

## **Team Advocacy Inspection for February 7, 2017**

### **McKinney House**

**Inspection conducted by Nicole Davis, P&A Team Advocate, and Antwoine Williams,  
Volunteer**

#### **Facility Information**

McKinney House is located in Greenville County at 307 Miller Road, Mauldin, SC 29662-2034. Team arrived at the facility at 10:22 AM and exited the facility at 12:19 PM. The administrator, Richard Widener, was not present for the inspection. The facility is operated by Piedmont Center for Mental Health Services. There were seven staff members present when Team arrived. The facility is licensed for 10 beds. The census was seven on the day of Team's inspection. The DHEC license had an expiration date of July 31, 2017. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to Piedmont Center for Mental Health Services. 20 Powderhorn Road, Simpsonville, SC 29662.

#### **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. Lunch consisted of pizza pockets, vegetable sticks, apple sauce, and crystal light mixed with water. A current menu was posted. Team conducted an exit interview with the staff.

#### **Report Summary**

The most recent HVAC inspection was completed 1/15/15. One emergency light did not illuminate when tested. The hot water temperatures in the bathrooms were 137° and 138. There was not a one week supply of staple food present. Resident A's most recent individual care plan was dated 6/30/16. Resident B's most recent individual care plan was dated 12/30/15. Resident B's most recent physical examination had the resident's diet listed as regular. In contrast, the resident's individual care plan had the diet listed as 1800 calories. The most recent monthly observation note for the records reviewed was dated 12/5/16. Resident A's most recent individual care plan was dated 6/14/16. One staff record did not include a background check, a health assessment or a TB test. Another staff record showed the most recent training was conducted in 2014. The lights in bedroom 3 and bedroom 5 did not work. In bedroom 5, the door below the sink was broken

#### **Areas of Commendation**

- The facility was clean and free of any odors. Resident rooms were organized. It was very homelike with wall hangings, plants and season appropriate decorations.
- Team observed residents coming and going as they pleased.
- A current activity calendar was posted. Activities included exercise, movies and popcorn, a peer group and an outing.

- Residents reported going out to eat every Friday; the location was decided by a different resident each Friday.
- Staff was very helpful during the inspection.
- A current TB risk assessment was available.
- Annual electrical, fire alarm and sprinkler inspections were available for review.
- Residents appeared to have a good rapport with the staff.
- The facility was kept at a comfortable temperature.
- A resident birthday calendar was posted in the facility.
- Residents reported recreational activities occurring at the facility.
- DHEC inspections were available for review.
- All prescribed medications were present and the MAR was accurately documented.
- Emergency evacuation routes were posted throughout the facility. Fire drills were completed monthly.

## **Areas Needing Improvement**

### **Health/Safety**

- The most recent HVAC inspection was completed 1/15/15.
- One emergency light did not illuminate when tested.
- The hot water temperatures in the bathrooms were 137° and 138°.

### **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)**

- No concerns noted.

### **Medication Storage and Administration**

- No concerns noted.

### **Meals & Food Storage**

- There was not a one week supply of staple food present. [Note: Staff reported grocery shopping is conducted every Wednesday, the day following Team's inspection.]

### **Resident Records**

- Resident A's most recent individual care plan was dated 6/30/16.
- Resident B's most recent individual care plan was dated 12/30/15.
- Resident B's most recent physical examination had the resident's diet listed as regular. In contrast, the resident's individual care plan had the diet listed as 1800 calories.
- The most recent monthly observation note for the records reviewed was dated 12/5/16.
- Resident A's most recent individual care plan was dated 6/14/16.

### **Resident Personal Needs Allowances**

- No concerns noted.

### **Appropriateness of Placement**

- No concerns noted.

### **Personnel Records**

- One staff record did not include a background check, a health assessment or a TB test.
- Another staff record showed the most recent training was conducted in 2014. [Note: Staff reported training was scheduled for 2/15/17.]

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

- The lights in bedroom 3 and bedroom 5 did not work.
- In bedroom 5, the door below the sink was broken.

### **Additional Recommendations**

- One resident 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.