Mr Pat Gaughan  
Chairman  
Nazareth House Management Ltd  
Nazareth House  
Church Hill  
Sligo  

Wednesday, 28 February 2007  

Inspection Report  


Dear Mr Gaughan,  

The Nursing Homes Inspection Team inspected Nazareth House Nursing Home, Church Hill Co. Sligo on 12/12/2006 & 15/12/2006  

There were 108 residents on this date. The Nursing Home is currently registered for 119 residents.  

The following issues require your attention and action.  

**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(s):** Two nurses and four carers at night are insufficient for such a large area and large number of patients.  

**Required Action:** Provide adequate number of competent staff at night based on layout of the Nursing Home and dependency levels of patients.  

**Timescale:** Immediate  

**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(s):** Over-bed light accessible to the person has not been provided in the following bedrooms
First Floor, bedroom number 6, 13, over-bed light not accessible due to bed location.
Second Floor, bedroom number 6, over-bed light not provided at one bed.
Bedroom number 4, over-bed light not provided at both beds
Light dimming facilities have not been provided in the following rooms;
First Floor: bedroom number 1, 2, 12 and 13.
Second Floor: bedroom number 1, 2, 3, 4 and 5.
Third Floor: bedroom number 1.

**Required Action:** Over-bed lights accessible to the person shall be provided at each bed
Permanent lighting with dimming facilities should be provided in all of the above bedrooms

**Timescale:** 1 Month

**Article: 11.2** In every nursing home there shall be provided suitable and sufficient accommodation which meets the minimum standards as follows:—

(j) emergency call facilities are provided at each bed;

**Non Compliance(s): Fatima Ward.** Emergency call facilities were available at each bed however they were not accessible to the person at all the beds in the following rooms.
Fatima First Floor: Bedroom Number 1, 3, 4, 5, 9, 10 and 13.
Fatima Second Floor: Bedroom number 6, 7, 10, 11, 13, and 15.
Fatima Third Floor: Bedroom number 1, 2 and 4

**Non Compliance(s): Basil Wards.** While emergency call facilities were available at each bed they were not always accessible at all beds in the following rooms.
Basil 1st floor: 1, 2, 3, 4, 5, 6 and 7
Basil 2nd floor: 2
Basil Ground floor: 1

**Required Action:** Ensure that emergency call facilities are accessible to the person

**Timescale:** 1 month

**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(s): Basil Wards:** Light dimming facilities were not available in the following rooms:
Basil 1st floor ward: 1, 2, 3.
Basil 2nd floor ward: 1 and 2.
Basil Ground Floor ward: 1 and 2
Overbed lights were not provided in the following rooms.
Basil 2nd floor ward: 1, 4, 6, 7, 9

**Required Action:** Permanent lighting with dimming facilities should be provided in each room. Overbed lights accessible to the person should be provided in the above rooms.

**Timescale:** 1 month
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;

Non Compliance(s): Tables and chairs and other pieces of equipment were located against the wall on Fatima 1st floor, which could make this area difficult to access for some residents. Chairs and a table were also located in front of the corridor hand rail on the 3rd floor of Fatima Ward. The location of a linen cupboard on the stairway connecting Fatima to Basil is also unsuitable.

Required Action: Take adequate precautions against the risk of accidents.

Timescale: Immediate

Article: 12. The registered proprietor and the person in charge of the nursing home shall:— (b) ensure that handrails are provided in circulation areas and that grab-rails are provided in bath, shower and toilet areas;

Non Compliance(s): The corridor located to the right of the stairway on the first floor of Fatima Ward had no handrails.

Required Action: Ensure that handrails are provided in circulation areas.

Timescale: 1 month

Article: 12. The registered proprietor and the person in charge of the nursing home shall:— (c) ensure that handrails are on both sides of stair cases except where a stairlift is provided;

Non Compliance(s): Stairway leading from Basil Ward to Fatima Ward had handrail on one side only.

