

**HOLY FAMILY NURSING HOME**

**A COPY OF**

**THE STATEMENT  
OF PURPOSE  
AND FUNCTION**

## The Statement of Purpose & Function

### The Holy Family Nursing Home

December 2014

**Name of the Centre:** The Holy Family Nursing Home

**Centre ID with HIQA:** 0349

**Address:** Magheramore, Killimor, Ballinasloe, Co. Galway.

**Employer Registration Number:** 9530914K

**Telephone Numbers:** Nurses station – 090-9676046 (24hours)

Administration office – 090-9676044 (9am – 5pm)

Fax Number: 090-9676047

**E-Mail:** [patrickfahey@eircom.net](mailto:patrickfahey@eircom.net)

**Website:** [www.theholynursinghome.com](http://www.theholynursinghome.com)

**Registration:** The Holy Family Nursing Home is registered with HIQA since the 3<sup>rd</sup> January 2012.

**Date of Registration:** 3<sup>rd</sup> January 2012

**Expiry Date:** 2<sup>nd</sup> January 2018

Holy Family Nursing Home inspection reports can be accessed at [www.hiqa.ie](http://www.hiqa.ie)

The home is a member of Nursing Home Ireland since 2001 and Excellent Ireland Quality Association an independent accreditation programme since June 2006.

The Holy Family Nursing Home has three partners registered in the business. Patrick, Anne, and Brian Fahey. Patrick Fahey offers advice day to day to the Management of the Nursing Home. Anne Retired as Director of Nursing on the 17<sup>th</sup> of June 2007 and since then has become the Nursing Home services collector and dispatcher for outside services.

#### **There 7 Conditions of Registration are as follows:**

##### **Condition 1.**

The designated centre Holy Family Nursing Home shall be operated at all times in compliance with the Health Act 2007 as amended from time to time.

##### **Condition 2**

The designated centre Holy Family Nursing Home shall be operated at all times in compliance with the Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013 and the Health Act 2007 (Registration of Designated Centres for Older People) Regulations 2013 (as amended, consolidated, restated or replaced from time to time) and in compliance with all other regulations made under the Health Act 2007 as amended from time to time.

##### **Condition 3**

The designated centre Holy Family Nursing Home shall be operated at all times in compliance with the National Standards for Residential Care Settings for Older People in Ireland (as amended, consolidated, restated or replaced from time to time) and in compliance with all other standards made under the Health Act 2007 and as the Chief Inspector may notify to the registered provider from time to time.

##### **Condition 4**

The designated centre Holy Family Nursing Home shall be operated at all times in compliance with all other legislation, regulations and standards which are applicable to it.

**Condition 5**

Subject to any prohibitions or restrictions contained in any other condition(s), the designated centre Holy Family Nursing Home shall be operated at all times in accordance with and shall provide only the services set out in its Statement of Purpose, as delivered and amended from time to time in accordance with Article 5 of the Health Act 2007 (Care and Welfare of Residents In Designated Centres for Older People) Regulations 2013 (S.I. No. 415/2013) (as amended, consolidated, restated or replaced from time to time).

**Condition 6**

No person under the age of 18 years of age shall be accommodated at the designated centre Holy Family Nursing Home at any time.

**Condition 7**

The maximum number of persons that may be accommodated at the designated centre Holy Family Nursing Home is 35. The maximum number of residents who can be accommodated in The Holy Family Nursing Home is 35. A copy of the size of each room in the Nursing home is attached to the end of this file. The capacity provided by The Holy Family Nursing Home under the Health Act 2007 is 35.

**Welcome to The Holy Family Nursing Home**

**Our Aim** is to deliver a person centered module of care, which is driven by a respect for the **Rights** of the older people, and which is focused on quality of life measures which is meaningful to each individual resident, according to **their wishes**. Which includes their **End of Life Care** that is specific to their needs, known wishes, preference and beliefs? Providing an environment that is supportive of resident's families and staff dealing with end of life issues. The **Nutritional** requirements of the residents change over time with frequent reviews asking what the residents likes/dislikes are, specific dietary needs and access to the varied menus.

**Our Objective** is to support residents to live as independently as possible with privacy and dignity and provide security and stability for all residents in our care. Endeavour to ensure that staff are qualified and trained in delivering care in a professional manner at all times. Continue to provide an environment in which residents and staff are valued and are allowed to thrive.

**Our Ethos** is to provide a warm, welcoming friendly and caring home, with a home from home atmosphere, where our staff provide loving care and treat residents with dignity and respect making them feel valued as important members of The Holy Family Nursing Home's extended family.

### **Governance and Management**

**Registered Provider: Brian Fahey** is a BComm Graduate of UCD and went on to qualify as a Chartered Accountant. Brian has extensive experience as a Manager of medium and large size organization in a multi-national and local company environment. Brian partnered with his parents Paddy & Anne to build the Nursing Home in 2000 and has been actively involved in Managing the Nursing Home since its opening.

