rail in side room opposite the nurse station needs cleaning | Completed | Maciel Vinagre Housekeeping Manager | Completed |
| Ash Ward | Entrance to the wards main doors edges are damaged and handrail end edges needs replacing currently is covered with black tap | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Ash Ward | Corridor Walls damaged by bays 4 – 5 needing painting and protective paneling | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Ash Ward | 3c 07 bath – wall under shelving needs addressing and seals needs replacing the same 3c011 sink | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Ash Ward | Last bay by the parents area- damaged walls back of beds | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Ash Ward | All window sills needs re-varnishing or painted | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Ash Ward | Tiles above all the sinks tops needs re-grouting | Assess scale of work required 1 st | Keith Hayward Estates | Completed |

| | | | | |
|-----------------|--|---|---|--|
| | | June 2016 | Manager | |
| Ash Ward | Adults site by nursing station and the side rooms the floors needs replacing | Assess scale of work required 1 st June 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| Ash Ward | Wall opposite room 3c05 is damaged by water leak | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Ash Ward | Privacy- curtain on 3c13b wasn't fully closed despite doctors seeing a patient | 16 th March 2016 | Karen Spence Ward Manager | Completed |
| Oak Ward | Notices board not updated | 1 st May 2016 | Karen Spence Ward Manager | Completed |
| Oak Ward | Walls behind the beds are damaged | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Oak Ward | Toilet 3D02 walls damaged | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Oak Ward | Missing ceiling tiles on the last bay | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Oak Ward | All window sills needs re-varnishing or painted | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Oak Ward | Damage floors by the first and bay and the play area | Assess scale of work required 1 st | Andrew Grimes Head of Capital | Schedule into Capital ward |

| | | June 2016 | Projects | refurbishment program 2016/17 |
|--------------------|--|---|--|--|
| Oak Ward | Notices board not updated | 1 st May 2016 | Kristine Reyes Ward Manager & Romel Mendoza | Completed |
| Cherry Ward | Not all patients beds had antibacterial hand rub-b available | Immediately | Kristine Reyes Ward Manager & Romel Mendoza | Completed |
| Cherry Ward | Temporary signs on the side rooms doors stating to keep the doors closed also there were isolation signs but the doors were opened | 1 st May 2016 | Kristine Reyes Ward Manager & Romel Mendoza | Completed |
| Cherry Ward | Floor damaged on several rooms- needs replacing | Assess scale of work required 1 st June 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| Cherry Ward | All window sills needs re-varnishing or painted | Assess scale of work required 1 st June 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| Cherry Ward | Cracked Toilet pan on 3A11 needs replacing | 1 st May 2016 | Keith Hayward Estates Manager | Completed |
| Cherry Ward | Notices board not updated | 1 st May 2016 | Kristine Reyes Ward Manager & Romel Mendoza | Completed |
| Cherry Ward | Temporary signs around the ward and silicone on sinks needs redoing | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Cherry Ward | Relatives room, there are a variety of chairs and most of them are not wipeable | 1 st June 2016 | Kristine Reyes Ward Manager & Romel Mendoza | Completed |
| Cherry Ward | Untidy store and ceiling panels needs to be put back properly | 1 st May 2016 | Kristine Reyes Ward Manager & Romel | Completed |

| | | | Mendoza | |
|--------------------|--|---|---|---|
| Cherry Ward | Entrance to the wards main doors edges are damaged and handrail end edges needs replacing | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Cherry Ward | Equipment stored on Fire exit route | Immediately | Kristine Reyes Ward Manager & Romel Mendoza | Completed |
| Falcon Ward | Falcon Wren bay has broken corner guard that needs replacing | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Falcon Ward | Seating in the reception area is not wipe able and needs replacing | 1 st August 2016 | Clinical Nurse Lead | Reviewing furniture |
| Falcon Ward | Walls under the rail protection are damaged and require repair and boarding to further protect the walls | 1 st July 2016 | Keith Hayward Estates Manager | Completed |
| Falcon Ward | A few stained ceiling tiles need replacing mainly at the entrance to the ward | 1 st July 2016 | Keith Hayward Estates Manager | Completed |
| Joan Booker | Ward look tired and in need of total refurbishment | Assess scale of work required 1 st June 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |
| Joan Booker | Walls in bays have no wall protection behind beds | 1 st June 2016 | Graham Bigger Head of Estates and Infrastructure | Schedule into Capital ward refurbishment program 2016/17 |
| Joan Booker | Toilet A3 & A4 have no hot and cold tap identification | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Joan Booker | Toilet signage mixed signs review signage and standardize | 1 st May 2016 | Deborah Parkinson | Completed |

