

## **Team Advocacy Inspection for October 25, 2017**

### **Joy Community Care Home**

**Inspection conducted by Nicole Davis, P&A Team Advocate, and Susan Grinnell, Volunteer**

#### **Facility Information**

Joy Community Care Home is located in Richland County at 6800 Doby Drive, Columbia, SC 29203-5133. Team arrived at the facility at 4:25 PM and exited the facility at 6:28 PM. The administrator, Jonathan Douglas, was not present for the inspection. The facility is operated by Deborah Scott. There was one staff member present when Team arrived; the owner arrived near the end of the inspection. The facility is licensed for ten beds. The census was eight with all residents present on the day of Team's inspection. The DHEC license had an expiration date of November 30, 2017. A current administrator's license was posted. The facility had a written emergency plan to evacuate to Southern Heritage, 1713 Charleston Highway, West Columbia, SC 29169.

#### **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. Dinner consisted of tuna casserole, tossed salad, peaches and tea. A current menu was posted. Team conducted an exit interview with the staff.

#### **Report Summary**

The hot water temperature in the bathrooms were 128°, 128°, and 129°. Cats were present around the facility. Staff and residents reported they were strays but the residents enjoyed feeding the cats. Team suggested adopting the cats and getting proper vaccinations. The fire extinguishers were last serviced August 2016. DHEC inspections were not available for review. One resident reported needing soap and toothpaste. One resident reported needing pants. One resident needed a pillow and pillow case replaced. Medications were pre-pulled for the 8 PM administration on 10/25/17. Resident A's most recent physical had the resident's diet listed as "regular". In contrast, the resident's most recent individual care plan had the diet listed as "diabetic". Resident B's most recent physical had the resident's diet listed as "low sodium". In contrast, the resident's most recent individual care plan had the diet listed as "regular". Also, Resident B's care plan was not signed by the resident or a responsible party. Personal funds ledgers and quarterly reports were not available for review. Staff reported they were offsite at the office. The one staff member available at the time of the inspection did not have current CPR training. Staff reported training was scheduled for 10/29/17. The staff did not have documentation of a TB test or physical examination available for review.

#### **Areas of Commendation**

- The facility has a spacious yard. Resident rooms were clean. The tables contained decorative placemats and tablecloths.

- A current activity calendar was posted. Activities included bingo, yoga, bible study and walking. Residents reported recreational activities occurring at the facility.
- Residents reported attending the fair.
- Residents appeared to have a good rapport with the staff.
- The facility was kept at a comfortable temperature.
- There was an adequate supply of food present. One resident described the meals as “a balanced diet with all food groups”.
- Prescribed medications were present and the MAR was accurately documented. The controlled substance log coincided with the amount of medication present.
- A current TB risk assessment was available for review.
- Annual HVAC, electrical and pest control inspections were current.
- SLED checks were completed.
- Emergency evacuation routes were posted throughout the facility. Fire drills were completed monthly.
- Observation notes were current.

## **Areas Needing Improvement**

### **Health/Safety**

- The hot water temperature in the bathrooms were 128°, 128°, and 129°.
- Cats were present around the facility. Staff and residents reported they were strays but the residents enjoyed feeding the cats. Team suggested adopting the cats and getting proper vaccinations.
- The fire extinguishers were last serviced August 2016.

### **Supervision & Administrator**

- DHEC inspections were not available for review.

### **Residents' Rights**

- No concerns noted.

### **Recreation**

- One resident would like to attend a Church in the community.

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

- One resident reported needing soap and toothpaste.
- One resident reported needing pants.
- One resident needed a pillow and pillow case replaced.

### **Medication Storage and Administration**

- Medications were pre-pulled for the 8 PM administration on 10/25/17.

### **Meals & Food Storage**

- No concerns noted.

### **Resident Records**

- Resident A's most recent physical had the resident's diet listed as "regular". In contrast, the resident's most recent individual care plan had the diet listed as "diabetic".
- Resident B's most recent physical had the resident's diet listed as "low sodium". In contrast, the resident's most recent individual care plan had the diet listed as "regular". Also, Resident B's care plan was not signed by the resident or a responsible party.

### **Resident Personal Needs Allowances**

- Personal funds ledgers and quarterly reports were not available for review. Staff reported they were offsite at the office.

### **Appropriateness of Placement**

- No concerns noted.

### **Personnel Records**

- The one staff member available at the time of the inspection did not have current CPR training. Staff reported training was scheduled for 10/29/17.
- The staff did not have documentation of a TB test or physical examination available for review.

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

- No concerns noted.

### **Additional Recommendations**

- None

**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.