

Team Advocacy Inspection for October 15, 2015
Rockhaven Community Care Home
Inspection conducted by Nicole Davis, P&A Team Advocate, Bethany Schweer, MSW Intern,
and Kristy Caldwell, Volunteer



Facility Information

Rockhaven Community Care Home is located in Richland County at 524 Rockhaven Drive, Columbia, SC 29223-7805. Team arrived at the facility at 10:34 AM and exited the facility at 12:52 PM. The administrator was not present for the inspection. The facility is operated by Richie Barnes. There was one staff member present when Team arrived. The facility is licensed for 10 beds. The census was 10 with six residents being present on the day of Team's inspection. The DHEC license had an expiration date of January 31, 2016. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to BTU Rest Home, 113 State Road S-35-555, Bennettsville, SC 29512.

Overview of Visit

During Team's visit we interviewed three residents; talked to residents and staff; reviewed three resident records, medications and medication administration records; and toured the facility. Team did not observe lunch; residents had just finished when Team arrived. The posted menu was baked ham, lima beans, turnip greens, pears and cornbread. Team conducted an exit interview with the staff.

Report Summary

The most recent electrical inspection was dated 9/16/14. The most recent HVAC inspection was dated 9/16/14. An annual TB risk assessment was not available for review. Wood pieces were near the ramp with exposed nails. Three panels of glass were propped against the shed in the backyard. A shovel and rake were lying on the ground in the backyard. Cleaning supplies under the kitchen sink were not secured. The locations

of the activities were not available on the calendar. Residents reported activities do not occur and “are just for show.” Two residents reported needing a coat. One resident reported needing a hearing aid, a dental exam and dentures. Resident B had a prescription for Spiriva 18mcg CP-handihaler, inhale one content of capsule daily. The medication was not listed on the MAR. Medications were pre-signed and pre-made for the evening administration on 10/15/15 and the morning administration on 10/16/15. One can of mixed vegetables had an expiration date of 12/14. Resident B did not have a signed written agreement. Team observed a blank copy in resident’s records. Resident B’s most recent physical examination was dated 5/29/14. Resident C’s most recent physical examination was dated 11/14/13. The quarterly financial reports of records reviewed needed to be corrected. The reports had zero deposits and zero expenditure although the monthly ledgers showed money being deposited. None of the personal funds ledgers included medication costs. Resident A’s personal funds ledger had a \$20 decrease from the previous month with no explanation. Staff reported the \$20 went towards the resident’s medication copay. The SLED background check was not available for Team to review. The flooring in the kitchen sunk in several places. Several drawers throughout the facility did not have stoppers, causing the drawers to come out all the way when opened. Two handrails in the hallway had broken brackets leaving them unattached to the wall and caving in when pressed. A hand drying device was not available in the bathroom. One dining room table was very loose and wobbly. The tile in front of Bedroom 3 is broken and shifted when walked on.

Areas of Commendation

- The facility contained a large television, wall hangings, and a screened porch for residents to use. The facility has a nicely fenced-in yard. Resident rooms were personalized.
- A current recreation calendar was posted. Activities included bingo, exercise, Frankies Fun Park, movie night and a trip to the park.
- Team observed a good rapport between residents and staff.
- Team observed residents coming and going as they pleased.
- There was an adequate supply of food present.
- The water temperatures were in the appropriate ranges.
- Food was properly labeled.
- Staff records reviewed contained current First Aid/CPR training.
- Emergency evacuation routes were posted throughout the facility. Fire drills were conducted monthly.
- Observation notes were current.
- Individual care plans were current and updated as needed.
- Some residents attend a clubhouse.
- The dog had current vaccination records.

Areas Needing Improvement

Health/Safety

- The most recent electrical inspection was dated 9/16/14. Staff reported she would fax a copy of a current inspection. As of 10/20/15 a copy has not been received.

- The most recent HVAC inspection was dated 9/16/14. Staff reported she would fax a copy of a current inspection. As of 10/20/15 a copy has not been received.
- An annual TB risk assessment was not available for review.
- Wood pieces were near the ramp with exposed nails.
- Three panels of glass were propped against the shed in the backyard.
- A shovel and rake were lying on the ground in the backyard.
- Cleaning supplies under the kitchen sink were not secured.

Supervision & Administrator

- No concern noted.

Residents' Rights

- No concerns noted.

Recreation

- Residents would like to do more in the community.
- The locations of the activities were not available on the calendar.
- Residents reported activities do not occur and "are just for show."

Residents' Activities of Daily Living (ADLs)

- Two residents reported needing a coat.
- One resident reported needing a hearing aid, a dental exam and dentures.

Medication Storage and Administration

- Resident B had a prescription for Spiriva 18mcg CP-handihaler, inhale one content of capsule daily. The medication was not listed on the MAR.
- Medications were pre-signed and pre-made for the evening administration on 10/15/15 and the morning administration on 10/16/15.

Meals & Food Storage

- One can of mixed vegetables had an expiration date of 12/14.

Resident Records

- Resident B did not have a signed written agreement. Team observed a blank copy in resident's records.
- Resident B's most recent physical examination was dated 5/29/14.
- Resident C's most recent physical examination was dated 11/14/13.

Resident Personal Needs Allowances

- The quarterly financial reports of records reviewed needed to be corrected. The reports had zero deposits and zero expenditure although the monthly ledgers showed money being deposited.
- None of the personal funds ledgers included medication costs. Resident A's personal funds ledger had a \$20 decrease from the previous month with no explanation. Staff reported the \$20 went towards the resident's medication copay.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- The SLED background check was not available for Team to review. [Note: Staff reported the administrator kept those records with him.]

Housekeeping, Maintenance, Furnishings

- The flooring in the kitchen sunk in several places.
- Several drawers throughout the facility did not have stoppers, causing the drawers to come out all the way when opened.
- Two handrails in the hallway had broken brackets leaving them unattached to the wall and caving in when pressed.
- A hand drying device was not available in the bathroom.
- One dining room table was very loose and wobbly.
- The tile in front of Bedroom 3 is broken and shifted when walked on. [Note: Staff reported maintenance was already scheduled to repair the floor.]

Additional Recommendations

- Two residents would like to work.
- One resident would like to move.
- One resident would like to go to school.
- Residents would like books and to play basketball.

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.