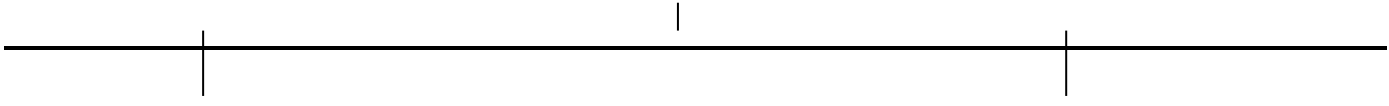
**Director of Nursing: Sinimol Rajan** – is a Registered General Nurse Bord Altranais from India. Sinimol had an adaptation 6 week course in Portiuncula Hospital, prior to working as a Nurse in our home. Sinimol has worked full time with the elderly since 2005, and has been Deputy Director of Nursing since July 2010. Sini has taken on the duties of Director of Nursing effective 8<sup>th</sup> October 2013.

**Deputy Director of Nursing: Teena Lisa Thomas** – is a registered general Nurse Bord Altranais approved from India since December 2011 and was employed as a Staff Nurse at Eliza Lodge Nursing Home in Co. Offaly. Teena commenced employment at Holy Family Nursing Home on the 7<sup>th</sup> January 2015. She was employed in a staff nurse role initially and was promoted to the role of deputy person in charge and has worked in that role since 17<sup>th</sup> July 2015.

## **THE ORGANIZATIONAL STRUCTURES OF THE HOLY FAMILY NURSING HOME**

**THE HOLY FAMILY NURSING HOME  
PROPRIETORS**

Brian, Paddy and Anne Fahey  
 |  
 Provider  
 Brian Fahey  
 Responsible for Quality & Continuous Improvement.  
 See job descriptions.



Person In Charge  
 Sinimol Rajan  
 See job description for responsibilities.

Administrator's  
 Annette Fitzgerald & Gillian Lyons  
 See Job Description

Teena Liza Thomas  
 Deputy Person-In-Charge (When Person In Charge on annual/sick leave)

**Day Shift**

**Evening Shift**

**Night Shift**



Nurse In Charge

Nurse In Charge

Nurse In Charge



**Head Care Assistant - Carmel Kelly** – See job description – responsible for all clinical care

**Deputy Head Care Assistant – Sinead Gilligan** – See job description – responsible for all clinical care

- Care Assistants
- Kitchen Staff
- House-Keeping & Maintenance
- Activities Staff
- Other Personnel that may be working or visiting during shifts.

**Staffing**

The Holy Family Nursing Home employs 37 staff; this equates to 28.04 WTEs. The following gives a breakdown of the staff complemented by grade and whole time equivalent (WTE) numbers.

Position	Number Employed	Whole time equivalent
Director of Nursing	1	1
Deputy Director of Nursing	1	1
Staff Nurses	3	3.2
Care Assistants	19	15.47
Activity Coordinators	2	1.3
Kitchen Staff	4	2.27
Housekeeping	2	1.4
Maintenance	1	1
Administrator	2	1.4

One staff nurse is on Maternity Leave and we are also utilising agency nurse.

### Care Provided

Our home caters for mainly over 65's years of age male and female, but we also cater for over 18's based on assessments of their needs and ability of our home to meet those needs. We provide 24 hr nursing care for general, mental, intellectual and physical disability. We care for long term, short term, convalescent, respite, post-operative, dementia, day care and weekend care which vary from low, medium, high to maximum dependency levels. For Resident's with dementia they have a safe walking area inside the building and an enclosed central court yard with wide paths if they wish to go outside for a walk or breathe of fresh air. Both front and back doors have a secure coded system in place, there are picture signs displayed of toilets, dayrooms, dining area, oratory, nurses' station to assist with orientation and familiarity. We also have a Wandering Resident System by Keaney Medical in place with the Nursing Home.

Descriptions of dependency levels are as follows:

**Low dependency:** This category refers to people who need some support in the community and the more independent residents in residential accommodation who require little nursing care. They are usually independently mobile but may use a walking stick and have difficulty managing stairs.

**Medium Dependency:** Person whose independence is impaired to the extent that he/she requires residential care because the appropriate support and nursing care required by the person cannot be provided by the community. Mobility is impaired to the extent that the person requires supervision or a walking aid.

**High Dependency:** Independence is impaired to the extent that the person requires residential care but is not bed bound. The person may have a combination of physical and mental disabilities, may be confused at times and be incontinent. He/she may require a walking aid and physical assistance to walk.

**Maximum Dependency:** Person whose independence is impaired to the extent that he/she requires nursing care. The person is likely to be bed bound, requires assistance with all aspects of physical care and may be ambulant but confused, disturbed and incontinent.

*Source: Long Stay Activity Statistics 2008 (Information Unit, Department of Health and Children)*

### Admission Criteria

Prior to admission the Person in Charge will make an assessment of dependency level and suitability of the nursing home. This can be done in a hospital or at person's home. In most cases the person and their family will be encouraged to come and view the nursing home. The prospective resident will be shown around and familiarised with their surroundings. On admission a Residents Guide Information Booklet is provided and explained to the resident and/or family member. A detailed assessment is taken in consultation with the resident and/or family

member and a **RESIDENTS CARE PLAN** is commenced within 2 days of admission reflecting the assessment findings and details the action to be taken by staff to ensure all aspects of health, personal and social care needs to the resident are met. The care plan is discussed and agreed with the involvement of the resident and/or his/her representative and is updated and reviewed as the residents needs change, no less frequently than at 4 monthly intervals

The Holy Family Nursing Home does not accept residents with acquired brain injuries or residents requiring tracheotomy care.

