8th Nov 2007

Mrs Jo Osborne
Hazel Hall Nursing Home
Clane
Co Kildare

Inspection Report


Dear Mrs Osborne

The Health Service Executive Nursing Home Inspection Team from a medical and nursing perspective inspected Hazel Hall Nursing Home on 30th Aug 2007.

The inspection commenced at 10am and was completed by 15.15pm. This inspection was routine and unannounced.

There were 35 residents on this date. One resident was hospitalised. The Nursing Home is currently fully registered for 46 residents.

The following:
- Articles have been satisfactorily addressed,
  Article 29 Medication Issues
  Article 5 (a) Medication policy (b) Cot sides

In relation to the recommendations the following improvements have been made:
Blister pack method of drug administration has been introduced.
Daily nursing notes now reflect the plan of care.
An induction programme for new staff has been devised and is being implemented.
Attendance at education & training being documented and records maintained.
Divan beds have been replaced with hydraulic beds.
A duplicate book has been introduced.
Storage of personal files is now satisfactory.

**General Comment**
Staff are to be congratulated on the work they have undertaken so far this year.
Individualised care plans have been introduced.
Policies have been updated
Two RGN’s are on day duty shifts.
Warfarin policy devised and implemented.
Three staff are undertaking Fetac Level 5
Staff have attended various information and educational programmes

**Current Inspection**

The following issues require your attention and action.

**Article:**
**Article 5**
"The registered proprietor and the person in charge shall ensure that there is provided for dependent persons maintained in a nursing home:—
(a) suitable and sufficient care to maintain the persons welfare and well-being, having regard to the nature and extent of the person’s dependency;
(b) a high standard of nursing care;”

**Non-compliance(s):**
Although policies are being developed and adapted for use within the Nursing Home. Policy development must be prioritised and policies must be evidence based
For example the following policies were not comprehensive enough to ensure safe practice;
- Restraint policy- aspects are based on anecdotal evidence for example, the use of a reclining Buxton chair to prevent pressure sores.
- MRSA policy not available

**Required Actions:**
(1) Policies must be devised or adapted to local level and implemented based on empirical evidence and best practice.
(2) Devise, implement and audit an MRSA policy
(3) Education for each individual staff member must be provided in the context of understanding and implementing the policies.

**Timescale(s)**
(1), (2) and (3) to commence immediately upon receipt of this correspondence and to be fully complete at 12 weeks.

**Article**
**Article 10.5**
“The registered proprietor and the person in charge of the nursing home shall ensure that:—

(d) A sufficient number of competent staff are on duty at all times having regard to the number of person maintained therein and the nature and extent of their dependency”

**Non-Compliance:**
(1) Practices evidenced during the inspection gave rise to concerns about the knowledge base and the ongoing professional development of senior nurses in the home. These practices include:

- The use of indwelling catheters to manage urinary incontinence in 20% of the residents
- Four Buxton chairs on the premises (3 stored in a bathroom and one in use). It was stated that their use is to prevent pressure sores. However, the patient using a Buxton chair for pressure sore prevention was not provided with a pressure-relieving cushion.
- Deposition of clinical waste in the domestic waste bin.
- The clinical waste bin is placed outside.
- Nurses were wearing light plastic gloves and no aprons when attending to a resident who had ______. There was no clinical waste bin in the resident’s room. Although latex gloves are available, the wearing of plastic gloves is encouraged to promote frequent changing of gloves. Aprons and latex gloves were available at the nurse’s station.
- Lack of knowledge when nurses were interviewed about the protocol for screening following the eradication regime.
- Although staff have attended infection control training and paper towel dispensers are installed, two cloth towels were in use in communal bathrooms.
- When reading through patient files it is apparent that problems outside those covered in the pre-printed care plans do not have a care plan to address them. For example, patient with an infected finger, which requires medication and dressings. The only nursing documentation pertaining to this is in the continuation notes.
- An analysis of the bath book for the month immediately preceding the inspection would indicate that 15 residents did not receive a bath/shower during that period and the most frequently bathed resident had 6 baths/showers in one calendar month. Residents appear well groomed and staff state that all residents receive a bed bath or a body wash daily.
Required Actions:
(1) Priority must be given to the acquisition of specialist gerontological nursing knowledge in order to provide appropriate care for older clients and clinical leadership within the home. Evidence of this must be available for future inspection. (2) A needs analysis of the specialist nursing skills required meeting the diverse needs of the older patients in your care and a plan drawn up and implemented to enable nurses to gain the skills and experience to meet the specialist nursing needs identified. (3) Core care plans must be adapted to suit individual patient’s needs. Additional training in writing care plans for all nurses. (4) Ongoing education and training needs for all staff must be continued and provided by the nursing home to ensure the nursing needs and requirements of all the patients are met. All staff should sign off on attendance at education and training, evidence of this must be made available along with programme content in a structured format for future inspection.

Timescale:
(1) Must commence immediately upon receipt of this report. (2) Plan drawn up within 3 weeks of receipt of this report to include realistic time frames. (3) And (4) to commence immediately upon receipt of this report.

Article:
Article 14
“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(s):
(1) There were two cloth towels in use in the communal hand washing facilities. (2) Buxton chairs with worn and scuffed covering unsuitable for cleaning and not recommended for patient use. (3) There is no bedpan washer. (4) Shortage of glove and apron dispensers. (5) Although latex gloves are supplied, lightweight plastic gloves are in use as protective equipment. (6) Inadequate number of shower facilities (Staff report that the 4 baths are seldom used) only two showers available for 46 residents without ensuite facilities.

Required Action:
(1) Remove cloth towels from communal washing facilities. (2) Remove plastic gloves and ensure that staff have suitable gloves and aprons conveniently available for use when needed. (3) Install an adequate number of glove apron dispensers on each corridor. (4) Dispose of all Buxton chairs and replace with more appropriate seating.
(5) Provide a bedpan washer in a sluice room.
(6) Install an appropriate number of showers.

Timescale:
(1) And (2) immediately upon receipt of this report.
(3) Within 2 weeks of receipt of this report
(4) Within 8 weeks of receipt of this report
(5) And (6) within 12 weeks of receipt of this report

Recommendations:
• When documenting accidents, medical examinations and interventions should be documented in the accident book.
• Ensure care plans are updated when a resident’s condition changes.
• Consider amendments to the restraint consent form.
• Consideration must be given to identifying a room for storage as bathrooms and corridors are becoming cluttered.
• Consider a more varied programme of activities for the residents
• Make a greater effort to ensure that contracts of care are signed for all residents as it is a requirement for legislation...
• Course content of fire training to be available for inspection.
• Implement an ongoing programme to ensure that furnishings are maintained or replaced as appropriate...

The Nursing Home Inspection Team/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:

__________________    ____________________
Designated Officer     Designated Officer
Nursing Home Inspection Team    Nursing Home Inspection Team

Signed counterpart sent to __________ & Sorcha Coonan, Person-in-Charge of Nursing Home