

Team Advocacy Inspection for January 18, 2018
Rockhaven Community Care Home
Inspection conducted by Toni Etheridge, P&A Team Advocate, and Monique Garvin,
Volunteer



Service Provider Information

Rockhaven Community Care Home is in Richland County at 524 Rockhaven Drive, Columbia, South Carolina 29223-7805. Team arrived at the facility at 12:30 PM and exited the facility at 2:30 PM. The administrator, Ritchie D. Barnes, was not present during the inspection. There was 1 staff member present when Team arrived. The facility is licensed for 10 beds. There were 7 residents present on the day of Team's inspection. The DHEC license had an expiration date of 1-31-18. The administrator's license had an expiration date of 6-30-18. The facility had a written emergency plan to evacuate to Joanne's Community Care Homes #1 at 756 Farrow Road Drive, Columbia, South Carolina 29223.

Overview of Visit

During Team's visit we interviewed four residents; talked to residents and staff; reviewed staff records, reviewed four residents' records, medication, and medication administration records, and toured the facility. Team did not observe lunch. Team conducted an exit interview with staff.

Report Summary

During Team's inspection, the overhead light in the dining-room needed two new light bulbs. The water at the dish washing station tested at 138° Fahrenheit, and the sanitizing station tested low at 139° Fahrenheit. In one resident's bathroom, the water tested high at 138.10° Fahrenheit, and the other resident's bathroom the water tested high at 137° Fahrenheit. In the hallway, near bedroom number #2, two hand-rails were loose. In the hallway, the middle ceiling light fixture needed a new light bulb. The facility's TB risk assessment was not available for review.

In the bathroom, across from bedroom#1, the grab-bar was loose and the shower-head was loose. The bath-tiles were not secured and the tub was dirty. There were no hand paper-towels in the bathroom. (The staff replenished the hand paper-towels while Team was present.) In the bathroom, the bath rug was dirty. In

the hallway, the light switch did not turn on the middle overhead light. In bedroom#2, the window blinds needed to be dusted. In the bathroom, near bedroom #4, an all-purpose cleaner was openly exposed. (Staff removed the product while Team was present.) Three residents did not know where the emergency contact numbers were located. The medication administration record dated 1/14/18 PM, did not have staff initials for Benztropine 1 mg. (Staff confirmed that medication had been administered.) The medication administration record dated 1/14/18 PM, did not have staff initials for Simvastatin 20 mg. (Staff confirmed that medication had been administered.) There were no ledger entries available to confirm residents received personal needs allowance for January 2018. (Staff stated residents were given a monthly allowance on Friday, January 12, 2018.)

At the rear exterior of the facility, the screen door was left unlocked. (Staff took all the residents out to an appointment; the back screen door was not secured.) In the back yard, an old bed mattress was under a tree, an old garden hose was on the ground, and the crawl space windows did not have screens or any fitted closures to secure the openings. In the front yard, wood was used to keep the gate closed.

Areas of Commendation

- The staff was courteous and professional.
- The staff responded promptly to inspection requests.
- The facility's evacuation routes were posted in conspicuous locations throughout the facility.
- The facility's fire extinguishers were inspected, initialed by staff and current.
- The facility's monthly fire drills were documented and current.
- The facility's room temperature was comfortable.
- The Laundry room was secured.
- The residents were able to access all living areas in the facility.
- The facility had a homelike feel with plants and framed quotes were hung on the walls.
- The on duty staff member's in-service training was current.
- The progress notes for residents were documented and current.
- Three residents liked living at the facility.
- Four residents felt safe in the facility.
- The facility's pet dog, a Maltese mix, had current vaccinations.
- The facility did not have offensive pet odors.

Areas Needing Improvement

Health/Safety

- In the kitchen, the water at the dish washing station tested at 138.10° Fahrenheit.
- In the kitchen, the water at the sanitizing station tested low at 139° Fahrenheit.
- In one resident's bathroom, the water tested high, 138° Fahrenheit.
- In one resident's bathroom, the water tested high, 137° Fahrenheit.
- In the hallway, near bedroom number #2, two hand-rails were loose.
- In the hallway, the middle ceiling light fixture needed a new light bulb.
- The facility's TB risk assessment was not available for review.
- In the bathroom, across from bedroom#1, the grab-bar was loose, and the shower-head was loose.
- There were no hand paper-towels in the bathroom. (The staff replenished the hand paper-towels while Team was present.)
- In the bathroom, near bedroom #4, an all-purpose cleaner was openly exposed. (Staff removed the product while Team was present.)
- Three residents did not know where the emergency contact numbers were located.
- At the rear exterior of the facility, the screen door was left unlocked. (Staff took all the residents out, and the back screen door was not secured.)

Supervision & Administrator

- No concerns were noted.

Residents' Rights

- No concerns were noted.

Recreation

- No concerns were noted.

Residents' Activities of Daily Living (ADLs)

- No concerns were noted.

Medication Storage and Administration

- The medication administration record dated 1/14/18 PM, did not have staff initials for Benzotropine 1 mg. (Staff confirmed that medication had been administered.)

- The medication administration record dated 1/14/18 PM, did not have staff initials for Simvastatin 20 mg. (Staff confirmed that medication had been administered.)

Meals & Food Storage

- No concerns were noted.

Resident Records

- No concerns were noted.

Resident Personal Needs Allowances

- There were no ledger entries to confirm residents received personal needs allowance for January 2018. (Staff stated, residents were given a monthly allowance on Friday, January 12, 2018.)

Appropriateness of Placement

- No concerns were noted.

Personnel Records

- No concerns were noted.

Housekeeping, Maintenance, Furnishings

- The overhead light in the dining-room needed two new light bulbs.
- In the bathroom across from bedroom#1, the bath-tiles were not secured and the tub was dirty.
- In the bathroom across from bedroom#1, the bath rug was dirty.
- In the hallway, the light switch did not turn on the middle overhead light.
- In bedroom#2, the window blinds needed to be dusted.
- In the back yard, an old bed mattress was under a tree.
- In the back yard, an old garden hose was on the ground.
- In the back yard, the crawl space windows did not have any fitted closures to secure the openings.
- In the front yard, wood was used to keep the gate closed.

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.