### **EMERGENCY ADMISSIONS**

**Emergency admission will be considered on an individual basis and always with the involvement of G.P, family, appropriate health care professionals and person in charge.**

- ❖ Emergency admission will be accepted provided that the person or agency referring the resident is able to provide sufficient information for the nurse in charge to determine that the resident has needs broadly within the services and facilities offered by the nursing home. The emergency agreement will state that admission will be short term and placement would only become long term after full assessment with the resident is carried out.
- ❖ Collect all information from residents G.P. (past and present medical history, current medications list, allergies etc.) nurse in charge will discuss if the residents have any concern.

Responsibility for medication will be taken over, with permission of resident and their family, from the resident and stored in an appropriate place as per information received from residents' G.P. and current supplier pharmacy

**On all admissions** where the Residents own **GP** is happy to continue caring for their needs. This is facilitated. Where own **GP** is no longer able to facilitate the Resident, there is access to a choice of GP of his/her own choice, including out of hours service.

### **Day Care**

Is available to anybody who may like to come to join the celebration of mass, participate in activities enjoy some lunch and home baking and meet other residents for the company and chat.

Residents are encouraged to participate in Activities if they desire which are carried out by trained staff. For residents who enjoy their own company and privacy their wish is respected.

Gentle walks are encouraged inside and outside the home where residents enjoy the view of the courtyard and surrounding green landscape.

### **Contract of Care**

By agreeing to take up residency within The Holy Family Nursing Home you will have signed a contract of care which ensures that you have a legally binding assurance of high quality care standards and that we have an

acknowledgement of your commitment to our terms and conditions. All contracts of care must be agreed and signed within one month of admission.

### **Religious Services**

- Each resident's spirituality is respected.
- Weekly mass by local parish priest and 3 monthly anointing (more often if a resident is ill or request of a family member). Where a resident is in hospital, Mass is offered for them for a quick recovery. Resident's are supported where a resident or family member is deceased with offering of mass, attending anniversary masses outside the home with their family or visiting the cemetery. Some of our residents like to give an offering to the priest or have a private word and this is facilitated, confession and blessings are also facilitated. Where a resident in the home passes away residents are supported in visiting and paying their respects accordingly to their wishes.
- Group rosary
- Oratory for private prayer and reflection for our residents, families and visitors.
- Local clergy from surrounding parishes visit residents who are from their parishes
- Visits from legion of Mary and Sisters of Mercy
- Minister Service is available if required

### **Other Services**

- Local Library Visits
- Newspapers are provided to residents who wish to avail of same. Browsing magazines.
- All resident's birthdays are celebrated and families are invited to join in celebrating same with a party and photographs which are later displayed and offered to the resident and families
- Families are invited to take their loved ones out for a spin in the car, Day trip, Weekend leave, to mass; shopping to allow them feels part of the community and creates a sense of well being.
- Residents have use of the public phone and where is not practical we bring a phone to them to ring their family. When families phone Holy Family Nursing Home a mobile phone is brought to the resident. A phone is now available at reception for Resident's use to receive and make calls; some of the residents receive E-Mails from relatives that are away or overseas.
- Access of TV and radios is available to each resident.
- Access to SKYPE.

### **Activities**

The Nursing Home provides various activities on daily and weekly basis e.g., Movement, Exercise, Music Afternoons, Poetry Reading, Book & Newspaper Reading, Library visits, Local GAA Visits, Outings on individual request. Physiotherapist sessions, Technology usage, Interaction with visits from the children of the local primary school and school students on work experience and any other suggested activities.

Please see our regular chart .

	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>	<b>SATURDAY</b>	<b>SUNDAY</b>
AM	Rosary	Rosary	Rosary	Rosary	Rosary	Rosary	Rosary



	Arts & Crafts	Gardening	Ladys Pampering	Mass	Mens Club	Relaxing Time	Mass on TV
PM	Hairdresser Services	Bingo	Word Games	Music Session	Bingo	Bingo & Word Games	Bingo
	Bingo	You Tube Browsing	Exercise Session	Cards & Games	Exercise Session	Assisted Walks	Family Visits
	Exercise Session	Cards & Games	Cards & Games		Cards & Games	Cards & Games	Cards & Games
	Cards & Games					Dog Therapy	

All our Therapeutic and Complimentary services are professionally registered & supervised throughout their attendance in Holy Family Nursing Home

- Alternative therapies
- Beautician
- Chiropody
- Dental work
- Escort Service and related Taxi expenses
- Hairdressing
- Hospital Visit
- Occupational Therapy
- Physiotherapy
- Psychiatry/Social Worker through referral from own GP.
- Nutritionist re diets
- Dietician through referral from Nutritionist
- Private Medical Visits
- Prescription Charges
- Speech & Language Therapy
- Toiletries and personal affects
- Medical Items not covered by the GMS
- Newspaper
- Dry Cleaning
- Reposing Costs  at Holy Family Nursing Home if requested and at the discretion of the Proprietor/Provider.

