MINISTRY OF HEALTH

REGIONAL HEALTH AUTHORITY AUDIT CONFORMANCE RESPONSE

REGION: WESTERN REGIONAL HEALTH AUTHORITY

HEALTH FACILITY & SERVICE DELIVERY AREA	NON-CONFORMANCE	RECOMMENDED / PROPOSED CORRECTIVE ACTIONS	TIMELINES	STATUS
WESTERN REGIONAL HEALTH A UTHORITY				
	Challenges in Leadership and Governance • Risk management • Implementation and monitoring of Quality Assurance (QA) programme	1. Review Regional Priorities in Quality Assurance (QA) 2. Improve risk management 3. Strengthen monitoring and Evaluation frameworks at the Regional level 4. Employ a dedicated Quality Assurance Officer 5. Determination and implementation of short, medium and long-term goals and Action Plan, with priorities and budgets and ensure monitoring and evaluation at parish levels 6. Improve supervision in high risk areas	Sept 2015 Dec 2015 Ongoing Sept 2015 Nov 2015	*1. Operational plan and priorities reviewed and shared with parish teams on September 18, 2015. This was previously done in Regional Technical Meetings and Senior Directors Meeting in May 2015 and August 2015. Focus on QA has been done in various meetings.* *2. Training in Risk Management conducted in October 2015. Risk Registers to be updated and monitored* *3. Regional Quality Assurance committee meetings held* *4. Audit monitoring meeting convened with Senior technical and Administrative September to review audit findings. Specific action plans being developed/refined and monitored* *5. Infection control training done. Gap analysis done to review staff needed to improve ability to strengthen*

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				supervision. Recruitment for key personnel to be done within the next three months
	Inadequate systems and infrastructure for Infection Prevention and Control, in particular for the high risk areas	1. Strengthen staffing at the facility level to support infection control 2. Provide guidance and tools for the Establishment / Strengthening of Infection Prevention and Control Committees at all hospitals and for Primary Care at Parish Level 3. Update Standard Operating Procedures including cleaning 4. Ensure adequate infrastructure for hand hygiene 5. Review priorities in Work Plan, for Infrastructure repairs 6. Complete infrastructure repairs in high risk areas 7. Train and retrain staff in high risk areas	Dec 2015 Dec 2015 Sept – Dec 2015 Sept- Dec2015 Sept 2015 Jan 2016- Dec	*Recruitment effected for key positions including inventory managers, operating theatre manager.* *Gap analysis to be used to develop action plan for recruitment.* *Infection Control Manuals disseminated in hospitals. High risk framework guideline is being implemented including monitoring infection in hospital and drug resistant microbes* *SOPs being posted to spur action* *Monitoring from Health Department in high risk areas is being done* *Retrofitting of areas being done and provision of hand sanitizer strengthened* *Completed and additional staff to manage infrastructure works have been employed* *Completed Intensive Care Unit (CRH) works. Other areas in progress* *Training has commenced.*

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	Inadequate and inconsistent supply of pharmaceuticals and sundries including weakness in stock and inventory management	8. Strengthen monitoring of pharmaceutical supply 9. Employ inventory managers 10. Strengthen systems to track use of drugs and sundries	Ongoing Dec 2015	*Monthly reports generated and some procurement done on open market where NHF is unable to supply.* *Recruitment process in progress for inventory managers* *IT system in development*
SAVANNA LA MAR PUBLIC GENERAL HOSPITAL				
Maternity	Lack of equipment poor lighting and inadequate supply of linen	*Procure equipment and supplies* *Repair /Replace lighting* *Improve linen management*	*Dec 2015/ongoing*	*Request made to procure items (BP Machines etc)* *Lighting issue addressed.* *Shortage of linen due to incomplete renovation of laundry.*
Operating Theatre	Routine Microbiology not done.	Trained staff to supervise Monthly Deep cleaning Routine cleaning and swabbing.	Sept 2015ongoing	*Deep cleaning and Swabbing done of OT. Awaiting* *Air Conditioning system cleaned.* *Duct cleaning scheduled for 7.11.11* *Training done for cleaning staff*
	Lack of supplies for basic function.	Reuse of supplies should not exceed manufacturer's recommendation Monitor use of supplies	Ongoing	*Increase in procurement and distribution of supplies. This process is ongoing.*
	Documentation of supplies and issues of inventory control	Improve the human resources to manage inventories	Sept 2015	*Officer identified and trained in Inventory and Supplies management.* *Better monitoring of stock.* *Improvement in supplies being made available*
Nursery	Located within Pediatric Ward with inadequate layout and no ventilator	Develop proposal to improve Nursery	Dec 2015	*Proposal developed and supported bu Issa Trust* *Renovation and relocation commenced for SCN to include compressed air. Equipment donated*

