

	<b>Nursing Home Inspection Report</b>	
	Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.	
<b>Nursing Home</b>	Greystones Nursing Home	
<b>Number of Residents</b>	50	
<b>Registered for</b>	76	
<b>Nursing Home Address</b>	Church Road, Greystones, Co. Wicklow	
<b>Proprietor</b>	Mr. Paul O'Neill & Ms. Claire Carroll	
<b>Proprietor's Address (if different from above)</b>		
<b>Person-in-Charge of Nursing Home</b>	Ms. Zephra Johnson	
<b>Date and Time of Inspection(s)</b>	19.05.2009 10.10 - 17.10	
<b>Date report issued</b>		
<b>Summary of previous report findings</b>	Following the previous inspection from 20.11.2008, the nursing home has addressed all non-compliance issues outlined in the report.	
	<b>Current Inspection Summary Findings</b>	
<b>Compliance status</b>	<p><b>Findings of latest (unannounced) inspection which took place on 19.05.2009 10.10 - 17.10</b></p> <p>The inspectors findings based on the <a href="#">current nursing home inspectorate regulations</a> are as follows:</p>	

Inspection Report

Findings

<b>Summary Findings of Current Nursing Home Inspection</b>	<ul style="list-style-type: none"> <li><b>Under Care &amp; Staffing the nursing home was compliant with 22 out of 25 regulations.</b> On the basis of this inspection and under current nursing home regulations, there are issues that need to be addressed as outlined below in relation to the Care and Staffing.</li> </ul>
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Compliance e/Non Compliance

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- **Under Management the nursing home was compliant with 23 out of 23 regulations.**

On the basis of this inspection and under current nursing home regulations, the inspection team would consider the nursing home to have a good standard of management.

- **Under Physical Environment the nursing home was compliant with 11 out of 11 regulations.**

On the basis of this inspection and under current nursing home regulations, the inspection team would consider the nursing home provides a good Physical Environment for residents.

**Based on the most recent nursing home inspection the nursing home is non-compliant under one or more regulations. For more details see below.**

Regulation number	Article 5 Welfare and Wellbeing
	The registered proprietor and the person in charge shall ensure that there is provided for dependent persons maintained in a nursing home: <ul style="list-style-type: none"> <li>(a) suitable and sufficient care to maintain the person's welfare and well being, having regard to the nature and extent of the person's dependency</li> <li>(b) a high standard of nursing care</li> </ul>

**Non-Compliance (This section should be deleted if no non-compliances have been recorded)**

Non-Compliance	1. In relation to _____ it was noted while walking about the nursing home that this _____ had _____. It was reported to the inspection team that _____ had fallen the previous afternoon from _____ chair and that this was the cause. Given the medical history of _____ a GP assessment should have been requested at a minimum. There was no evidence to suggest this had been done
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Required Action	Immediate Review by the GP as discussed at the time of inspection
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Timescale	Immediate
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Non-Compliance	2. In relation to _____ it was noted from _____ records that _____ has not been referred to _____. _____ care Plan does outline goals to be achieved and _____ care plan does not outline the _____
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required actions adequately

Required Action

- (A) \_\_\_\_\_ nursing care plan should be reviewed and updated to be patient specific.
- (B) All Nursing staff should receive update training in Nursing Care Planning.

The care plans must be patient specific. Once the assessment has been completed and problems or potential problems identified a care plan should be initiated for the patient. The requirements of a care plan to include the following:

- Problem identification
- Goal specification
- Specific nursing interventions to include how, when and who will carry out the interventions within a specified time-frame.
- Review date
- All entries in the care plan must be dated and signed by the person who has formulated the plan

The plan should then be reflected in the daily nursing notes (nursing kardex)

Timescale

- (A) Immediately
- (B) Two months from receipt of this report

Non-Compliance

3. It was noted \_\_\_ cannot \_\_\_\_\_ yet there is no \_\_\_\_\_ care plan in place

Required Action

To devise and implement a \_\_\_\_\_ care plan tailored to this resident's needs

Timescale

Immediately on receipt of this report

Non-Compliance

4. In relation to \_\_\_ Waterlow score on April 17<sup>th</sup> 2009 was \_\_\_\_\_ which would place \_\_\_ at very high risk to develop pressure ulcers. There were a few sparse notes on \_\_\_ Waterlow assessment chart in relation to the use of an air mattress but there was no specific Pressure Ulcer prevention and management care plan in place.

Required Action

To devise and implement a goal specific care plan tailored to this resident's individual assessment of needs

Timescale

Immediately on receipt of this report

# Nursing Home Inspection Report

Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.

