

	<b>Nursing Home Inspection Report</b>
	Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.
<b>Nursing Home</b>	St Joseph's Nursing Home
<b>Number of Residents</b>	44
<b>Registered for</b>	44
<b>Nursing Home Address</b>	Lurgan Glebe, Virginia, Co Cavan.
<b>Proprietor</b>	Masonic Haven Ltd.
<b>Proprietor's Address (if different from above)</b>	
<b>Person-in-Charge of Nursing Home</b>	Josephine Taite
<b>Date and Time of Inspection(s)</b>	7/04/08 10.00 -15.00
<b>Date report issued</b>	30 <sup>th</sup> April 2008
<b>Summary of previous report findings</b>	<p>The previous inspection from 22/11/08 showed the nursing home to be non-compliant with current nursing home inspectorate regulations at the time of inspection. The previous non-compliances have been</p> <ul style="list-style-type: none"> <li>• addressed Articles 5(g); 27.1(a); 11.2 (h); 12 (a); 18.1 (e) (g);</li> <li>• partially addressed Articles 14(a) (b); 19.1 (d) and recommendations;</li> <li>• not yet been addressed Article 11.2 (f) (i); 14(b)</li> </ul>
	<b>Current Inspection Summary Findings</b>
<b>Compliance status</b>	<p><b>Findings of latest unannounced inspection which took place on 7/04/08</b></p> <p>The inspectors findings based on the <a href="#">current nursing home inspectorate regulations</a> are as follows:</p>

Inspection Report

Findings

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Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.

## Summary Findings of Current Nursing Home Inspection

- **Under Care & Staffing the nursing home was compliant with 20 out of 21 regulations.**  
On the basis of this inspection and under current nursing home regulations, there are issues that need to be addressed as outlined below in relation to the Care and Staffing.
- **Under Management the nursing home was compliant with 27 out of 27 regulations.**  
On the basis of this inspection and under current nursing home regulations, there are issues that need to be addressed as outlined below in relation to Management.
- **Under Physical Environment the nursing home was compliant with 7 out of 11 regulations.**  
On the basis of this inspection and under current nursing home regulations, there are issues that need to be addressed as outlined below in relation to the Physical Environment.

## Non-Compliance (This section should be deleted if no non-compliances have been recorded)

Based on the most recent nursing home inspection the nursing home is non-compliant under one or more regulations. For more details see below.

Regulation number	Article 14b The registered proprietor and the person in charge of the nursing home shall:— ( b ) make adequate arrangements for the prevention of infection, infestation, toxic conditions, or spread of infection and infestation at the nursing home;
Non-Compliance	Suitable and adequate hand disinfection facilities were not provided at the entrance to the nursing home. The soap dispenser at the shared staff toilet was clogged.
Required Action	A suitable hand disinfectant dispenser (preferably wall mounted) to be suitably sited at the entry to the nursing home. This soap dispenser to be put in proper working order.
Timescale	Within 1 month from receipt of this report Within 1 day from receipt of this report
Regulation number	Article 12 (a) The registered proprietor and the person in charge of the nursing home shall:— ( a ) take precautions against the risk of accidents to any dependent person in the nursing home and in the grounds of the nursing home;
Non-Compliance	Suitable and adequate equipment storage was not provided.

Compliance/Non Compliance

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<b>Required Action</b>	Suitable and adequate equipment storage to be provided.
<b>Timescale</b>	As soon as practicable

<b>Regulation number</b>	Article 14a The registered proprietor and the person in charge of the nursing home shall:— ( a ) ensure that the nursing home and its curtilage is maintained in a proper state of repair and in a clean and hygienic condition;
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<b>Non-Compliance</b>	The floor of the smoker's room is displaying permanent stain marks.
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<b>Required Action</b>	The floor to be provided with a durable impervious and readily washable finish (e.g. suitable ceramic tiling).
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<b>Timescale</b>	Within 2 months from receipt of this report
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<b>Regulation number</b>	Article 11.2(i) In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:— ( 1 ) over-bed lamps at each bed accessible to the person and permanent night lighting with dimming facilities;
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<b>Non-Compliance</b>	The over bed lights at rooms **, **, ** and ** are not readily accessible to the bed occupant.
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<b>Required Action</b>	The over bed light at room ** was not in working order. The over bed lights to be relocated to a readily accessible position so that they can be easily switched on by the bed occupant.
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<b>Timescale</b>	This light to be put in working order Within 1 day from receipt of this report
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<b>Regulation number</b>	Article 11.2(f) In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:— ( f ) suitable and sufficient equipment and facilities having regard to the nature and extent of the dependency of the persons maintained in the nursing home;
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<b>Non-Compliance</b>	The wash hand basin tap at bathroom ** was stiff and the toilet backrest was loose. The hot tap at the wash hand basin at room ** was defective.
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<b>Required Action</b>	The tap to be put in proper working order and the toilet
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back rest to be secured.

