

DIRECTORATE OF FACILITIES MANAGEMENT

SMART OBJECTIVES FOR 2008/9

Specific	Measurable	Actions	Resources (external)	Timescale
To have a hospital that is clean	To consistently achieve 90% on 49-point national standards of cleanliness audits	To receive monthly audits from the VLP and develop action plans for each area falling below the performance limit.	VLP to continue to complete monthly 49-point audits of all ward areas.	Immediate and On-going
			Installation of Electronic audit system	May 2008 Training June 2008
		For the housekeeping department to provide trained, motivated and regular domestic staff to all clinical areas	Support required from HR for successful recruitment of domestic staff and team leaders	Immediate and On-going
			Creation of FSA learning and development centre.	August 2008

Specific	Measurable	Actions	Resources (external)	Timescale
To have a hospital that is clean (cont.)	To consistently achieve 90% on PEAT inspections	To carry out bi-monthly ward PEAT inspections and develop action plans for areas falling below the performance limit	Inspections carried out by senior nursing and facilities managers in conjunction with ward manager and matron for the ward inspected.	Immediate and on-going
	To consistently achieve 90% on external public space inspections	To carry out monthly external public space inspections and develop action plans for areas falling below the performance limit		Immediate and on-going
	To consistently achieve 90% on internal inspections	To carry out monthly internal public space inspections and develop action plans for areas falling below the performance limit.		Immediate and on going

Specific	Measurable	Actions	Resources (external)	Timescale
To have a hospital that is clean (cont.)	Provide benchmark data on service costs	Through networking and benchmarking clubs identify a series of metrics that can be used to assess comparative costs of services	Some external support may be needed to identify cost metrics and help with networking	September 2008
	Monthly reporting of results to the Trust Board	To report the scores through the Trust Dashboard Report	Input from IM&T informatics	April 2008
To provide patients with a Quality Meal Service	To consistently achieve a score of 90% or higher for in patient feedback on the quality of the meal service	To establish a robust methodology for assessing patient satisfaction	Input from Allan Perry & IM&T in developing a statistically robust methodology	July 2008
		Carry out bi-monthly surveys on an agreed basis to establish patient satisfaction	Cecil Douglas & Paul Hepworth in association with Matron responsible for ward area	June 2008
		Develop action plans to address failures to meet standards	Cecil Douglas, Paul Hepworth, Matrons & Ward Managers	May 2008
	Benchmark meal costs	To establish the Trust cost per patient meal day and to identify similar Trusts to share this information	Finance Support to develop robust cost model and Informatics to provide information on in-patient bed-days	December 2008
	Monthly reporting of results to the Trust Board	To report the scores through the Trust Dashboard Report	IM&T, Allan Perry & Cecil Douglas	December 2008

Specific	Measurable	Actions	Resources (external)	Timescale
To develop an exemplar equipment decontamination and management service and to redevelop and single compliant endoscopy service	To set up, open, manage and maintain a validated equipment washer facility	Identify location for washer facility, design, tender and project manage construction.	Capital (secured) Estates time (secured)	September 2008
		Prepare policies and procedures governing operation of the unit]	SSD management (available)	
		Prepare business case for staffing, and operating the unit	Executive team support	
	An equipment tracking system to provide an audit trail and confirmation on equipment cleaning history and an equipment inventory for all ward based non-electrical equipment to form the basis of a decontamination register	Use inventory to establish a program of regular decontamination of all equipment that can be cleaned by equipment washer. Record standard and occasion of cleaning.	Information provided by wards and equipment manufacturers re. Item care.	September 2008
			Support from wards (matrons) to remove equipment from wards to library.	

Specific	Measurable	Actions	Resources (external)	Timescale
To develop an exemplar equipment decontamination and management service and to redevelop and single compliant endoscopy service	100% of all pieces of electrical and non-electrical equipment used in patient care with a bespoke cleaning plan	All electrical equipment and non-electrical stored or cared for in BME will have a decontamination certificate. Additionally the areas which sent it to the above departments will also sign for decontamination	Ward managers and matrons to support sign-off process. Actioned by library and EBME staff	September 2008
	Expand the equipment library to encompass more types of medical equipment. Ward based stocks reduced to zero on an agreed basis	Follow the model of Swindon and expand the service can.	Possible staff and potentially some washing machine/dryer equipment.	March 2009
	Relocate and open a new compliant endoscopy unit. Management of unit to come under dedicated manager and staff developed from closing SSD	Prepare and write business case to support development of stand alone unit	Executive team support	May 2009
		Identify location for new Endoscopy Unit, design, tender and project manage construction.	Capital (secured) Estates time (secured)	March 2009
		Prepare policies and procedures governing operation of the unit	SSD management (available)	March 2009