### **Dining/Catering**

We offer two sittings for our dinner and evening tea meals, the first sitting is for more dependant residents who require assistance. We offer full and varied menu with fresh food prepared daily by our experienced staff.

### **Temporary Vacation Of Nursing Home**

In the case of temporary absence, both the Resident and the Proprietor have reached a written understanding on the payment of fees under Contract of Care Agreement.

During temporary absence for hospitalisation or vacation the fees agreed shall continue to be payable by the Resident to the Proprietor.

It is the responsibility of representative or family to accompany resident to hospital appointments or social occasions. If they are unable or unwilling to do so, with the agreement of the resident or representative, The Holy Family Nursing Home will arrange for a carer and transport to accompany the resident at a cost. When a Holy Family Nursing Home carer accompanies the resident on a appointment or outing it is covered under our Insurance policy. If the resident is taken out by their family or representative they are not covered under the Insurance policy.

When family or representative takes a resident out of the nursing home they take responsibility for the resident's safety. They have to inform the nurse in charge and sign the residents outing book.

**EXCURSIONS** - Excursions organised by the Nursing Home are covered by the Home's insurance. The resident's family and GP are contacted to inform them of the upcoming trip and to seek permission for the resident to travel. The Home also ensure that there is adequate nursing and care staff to accompany the residents on trips depending on number travelling and levels of dependency

**PRIVACY & DIGNITY** - It is the policy of The Holy Family Nursing Home to respect privacy and dignity for each individual resident at all times. Our policy has been read and understood by all staff. Our aim is to treat others like we would like to be treated ourselves.

We comply with the Data Protection Act 1988 and Data Protection (Amendment) Act 2003. All staff have read our Confidentiality Policy and signed same.

**Arrangements made for respecting privacy and dignity in our home includes:**

- Addressing residents in an appropriate manner by the name they wish to be called.
- Knocking on the door before entering a room and waiting for a reply.
- Ensuring curtains are drawn closed while attending to the needs of residents in shared rooms.
- Ensuring residents receive care with dignity, courtesy, kindness and respect.
- Respect personal belongings.
- Respect resident's choice to be left alone, dine alone in bedroom, wearing a certain item of clothing.
- Ensuring privacy when speaking to a resident re: personal matters.
- Maintaining confidentiality and trust, keeping all residents records confidential.
- Providing time to listen to the needs of residents.
- Providing independence as able.
- Providing choice about residents care.
- Pictures, photos, mementos etc, are most welcome to adorn a resident's room and enhance the home from home environment promoting comfort, familiarity and safety.
- A small amount of cash only, is advised to be kept by the resident if they so wish and must be declared on admission and is clearly identified on the property list. . Under our EpicCare system all residents have a separate pocket money account where all outgoing and incoming transactions are recorded giving an up to date balance each time a transaction is recorded. When a resident wishes to make a withdrawal this is signed for by the resident or their representative and a staff member. At the end of each month the

resident or their representative will sign off on any other transactions put through the residents account and the total of the transactions from the month will be deducted from the residents balance. We ask for your support to come to the Admin Office between the hours of 9am – 5pm Mon-Fri when visiting to check same. A safe is provided for items of value and money where they are lodged. It is recommended to avail of it. The Nursing Home will accept no responsibility for loss of money or jewelry or other valuables that have not been given for safe keeping. A detailed account of all clothing, property, money, glasses etc. will be taken on admission.

- Engage residents in activities, residents meetings, and allow them to make decisions and suggestions to enhance their quality of life in the home and alleviate loneliness and isolation.
- Ensuring families and loved ones are allowed to participate in the residents care if they so wish.
- Ensuring that all residents, representatives feel able to complain without any fear of retribution.
- Ensure that there is zero tolerance of abuse through yearly training and supervision of staff.

### **CONSULTATION WITH RESIDENTS**

Consultations with Residents is on going with every day banter, and Residents are encouraged to express any concerns they have re any aspect of their care. Each resident is requested to complete a feedback form, and where they are unable to complete same – family are involved. Comment Box is also available at reception with the necessary forms (anonymous) to complete if they so wish. We have Residents meetings on a 3 monthly basis between management, residents and their families which enables residents to express opinions, concerns or new ideas for improvement and engage in the operation of the home. We encourage residents to participate in organized trips and choose a destination. Any complaints are taken very seriously and are followed up promptly ensuring that the resident/family are happy with the outcome.