This tap to be repaired.

**Timescale** Within 7 days from receipt of this report

**Regulation number** Article 29 (a): The registered proprietor and the person in charge of the nursing home shall make adequate arrangements for the recording, safekeeping, administering and disposal of drugs and medicines.

**Non-Compliance** On a review on a random sample of drug charts residents \*\* and \*\*'s drug administration records were unsigned by the nurse. Nurses administer medication from a photocopied prescription sheet which was faded in some instances. The nursing home staff reported that the original prescriptions were retained by the Pharmacy. The policy in relation to drug administration was brief and made no reference to An Bord Altranais Guidelines (2007).

**Required Action** MDA's prescribed for prn use were unused since November 2007 and in stock. No checks regarding MDA stock was recorded  
Drug administration to be recorded appropriately and in accordance to An Bord Altranais Guidelines on Medication Management (2007)  
Review current practice in association with best practice guidelines and An Bord Altranais Guidelines on Medication Management (2007)  
Develop a policy in relation to safe practice and as outlined in An Bord Altranais Guidelines on Medication Management (2007). Liase with General practitioners and pharmacy in relation to best practice and policy.  
Return unused drugs to pharmacy. Best practice is for 2 nurses to check and record MDA stock levels between shifts eg at handover from day to night nurse.

**Timescale** Within one month of receipt of this report

**Regulation number** 11.2 (f) In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:—  
( f ) suitable and sufficient equipment and facilities having regard to the nature and extent of the dependency of the persons maintained in the nursing home;

**Non-Compliance** The storage of essential and shared equipment remains a problem within the Nursing Home: Cleaning items were in unlocked cupboards in the hairdressers room and cleaning solutions were found

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unattended in residents rooms  
 A hoist was charging in the hairdressers room on the first floor  
 Hoist stored in twin room on ground floor  
 Wash hand basins were stored on the floor in some ensuites and in rooms \*\*, \*\*, \*\*, \*\*  
 Toiletries' were stored on top of cisterns in ensuite rooms eg rooms \*\*, \*\*, \*\*  
 A Cotside bumper which was not in use was being stored on-top of the wardrobe in room \*\*  
 Incontinent wear and disposable cups stored in twin room ground floor ie \*\*  
 Armchair found in the ensuite of room \*\*  
 Staff changing, cleaners room [non-catering and catering], prayer/visitors room, sluice room downstairs is to be considered in a proposed extension.  
**Required Action** Provide adequate and appropriate storage to ensure; Risks of accidents are reduced to a minimum  
 Ensure electrical equipment is stored appropriately  
 Residents space and environment is not compromised  
 Risk of cross infection is reduced  
 Submit plan of proposed extension confirming consideration to Staff changing, cleaners room [non-catering and catering], prayer/visitors room, sluice room downstairs  
**Timescale** Within one month from receipt of this report

**Regulation number** Article 15 (f) The registered proprietor and the person in charge of the nursing home shall ensure that:—  
 ( d ) there is a sufficient number of baths and showers having regard to the number of persons in the nursing home and that a sufficient number of assisted baths and showers are provided, having regard to the dependency of persons in the nursing home;

**Non-Compliance** While the nursing home has a number of assisted showers available in the Nursing Home, the facility of a bath or an assisted bath is not available. His issue was referenced on previous inspections and the nursing home staff informed the designated officers that the provision of an assisted bath was being addressed and to be provided in the assisted shower room \*\*.

**Required Action** Submit confirmation regarding the provision of an assisted bath.  
**Timescale** Within one month from receipt of this report.

All regulations, their reference numbers and the details of those regulations can be viewed in [Nursing Homes \(Care and Welfare\) Regulations, 1993](#).

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	Comments and Recommendations	
<p>Comments and recommendations made by the inspection team as a result of the inspection</p>	<p>Hand gel to be provided between rooms/along corridors and on all floors</p> <p>Access training and facilitation in relation to the Nursing Process, relevant and evidenced based assessment tools, care plans, evaluation and record keeping. The person in charge to Liaise and refer staff nurses to An Bord Altranais Guidelines and review/audit performance regarding maintaining records. Implement a policy in relation to record keeping, data collection, analysis and evaluation.</p> <p>Review and audit equipment such as mattresses, bed tables and beds, and repair or replace as required</p> <p>Submit 3 Nurse Licence PIN numbers, insurance, confirmation re fire service &amp; emergency lighting check</p> <p>Complete policy documents relevant to resident profile</p> <p>Insert dates on all duty rosters</p> <p>Management to review the use of the pumps/macerators? at the toilet drainage system and investigate the possibility of the carrying out of any works that will eliminate their usage.</p> <p>The roof space insulation to be checked and increased as necessary so as to reduce heat loss.</p>	<b>Recommendations</b>
<p>This report has been completed/issued by</p>	<p>Noel Mulvihill, LHO</p>	<b>Author</b>