Team Advocacy Inspection for September 27, 2016
Dixon's Community Care Home
Inspection conducted by Nicole Davis, P&A Team Advocate, and Laura Currie, Volunteer

Facility Information

Dixon's Community Care Home is located in Kershaw County at 1456 Dixon Road, Elgin, SC 29045-9030. Team arrived at the facility at 9:38 AM and exited the facility at 11:30 AM. The administrator, James Dixon, was present for part of the inspection. The facility is operated by Dixon's Community Care Home Inc. There was one staff member present when Team arrived; the administrator and his wife arrived shortly after Team. The facility is licensed for five beds. The census was three with three residents being present when Team arrived; one resident went to an appointment shortly afterwards. The DHEC license had an expiration date of September 30, 2017. An administrator's license was current and posted. The facility did not have a written emergency evacuation plan available for review.

Overview of Visit

During Team's visit we interviewed two 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 meal consisted of pork chops, pinto beans, okra, rolls, tea and water. Team conducted an exit interview with the administrator's wife and staff.

Report Summary

A current HVAC inspection was not available for review. The written emergency evacuation plan was not available for review. The vaccination records of a resident's dog were not available for review. In the backyard, a shed used for laundry was left unsecured. There were miscellaneous items in piles and stored overhead. One resident reported not getting along with his roommate and wanted to switch rooms. One resident is concerned about how his money is being spent and would like staff to sit down and explain everything. The activity calendar did not have the time or location posted. One resident reported needing soap and shampoo. One resident reported needing clothes and shoes. Team observed very few items in the resident's closet. One resident reported needing eyeglasses and dentures. Resident A had a prescription for Lorazepam 1mg tablet, take one tablet by mouth three times a day as needed. There were 82 tablets remaining. The controlled substance log was not accurately documented, with blanks on the log either 84 or 85 tablets were shown to be remaining. Resident C had a prescription for Nasonex SPR 50 Mcg, two sprays in each nostril every day. The medication was not available. Residents would like other food options. One resident reported "I am tired of pinto beans." Another resident reported "it is nasty." Resident A's most recent physical had the resident's diet listed as "normal." In contrast, the resident's individual care plan had the diet listed as "no added salt." Resident A's most recent physical had "yes" circled next to the question "Does the person require daily care of a registered or license practical nurse?" Resident C's most recent physical had the resident's diet listed as "low cholesterol/low salt." In contrast, the resident's individual care plan had the diet listed as "regular." Resident C's most recent individual care plan was dated 3/1/16. For some residents, the facility used the 72 hours assessment form in lieu of the individual care plan form, resulting in the forms not being signed by the

resident or a responsible party. Resident B had a pre-signed quarterly financial report for October 2016. His quarterly report dated March – June 2016 was signed by the staff only. Resident C had a pre-signed quarterly financial report for November 2016. The quarterly financial report for all records reviewed did not coincide with the documentation on the personal needs allowance; the amounts shown were less. Staff did not have a TB test available for review. Flooring throughout the facility was soft and sunk when stepped on, especially in the kitchen and resident bathroom.

Areas of Commendation

- Resident rooms were personalized.
- A current activity calendar was posted. Activities included personal shopping, Bingo, lie games, TV day and Church.
- Staff was very helpful during the inspection.
- Team observed residents coming and going as they pleased.
- Residents appeared to have a good rapport with the staff. One resident reported “it’s all right here.”
- The facility was kept at a comfortable temperature.
- Water temperatures were in the appropriate range.
- There was an adequate food supply.
- DHEC inspections were available for review.
- Annual electrical inspections were current.
- Current First Aid/CPR training documentation was present. SLED checks were completed.
- Emergency evacuation routes were posted throughout the facility. Fire drills were completed quarterly.
- Observation notes were current. The facility reviewed monthly notes with each resident, having them sign.

Areas Needing Improvement

Health/Safety

- A current HVAC inspection was not available for review. [Note: The administrator’s wife reported she would fax the current inspection form. As of 9/30/16 Team had not received the document.]
- The vaccination records of a resident’s dog were not available for review. [Note: The administrator’s wife reported she would fax the vaccination records. As of 9/30/16 Team had not received the document.]
- In the backyard, a shed used for laundry was left unsecured. There were miscellaneous items in piles and stored overhead.

Supervision & Administrator

- The written emergency evacuation plan was not available for review. [Note: The administrator’s wife reported she would fax the plan. As of 9/30/16 Team had not received the document.]

Residents' Rights

- One resident reported not getting along with his roommate and wanted to switch rooms. Team noted an empty room was available.
- One resident is concerned about how his money is being spent and would like staff to sit down and explain everything.

Recreation

- Residents would like to do more in the community.
- The activity calendar did not have the time or location posted.

Residents' Activities of Daily Living (ADLs)

- One resident reported needing soap and shampoo.
- One resident reported needing clothes and shoes. Team observed very few items in the resident's closet.
- One resident reported needing eyeglasses and dentures.

Medication Storage and Administration

- Resident A had a prescription for Lorazepam 1mg tablet, take one tablet by mouth three times a day as needed. There were 82 tablets remaining. The controlled substance log was not accurately documented, with blanks on the log either 84 or 85 tablets were shown to be remaining.
- Resident C had a prescription for Nasonex SPR 50 Mcg, two sprays in each nostril every day. The medication was not available. [Note: The administrator contacted the pharmacy while Team was present; the medication was filled and needed to be picked up.]

Meals & Food Storage

- Residents would like other food options. One resident reported "I am tired of pinto beans." Another resident reported "it is nasty."

Resident Records

- Resident A's most recent physical had the resident's diet listed as "normal." In contrast, the resident's individual care plan had the diet listed as "no added salt."
- Resident A's most recent physical had "yes" circled next to the question "Does the person require daily care of a registered or license practical nurse?" [Note: Staff reported this was incorrect and the doctor would be contacted to correct it.]
- Resident C's most recent physical had the resident's diet listed as "low cholesterol/low salt." In contrast, the resident's individual care plan had the diet listed as "regular."
- Resident C's most recent individual care plan was dated 3/1/16.
- For some residents, the facility used the 72 hours assessment form in lieu of the individual care plan form, resulting in the forms not being signed by the resident or a responsible party.

Resident Personal Needs Allowances

- Resident B had a pre-signed quarterly financial report for October 2016. His quarterly report dated March – June 2016 was signed by the staff only.
- Resident C had a pre-signed quarterly financial report for November 2016.
- The quarterly financial report for all records reviewed did not coincide with the documentation on the personal needs allowance; the amounts shown were less.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- Staff did not have a TB test available for review.

Housekeeping, Maintenance, Furnishings

- Flooring throughout the facility was soft and sunk when stepped on, especially in the kitchen and resident bathroom.

Additional Recommendations

- Two residents would like to move.
- Two residents would like to work.
- One resident would like to assist with meal preparation.

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.