

## **Team Advocacy Inspection for May 2, 2017**

### **Burgess Residential Care #3**

**Inspection conducted by Nicole Davis, P&A Team Advocate, and Emily Caldwell, Volunteer**

#### **Facility Information**

Burgess Residential Care #3 (formally Woodard's Community Care Home I) is located in Florence County at 615 W Evans Street, Florence, SC 29501-3409. Team arrived at the facility at 10:13 AM and exited the facility at 12:09 PM. The administrator, Sandy Burgess, was present for part of the inspection. The facility is operated by Dellavision LLC. There was one staff member present when Team arrived; the administrator arrived approximately one hour later. The facility is licensed for nine beds. The census was six with five residents being present on the day of Team's inspection. The DHEC license had an expiration date of August 31, 2017. An administrator's license was current and posted. A written emergency evacuation plan was not available for review.

#### **Overview of Visit**

During Team's visit we interviewed three residents; talked to residents and staff; reviewed three residents' records, medications and medication administration records; and toured the facility. Team did not observe lunch. The posted menu listed veggie soup, peanut butter and jelly sandwich, applesauce and a drink for lunch. Team conducted an exit interview with the administrator.

#### **Report Summary**

The hot water temperatures in the kitchen only reached 113°. The TB risk assessment was partially completed. The administrator completed the remaining portion while Team was present. The most recent fire drill was completed on 1/3/17. The fire extinguishers were not monitored monthly; one did not have an inspection tag. A wall locker was blocking the hallway by the front door. Residents, Team and staff had to walk along the wall to pass. One resident wore extremely dirty and stained clothes. One resident had a torn comforter. Team could not verify the amount of perishable food available. The refrigerator and freezer were locked in a room that had a broken door knob. Staff and a resident tried picking the lock while Team was present. The administrator reported the door does not usually lock and she will have her husband come open the door. Items in the pantry had best by dates of 5/8/08, 11/22/11, 5/28/12, 6/3/14 and 4/16/15. Team found a rusted can of soup. Resident A's most recent individual care plan was not signed by the resident or a responsible party. Resident A's personal funds ledger did not consistently specify the description of each transaction. Resident C's personal funds ledger did not consistently specify the description of each transaction. The floor vent near the dryer was very dusty. The bathrooms did not have soap or a hand drying device available. Blinds throughout the facility were broken. There were three broken chairs in the back yard. There was a pile of clothes in the living room. The administrator reported the clothes had been donated and they were being stored there for now. The hand rail on the ramp was loose. There was a hole in the ceiling, near the back door, exposing the boards in the ceiling. An empty brandy container was in the front yard, broken pipes were on the side of the house and rotten wood was propped against the side of the house. The flooring was soft near the toilet and bathtub in the downstairs bathroom. The shower curtain in the upstairs bathroom

was badly stained and had black mold along the bottom of the curtain. The bathtub was partially black, stained and chipped. The molding around the tub was rotting. One bedroom had a broken chair.

### **Areas of Commendation**

- The front sitting area had cute tables and the walls had recently been painted with a neutral color.
- Team observed residents coming and going as they pleased.
- Residents reported “the food is to my liking” and “the food is good here.”
- A current activity calendar was posted. Activities included Church, checkers, card games, movies and arts & crafts.
- Residents reported recreational activities occurring at the facility.
- Residents appeared to have a good rapport with the staff.
- The facility was kept at a comfortable temperature.
- DHEC inspections were available for review.
- Annual HVAC, electrical and fire alarm inspections were current.
- Current First Aid/CPR training documentation was present. SLED checks were completed.
- Prescribed medications were present; the MAR was accurately documented. The controlled substance log coincided with the amount of medication present.
- Emergency evacuation routes were posted throughout the facility.
- Observation notes were current.

### **Areas Needing Improvement**

#### **Health/Safety**

- The hot water temperatures in the kitchen only reached 113°.
- The TB risk assessment was partially completed. The administrator completed the remaining portion while Team was present.
- The most recent fire drill was completed on 1/3/17.
- The fire extinguishers were not monitored monthly; one did not have an inspection tag.
- A wall locker was blocking the hallway by the front door. Residents, Team and staff had to walk along the wall to pass. [Note: The administrator reported it is scheduled to be placed by the dryer, it is too heavy to be moved without additional support.]

#### **Supervision & Administrator**

- A written emergency evacuation plan was not available for review.

#### **Residents’ Rights**

- No concerns noted.

## **Recreation**

- Residents would like to do more in the community.

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

- One resident wore extremely dirty and stained clothes.
- One resident had a torn comforter.

## **Medication Storage and Administration**

- No concerns noted.

## **Meals & Food Storage**

- Team could not verify the amount of perishable food available. The refrigerator and freezer were locked in a room that had a broken door knob. Staff and a resident tried picking the lock while Team was present. The administrator reported the door does not usually lock and she will have her husband come open the door.
- Items in the pantry had best by dates of 5/8/08, 11/22/11, 5/28/12, 6/3/14 and 4/16/15. Team found a rusted can of soup.

## **Resident Records**

- Resident A's most recent individual care plan was not signed by the resident or a responsible party. [Note: The administrator reported the resident refused to sign the plan.]

## **Resident Personal Needs Allowances**

- Resident A's personal funds ledger did not consistently specify the description of each transaction.
- Resident C's personal funds ledger did not consistently specify the description of each transaction.

## **Appropriateness of Placement**

- No concerns noted.

## **Personnel Records**

- No concerns noted.

## **Housekeeping, Maintenance, Furnishings**

- The floor vent near the dryer was very dusty.
- The bathrooms did not have soap or a hand drying device available. [Note: Staff immediately placed paper towels in the bathrooms.]
- Blinds throughout the facility were broken.

- There were three broken chairs in the back yard.
- There was a pile of clothes in the living room. The administrator reported the clothes had been donated and they were being stored there for now.
- The hand rail on the ramp was loose.
- There was a hole in the ceiling, near the back door, exposing the boards in the ceiling. [Note: The administrator reported a leak had recently been repaired.]
- An empty brandy container was in the front yard, broken pipes were on the side of the house and rotten wood was propped against the side of the house.
- The flooring was soft near the toilet and bathtub in the downstairs bathroom. [Note: The administrator reported the floor was scheduled to be replaced.]
- The shower curtain in the upstairs bathroom was badly stained and had black mold along the bottom of the curtain. The bathtub was partially black, stained and chipped. The molding around the tub was rotting. [Note: The administrator reported the bathroom was like this when she took over the facility but it is scheduled to be replaced.]
- One bedroom had a broken chair.

### **Additional Recommendations**

- One resident would like to move.
- Two residents would like to work.

**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.