Tuesday, July 03, 2007

Varna Healthcare Services Ltd.,
Registered Proprietors,
Sacred Hearts Nursing Home
Roslea Road
Clones
Co Monaghan

Inspection Report
Re: Inspection of Sacred Hearts Nursing Home, Roslea Road, Clones, Co Monaghan
under the Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.

Dear Sir/Madam,

The Health Service Executive Nursing Homes Inspection Team inspected Sacred Hearts Nursing Home, Roslea Road, Clones, Co Monaghan from a nursing and environmental health perspective on the 15/03/07 from 10.00am – 4.30pm. This inspection was routine unannounced.

There were 44 dependent persons on this date. The Nursing Home is currently fully registered for 50 dependent persons.

Following the previous inspection report the following articles are in compliance Article 5 (b)(h), Article 15(g), Article 29 (a) (b) Article 19.1 (e)(i).

The following issues require your attention and action.
Article
Article 7.3 “Such contract shall deal with the care and welfare of that person in the nursing home and shall include details of the services to be provided for that person and the fees to be charged.”

Non compliance
Five dependent persons with contracts of care did not have the fees included.

Required Action
Execute a contract with each dependent person and/or a person acting on his or her behalf. The contract shall include the fees to be charged.

Timescale
Within 2 months of receipt of this report.

Article
Article 11.2 “In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:— (d) a visitors reception area and adequate facilities for persons to receive visitors in private;”

Non-compliance
There is no designated visitors reception area and adequate facilities for persons to receive visitors in private.

Required Action
Provide a designated visitors reception area and facilities for persons to receive visitors in private.

Timescale
Within one month of receipt of this 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,
(a) the first name, surname, address, date of birth, marital status and religious denomination of the 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;’
(c) the name, address and telephone number of the person's medical practitioner.”
Non compliance
Failure to comply with Article 18.1 is a reoccurring non-compliance previously identified on report of inspection of the 19th of December 2005. The following omissions were recorded on the above date of inspection.
The religious denomination of all dependent persons within the nursing home.
The telephone number, 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.
The addresses of a number of dependent person’s medical practitioner

Required Action
Complete register to include particulars in respect of each person within the nursing home.

Timescale
Within 7 days of receipt of this report.

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

Non compliance
The administration record of dependent persons ** has been amended using Erasure fluid. Dependent person ** medication administration chart records that drugs were administered at 10pm the dependent person was discharged from the nursing home on the morning of **. The drug administration records of dependent person, **, ** and **, have been altered using erasure fluid. The use of erasure ink is a recurring non-compliance previously identified in inspection report of December 19th 2005.

Required Action
All nursing staff should refer and adhere to their responsibilities and accountability as registered nurses, which should include reference the principles of medication management, the Five Rights of Medication Administration. Guidance to Nurses and Midwives on Medication Management, An Bord Altranais, (2003)
All nursing staff should refer and adhere to their responsibilities and accountability as registered nurses, which should include reference the principles of record keeping in clinical practice contained within Recording Clinical Practice Guidance to Nurses and Midwives (2002) “Erasure fluid should never be used”. 7.11 p12.

Timescale
Within 7 days 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
1. The walls, ceiling and windows in the smoking area were completely discoloured with what appeared to be smoke and nicotine.
2. The walls of the staff sanitary accommodation are defective in parts.
3. The ceiling area leading to the roof light near bedroom ** is somewhat dusty.
4. The extract fan at the toilet off the day room, ground floor is dusty.
5. The vanity unit at the wash hand basin at bedroom ** is defective.
6. Dependent person was smoking in the dining room recurrent non compliance as of inspection report of the 19th December 2005.

Required Action
1. Completely clean and repaint surfaces. Because of nature of the use of the room this action may be required more frequently than with other areas.
2. The wall surfaces to be provided with a smooth, durable and readily cleanable surface e.g. suitable cladding.
3. This area to be cleaned.
4. This area to be cleaned
5. This unit to be replaced
6. Review of smoking policy within nursing home.