| | | | Clinical Nurse Lead | |
|-----------------------|---|--|--|--|
| All Wards | <p><u>Dementia friendly environment</u> requires the following that was largely missing:</p> <ul style="list-style-type: none"> • Large faced clock with date and time in all bays. • Toilet doors in a distinctive colour with a pictorial toilet sign that can be seen from all areas of the ward. • Clear signage in the ward prominently displayed, showing the hospital name and ward name. • Toilet seats, flush handles and rails in a colour that contrasts with the toilet bathroom walls and floors • Mirrors that can easily be removed if required or fixed in a way that allows for them to be temporarily covered | Work to commence on Swift Ward end two bays as a trial before being rolled out | Chris Bell Associate Director of Estates and Facilities | Schedule into Capital ward refurbishment program 2016/17 |
| All Wards | <p><u>Signage:</u></p> <p>Temporary signs were stuck to walls with either blue tac or tape. This damages the walls and makes the ward look untidy. All signs to be either attached to notice boards laminated if not in a glass frame or inserted into clip frames</p> | Assess scale of work required 1 st June 2016 | All Clinical Nurse Leaders | Ongoing |
| Communal areas | Main entrance ladies toilet middle cubicle broken door lock, plus seat sanitizer missing needs a completed refurbish - damaged walls especially around sinks and flush handles | ASAP | Keith Hayward Estates Manager | Completed |
| Communal areas | Some temporary signs advertising services need removing from main entrance wall near to Café and outside pharmacy level 2 | ASAP | Maciel Vinagre Housekeeping Manager | Completed |
| Communal areas | X-Ray equipment stored in level 3 corridor needs removing | 1 st May 2016 | Andrew Moth Radiography | Will dispose of redundant |

| | | | Lead | equipment |
|-----------------------|---|--------------------------------|---|--|
| External areas | Path outside main entrance is uneven and prone to puddles. Verge alongside path is muddy, as grass has died due to people walking on it. | 1 st September 2016 | Graham Bigger Head of Estates and Infrastructure | Completed |
| External areas | Wild flower gardens near bus stop have become untidy and full of weeds | 1 st July 2016 | Graham Bigger Head of Estates and Infrastructure | Outstanding |
| External areas | Zebra crossing required near to Abbey Block main entrance | 1 st June 2016 | Graham Bigger Head of Estates and Infrastructure | Completed |
| A&E | Temporary signs throughout were stuck to walls with either blue tac or tape. This damages the walls and makes the ward look untidy. All signs to be either attached to notice boards laminated if not in a glass frame or inserted into clip frames | 1 st May 2016 | Helen Lawrence Clinical Nurse Lead | This action will never be fully completed. Work ongoing in ED – difficult to manage due to amount of information requested to be readily visible to staff. Declutter took place on 18.06.16. New notice board have been put up. Situation being monitored. Large scale re-organisation of departmental layout planned for completion |

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|----------------|--|---|-------------------------------------|---|
| | | | | December 2016 – we will ensure notice boards etc are reviewed during this process |
| A&E | Main entrance wooden doors have become heavily damaged therefore not easy to keep clean. Review whether they can be repaired or need replacing | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| A&E | Consulting rooms 1&2,, plus emergency nurse practioner cubicle walls damaged Children's C1&2 cubicle walls damaged | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| A&E | Ceiling tile missing in majors near to door 8, plus tile cracked near to nurses station | 1 st May 2016 | Keith Hayward Estates Manager | Completed |
| A&E | CDU bays 4-6 corner of walls heavily damaged, plus wall corner entering multi-faith room damaged | 1 st May 2016 | Keith Hayward Estates Manager | Completed |
| A&E | Main entrance as in need of replacement | Assess scale of work required 1 st June 2016 | Keith Hayward Estates Manager | Completed |

Appendix 3

PLACE Assessment – Action Plan

Wednesday 6th April 2016
Ashford Hospital

Areas assessed

- Main Entrance
- Car Parks
- Chaucer Ward & Annex
- Dickens Ward
- Main Outpatients
- Public Corridors & Toilets
- Lifts & stairs
- External Areas