### **RESIDENTS COMPLAINTS PROCEDURE**

- 1 If a resident or their representatives has any concerns regarding the Care and Conditions provided at the Holy Family Nursing Home they have a right to complain, in accordance with Part 10 of the Health Act 2007 (Care and Welfare of Residents in Designated Centers for Older People) Regulations 2013 and Standard 6 of the National Quality Standard for Residential Care Settings for Older people in Ireland. Residents and their representatives are encouraged to approach the **Person-In-Charge, Sinimol Rajan** or her Deputy or the qualified nurse in charge of the shift and discuss the matter, most complaints can be resolved at this level and this can be quite informal.
- 2 They can express their concern or complain anytime to any of the staff members. The concern/issue will be dealt with by the **Person-In-Charge, Sinimol Rajan**. If the resident does not feel comfortable raising a complaint themselves they can nominate a family member or a friend to do so on their behalf.
- 3 **Sinead Gilligan** is the nominated member of staff that they can take their complaint to if they don't feel comfortable taking it to the Person-In-Charge. Sinead's responsibility is to maintain records of all complaints detailing investigations and outcome of complaints and whether the complainant is satisfied the complaint is dealt with in a satisfactory manner. All records are kept for a period of not less than seven years.
- 4 The Proprietor must be informed of all complaints and if the resident or their representative do not wish to raise their complaint or concern with the nursing home staff or the Person-In-Charge they can contact our external advocate, **Bridie Hardiman (Tel: 090 9627178)**

- 5 The **Person-In-Charge, Sinimol Rajan** or nominated person **Sinead Gilligan** will inform the complainant of the investigation and the outcome of their complaint. The complaint should be acknowledged in writing within 5 days and investigated within 21 working days in accordance with our complaints policy.
- 6 The Proprietor shall ensure that the any resident who has made a complaint is not adversely affected by reason of the complaint having been made.
- 7 If the complainant is not satisfied with the outcome of their complaint or they have serious concerns about the running of the Nursing home they may contact:

**Bridie Hardiman, Gortavoher, Kiltormer, Ballinasloe, Co. Galway - Tel: 090 9627178**

- 8 If the complainant is not happy with the outcome of the Independent Person they may contact the Office of the Ombudsman:

**The Office of The Ombudsman, 18 Lower Leeson Street, Dublin 2 – Phone: LoCall 1890 22 30 30 or 01 6395600, Email: [ombudsman@ombudsman.gov.ie](mailto:ombudsman@ombudsman.gov.ie)**

### **Candles & Open Flame Device Policy**

- **Indoor Use**

At the Holy Family Nursing Home the use of candles and other flame decorative devices is not allowed within the Holy Family Nursing Home. We recommend Battery powered LED “candles” are recommended as an alternative for indoor decorative displays.

Upon admission to the Holy Family Nursing Home the nurse on duty explains this to the new resident and their relatives.

There is a “**Do not light candles**” sign displayed in the Oratory and displayed in each fire zone around the Holy Family Nursing Home.

- **Outdoor Use**

Outdoor use of candles and other open flame decorative devices are only allowed if a residents family requests a lighted candle and the following requirements are adhered to at all times:

- Attended at all times while lit.
- At least 7.62 Mtr from the Holy Family Nursing Home and vehicles.
- At least 1.82 Mtr feet from walkways.
- Keep away from combustible materials and vegetation.
- Completely extinguished after use.
- Persons holding candles must keep them away from others, and lit candles may not be passed from one person to another.

The [fire policy](#) and [Emergency evacuation plan](#) is available at the Nurses station and has been read and understood by all staff. Staff are provided with yearly fire training, use of fire equipment and regular fire alarm activation and monthly fire drills are carried out as per records in compliance with HIQA. All new staff receive fire training and are trained in fire drills.

## Fire Precautions and associated emergency procedures:

- There is a no smoking policy in the home. Any resident who wishes to smoke does so in the enclosed designated smoking area at the rear of the building near the back toilets and outside.
- There are “no smoking” signs in all rooms.
- There is a no candle policy in operation in the home and signs in all the corridors, day rooms, kitchen, etc.
- There is a smoke alarm in every room.
- Any confused resident is strictly supervised.
- Cigarette lighters are not left with confused residents.
- Metal bins are provided for smoking and emptied regularly.
- All exits are checked daily that they are clear to avoid cluttering or pile up of cardboard boxes.
- Fire extinguishers are placed throughout the building and serviced yearly.
- Fire alarm panel shows displayed zones in the home and is serviced quarterly.
- Attic Fire Sensors linked to the Ground Floor are displayed in different Zones and same is displayed at the Fire Panel
- Fire orders are displayed on notice board in reception and in the kitchen.
- Evacuation emergency plan is kept up to date with all admissions, transfers, discharges and deaths.
- Personal Emergency Evacuation Plan assessment of all residents is updated .
- Mock trial evacuations are carried out between zones every 3 months.
- All fire doors are checked for secure closing.
- All bedroom doors and most office doors have now been fitted with automatic fire door closures.
- Emergency lighting checked monthly.
- Any future purchases of materials aim to be fire retardant.
- Fire log book is available at the nurse’s station in which all systems servicing, testing and other relevant records are kept.
- Fire blankets are being purchased to cater for all high and max dependencies on an ongoing basis.
- Main gas valves supply is clearly marked with a sign outside the back building near the flow gas cylinder.
- There is a valve to shut off gas supply for kitchen and laundry at the right side of the dishwasher in the **Kitchen**. There is also a gas point valve to shut off gas supply in **Dayroom 1** and one **outside Dayroom 1** at the side of the building.
- The carbon monoxide alarm in Day Room 1 is checked daily to ensure it is working properly.
- Gas Detectors in Laundry, Kitchen, Boiler House & Dayroom 1
- Gas stove in day room 1 is serviced yearly.
- All electrical appliances are checked yearly.
- Towels or clothes will not be placed near portable heaters.
- Staff will see that all TV sets are switched off and that the plugs are removed at night and no mobile phones are left charging overnight.
- Portable heaters when in use will not be placed where they can be knocked over.
- Care will be taken in the use and storage of inflammable liquids which are stored in locked cupboard.
- Oxygen cylinders not in use are stored outside the building.
- The home is a safe and healthy working environment with safe access and egress.
- Missing person drill carried out every 3 months

