

Team Advocacy Inspection for January 11, 2018

Beard's Residential Care Facility #3

Inspection conducted by Toni Etheridge, P&A Team Advocate, and Michael Zuch, Volunteer



Photo Date 1-11-2018

Service Provider Information

Beard's Residential Care Facility #3 is in Florence County at 201 North Brockington Street, Timmonsville, South Carolina 29161-1503. Team arrived at the facility at 10:35 AM and exited the facility at 12:13 PM. The assistant administrator, Victoria Beard, was present during the inspection. There was 1 staff member present when Team arrived. The facility is licensed for 8 beds. The census was 8 with 7 residents present on the day of Team's inspection with one resident in the hospital. The DHEC license had an expiration date of 12-31-18. The administrator's license had an expiration date of 6-30-18. The facility had a written emergency plan to evacuate to Beard Residential Care Facility#1 at 123 North Warren Street, Timmonsville, South Carolina 29161-1433.

Overview of Visit

During Team's visit we interviewed three residents; talked to residents and staff; reviewed staff records, reviewed three residents' records, medication, and medication administration records, and toured the facility. The assistant administrator, Victoria Beard, was present. The facility had no hot water. Team conducted an exit interview with the assistant administrator.

Report Summary

During Team's inspection, the facility had no hot water. In bedroom#3, the smoke alarm chirped continuously. The on duty staff member's in-service training credentials, were not all current. Two residents wanted to nap, and one resident wanted new shoes.

The medication administration record for Fluoxetine Prozac's written order in the MAR read 40mg.; the bottle was labeled 20mg. The medication administration record dated 1/10/18 AM, for Divalproex 500mg. did not have staff signature. (Staff confirmed medication was administered). The medication administration record dated 1/11/18 AM, for Divalproex 500mg. did not have staff signature. (Staff confirmed medication was administered). The medication administration record dated 1/9/18 PM, for Desmopressin 0.2mg. did not have

staff signature. (Staff confirmed medication was administered). Another medication administration record dated 1/10/18 PM, for Desmopressin 0.2mg. did not have staff signature. (Staff confirmed medication was administered).

In bedroom#1, the dry-wall was separated from the wall, and a new light bulb was needed. In the kitchen, a large sheet of dry-wall being stored. The outdoor carpet at the front entrance was not tacked down and prevented the use of the front door. (The assistant administrator stated the outdoor carpet was being fixed). The facility's side door cannot be opened or closed with ease. In the front yard, the hand-railings were not secured. The outdoor Gazebo steps were not sturdy. On the front exterior back-side of the facility, a large iron rod was exposed. The exterior windows under the facility's crawl space was not secured. In the main bathroom, no paper towels were available (Paper towels were replenished while Team was present), and in the living-room were two worn sofas.

Areas of Commendation

- The assistant administrator was professional.
- The assistant administrator responded promptly to inspection requests.
- The TB risk assessment for the facility was current.
- Fire drills were conducted monthly and documented.
- The facility's annual fire extinguisher inspection was current.
- The facility's room temperature was comfortable.
- The Laundry room was secured.
- The residents are able to access all living areas in the facility.
- Two residents felt safe in the facility.
- Three residents liked living in the facility.
- Two residents stated the food was good.

Areas Needing Improvement

Health/Safety

- The facility had no hot water.
- In bedroom#3, the smoke alarm chirped continuously.

Supervision & Administrator

- The on duty staff member's in-service training credentials, were not all current.

Residents' Rights

- Two residents wanted to nap.
- One resident wanted new shoes.

Recreation

- No concerns were noted.

Residents' Activities of Daily Living (ADLs)

- No concerns were noted.

Medication Storage and Administration

- The medication administration record for Fluoxetine Prozac's written order in the MAR read 40mg.; the bottle was labeled 20mg.
- The medication administration record dated 1/10/18 AM, for Divalproex 500mg. did not have staff signature. (Staff confirmed medication was administered).
- The medication administration record dated 1/11/18 AM, for Divalproex 500mg. did not have staff signature. (Staff confirmed medication was administered).
- The medication administration record dated 1/9/18 PM, for Desmopressin 0.2mg. did not have staff signature. (Staff confirmed medication was administered).
- The medication administration record dated 1/10/18 PM, for Desmopressin 0.2mg. did not have staff signature. (Staff confirmed medication was administered).

Meals & Food Storage

- No concerns were noted.

Resident Records

- No concerns were noted.

Resident Personal Needs Allowances

- No concerns were noted.

Appropriateness of Placement

- No concerns were noted.

Personnel Records

- No concerns were noted.

Housekeeping, Maintenance, Furnishings

- In bedroom#1, the dry-wall was separated from the wall, and a new light bulb was needed.
- In the kitchen, a large sheet of dry-wall was being stored.
- At the front entrance, the outdoor carpet was not tacked down and prevented the use of the front door. (The assistant administrator stated the outdoor carpet was being fixed.)
- The facility's side door cannot be opened or closed with ease.
- In the front yard, the hand-railings were not secured.
- The outdoor Gazebo steps were not sturdy.
- The exterior back-side of the facility, a large iron rod was exposed.
- The exterior windows under the facility's crawl space were not secured.
- In the main bathroom, no paper towels were available. (Paper towels were replenished while Team was present).
- In the living-room were two worn sofas.

Additional Comment

- The residents complained that snacks must be purchased by the residents. In DHEC'S 2015 Standards for meals and snacks, the facility is expected to provide snacks to residents at no additional cost.

Please Note: Residents listed in the report are assigned random gender identification. This is for the purpose of making the report easier to read. However, the gender does not identify the individuals in the report.