Required Action: Handrails should be provided on both sides of the stairway.

Timescale: 1 month

Article: 12. The registered proprietor and the person in charge of the nursing home shall:—

(e) ensure that safe floor covering is provided

Non Compliance(s): The floor covering in bedroom number 8 on the 2nd floor of Basil ward was defective in a number of areas.

Required Action: Ensure that safe floor covering is provided.

Timescale: Immediate

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;

Non Compliance(s): Fatima Ward 2nd Floor Sluice Room. There was a number of missing floor and wall tiles which could cause difficulty in maintaining surfaces in a clean condition. There were also a number of openings in the wall/ceiling around pipe work. Light covers were in a dirty condition as were the upper sections of the walls and the window frame. Paintwork on wall and ceiling was also in a defective condition.

Basil Ward Ground Floor Sluice Room. There were a number of missing wall tiles and the upper wall sections were in a dirty condition. The metal stand of the sluice sink was in a corroded condition and not capable of being cleaned.
**Required Action:** The sluice rooms and the equipment therein shall be maintained in a proper state of repair and in a clean and hygienic condition. Suitable easily cleaned surfaces shall be provided in the basement laundry areas.

**Timescale:** 3 months

**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):** The storage of clean linen in the area that provides access to the sluice room located on Fatima 1st floor and in the bathroom area of Fatima 3rd floor is unsuitable due to the risk of spreading infection.

**Required Action:** Adequate and suitable storage facilities shall be provided for the storage of clean linen.

**Timescale:** 1 month

**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):** (b) At the time of inspection the patient in Room 5 Basil 1st floor was in isolation due to a query infection with C. Difficile. There was no indicator that the patient was in isolation.

**Required Action:** Review the current policy on isolating patients suffering from infectious disease and implement any corrective action which maybe deemed necessary in order to ensure that the risk of spreading the infection is controlled.

**Timescale:** Immediate

**Article: 14.** The registered proprietor and the person in charge of the nursing home shall (c) ensure that there are adequate arrangements for the laundering at regular intervals, and as occasion may require, of linen, clothing and other articles belonging or used by dependent persons maintained in the nursing home;

**Non Compliance(s):** Residents personal clothing is currently being washed and dried in the sluice rooms of Fatima 1st and 2nd floor. The location of these laundries in the sluice areas is unsuitable because of the risk of spreading infection.

**Required Action:** Suitable laundry facilities shall be provided for laundering resident’s personal clothing

**Timescale:** 3 months

**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(s):** Suitable sluice facilities have not been provided on Fatima 3rd floor.

**Required Action:** Adequate arrangements shall be made to prevent the spread of infection.

**Timescale:** 3 months
Article 15. The registered proprietor and the person in charge of the nursing home shall ensure that: (a) there is a sufficient supply of piped hot and cold water and that wash-hand basins are provided in each bedroom —

Non Compliance(s): Wash hand basins were not provided in bedrooms number 2 and 4 in Fatima 3rd floor.

Required Action: Wash hand basins with hot and cold running water should be provided in these bedrooms.

Timescale: 1 month

Article 15. The registered proprietor and the person in charge of the nursing home shall ensure that:—

(g) adequate arrangements are made for the proper disposal of swabs, soiled dressings, instruments, disposable syringes and sheets, incontinence pads and other similar substances and materials.

Non Compliance(s): Adequate arrangements have not been made for the proper storage and disposal of clinical waste which includes swabs, soiled dressings, instruments, disposable syringes and sheets, incontinence pads and other similar substances. In general the internal storage of these items was satisfactory however there are no external storage facilities. The present system of transporting clinical waste to Sligo General Hospital is unsuitable as personnel are not trained and licensed to carry clinical waste.

Required Action: Suitable and adequate external storage area shall be provided for the storage of clinical waste before it is removed from the premises. Such an area shall be well secured from unauthorised entry. Adequate arrangements shall be put in place to ensure the safe removal, transportation and disposal of all clinical waste generated by this premises.

