

	Nursing Home Inspection Report
	Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.
Nursing Home	St. Louis Nursing Home
Number of Residents	19
Registered for	19
Nursing Home Address	Louisville, Co. Monaghan.
Proprietor	Trustees of Sisters of St. Louis Monaghan
Proprietor's Address (if different from above)	As above
Person-in-Charge of Nursing Home	Moyra McBride
Date of Inspection(s)	17 th September 2007
Date report issued	20 th November 2007
	Findings previous report summary
	The previous inspection from 23 rd March 2007 showed; The following Articles have been satisfactorily addressed; Article 18.1 (a), Article 19.1 (a), Article 14(b) Article 29(b) The following Articles have been partially addressed; Article 5(e) and Article 19.1(f)
	Current Inspection Summary Findings
Compliance status	Findings of latest inspection took place on 17/9/07: summary The inspectors found that based on the current nursing home inspectorate regulations under the following compliance groupings the nursing home performed as follows:

Inspection Report

Findings

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

Inspection
Unannounced

- **Under Physical Environment the nursing home was compliant with 9 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.
- **Under Management the nursing home was compliant with 21 out of 23 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 Care & Staffing the nursing home was compliant with 24 out of 25 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.

Non-Compliant

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 34 <i>"The registered proprietor shall ensure that dependent persons are adequately insured against injury while being maintained in the home".</i>
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Non-Compliance	A copy of an up to date insurance policy cover was not available on the day of Inspection. It was requested by the designated officers that this be forwarded to the Inspectorate within seven days. Despite phone calls since inspection this information has not been provided.
Required Action	Provide to the Inspectorate evidence of adequate insurance cover for all residents maintained in the nursing home.
Timescale	Within 24 hrs of receipt of this report

Regulation number	Article 11.2(i) <i>"In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:- over-bed lamps at each bed accessible to the person and permanent night lighting with dimming facilities.</i>
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Non-Compliance	On day of inspection the dimmer light in Room ** and
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Compliance/Non Compliance

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

the night light in Room ** were not working.

Required Action Repair lights

Timescale Within 24 hours of receipt of this report.

Regulation number Article 11.2(f) *"In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:- 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 1. A second hoist sling is required as the current sling is showing signs of wear and tear.
2. The commode in Room ** requires replacing, the brakes were unsafe and the wheels rusted. A stained commode was also noted in Room **.

Required Action 1. A second sling is required in order to ensure the safe transfer of dependent residents.
2. Remove and replace commodes in Room ** and Room **.

Timescale 1. Within 2 weeks of receipt of this report.
2. Within 24 hours of receipt of this report.

Regulation number Article 17 *"The registered proprietor and the person in charge of the nursing home shall have a brochure available with information about the nursing home, including the name and address of the home, the name of the registered proprietor, the admissions policy, accommodation provided and special facilities and services."*

Non-Compliance The current brochure does not include a specific admissions policy. The brochure should clearly indicate the type and dependency of residents which the nursing home can accept and indicate any limitations where appropriate.
The brochure should also include the name of the registered proprietor.

Required Action Review the brochure to include a specific admissions policy and the name of the registered proprietor.

Timescale Within 2 months of receipt of this report.

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

Regulation number Article 19.1(f) *“In every nursing home the following particulars shall be kept in a safe place in respect of each dependent person:- a record of drugs and medicines administered giving the date of the prescription, dosage, name of the drug or medicine, method of administration, signed and dated by a medical practitioner and the nurse administering the drugs and medicines.”*

Non-Compliance It was noted on the day of inspection that prescribed medications had been transcribed onto the medication administration sheets and bulk signed by the General Practitioner.
This was discussed with the person in charge during the feedback session who advised the Inspectors that the transcribing had not occurred in the nursing home but had been transcribed and bulk signed in the GP’s practice clinic and the sheets returned to the nursing home.

Required Action

1. That all staff nurses refer to standards required by An Bord Altranais “Guidance to Nurses and Midwives on Medication Management “(July 2007).
2. Person in charge to ensure all staff sign to say they have read this document.
3. Person in charge to address in conjunction with the medical practitioner, the issues identified to the Designated Officers regarding medication prescribing practices.
4. An agreed policy on medication prescribing and administration practices should be devised between the nursing home and the GP which must stipulate required systems in order to minimise errors.

Timescale

1. Within 24 hours of receipt of this report.
2. Within 24 hours of receipt of this report.
3. Within one month of receipt of this report
4. Within one month of 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](#).

	<h2 style="text-align: center;">Nursing Home Inspection Report</h2>	
	<p style="text-align: center;">Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.</p>	
<p>Recommendations made by the inspection team as a result of the inspection</p>	<h3 style="text-align: center;">Recommendation(s)</h3> <ol style="list-style-type: none"> 1. Unsecured fire extinguishers were noted on floor outside Rooms ** and **. It is recommended that these are secured in association with advice and recommendations from a suitably qualified competent person in fire safety. In order to reduce the risk of injury to any dependent person or staff member, in the event of the extinguisher falling or accidentally discharging. 2. A locked door on the 2nd floor was identified by the person in charge as being a fire exit. It is recommended that a sign identifying this door as a fire exit is put in place as soon as possible. 3. Currently one member of staff has a qualification of state enrolled nurse and is listed under the nursing personnel on the staff rota, although this staff person performs the role of carer. It is recommended that there is a differentiation between qualified and non-qualified staff on the rota to ensure clarity of roles and that an adequate number of competent staff are rostered to meet the 1993 care and welfare regulations. 4. Update Manual handling policy to reflect current practice. 	Recommendations
<p>This report has been completed/issued by</p>	<p>Noel Mulvihill, LHO</p>	Author