## Emergency Procedures:

## **No Water Supply**

- Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – see Emergency Folder
- Inform Kitchen personnel.
- Contact local County Council office as to reason why water disruption, and the length of duration of water shortage. Tel: 090 9741019. Ability to supply extra water via tanker.
- Ensure provision of fruit juices, bottled water, nourishing drinks are on hand for consumption. (5 litre drums of water)
- Prioritize ill and vulnerable residents.
- Alert all staff.
- Have body wet wipes readily available for hygiene.
- If notice given, alert kitchen to fill extra containers.

## **No Telephone Service**

- Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – see Emergency folder.
- Mobile phone must be available at all times, to allow communication with G.P.s, Hospitals and relatives regarding resident care.
- Contact our phone providers: Eircom, tel: 1800 501 502 quoting account number: 83426443 and Infinity, tel: 01-2930913 (Direct Line), 01 2930090, Mobile 086 1709790 Email: gerry.kernan@infinityIT.ie
- Telephone Service now through Wi-Fi & Eircom

## **No Electricity**

- Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – See Emergency Folder
- Ring SSE Airtricity to query duration of power cut and reason why. Phone no. 1850 372999 quoting MPRN No. 10009851769.
- Identify residents that require oxygen concentrators and use oxygen cylinders available (stored outside at rear of the building).
- Identify residents nursed on pressure care mattresses and residents with electric beds.
- Reposition hourly in compliance with manual handling guidelines and Health and Safety.
- Ensure all emergency lights are working or operational.
- Ensure all residents are safe and kept calm and reassured.
- If the failure lasts longer than 8 hours, evacuate Residents from darkened areas.
- Have torches available.

## **No Heating**

- Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – see emergency folder
- Check heating system and room temperature in the rooms.
- Adrian Sfredel – Electrician on 086/1955142
- Rory Donnellan – Plumber on 086-1713474
- Provide portable oil heaters if temperature is low.
- Provide hot drinks and extra warm blankets.
- If during the day encourage residents to sit in dayrooms with a gas fire in Dayroom 1 and an electric fire in Dayroom 2.

- **In the event of any fire or loss of power HIQA needs to be informed within three working days of the incident using the NF09 form. Any occasion on which the fire alarm equipment is operated other than for the purpose of fire practice, drill or test of equipment the incident must be entered on a Quarterly Notifications Excel Spreadsheet (older people). This Excel sheet must be submitted to HIQA on a quarterly basis, on the following dates:**

- **31<sup>st</sup> of Oct, 31<sup>st</sup> of Jan 30<sup>th</sup> of April 31<sup>st</sup> of July**

### Loss of Gas

- Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – see emergency folder
- Gas Detectors installed in Laundry, Kitchen, Boiler House, Dayroom 1
- Rory Donnellan – Plumber on 086-1713474 – installed Gas Detectors
- Contact: Calor (01) 8555451 Dublin, or Dermot Higgins 087 2569513 sales rep.

### Washing Machine/Dryer breaks down

- Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – see emergency folder
- Billy Rooney contractors/engineers at 087 8299892/087 8345251/093 25700.
- Rory Donnellan – Plumber on 086-1713474 – installed Gas Detectors- dryer repairs

### Computer Break-down

- Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – see emergency folder
- In January 2012 a new server to provide back-up was installed. A high quality memory back-up system (Iomega) is now connected to the main computer in the office and weekly emails are sent with a progress back-up report.
- I.T support provided by Infinity. Tel. 01-2930090.