Timescale: Immediate

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(s): Nurses are transcribing the scripts and they are not being signed by a GP. This is against An Bord Altranais guidelines

Required Action: An Bord Altranais guidelines to be followed at all times

Timescale: Immediate

Article 27.1. The registered proprietor and the person in charge of the nursing home shall: (a) take adequate precautions against the risk of fire, including the provision of adequate means of escape in the event of fire and make adequate arrangements for detecting, containing and extinguishing fires, for the giving of warnings and for the evacuation of all persons in the nursing home in the event of fire, and for the maintenance of fire fighting equipment;

(b) make adequate arrangements to secure by means of fire drills and practices that the staff, and so far as is practicable, dependent persons in the nursing home, know the procedure to be followed in the case of fire;

(c) take all reasonable measures to ensure that materials contained in bedding and the internal furnishings of the nursing home have adequate fire retardancy properties and have low levels of toxicity when on fire; (d) ensure that emergency lighting is provided in the home;

28.1 In every nursing home there shall be kept in a safe place a record of:—
(a) all fire practices which take place at the home;  
(b) all fire alarm tests carried out at the home together with the result of any such test and the action taken to remedy defects;  
(c) the number, type and maintenance record of fire-fighting equipment.

28.2 In every nursing home the procedure to be followed in the event of fire shall be displayed in a prominent place in the nursing home.

Non Compliance(s): Written confirmation from a competent person that the home complies with articles 27.1, 28.1 and 28.2 has not been provided to the Health Service Executive.

Required Action: Written confirmation from a competent person that the home complies with articles 27.1, 28.1 and 28.2 shall be provided. As there are plans to discontinue the use of the wing which is currently Knock Ward Ground Floor, 1st and 2nd floor this change of use and the implications on fire safety within the Nursing Home should be taken into consideration

Timescale: 3 months

Recommendations:
- A full assessment on admission to be carried out to identify those patients who are at risk of falls
- Ensure all patients have comprehensive assessment on admission. The care plan is the measure for determining whether appropriate care is delivered to the residents and changes to reflect the changing needs of the resident. It should include assessment, planning of care, implementation, and evaluation of care
- An increase in physiotherapy and occupational therapy hours based on the dependency of the resident
- Address Skill Mix to ensure proper supervision of Care
- To put in place a system to ensure supervision of mobile confused patients
- Each ward should have a Nurse Manager based on the layout of the Nursing Home and the large number of patients
- Update restraint consent forms
- As emergency call facilities are not generally provided in sanitary accommodation and shower/bath areas it is recommended that all these areas should be provided with suitable call facilities
- Advice on the suitability of the existing rail on the wall side of the main stairway should be sought from an occupational therapist
- While staff appeared to be aware of the different colour coding of cloths/mop buckets I recommend that these details should be posted in each of the sluice rooms.
• There are an adequate number of toilets and wheelchair toilets available however I have concerns about the accessibility of a number of the smaller WC cubicles located throughout the home which are in use. Mobile frames to assist are available in some and others have only one grab rail. The occupational therapist should be requested to examine the use of these toilets from a safety point of view. They are located on Basil 1st floor, Basil 2nd floor, Knock 2nd floor, Fatima 1st floor and Fatima 2nd floor.

• As there are a number of different unsuitable laundry areas used for resident personal belongings I recommend the laundry services/facilities be reviewed as it maybe more be economical to provide one centrally located laundry.

The Chairperson of the Inspection Team is to be notified in writing on or before the above date(s) indicating the steps taken by the nursing home to carry out the actions as required under the regulations.

Signed:

________________________________________  __________________________  __________________________
Chairperson  State Registered Nurse  Environmental Health
Nursing Home Inspection Team  Nursing Home Inspection Team  Office


cc Person-in-Charge