| Identified Issue | Work Needed | Timescale | Responsibility | Progress |
|---|--|--------------------------------|---|--|
| Hospital front entrance plant pots some are broken and empty | Repair or replace broken plant pots and paint and replant existing pots | 1 st May 2016 | Keith Hayward Estates Manager | Outstanding. |
| Main Entrance broken bollards | Two bollards have broken off and left on the grass to be disposed of | 1 st May 2016 | Mark Ball Portering Manager | Completed |
| Main Entrance car park sign by exit broken in half | Needs replacing | 1 st June 2016 | Mark Ball Portering Manager | Signage ordered |
| Courtyard between wards | Paving is stained and requires jet washing | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Main Entrance male toilet A93 L1012 | Three of the lights not working at the time of the inspection please check | ASAP | Keith Hayward Estates Manager | Completed |
| Main entrance lifts signage | Signage in lifts yellow sign peeling off, plus the other blue sign has letters missing | 1 st June 2016 | Keith Hayward Estates Manager | New signage to be ordered |
| Flat roof between the courtyards | Vegetation is growing on the flat roof and needs removing | 1 st June 2016 | Keith Hayward Estates Manager | Outstanding |
| Toilets: 3rd Floor above main entrance | Male toilet in need of refurbishment | 1 st September 2016 | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2016/17 |

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|----------------------|--|---------------------------|---|---|
| Ceiling tiles | Stained tile outside of Outpatients Echocardiogram level 2 plus a few tiles near to lifts further down the corridor | 1 st June 2016 | Keith Hayward Estates Manager | Awaiting new tiles |
| Outpatients | Male toilet 56/f70 has two of the seat pans running water consistently and may need adjusting | 1 st May 2016 | Keith Hayward Estates Manager | Completed |
| Outpatients | Reflection room has equipment stored in it drip stand that needs moving | 1 st May 2016 | Diana Lashbrook Clinical Nurse Lead | 21.04.2016 – This has been removed it was waiting for Gynae specialist nurse to pick up |
| Dickens Ward | Mattresses several of them left in corridor and need to be stored in the mattress store | Asap | Mark Ball Portering Manager | Completed |
| Dickens Ward | Drip stands bottom needs cleaning | Asap | Sue Chessman Ward Manager | Action taken Drip stands all cleaned |
| Dickens Ward | Toilet pull cords several are soiled and need replacing Source new type of cords so could be wipe able | 1 st May 2016 | Keith Hayward Estates Manager | Completed |
| Dickens Ward | Walls outside toilet 029 and by nursing station apposite the D bay holes covered needs painting and | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Dickens Ward | Discharge & admission lounge tables are very old and permanent stained that required replacement | Asap | Sue Chessman Ward Manager | Action taken League of friends are giving us a donation to get new ones |
| Dickens Ward | Floors an most all bays and side rooms have excessive wear and permanent stains–requires replacement | TBC | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2017/18 |
| Dickens Ward | Patient equipment stored on shower room 029- equipment to be removed and stored in appropriate area | Asap | Sue Chessman Ward Manager | Action taken Equipment moved |
| Dickens Ward | Temporary and unlamented signs were found nearly every toilet stating not to put wipes down the toilet- permanent signs are required | Asap | Sue Chessman Ward Manager | Action taken all paper signs not laminated have been taken down |

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| Chaucer Ward | Toilet pull cords several are soiled and need replacing Source new type of cords so could be wipe able | Asap | Keith Hayward Estates Manager | Completed |
| Chaucer Ward | Drip stands bottom needs cleaning | Asap | Omowa Sally Ward Manager | Completed |
| Chaucer Ward | Temporary and unlamented signs were found nearly every toilet stating not to put wipes down the toilet- permanent signs are required | Asap | Omowa Sally Ward Manager | Completed |
| Chaucer Ward | Floors an most all bays and side rooms have excessive wear and permanent stains–requires replacement | TBC | Andrew Grimes Head of Capital Projects | Schedule into Capital ward refurbishment program 2017/18 |
| Chaucer Ward | Toilet 011 ledge under the toilet paper is damaged needs to repairing | 1 st June 2016 | Keith Hayward Estates Manager | Completed |
| Chaucer Ward | Last shower on the left floor needs cleaning | Asap | Maciel Vinagre A Hotel Services Manager | Completed |
| Chaucer Ward | Patient equipment stored on the last shower room before going to Wordsworth equipment to be removed and stored in appropriate area | Asap | Omowa Sally Ward Manager | Room now changed to store, shower capped off and removed. |
| Chaucer Ward | Last bay toilet damaged waste bin needs to be replaced | Asap | Mark Ball Portering Manager | Schedule into Capital ward refurbishment program 2017/18 |
| Chaucer Ward Annex | Toilets walls are damaged badly (damp) needs repairing and painted, by apposite the Wordsworth nursing station and the next one | 1 st June 2016 | Keith Hayward Estates Manager | Completed |