Tuesday, 06th November 2007

Esker Lodge Ltd.,
Proprietors,
Esker Lodge Nursing Home,
Esker Place,
Cathedral Rd,
Cavan,
Co. Cavan

Inspection Report

Re: Inspection of Esker Lodge Nursing Home, Esker Place, Cathedral Road, Cavan, Co. Cavan, under the Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.

Dear Proprietor,

The Health Service Executive Nursing Homes Inspection Team from a nursing and environmental health perspective inspected Esker Lodge Nursing Home, Esker Place, Cathedral Road, Cavan, Co. Cavan on 10/05/07 from 10am to 16.40pm. This inspection was routine unannounced.

There were 36 dependent persons on this date. The Nursing Home is currently fully registered for forty four dependent persons.

Issues identified in the previous Inspection Report dated 07/11/06 related to Articles 12(f), Article 14 have been addressed satisfactorily. Recommendations have also been implemented satisfactorily.

The following issues require your attention and action:

Article
Article 18.1 “In every nursing home there shall be kept in a safe place a bound register of all dependent persons resident in the home, which shall include the following particulars in
respect of each person”, (a) “the first name, surname, address, date of birth, marital status and religious denomination of the person.”

Non compliance
On the day of the inspection the designated officers noted that the marital status of **, and ** were not included in the register.

Required Action
Document and complete the marital status of ** and ** in the bound register.

Timescale
Within one week of receipt of this Inspection Report.

Article
Article 18.1 “In every nursing home there shall be kept in a safe place a bound register of all dependent persons resident in the home, which shall include the following particulars in respect of each person”, (b) “the name, address and telephone number, if any, of the person's relative or other person nominated to act on the person’s behalf as a person to be notified in the event of a change in the person's health or circumstances;”

Non compliance
On the date of the inspection the designated officers noted that the name, address and telephone number of the next of kin of dependent person ** was not completed on the register. The address and telephone numbers of the following dependent persons next of kin were not completed on the register; **, **, **, **, **, **.

Required Action
Document and complete the details of next of kin in the register for dependent persons; **, **, **, **, **, **.

Timescale
Within one week of receipt of this Inspection Report

Article
Article 18.1 “In every nursing home there shall be kept in a safe place a bound register of all dependent persons resident in the home, which shall include the following particulars in respect of each person”, (c) “the name, address and telephone number of the person’s medical practitioner”.

Non compliance
**Required Action**
Document and complete detail of address and telephone number of general practitioner in the bound register.

**Timescale**
Within one week of receipt of this Inspection Report

**Article**
*Article 18.1* “In every nursing home there shall be kept in a safe place a bound register of all dependent persons resident in the home, which shall include the following particulars in respect of each person”, (e) “where the person has left the nursing home, the date on which he or she left and a forwarding address.”

**Non compliance**
On the date of the inspection no forwarding address was completed in the register for dependent persons ** and ** who have left the nursing home.

**Required Action**
Document and complete details of forwarding address of discharged dependent persons ** and **.

**Timescale**
Within one week of receipt of this Inspection Report.

**Article**
*Article 29(b)* The registered proprietor and the person in charge of the Nursing Home shall “ensure the treatment and medication prescribed by the medical practitioner of a dependent person is correctly administered and recorded”.

**Non compliance**
On the date of the inspection, the nutritional supplement sip drink, prescribed for dependent person ** has not been recorded as signed for in the drug administration chart, as given at one o’clock.

**Required Action**
All treatment and medication prescribed by the medical practitioner of a dependent person should be correctly administered and recorded. All registered nurses responsible for administering medication should be guided by An Bord Altranais Guidance to Nurses and Midwives on Medication Management (2003). Ensure prescribed nutritional sip drinks for dependent person ** are signed for by registered nurse.

**Timescale**
Within one week of receipt of this report.
Recommendations:
Cease using downstairs sluice room to store two commode chairs, as this limits access to handwashing facilities. Provide alternative storage for two commode chairs.

The Nursing Home Inspection Team is to be notified in writing on or before the above dates indicating the steps taken by the Nursing Home to carry out the actions as required under the Regulations.

Signed:

____________________  ____________________  __________________
Chairperson/Designated Officer.  Designated Officer.  Environmental Health Officer/Designated Officer.

cc.  Ms. Orla McKenna, Person in Charge