

Team Advocacy Inspection for May 23, 2016

Phaire's Care at Katura Springs

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



Facility Information

Phaire's Care at Katura Springs is located in Orangeburg County at 12488 Old Number Six Highway, Eutawville, SC 29048-9167. Team arrived at the facility at 10:30 AM and exited the facility at 2:21 PM. The administrator, Carlton Phaire, was present for the inspection. The facility is operated by Carlton Phaire. There were three staff members present when Team arrived; two more staff members arrived during the inspection. The facility is licensed for 48 beds. The census was 32 with 27 residents being present on the day of Team's inspection. The DHEC license had an expiration date of June 30, 2016. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to Dayspring Assisted Living, 5146 Towles Road, Hollywood, SC.

Overview of Visit

During Team's visit we interviewed four residents; talked to residents and staff; reviewed seven resident records, medications and medication administration records; and toured the facility. Lunch consisted of a fried salmon sandwich, corn, vanilla cookies and a drink. A current menu was not posted. Team conducted an exit interview with the administrator and staff.

Report Summary

The emergency light near the dining room did not illuminate when tested, it only buzzed. The fire extinguisher in Workstation #2 was not monitored monthly. The room was unlocked although it was a storage area with several miscellaneous items. The fire extinguisher near Washroom #1-141 was overcharged. Team noted the extinguisher was last monitored on 5/2/16. The calendar on one hallway was dated March 2016;

the calendar on the other hallway was dated April 2016. Residents would like a larger variety of activities. One resident reported “the activities aren’t worth [expletive].” One resident reported needing soap. One resident reported needing vision and dental exams. One resident reported needing a razor, shaving cream, and aftershave. One resident wore a sweater containing holes. Throughout the month of May, the MAR had not been initialed for administration for several residents. Food in the freezer was not properly labeled. One bag of meat had bust open, leaving the meat exposed. Resident E’s most recent physical examination did not address the resident’s dietary needs. Resident E’s most recent individual care plan did not address whether the resident had an advanced directive or power of attorney. Resident G’s most recent physical examination had “yes” circle regarding whether the resident required the daily care of a registered or licensed practical nurse. Resident G’s most recent individual care was completed 11/4/15 and did not address the resident’s dietary needs. Resident H’s most recent physical examination does not address whether the resident can participate in physical activities. Resident H’s most recent individual care plan does not address whether the resident has a power of attorney. Resident H’s most recent monthly observation note was dated March 4, 2016. The personal funds ledger of the records reviewed were last signed January 2015. None of the records reviewed contained quarterly financial reports or documentation of the residents receiving their allowance. Bathroom 111 did not have soap, toilet paper or a hand drying device. Staff reported residents sometimes use that bathroom. The sink in Bedroom 162 did not work and the handrail near the toilet was very wobbly. The bathroom connecting to Bedroom 168 and Bedroom 169 had a towel rack that was loose and did not have a hand drying device available. In Classroom 116, a wooden chair had parts that were broken. Bathroom 15 had a loose towel rack and rusted ceiling vent. Also, there was no soap available in the bathroom. The water fountain by Workstation #1-141 was dirty. It had white residue around the spout and a black substance on the drain. The bathroom connecting Bedroom 138 and Bedroom 139 did not have a hand drying device available. The bathroom connected Bedroom 132 and Bedroom 133 had a loose towel rack and the drain cover for the shower was sitting next to the drain.

Areas of Commendation

- The entrance to the facility is comfortable and homelike.
- Each hallway has an area with chairs and a television for residents.
- Staff members were cleaning when Team arrived.
- The bedrooms were spacious and clean.
- Residents were participating in a group when Team arrived.
- Residents appeared to have a good rapport with the staff.
- Residents reported being treated with respect.
- Team observed one staff member braiding a resident’s hair.
- The facility was kept at a comfortable temperature.
- There was an adequate supply of food present.
- The water temperatures were in the appropriate ranges.
- DHEC inspections were available for review.
- Annual HVAC, electrical, and fire alarm inspections were current.
- A current TB risk assessment was available for review.

- Current First Aid/CPR training documentation was present.
- Emergency evacuation routes were posted throughout the facility. Fire drills were completed monthly.

Areas Needing Improvement

Health/Safety

- The emergency light near the dining room did not illuminate when tested, it only buzzed.
- The fire extinguisher in Workstation #2 was not monitored monthly. The room was unlocked although it was a storage area with several miscellaneous items.
- The fire extinguisher near Washroom #1-141 was overcharged. Team noted the extinguisher was last monitored on 5/2/16.

Supervision & Administrator

- No concerns noted.

Residents' Rights

- No concerns noted.

Recreation

- Residents would like to do more in the community.
- The calendar on one hallway was dated March 2016; the calendar on the other hallway was dated April 2016.
- Residents would like a larger variety of activities. One resident reported "the activities aren't worth [expletive]."

Residents' Activities of Daily Living (ADLs)

- One resident reported needing soap.
- One resident reported needing vision and dental exams.
- One resident reported needing a razor, shaving cream and aftershave.
- One resident wore a sweater containing holes.

Medication Storage and Administration

- Throughout the month of May, the MAR had not been initialed for administration for several residents.

Meals & Food Storage

- Food in the freezer was not properly labeled.
- One bag of meat had bust open, leaving the meat exposed.

Resident Records

- Resident E's most recent physical examination did not address the resident's dietary needs.
- Resident E's most recent individual care plan did not address whether the resident had an advanced directive or power of attorney.
- Resident G's most recent physical examination had "yes" circle regarding whether the resident required the daily care of a registered or licensed practical nurse. [Note: The administrator reported this was an error and he would have the doctor correct it.]
- Resident G's most recent individual care was completed 11/4/15 and did not address the resident's dietary needs.
- Resident H's most recent physical examination does not address whether the resident can participate in physical activities.
- Resident H's most recent individual care plan does not address whether the resident has a power of attorney.
- Resident H's most recent monthly observation note was dated March 4, 2016.

Resident Personal Needs Allowances

- The personal funds ledger of the records reviewed were last signed January 2015.
- None of the records reviewed contained quarterly financial reports or documentation of the residents receiving their allowance. [Note: The staff responsible for finances stated residents do receive and allowance and she will do better with the documentation.]

Appropriateness of Placement

- No concerns noted.

Personnel Records

- One staff did not have a SLED background check available for review. [Note: Team received a background check via fax on 5/25/16.]

Housekeeping, Maintenance, Furnishings

- Bathroom 111 did not have soap, toilet paper or a hand drying device. Staff reported residents sometimes use that bathroom.
- The sink in Bedroom 162 did not work and the handrail near the toilet was very wobbly. [Note: The administrator reported the water was shut off to the sink because of maintenance issues.]
- The bathroom connecting to Bedroom 168 and Bedroom 169 had a towel rack that was loose and did not have a hand drying device available.
- In Classroom 116, a wooden chair had parts that were broken.
- Bathroom 15 had a loose towel rack and rusted ceiling vent. Also, there was no soap available in the bathroom.
- The water fountain by Workstation #1-141 was dirty. It had white residue around the spout and a black substance on the drain.
- The bathroom connecting Bedroom 138 and Bedroom 139 did not have a hand drying device available.

- The bathroom connected Bedroom 132 and Bedroom 133 had a loose towel rack and the drain cover for the shower was sitting next to the drain.

Additional Recommendations

- Three residents would like to move.
- Two residents would like to work. One resident would like to assist with yardwork around the facility.

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.