27th August 2007

Dr. Mary & Mr. Peter Jones,
Proprietors,
Orwell House Nursing Home,
112 Orwell Road,
Rathgar,
Dublin 6

Inspection Report


Dear Proprietors,

The Health Service Executive Nursing Home Inspection Team from a Nursing & Medical perspective inspected Orwell House Nursing Home on 20th & 22nd August 2007.

On Aug 20th the inspection commenced at 11.40am and was completed by 6.00pm. On Aug 22nd the inspection commenced at 10.00am and was completed by 1 pm. Both inspections were unannounced.

There were 51 residents on August 20th and 50 residents on August 22nd as one resident was hospitalised. The Nursing Home is currently fully registered for 66 residents.


The following articles have been satisfactorily addressed:

Article 21 (b)
Personal Identification Numbers (PINS) were available for inspection.

Article 11.2
Lighting and dimming facilities are adequate.

Article 11.2
Call bells were provided at each bed.

Article 29
Storage of emergency antibiotics has been discontinued.

Article 19.1
Patients’ drug kardex & medical administration sheets have been reviewed. Prescribed medicines & discontinued medicines are being signed by the GP.

The following articles have been partially addressed:

Article 11.2
Each resident has been afforded wardrobe space. In some instances the space provided is small and inadequate to meet their personal needs.

In relation to the recommendations of the previous report the following improvements have been made:

• The extra nurse employed on night duty is still not present at all times in the high dependency unit but spends several hours of her time on the 3rd floor.
• Care assistant hours have been increased, except from 2-5 pm.
• Residents from the third floor now attend activities downstairs.

Current Inspection

The following issues require your attention and action.

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

Non Compliance:

Eye drops & cytamen for injection were stored in the door of a domestic fridge on the 3rd floor.

Required Action:

These medications to be kept in the medical fridge at the nurse’s station.

Timescale:
Immediate on receipt of this report.
Article 11.2

“In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:

(a) adequate accommodation and space in single and shared sleeping rooms and portable screens or screening curtains to ensure privacy for individual persons

(g) Bed and bedding appropriate to the dependency of each person and suitable and sufficient furniture and other necessary fittings and equipment.”

Non-compliance(s):

(1) Room 305- on Aug 20th and 22nd screen curtains were not available for use in the double room.

(2) Two residents in the HDU share a wardrobe affording them very little space for personal belongings

(3) Suitcases present, cluttering up rooms, and in one room are stored in the shower

(4) Room 206 - bed is old and the bed head is broken.

Required Action.

(1) Source spare sets of curtains or portable screens for use when curtains are being laundered.

(2) Each resident be provided with a wardrobe space adequate to meet their individual needs.

(3) Source alternative storage for suitcases

(4) Replace this bed with a high low type

Timescale

(1) Immediately on receipt of this report.

(2), (3) and (4), 1 month from receipt of this report

Article 14

“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;

(b) Make adequate arrangements for the prevention of infection, infestation, toxic conditions, or spread of infection and infestation at the nursing home;”
Non-compliance(s):

1. Part of the carpet on the stairs from the 2nd to the 3rd floors, & also the back stairs was lifted, posing a potential trip hazard.
2. There was a strong foul odour from ground floor toilet as the extractor fan was out of order.
3. Some of the furniture in use was obsolete in that the covering was torn/ stained and as a consequence unhygienic and a route for cross infection.
4. A number of lockers were chipped and worn
5. A number of residents’ individual towels were in use for more that one day with old stains evident.
6. Two refuse bins were not pedal type as required for infection control.
7. Room 202, rain water had leaked through the roof overnight. The resident reports that this is the second occasion for this to occur.
8. Room 315 has a hole in the ceiling
9. Room 318 has chipped paintwork on the shelves in bathroom
10. Room 323 A carpet tear is covered with tape.
11. Room 317 had a stale smell of urine
12. Room 118 had cigarette burns in the carpet from a previous resident.

Required Action:

1. Repair lifted carpet.
2. Repair the extractor fan in the HDU bathroom.
3. Replace the existing sub standard furniture and fittings, repair the ceilings.
4. Devise a program for ongoing replacement of furniture and equipment.
5. In the interim period while awaiting the move to the new building a programme must be put in place to ensure the upkeep and maintenance of the existing premises to an acceptable standard.
6. Ensure that all residents are provided with a fresh towel and facecloth daily.
7. Ensure that all bins have a pedal mechanism
8. Replace the offending mattress(s) in Room 317 and shampoo the carpet.
9. Replace the carpets in rooms 323 and 118.

Timescale:

- (1), (2), (6) (7) and (8) immediately upon receipt of this report.
- (9) within 2 weeks of receipt of this report.
- (3), (4), (5), within one month of receipt of this report.
Recommendations:

- The existing arrangements where communal rooms are used for smoking exposes staff and non-smokers to the harmful effects of passive smoking. A pleasant designated smoking area should be provided and smoking prohibited in communal areas.
- Care staff hours have increased on all day shifts except for the period between 2-5pm. Extra care staff to be rostered to ensure that four care staff are on duty for the 2-5pm period.
- Elbow taps to be installed in both rooms of the High Dependency Unit.

The Chairperson of the 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, Nursing Home Inspection Team
Nursing Home Inspection Team

Signed counterpart sent to Ros O’Beirne, Person-in-Charge of Nursing Home