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				by ISSA Trust (no ventilator) Training being done for staff in WRHA and Issa Trust
Accident & Emergency	Lack of preventative Maintenance Schedule	Develop preventative maintenance schedule for equipment and strengthen implementation	Oct 2015	*In discussion with Regional Biomedical Unit to implement. Visit scheduled for November 24, 2015.*
	Lack of Stretchers and wheelchairs	Procure equipment	Nov 2015	*Procurement phase of three stretchers in progress.*
	Laboratory results unavailable to physicians within standard time protocol	Improve health information system	Dec 2015	*Roche implementing LAN system to link ER with Lab.*
	Difficulty in obtaining essential drugs	Strengthen drug procurement and monitoring	Ongoing	*Supply/demand problems based on NHF controls. Sourcing on open market where available*
Laundry Service	Inadequate supplies of linen	Procure additional linen Complete laundry renovations	Oct 2015	*Laundry services outsourced (CRH & FPGH). Introduction of disposables to augment supplies.*
Equipment		Procure Equipment		
	Split A/C units in OT		Dec 2015	*Central Unit being procured to be installed by December 4, 2015*
	Anesthetic Machine		Dec 2015	*Procurement process far advanced for item*
	No table top autoclave		Dec 2015	*Issa Trust consented to donate to the hospital*
	Operating Theater Beds		Dec 2015	*Procurement process far advanced for this item.*
CORNWALL REGIONAL HOSPITAL				
Operating Theatre	Inadequate management of stock and supplies	Strengthen Stock management Employ an Operating theatre manager	Sept 2015 Dec 2015	*Established the requirements and buffer stock levels.* *Recruitment of OT manager is in progress*

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	Inadequate disposables and PPEs	Procure disposables and PPEs	Sept 2015/ongoing	*Procurement in progress*
	Inadequate critical equipment	Procure equipment and supplies	Sept- Dec 2015	*Repairs done on operating theatre lights, operating theatre bed procured, 5 vital signs monitor and stretchers procured. Anesthetic machines(1) on order and three (3) prepared for tender*
	Non compliance with infection control procedures	Train and monitor staff to ensure conformance with infection control procedures	Ongoing	*Training session conducted before and post audit*
Maternity	Inadequate physical layout Inadequate equipment and supplies	Complete rehabilitative works in Maternity Unit Procure equipment and supplies	Dec 2015 Sept 2015-Apr 2016	*Project is in progress* *Procurement in progress. Items already delivered include suction, stretchers, and recovery beds*
Neonatal Unit	Inadequate adherence to infection control procedures Inadequate staffing in unit Inadequate equipment	Strengthen monitoring of staff Retrain staff in infection control practices Procure equipment and supplies Recruit additional staff	Ongoing Sept 2015/Ongoing Dec 2015 Sept 2015- Apr 2016	*Monitoring increased. Training sessions have been conducted and additional staff assigned to the area. Some equipment, PPEs and supplies procured including cots. PROMAC to assist with further infrastructure changes (in the design phase). SOPs developed for some critical procedures and others in development*
Intensive Care Unit	Inadequate tools for monitoring and support Suboptimal use of the ICU due to inadequate staff and equipment No microbiologist on staff to support services provided	Procure tools for monitoring and support Employ additional staff including microbiologist	Sept 2016/Ongoing	*Procurement in progress. New ventilators procured* *Improved use of space but staff recruitment pending. Staff granted study leave for training programmes such as critical care nursing and microbiology.*

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Linen	Inadequate linen and linen management system	Improve linen management system Repair nonfunctional washers and dryers Improve stock of linen	Sept 2016	*New washer installed* *Linen management system improved with formal systems developed and monitored to track linen* *Additional linen procured*
Maintenance	Insufficient maintenance schedules	Develop maintenance schedules where needed Strengthen maintenance systems where present	December 2016	*Additional maintenance staff employed and capacity strengthened through training* *Maintenance Schedules in development* *Outsourcing of some maintenance schedules done* *Engaged external consultants to evaluate critical equipment*
HEALTH CENTRES				
Savanna la mar Health Centre				
Environment	Inadequate Space – Waiting Area	Savanna la mar Health Centre is currently under renovation – funded by National Health Fund	Project's original end date was Oct. 6, 2015. A new date is to be determined.	*Construction in progress.*
	Toilet facilities partially cleaned	Strengthen Cleaning schedule	October 2015	*Two hourly monitoring in place to ensure adequate cleaning frequency*
Emergency Trolley, equipment and Supplies	*Absence of some antipsychotic meds and some resuscitative drugs *Inadequate number of airways	Drugs and sundries to be procured	November 2015	*Pharmacy monthly request as per need*
Human Resource & facilities Management	Lack of documentation of orientation	To share documentation of schedules with Human Resource department	Monthly	

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	Staff Meetings not held routinely	Meetings scheduled for 2nd Thursdays monthly	Immediate	*Scheduled d to be held on November 12, 2015.*
	Inadequate wheel chairs	To be procured	Budget 2016-2017	*One to be redeployed from SPGH*
	No pharmacy services	Based on proximity to hospital Pharmacy Services is accessible. In addition primary care offer pharmacy services from three health centres.	immediate	*Pharmacy services are held once per month at each location.*
	Inadequate storage facility	Area will be identified after renovation of health centre		
	Procure equipment and supplies	To be procured	By the end of November 2015-2016	*Procurement initiated for some supplies.*