## EMERGENCY RESPONSE

### FIRE RESPONSE:

- Help those in immediate danger, but only if safe to do so
- Close door on the fire
- Activate the alarm (by breaking the glass at the nearest fire alarm point)
- **Call the fire brigade by dialing 999 or 112**
- Attack the fire, but only if safe to do so
- Do not let the fire come between you and your means of escape

### KEEP BETWEEN THE DOOR AND THE FIRE

- Know how to operate fire fighting equipment in your work area

- To operate a portable fire extinguisher
  - check the gauge to make sure it is full(some extinguishers may not have gauges)
  - pull the pin on the handle
  - get into a safe position to fight the fire  
(Keep down low – this allows you to get closer to the fire and minimizes the effects of rising smoke and heat) squeeze the trigger (some may have a button which needs to be pressed)
  - hold the extinguisher upright
  - aim extinguisher at the base of the fire, not the flames
  - sweep extinguisher from side to side
  - avoid smoke and fumes

### **REMEMBER**

**A Fire extinguisher is designed to put out small fires, before using an extinguisher, decide on the following;**

- **Is the extinguisher capable of putting out the fire?**
- **Whether you are placing your life in danger by attacking the fire?**
- **Always ensure Fire extinguisher is immediately replaced.**

### **Fire Evacuation**

- In the event of an evacuation of the building contact Paul Hardiman – Tel No: 086 0793625 and inform him that the building requires evacuation and Paul will contact the first two people on the fire cascading tree and they will in turn contact two others, copy of the Fire Cascading Tree attached.
- Do not waste time getting personal belongings
- Evacuate via nearest fire escape route(be familiar with escape routes)
- Move quickly but DO NOT RUN
- Evacuate residents closest to danger area first
- Evacuating residents in a horizontal movement to safe zones may be required
- Make a point of being familiar with evacuation procedures for your particular work areas
- The more mobile residents should be evacuated before less mobile residents
- Do not block corridors with beds/chairs
- Close smoke doors (& other doors and windows if time allows)
- Potentially dangerous equipment should be turned off (if safe to do so)
- Move to assembly area at the front of the Nursing Home Building left hand side marked clearly and wait for the all clear from the fire officer on duty.
- Staff should check all rooms and leave lights on as you go.

### **Evacuation plan to the outside of the building**

- If Evacuation warrants removing Residents outside to the emergency building (i.e. GAA building across the road) the following action must be taken:
- The provider/person in charge at the time takes charge. All staff should carry out instructions as requested by the person in charge quietly and calmly. Extra staff should be called in addition to present staff if needed, staff telephone numbers are on the notice board in the nurse's station and the administration office.



- Have roster, visitor's book and evacuation plan **readily available** at nurses station at all times.
- Reassure residents at all times.
- The person in charge takes control of the key and after hours the nurse on duty takes control.
- The key for the evacuation building is stored in administration office and all staff are aware of same. The ramp for wheelchair access is stored at the entrance to the GAA emergency building.
- The emergency evacuation building is opened during the day from 08.30am to 17.00pm Monday to Friday, after hours we have access with our own key.
- In the event of an emergency, traffic outside the building would have to be controlled. The provider/person in charge takes responsibility by contacting Gardai to provide traffic control across the road.
- The provider would contact wheel chair accessible transport – Noel Glynn (091 843050) or 087 2518585 to assist with transport or alternatively Damian Colleran 090-9642236
- The person in charge takes control and delegates staff to residents according to the evacuation care plan.
- If safe to do so grab extra blankets for residents
- 1/2 persons are assigned to the GAA building to stay with and reassure residents moved from the home.

### **Flood from the attic**

- All staff are aware to turn on all cold taps fully to reduce the power of the water from above.
- Contact the proprietor, if difficulty is experienced in turning off the main water supply in the attic. Ensure the valve is clearly marked turn clockwise to close.

### **Flood**

- Remain calm.
- Move Residents away from source of flood if risk of spreading.
- Disconnect any electrical equipment.
- Have first aid box readily available – 1 in Nurses station and 1 in the Kitchen.
- Protect people before property; - if in danger call 999 or 112.
- Evacuate as per Evacuation plan procedure.

### **Gas Leak**

- **Inform Person/Nurse in Charge, Maintenance, Proprietor & Manager – see emergency folder**
- Gas Detectors installed in Laundry, Kitchen, Boiler House & Dayroom 1 to detect Gas and if Gas is detected it will automatically shut off supply of Gas to the building.
- In the event of a gas leak all staff are also made aware of how and where to turn off the gas valve. There is a valve to shut off gas supply for kitchen and laundry at the right side of the dishwasher in the Kitchen. There is also a gas point valve to shut off gas supply in Dayroom 1 and one outside Dayroom 1 at the side of the building and outside at the Gas Tank.
- Contact Ballinasloe Gas – Rory Donnellan on 086 1713474.
- If in danger evacuate the area immediately as per evacuation plan procedure.

**Visiting is open** to families and friends and families are encouraged to be involved in the care of their loved ones if they so wish and are invited to join with them for refreshments and taste some of our delicious home baking or join them in mass or activities.

Visitors staying beyond a reasonable time to a person in a shared room may be asked to leave. If a resident indicates that they do not wish to see a particular visitor, their wish is respected.

