Tuesday, 18 September 2007

Thierry and Lucy Grillet,
Registered Proprietors,
St Elizabeth’s Nursing Home,
Kells Rd,
Athboy,
Co. Meath

Inspection Report


Dear Sir/Madam,

The Health Service Executive Nursing Homes Inspection Team from a nursing and environmental health perspective inspected St Elizabeth’s Nursing Home, Kells Rd, Athboy, Co. Meath on 16/8/07 the from 10am to 4.45pm. This inspection was routine unannounced.

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

Issues identified in the previous Inspection Report dated 27/03/2007 related to Articles 18.1 (b), 11.2 (f), 11.2 (j), 12 (a), and 17, have been addressed satisfactorily. Articles 14 (b) and 19.1 (d) have not been addressed satisfactorily. The following issues require your attention and action.
Article
Article 11.2 (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.”

Non Compliance
The over-bed lamp in room * is not accessible to the person occupying this bed.

Required Action
Re-position the over-bed lamp in room * to ensure it is accessible to the person occupying this room.

Timeframe
Within one month of receipt of this report.

Article
Article 12 (a) “The registered proprietor and the person in charge of the nursing home shall take precautions against the risk of accidents to any dependent person in the nursing home and in the grounds of the nursing home.”

Issue
There was a fire extinguisher standing on the floor by the door in the store room next to the laundry.

Required Action
The registered proprietor and the person in charge of the nursing home need to ensure the fire extinguisher in the dirty linen store room is fixed to the wall thereby taking precautions against the risk of accidents to any dependent person in the nursing home.

Timeframe
Within one month of receipt of this report.

Article
Article 12 (e) “The registered proprietor and the person in charge of the nursing home shall ensure that safe floor covering is provided.”

Issue
The floor covering in the corridor on the first floor where the old and new part of the nursing home meet is cracked therefore not safe for residents and staff. The floor outside the laundry room has a ridge which makes it unsafe for residents and staff.
**Required Action**
The registered proprietor and the person in charge of the nursing home shall ensure the floor covering in both these areas is replaced or repaired thus ensuring that safe floor covering is provided.

**Timeframe**
Within one month of receipt of this report.

**Article**
Article 14 (a) *The registered proprietor and the person in charge of the nursing home shall ensure that the nursing home and its curtilage is maintained in a proper state of repair and in a clean and hygienic condition.*

**Non-compliance**
The carpet floors covering in Room No * and in Room No * were in a dirty condition at the time of inspection.

**Required Action**
These carpets are to be professionally deep cleaned or replaced.

**Timescale**
Within 4 weeks of receipt of this report.

**Article**
Article 14 (b) “*The registered proprietor and the person in charge of the nursing home shall make adequate arrangements for the prevention of infection, infestation, toxic conditions, or spread of infection and infestation at the nursing home.*”

**Non-compliance**
1. Open rubbish bins in a number of bathrooms throughout the nursing home do not provide adequate arrangements for the prevention of infection as staff have to make hand contact with the bin in order to open it.
2. Communal towels were seen hanging in a communal shower room opposite room *, bathroom * and in twin room *. Cloth towels are considered an unhygienic means of communal hand drying due to the risks of cross infection. This is a recurrent non-compliance. It appeared on the previous inspection report dated 27/03/2007.
3. There was no liquid soap provided in a number of bedrooms *, *, **, * and ** therefore there was no means provided for staff to wash their hands.
4. The designated officers were informed that sponges seen in the store room by the laundry were used to wash residents. These were then washed together in the washing machine at thirty degrees and reused to wash residents.
5. The commode in both bathroom * upstairs and in the en-suite of room ** were found to be rusty and therefore one could not ensure cleaning would adequately prevent the spread of infection. The designated officers were informed that these were residents personal commodes which they insisted on bringing into the nursing home with them.

6. There was an uncovered divan mattress on the beds in room ** and room **. The residents in both these beds were incontinent and both these mattresses smelt malodorous. The divan mattress on the bed in room * was uncovered although the resident in this bed on the day of inspection was continent it has the potential of leading to spread of infection and infestation at the nursing home.

7. The designated officers were informed that commode pans were sterilized by cleaning them with a detergent under the shower in each room this is inadequate in preventing the spread of infection.