Timescale
1. Within one month of receipt of this report
2. 3 months
3. 2 days
4. 2 days
5. 1 month
6. Within one month 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. There were inadequate arrangements for the management of infection control. A supply of gloves and aprons were not available for staff in providing care for dependent persons with MRSA.
2. A number of fabric chairs have become frayed and torn which may present a risk of cross infection as they cannot be cleaned thoroughly.
3. A number of commode covers are worn and are no longer durable and at present a risk of infection.
4. A member of staff providing direct care to dependent persons was not wearing a uniform or protective clothing.
5. Dependent persons within a double and three bedded rooms were sharing a commode where one of the dependent person in this room was MRSA positive.
6. The wash hand basin at bathroom ** displays stains of a permanent nature. The surface of the wash hand basin at the staff toilet is showing signs of wear.
7. The paper towel holder is not located close to the laundry wash hand basin.
8. A suitable bin was not provided for the used paper towels at the morgue.
9. The area between the wash hand basins and the splash back at the end of corridor wash hand basin ground floor is not provided with a proper finish.
10. The lid of the cistern of flush unit in toilet by rooms ** and ** is broken and a source of infection.
11. Bed pans were found stored on the floor in a number of toilets and a urinal was found on the floor of room **.

Required Action

1. Fabric chairs need to be recovered or replaced to ensure smooth, durable and readily cleanable surface.
2. Commode covers need to be replaced.
3. Delivery of a comprehensive staff training programme to include, compliance with Infection control policy, ensuring MRSA precautions are implemented.
4. Staff should have readily available protective measures and staff delivering direct care to dependent persons should be in uniform, to ensure prevention and spread of infection within the nursing home.
5. The development of a cleaning schedule within the nursing home to ensure all areas within the home are thoroughly cleaned on a regular basis.
6. The wash hand basins at room ** to be replaced.
7. The paper towel holder to be moved to a position close to the wash hand basin.
8. A suitable bin to be provided for this purpose in the morgue.
9. This area to be provided with a smooth, durable, impervious and readily washable finish.
10. Suitable mop hanging facilities to be provided.
11. Replace lid of the cistern flush or replace same.
Timescale
1. Within 3 weeks of receipt of this report
2. Within 2 weeks of receipt of this report
3. Within one month of receipt of report
4. Within 2 weeks of receipt of this report
5. Within 2 weeks of receipt of report.
6. Within 2 months of receipt of this report
7. Within 1 month of receipt of this report
8. Within 2 days of receipt of this report
9. Within 1 month of receipt of this report
10. Within 2 months of receipt of this report
11. Within 2 weeks of receipt of this report.

Article
Article 14, “The registered proprietor and the person in charge of the nursing home shall: (d) ensure that a separate well ventilated room is provided for sluicing and for the storage of dirty linen;”

Non-compliance
There are insufficient sluicing facilities for the number of dependent persons within the nursing home. Staff are required to carry soiled linen to ground floor. A second sluice is required. This is a recurring non-compliance previously identified in inspection report of the 19th April 2006 and in the report of inspection 19th December 2005.

Required Action
Provide facilities on 1st floor to ensure that a separate well ventilated room is available for sluicing and for the storage of dirty linen

Timescale
Within 3 months of receipt of this report

Article
Article 11.2 “In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows: ( i ) over-bed lamps at each bed accessible to the person and permanent night lighting with dimming facilities;”

Non compliance
The dimmer knob at the central light at bedroom 23 is missing.

Required Action
A suitable dimmer knob to be provided.

Time scale
2 days
### Article

Article 12. “The registered proprietor and the person in charge of the nursing home shall: (a) take precautions against the risk of accidents to any dependent person in the nursing home and in the grounds of the nursing home; (e) ensure that safe floor covering is provided.”

### Non compliance

The two wardrobes at bedroom ** are somewhat unstable. Floor covering is worn and torn and some floor tiles are chipped in ground floor parts of the nursing home.

### Required Action

These units to be adequately stabilized e.g. secure to the walls.
Floor covering and chipped tiles to be replaced

### Timescale

Within one month of receipt of this report

---

### Article

Article 22 “When a dependent person dies in a nursing home, the registered proprietor or the person in charge shall send a notice in writing of the date and time of death to the Medical Officer of Health for the area in which the nursing home is situated, not later than forty eight hours after it occurs and the certified cause of death as soon as possible thereafter.”

### Non-compliance

Following the death of dependent person ** which occurred on the 20/02/07 in the nursing home, no notification as required by Article 22 had been sent to HSE.