DATE: _____
SIGNED: _____
Proprietor/Provider

### **Break down of Room sizes in Holy Family Nursing Home**

1A + 1B. Double Bedroom	3.54m x 4.20m = 14.868m <sup>2</sup>
2A, 2B Double Bedroom and ensuite	5.3m x 3.3m = 17.49m <sup>2</sup>
3A + 3B. Double Bedroom	3.828m x 3.89m = 14.89m <sup>2</sup>
4. Single Bedroom	2.427m x 3.828m = 9.3m <sup>2</sup>
5. Single Bedroom	2.427m x 3.2828m = 9.3m <sup>2</sup>
5A + 5B. Double Bedroom	16.737m <sup>2</sup>
6. Single Bedroom and ensuite	10.795m (roomsize) x 2.426m (ensuite) = 13.22m <sup>2</sup>
7. Single Bedroom and ensuite	10.795m (roomsize) x 2.425m (ensuite) = 13.22m <sup>2</sup>

8. Single Bedroom and ensuite	$10.795\text{m}(\text{roomsized}) \times 2.425\text{m}(\text{ensuite}) = 13.22\text{m}^2$
9. Single Bedroom and ensuite	$10.795\text{m}(\text{roomsized}) \times 2.425\text{m}(\text{ensuite}) = 13.22\text{m}^2$
10. Single Bedroom and ensuite	$10.795\text{m}(\text{roomsized}) \times 2.425\text{m}(\text{ensuite}) = 13.22\text{m}^2$
11. Single Bedroom and ensuite	$10.795\text{m}(\text{roomsized}) \times 2.425\text{m}(\text{ensuite}) = 13.22\text{m}^2$
12. Single Bedroom and sink	$2.660 \times 3.50\text{m} = 9.310\text{m}^2$
12A. Single Bedroom	$10.957\text{m}^2$
14. Single Bedroom	$2.415 \times 4.30\text{m} = 10.385\text{m}^2$
15. Single Bedroom	$3.316 \times 4.30\text{m} = 14.258\text{m}^2$
16. Single Bedroom	$2.950 \times 4.30\text{m} = 12.685\text{m}^2$
16A. Single Bedroom	$2.275 \times 4.18\text{m} = 9.510\text{m}^2$
17A + 17B Double Bedroom	$3.80\text{m} \times 4.18\text{m} = 15.884\text{m}^2$
18. Single Bedroom	$2.225 \times 4.18\text{m} = 9.300\text{m}^2$
19. Changing Room	$2.225 \times 4.18\text{m} = 9.300\text{m}^2$
20. Single Bedroom	$2.225 \times 4.18\text{m} = 9.300\text{m}^2$
21. Single Bedroom	$2.225 \times 4.18\text{m} = 9.300\text{m}^2$
22. Single Bedroom	$2.225 \times 4.18\text{m} = 9.300\text{m}^2$
23A + 23B Double Bedroom	$3.60\text{m} \times 4.18\text{m} = 15.050\text{m}^2$
24A + 24B Double Bedroom	$3.80\text{m} \times 4.18\text{m} = 15.884\text{m}^2$
25A + 25B Double Bedroom	$3.85\text{m} \times 4.18\text{m} = 16.093\text{m}^2$
26. Shower room with window	$1.90\text{m} \times 1.85\text{m} = 3.515\text{m}^2$
27. Shower room with vent	$1.90\text{m} \times 2.23\text{m} = 4.237\text{m}^2$
28. Toilet	$1.90\text{m} \times 1.55\text{m} = 2.945\text{m}^2$
29. Toilet	$1.90\text{m} \times 1.55\text{m} = 2.945\text{m}^2$
30. Smoking area	$1.90\text{m} \times 2.38\text{m} = 4.522\text{m}^2$
31. Boiler house	$1.68\text{m} \times 1.68\text{m} = 2.822\text{m}^2$
32. Dayroom 2	$6.67\text{m} \times 4.50\text{m} = 30.015\text{m}^2$
33. New Stores Room	$3.40\text{m} \times 3.50\text{m} = 11.730\text{m}^2$
34. Bathroom No.1 (front)	$2.907\text{m} \times 5.00\text{m} = 14.535\text{m}^2$
35. Linen Room	$15.097\text{m}^2$
36. Administration Office	$9.685\text{m}^2$

37. Staff Toilets/Disable Toilet	18.093m <sup>2</sup>
38. Sluice Room	2.10 x 4.30m = 9.030m <sup>2</sup>
39. Laundry Room	1.860 x 4.30m = 7.998m <sup>2</sup>
40. Kitchen Stores Room	2.400 x 3.600m = 8.640m <sup>2</sup>
41. Kitchen	26.868m <sup>2</sup>
42. Dining Room	7.750 x 5.00m = 38.750m <sup>2</sup>
43. Dayroom 1	58.260m <sup>2</sup>
44. Oratory	3.330 x 4.20m = 13.986m <sup>2</sup>
45. Family Room/Office	2.215 x 4.20m = 9.303m <sup>2</sup>
46. Reception Area	23.355m <sup>2</sup>
47. Nurses Station	2.200 x 4.20m = 9.240m <sup>2</sup>
48. Enclosed Courtyard	189.45m <sup>2</sup>
49. Staff Canteen	2.230 x 4.18m = 9.320m <sup>2</sup>
50. Bathroom 2 (Beside back door)	1.800m x 4.18m = 7.524m <sup>2</sup>
51. Hair Salon	2.82m x 1.86m = 5.24m <sup>2</sup>
52. Housekeeping Storage Room	3.370m x .970m = 3.2689m <sup>2</sup>