**Required Action**

1. The registered proprietor and the person in charge of the nursing home to provide pedal bins in all bathrooms.

2. The registered proprietor and the person in charge to remove towels from shared bathrooms and cease there use in communal areas throughout the nursing home. To educate the staff about the use of communal towels. Hygienic means of hand drying shall be provided in communal bathrooms e.g. paper disposable towels.

3. The registered proprietor and the person in charge of the nursing home to ensure staff are provided with a means of washing their hands prior to leaving rooms *, **, * and ** thus preventing spread of infection and infestation at the nursing home.

4. The registered proprietor and the person in charge of the nursing home to ensure that washed sponges are not reused to attend to residents hygiene needs. To ensure all these sponges are discarded. The use of disposable wash cloths is recommended to prevent the potential spread of infection.

5. The registered proprietor and the person in charge of the nursing home to remove the two rusty commodes (post consultation with the resident and their family) from the nursing home thus making adequate arrangements for the prevention of infection or spread of infection and infestation at the nursing home. These commodes to be replaced with commodes that can be cleaned thoroughly without the risk of causing the spread of infection.

6. Remove the three uncovered divan mattresses from the above rooms thus preventing spread of infection and infestation at the nursing home. Replace with mattresses that have water proof covers.

7. The nursing home to purchase and install a bedpan washer to ensure bedpans used in the commodes throughout the nursing home are adequately sterilized thus removing the potential risk of the spread of infection.

**Timeframe**

1. Within one week of receipt of this report
2-3. Immediately on receipt of this report
4-5. Within one week of receipt of this report
6. Within two weeks of receipt of this report
7. Within two months of receipt of this report

Article
Article 18.1 (b) “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 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
There was no next of kin address entered in the bound register for a number of dependent residents within the home **, **, and **.

Required Action
The registered proprietor and the person in charge of the nursing home to ensure that each individual admitted to the nursing home have an address for their next of kin entered in the bound register to ensure they can be notified in the event of a change in the person's health or circumstances.

Timeframe
Within seven days of receipt of this report

Article
Article 19.1 (d) “In every nursing home the following particulars shall be kept in a safe place in respect of each dependent person an adequate nursing record of the person's health and condition and treatment given, completed on a daily basis and signed and dated by the nurse on duty.”

Non-compliance
1. There was no care plan written for ** (Room **). On the day of the inspection this lady was been hoisted from bed to chair and although she had a pressure relieving mattress on her bed there was no evidence in her nursing documentation that she had had a pressure sore risk assessment preformed on admission or thereafter. The nursing home pressure sore prevention policy states that all residents have a waterlow score (pressure sore risk assessment) preformed on admission.
2. Resident ** (Room **) had a care plan written but this was last reviewed on the 22/02/2006.
3. Resident ** (Room **) had no care plan written and no pressure sore risk assessment preformed.
4. ** (Room **) had no care plan written, no pressure sore risk assessment preformed and no falls risk assessment preformed. This gentleman had a belt insitu while sitting in the chair as he was at risk of falling out.
5. Residents observations are been recorded on a piece of paper.
Required Action
1. The registered proprietor and the person in charge of the nursing home to ensure that all staff are allocated time to read the nursing home pressure sore prevention policy.
2. The registered proprietor and the person in charge of the nursing home to ensure each individual staff member sign and date on the front of the policy folder when they have read it.
3. The registered proprietor and the person in charge of the nursing home to ensure that all staff members adhere to the nursing home policies.
4. The nurse in charge to develop, implement and ensure staff adhere to a documentation policy.
5. The registered proprietor and the person in charge of the nursing home to ensure that all residents have a care plan written, a pressure sore risk assessment and a falls risk assessment is done on admission.
6. The registered proprietor and the person in charge of the nursing home to ensure that all problems/needs that the individual resident has are addressed in their care plan. That each problem/need has a goal, an action plan, a review date and a nurses signature.
7. The registered proprietor and the person in charge of the nursing home to ensure that staff use the care plan to evaluate the care given on each shift.
8. That these individual care plans are updated on a regular basis (see non-compliance 2) or when there is a change in the residents condition. This should be recorded by placing a date under review date.
9. Residents observations are recorded on a observation chart to ensure a improvement or deterioration in ones condition can be clearly seen.

Timeframe
Within one month of receipt of this report

Article
Article 19.1 (h) “In every nursing home the following particulars shall be kept in a safe place in respect of each dependent person, a record of any occasion on which physical or chemical restraint is used, the nature of the restraint and its duration.”