### Required Action

When a dependent person dies in a nursing home, the registered proprietor or the person in charge shall send a notice in writing of the date and time of death to the Medical Officer of Health for the area in which the nursing home is situated, not later than forty eight hours after it occurs and the certified cause of death as soon as possible thereafter.

### Timescale

Within 1 day of receipt of this report
Article
Article 19.1 “In every nursing home the following particulars shall be kept in a safe place in respect of each dependent person, (h) a record of any occasion on which physical or chemical restraint is used, the nature of the restraint and its duration”.

Non-compliance
The restraint record currently used does not include chemical restraint i.e. medication occasionally required to control aggressive behaviour with dependent persons. Dependent person ** is currently receiving such medication.

Required Action
1. Develop a Policy for Chemical restraint and ensure it is a working document.
2. Alternative measures to be considered and documented, in an effort to accomplish treatment goals without the use of a chemical restraint.
3. In line with best practice the decision to use a restraint whether chemical or physical, should be made ideally with the service user, in consultation with the service user’s doctor and other members of the multidisciplinary team. Details of these discussions need to be recorded in the dependent persons’ records. Best practice requires that the decision to apply a restraint should be made in consultation with the dependent person or their next of kin, the Medical Officer and the nursing team, and that there is a record of same.
4. Where restraint is considered the only option the reasons for use of restraint needs to be clearly documented. Such a record forms the basis for evaluation of the need for a restraint
5. The type of restraint and the indication for its use should be reflected in the dependent persons individual nursing care plan
6. Review times in relation to the use of restraint needs to be specified in advance and outcome of reviews recorded.
7. Provide training for the Person in Charge and all Nursing staff in relation to the use of restraint and develop and implement a restraint trainer’s record.
8. Provide continuous monitoring and review of staffing levels to ensure restricted use of restraint.

Timescale
Within 7 days of receipt of report
Article
Article 19.1 “In every nursing home the following particulars shall be kept in a safe place in respect of each dependent person (f) “a record of drugs and medicines administered giving the date of the prescription, dosage, name of the drug or medicine, method of administration, signed and dated by a medical practitioner and the nurse administering the drugs and medicines”

Non-compliance
The nurses appear to have transcribed medication orders for dependent person ** which were then bulk signed and dated by a medical practitioner. Changes to the identified times upon which medications were to be administered appeared to be altered using corrective fluid rather than new orders being rewritten.

Required Action
A Policy regarding medication management and administration to be developed which demonstrates best practice and complies with An Bord Altranais – Guidance to Nurses and Midwifes on Medication Management (2003).

All medications must be prescribed and signed by the Medical Practitioner, and the original used by the Nurses in order to administer medication.
When there are alterations to the dependent persons prescribed medication these must be rewritten and signed by the medical practitioner.

Timescale
Within 7 days of receipt of this report.

Article
Article 19.1 “In every nursing home the following particulars shall be kept in a safe place in respect of each dependent person( d ) 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.”

Issue
The name and surname of dependent person must be recorded on each individual sheet of progress notes to ensure that any pages which are mislaid can be returned to correct file. Dependent person ** had no entry for care delivered on the day 14/03/07. Dependent person ** had subcutaneous fluid commenced at 1am which had not been entered on the fluid chart. Entries made in nursing notes refer to dependent person ** pressure sore however there is no assessment or grading of same. A number of care plans were not dated.
**Required Action**

All nursing staff should receive training regarding their responsibility and accountability as registered nurses, which should include reference the principles of record keeping in clinical practice contained within Recording Clinical Practice Guidance to Nurses and Midwives (2002).

**Timescale**

Within 1 month of receipt of report

**Article**

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

**Issue**

Dependent persons ** has sustained 4 falls since 1st January 2007. It is unclear what preventative actions have been taken following each fall to prevent reoccurrences.

**Required Action**

Dependent persons to have falls risk assessment completed and an individual preventative action plan developed and evaluated to reduce likelihood of a repeated falls

**Timescale**

Within one month of receipt of this report.

**Recommendations**

1. A policy should be developed to guide staff on Caring for Deceased Person and their families within the nursing home.
2. A record is maintained and evaluated for training undertaken by the care, catering and support staff.
3. The facilities available for storage of equipment need to be reviewed to ensure they are adequate, if the current plan to convert equipment storage area to hairdressing facility is implemented.
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        Environmental Health Officer/
Designated Officer.

Cc Ms Elaine Currier, Person-in-Charge