

## Team Advocacy Inspection for August 3, 2015

### Briana's Residential Care Facility

Inspection conducted by Nicole Davis, P&A Team Advocate, and Kayla Sullivan, Volunteer



### **Facility Information**

Briana's Residential Care Facility is located in Allendale County at 252 Charleston Avenue N, Fairfax, SC 29827-4502. Team arrived at the facility at 11:02 AM and exited the facility at 2:09 PM. The administrator was not present for the inspection. The facility is operated by Genora Jenkins. There was one staff member present when Team arrived, another staff arrived soon after. The facility is licensed for 10 beds. The census was seven with six residents being present on the day of Team's inspection. The DHEC license had an expiration date of November 30, 2015. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to Seville's Residential Care Facility, 109 Bennett Lane, Hampton, SC 29224.

### **Overview of Visit**

During Team's visit we interviewed three residents; talked to residents and staff; reviewed three resident records, medications and medication administration records; and toured the facility. Team did not observe lunch; the residents were eating breakfast when Team arrived. Breakfast consisted of pancakes, eggs and sausage. Team conducted an exit interview with the staff.

### **Report Summary**

The hot water temperature in one bathroom was 80.8°. Although a resident has an oxygen machine in the bedroom, the facility did not have a "No smoking, oxygen in use" sign posted. In the yard, a broken bench had exposed nails. Resident A had a prescription for Simvastatin 20mg tablet, take one tablet by mouth daily and DOK 100mg soft gel, take one capsule by mouth twice daily. The MAR had not been signed for administration on 8/1/15, 8/2/15 or 8/3/15. Resident C had a prescription for Aspirin EC 81mg tablet, take one tablet by

mouth once daily. The MAR had not been signed for the morning administration. The facility did not have a one-week supply of non-perishable food available. A menu was not posted for residents to view. Several items in the refrigerator and freezer were not properly labeled. The most recent observation notes of records reviewed were dated May 2015. Resident B did not have a 72 hour assessment available although the resident had arrived a few months prior to Team's inspection. Resident C's most recent physical examination listed resident's diet as regular. In contrast, the individual care plan listed resident's diet as low salt. Resident C's individual care plan did not address ambulation and transfer needs and was not signed by the resident. One staff record reviewed did not have a SLED background check. Staff records reviewed did not include recreational training although one staff reported making the calendar and leading the activities. Several drawers throughout the facility did not have stoppers, causing the drawers to come out all the way when opened. Several drawers were broken. One bathroom had several loose tiles. The handrail on the back porch was wobbly. Several spots on the wooden front and back porch were soft and sunk when walked on, especially under the mats. The towel rack in one bathroom was broken. The water in one bathroom kept making a sucking, gurgling noise during Team's inspection.

### **Areas of Commendation**

- The facility has a nice front and back porch, with rocking chairs for residents to use. It also has a large yard with benches and a swing. There were comfortable chairs, plants, wall hangings and a television.
- Rooms were clean and the facility had a pleasant smell.
- A current recreation calendar was posted. Activities included checkers, musical chairs, matching, tic tac toe and card games.
- Team observed a good rapport between residents and staff.
- One resident reported "it pretty nice. It's the best place I can be right now." Another resident reported "the food is good."
- A current electrical, HVAC and fire alarm inspection was available for review.
- A current TB risk assessment was available for review.
- Emergency evacuation routes were posted throughout the facility.
- Two types of fire extinguishers were present and monitored monthly. Fire drills were also completed monthly.
- The controlled substance log was accurately documented.
- Individual care plans were current and updated as needed.

### **Areas Needing Improvement**

#### **Health/Safety**

- The hot water temperature in one bathroom was 80.8°.
- Although a resident has an oxygen machine in the bedroom, the facility did not have a "No smoking, oxygen in use" sign posted.
- In the yard, a broken bench had exposed nails. [Note: Staff reported the bench was scheduled to be discarded.]

## **Supervision & Administrator**

- No concerns noted.

## **Residents' Rights**

- No concerns noted.

## **Recreation**

- Residents would like to do more in the community.

## **Residents' Activities of Daily Living (ADLs)**

- One resident reported needing a vision exam.
- One resident reported needing sneakers.

## **Medication Storage and Administration**

- Resident A had a prescription for Simvastatin 20mg tablet, take one tablet by mouth daily and DOK 100mg soft gel, take one capsule by mouth twice daily. The MAR had not been signed for administration on 8/1/15, 8/2/15 or 8/3/15.
- Resident C had a prescription for Aspirin EC 81mg tablet, take one tablet by mouth once daily. The MAR had not been signed for the morning administration.

## **Meals & Food Storage**

- The facility did not have a one-week supply of non-perishable food available. [Note: The staff reported she was going grocery shopping later that day.]
- A menu was not posted for residents to view. [Note: Staff posted a menu in the living room while Team was present.]
- Several items in the refrigerator and freezer were not properly labeled.

## **Resident Records**

- The most recent observation notes of records reviewed were dated May 2015.
- Resident B did not have a 72 hour assessment available although the resident had arrived a few months prior to Team's inspection.
- Resident C's most recent physical examination listed resident's diet as regular. In contrast, the individual care plan listed resident's diet as low salt.
- Resident C's individual care plan did not address ambulation and transfer needs and was not signed by the resident. [Note: Staff reported the resident did not want to sign the care plan.]

## **Resident Personal Needs Allowances**

- No concerns noted.

### **Appropriateness of Placement**

- No concerns noted.

### **Personnel Records**

- One staff record reviewed did not have a SLED background check.
- Staff records reviewed did not include recreational training although one staff reported making the calendar and leading the activities.

### **Housekeeping, Maintenance, Furnishings**

- Several drawers throughout the facility did not have stoppers, causing the drawers to come out all the way when opened.
- Several drawers were broken. [Note: Staff reported some of the dressers were new but due to being overstuffed they broke.]
- One bathroom had several loose tiles.
- The handrail on the back porch was wobbly.
- Several spots on the wooden front and back porch were soft and sunk when walked on, especially under the mats.
- The towel rack in one bathroom was broken.
- The water in one bathroom kept making a sucking, gurgling noise during Team's inspection. [Note: Staff reported there was a recent clog and the plumber has been notified.]

### **Additional Recommendations**

- Two residents would like to move.

**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.