Non-compliance
Resident ** was sitting in the sitting room in a chair with a belt around his waist. There was no record of any occasion on which physical restraint the nature of the restraint and its duration found within the nursing documentation for this resident. However the nursing home policy stated that a record was to be kept of any occasion restraint was used on a resident.
Required Action
1. The registered proprietor and the person in charge of the nursing home to ensure that all staff are allocated time to review the nursing home policy on restraint.
2. The registered proprietor and the person in charge of the nursing home to ensure each individual staff member sign and date on the front of the policy folder when they have read it.
3. The registered proprietor and the person in charge of the nursing home to ensure that all staff members adhere to the nursing home policy on restraint.
4. That a record is kept within the residents nursing notes of any occasion on which physical or chemical restraint is used, the nature of the restraint and its duration.

Timescale
Within two weeks of receipt of this report

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

Non-compliance
1. Resident ** had Diclac 50mg od (daily) po (orally) PRN (as required) prescribed, dated and signed by the medical practitioner. On the pre-printed drug sheet from the pharmacy Diclac 50mg was written BD (twice daily) po (orally) this pre-printed sheet was not dated or signed by a medical practitioner however it was signed as given twice a day by a nurse.
2. Resident ** was prescribed Klacid LA od (daily) po (orally) dated 13/08/2007 and signed by the medical practitioner. On the pre-printed drug sheet from the pharmacy Klacid LA was written 1(one) BD (twice daily) and this was tippexed over and daily was written. It was signed by a nurse as given daily on the 11/8/07 and twice daily on the 12/8, 13/8 and the 14/8.
3. ** was prescribed Omeprazole 20mg od (daily) po (orally) this was signed and dated by the medical practitioner. On the pre-printed drug sheet from the pharmacy Omeprazole 20mg, two in a.m. was written. It was signed by a nurse as given daily. This pre printed pharmacy sheet was not signed by a medical practitioner. Lasix 20mgs 1 every three days (mon,wed and fri) was signed and dated by the medical practitioner on the residents drug chart. On the pre-printed drug sheet from the pharmacy it was written Lasix 20mgs 1 every three days (mon,wed and fri) not signed by a medical practitioner. The Lasix 20mgs was signed by a nurse as given daily from the 4/8/07 – 15/8/07.
**Required Action**

1. The registered proprietor and the person in charge of the nursing home to ensure that all staff are allocated time to read the nursing home policy on drug administration.

2. The registered proprietor and the person in charge of the nursing home to ensure each individual staff member sign and date on the front of the policy folder when they have read it.

3. The registered proprietor and the person in charge of the nursing home to ensure that all staff members adhere to the nursing home policy on drug administration.

4. The registered proprietor and the person in charge of the nursing home to ensure that drugs are given by a registered nurse as prescribed by the medical practitioner and not as pre-printed on the pharmacy sheet.

5. The registered proprietor and the person in charge of the nursing home to consider removing the pre-printed pharmacy sheet from the drug chart folder thus removing the potential for drug errors reoccurring.

6. The registered proprietor and the person in charge of the nursing home to ensure all registered nursing staff refer and adhere to standards required by An Bord Altranais “Guidance to Nurses and Midwives on Medication Management “(June 2003).

7. Person in charge to follow up on all incidents relating to medication errors.

8. Person in charge to ensure all staff are provided with necessary education to prevent re-occurrence of medication errors.

**Timeframe**

Within one week of receipt of this report

**Recommendations**

- On the day of inspection the Nursing Homes’ Cleaning Schedule and Cleaning records were inspected. It is recommended that the Cleaning Schedule and Cleaning Checklists be reviewed and amended to include the Nursing Homes’ cleaning and disinfection procedures for Commodes, Commode Pans, Urine bottles, Trolleys, Hoists and other items of equipment not currently documented in the cleaning schedule.

- In relation to the storage of food items it is recommended that a designated cupboard be provided for the storage of dry goods.
The Chairperson of the Inspection Teams to be notified in writing on or before the above dates the steps taken by the nursing home to carry out the actions as required under the regulations.

Signed:

_____________________     _______________________
Designated Officer/Chairperson.                             Designated Officer

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Environmental Health Officer,  
Designated Officer