Dominican Sisters,
Our Lady of Fatima Home,
Oakpark,
Tralee,
Co. Kerry.

Date: 25th July, 2006

Inspection Report

Dear Sir/Madam,

Chairperson and Asst. DPHN from Nursing Homes Inspection Team visited Our Lady of Fatima Nursing Home on 12th July, 2006 and there was a subsequent visit by SEHO of Nursing Homes Inspection Team on 18th July, 2006.

There were 55 residents on 12th July, 2006. The Nursing Home is currently registered for 57 residents. A request has been received to increase registration to 59 beds. This is approved. A new registration certificate will be forwarded to you as soon as possible.

The following issues were noted at inspection and need your attention.

RECOMMENDATIONS:

Article 10.5 Insufficient staffing levels, particularly at evening and night time taking into consideration the number of residents residing in the Nursing Home (55), the layout and size of Nursing Home, and the number of maximum and high dependency clients resident at the home. 5 Max and 9 High Dependency residents subvented by HSE at present. In addition 15 HSE placed residents at home and many other residents are High to Max Dependency. A significant proportion of residents overall have a diagnosis of dementia.

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The roster for the week commencing 10th July showed 2 nurses and 2 carers on duty from 5.30pm until 6.30am each day. There were no kitchen or domestic staff rostered after 6pm. It is considered that the standard of nursing care maybe compromised by the shortage of staff which necessitates the diversion of care staff from caring to managing drinks rounds and toileting clients at these times. It is acknowledged that Person in Charge stated that the Dominican Sisters contribute to residents care during evenings on an informal basis (not on roster) and that a third nurse now commences duty at 6.30 am since last inspection.

**Recommendation:**

Staffing levels should be reviewed immediately taking into account the dependency levels of clients and the layout of the building. More staff should be rostered for evening and night times. This has previously been brought to the attention of the Nurse in Charge and the Proprietors. We suggest that Catering/Domestic staff hours could be changed to give a service throughout 24 hours. See Guide to the Nursing Home Legislation, Department of Health, 1995 and UK guidelines “Fit for the Future” National Required Standards for Residential and Nursing Home for Older People regarding Staffing Levels.

**Recommendation:**

Recommend home provide Physiotherapy sessions to advise on management of residents and prevention of contractures.

**Article 12. Code of Practice.**

Physical restraint on TO’S not discussed with GP prior to restraining. TO’S is in a very reclined chair. Restraint decision was not made by a multidisciplinary team in line with restraint guidelines, see copy of Code of Practice for Nursing Homes, Article 12 and INO restraint guidelines (copy enclosed). Inspection Team discussed with GP at inspection. Recommend that decision to restrain is in line with best practice.

**Article 11.2 (f)**

4 Buxton chairs and 1 special reclining chair in use. (Two of these chairs are used at the request of the residents’ families). Buxton chairs are regarded as a form of physical restraint.
Recommend that Nurse in Charge actively encourages nursing home staff to reduce reliance on the use of Buxton chairs to an absolute minimum. If Buxton chairs are used it should only be in exceptional circumstances following in depth assessment and consultation with GP and Next-of-kin (‘Guidelines on the Use of Restraint in the Care of the Older Person’, INO, 2003; ‘Restraint revisited – rights, risk and responsibility’, RCN, 2004).

In addition, Occupational Therapist and Physiotherapist may need to be consulted regarding specialised seating/equipment for particular residents. Nurse in Charge, in consultation with nursing home staff to develop a policy on the use of restraint for the home.

**Article 29(b)**

Disposal of drugs which are discontinued. Many discontinued drugs still in residents file. Recommend returning to Pharmacy.

**Article 5 (e)  Recommendation:**

Insufficient recreation/activities carried out within the nursing home, occasional bingo, exercise and music provided. Recommend that Person – In - Charge increase recreation/activities within the nursing home to daily, to enhance the quality of life of the residents.

Many residents with dementia resident at home. No organised activities observed for residents at time of visit. Information given to Person –In- Charge regarding source of training for dementia care.
Enclosing copy of guidelines on medication management (Pharmaceutical Society of Ireland Best Practice Guidelines on the provision of Pharmacy Services to Residential Homes by Community Pharmacies).

Signed:

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<th>Chairperson</th>
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<td>Senior Medical Officer</td>
<td>Asst. Director of Public Health Nursing</td>
<td>Senior Environmental Health Officer</td>
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c.c. Ms. Celine Everett, Person-in-Charge