Regulation number **Article 19.1**

In every nursing home the following particulars shall be kept in a safe place in respect of each dependent resident

(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 nurses administering the drugs and medicines "

Non-Compliance 1. In relation to \_\_\_\_\_ the following non compliances were identified

- A. There was no frequency of administration specified for \_\_\_\_\_.
- B. \_\_\_\_\_ was not discontinued by the doctor and it did not specify how long it should taken for.
- C. \_\_\_\_\_ was prescribed but no route of administration was specified

2. In relation to \_\_\_\_\_ the following non compliance was identified;

\_\_\_\_\_ was prescribed but no frequency of administration was specified.

Required Action **1 -2 inclusive:**

- A. All nurses need to be referred An Bord Altranais Guidance to Nurses and Midwives on Medication Management 2007. Nurse Managers must ensure that these guidelines are implemented by all staff and that systems are put in place to support implementation of best practice guidelines.
- B. The GP should be notified immediately in order to rectify these omissions

Timescale **Immediately on receipt of this report**

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Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.

Regulation number

## Article 29 Medical preparations

The registered proprietor and the person in charge of the Nursing Home shall:

(a) Make adequate arrangements for the recording, safe keeping, administering and disposal of drugs and medicines

(b) Ensure that the treatment and medication prescribed by the medical practitioner is correctly administered and recorded

Non-Compliance

1. The new drug chart needs to be reviewed in relation to having two months administration records mixed up in one months "space". It might be prudent to have the pharmacy make their deliveries at the beginning of the month instead of in the middle of a month. There is the potential for a nurse who is not familiar with the system to inadvertently hold or double medicate a resident. The use of pharmacy stickers on the drug chart is not in line with best practice as it can be removed and the record can be altered

Drugs are being administered from blister packs dispensed by the pharmacist in which the drugs are not individually labelled. Although there is a description of each pill on the pharmacies sticker in the drug chart, i.e. 'round red', 'oblong yellow' there is still a risk that the wrong medication could be administered (or withheld) because of the similarities in appearance between different drugs.

This system also increases the risk that the nurse will administer drugs directly from the blister pack, without double checking the medication on the drug Kardex. Apart from the risk of mixing up the medications in the blister pack, there is a danger that the nurse will not be aware of the fact that the prescription may have been changed by the doctor since the original blister pack was dispensed by the pharmacist.

During the course of the Designated Officers' walkabout a dessert dish of drugs were found on a Resident's bedside locker and had been signed as having been administered at 0800 Hrs. these drugs were discovered around 12 Noon.

Required Action

(A) Systems need to be put in place to ensure that adequate nursing records of all residents' health,

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welfare, conditions and treatment given are completed on a daily basis and signed and dated by the nurse on duty

(B) Drugs must be administered from the doctors' original prescription sheet/record and not from the Pharmacists' stickers

**Timescale**  
 (A) Two Months from receipt of this report  
 (B) Immediately on receipt of this report

**Non-Compliance** 2. In relation to \_\_\_\_\_ the following non compliance was identified

(A) \_\_\_\_\_ is prescribed BD but is only applied daily according to \_\_\_\_\_ MARS sheet

**Required Action** (A) All nurses need to be referred An Bord Altranais Guidance to Nurses and Midwives on Medication Management 2007. Nurse Managers must ensure that these guidelines are implemented by all staff and that systems are put in place to support implementation of best practice guidelines.

**Timescale** Immediately on receipt of this report

All regulations, their reference numbers and the details of those regulations can be viewed in [Nursing Homes \(Care and Welfare\) Regulations, 1993](#).

## Comments and Recommendations

Comments and recommendations made by the inspection team as a result of the inspection

### General Recommendations

1. The PRN medications should be written up in the PRN section of the Drug Book and separated out from the regularly prescribed and administered drugs
2. It was noted in numerous rooms that the Residents' care plans were posted to the wall beside their bed or to the door of their wardrobes. In the interest of residents' privacy and dignity this practice should cease immediately and alternative arrangements should be made that do not involve the display of residents' information in places accessible to visitors

### Comments

1. Residents interviewed reported that they were happy with the care

Recommendations

	<b>Nursing Home Inspection Report</b>	
	<p>Health (Nursing Homes) Act, 1990 and the Nursing Homes (Care and Welfare) Regulations, 1993.</p> <p>they received and that staff were very helpful.</p> <ol style="list-style-type: none"> <li>2. Meals offered are varied and of high standard.</li> <li>3. The nursing home was noted to be clean and well maintained.</li> </ol>	
<p>This report has been completed/issued by</p>	<p>Ms. Marion Meany, A/Local Health Manager, Wicklow</p>	<p>Author</p>