

Team Advocacy Inspection for October 19, 2015
Sherman Residential Care
Inspection conducted by Nicole Davis, P&A Team Advocate, Mason Smith, MSW Intern and
Amanda Denson, Volunteer



Facility Information

Sherman Residential Care is located in Greenville County at 20 Mayfield Street, Greenville, SC 29601-1815. Team arrived at the facility at 10:45 AM and exited the facility at 1:31 PM. The administrator was present for the inspection. The facility is operated by Olise Sherman. There was one staff member present when Team arrived. The facility is licensed for 16 beds. The census was 13 with four residents being present on the day of Team's inspection. The DHEC license had an expiration date of March 31, 2016. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to Greenville Rescue Mission, 575 West Washington Street, Greenville, SC 29601.

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; observed lunch and toured the facility. Lunch consisted of Italian pasta and meatballs, seasoned zucchini, breadsticks and ice cream. A current menu was posted. Team conducted an exit interview with the administrator.

Report Summary

The most recent HVAC inspection available for review was dated 2/2/12. The most recent electrical inspection available for review was dated 2/2/12. An annual TB risk assessment was not available for review. The most recent fire drill was completed 1/8/15. The hot water temperature in one bathroom was 77°. One resident reported needing a vision exam. Resident B had a prescription for Metformin HCL 1000mg tablet,

take one tablet twice a day. In contrast, the MAR had Metformin HCL 500 mg tablet, take one tablet twice a day. Resident C had a prescription for Cetirizine HCL 10mg, take one tablet by mouth daily. The medication was not labeled. Several food items had expiration dates in 2012, 2013 and the beginning of 2015. Items in the refrigerator and freezer were not labeled. Resident A's most recent individual care plan was dated 4/18/15. Resident B's most recent individual care plan was dated 4/18/15. Resident C's individual care plan was incomplete, did not include a date and was signed by a staff member. Resident C did not have a signed written agreement with the facility available for review. Resident A and Resident C did not have photographs available. The SLED record, health assessment and TB test documentation of one staff was not available for review. One bathroom had bar soap present. In one bathroom, the sink knobs were reversed, controlling the opposite water temperature.

Areas of Commendation

- The facility contained a television, wall hangings, plants and board games. The facility has a large, well maintained yard.
- The facility was well lit, clean and had a pleasant smell.
- A current recreation calendar was posted. Activities included bingo, exercise, card games, storytelling and shopping.
- Team observed a good rapport between residents and staff.
- Residents reported feeling safe. One resident said "I can go to the administrator if I have a problem." Another resident reported "staff always talks to us."
- There was an adequate supply of food present.
- Lunch looked and smelled appetizing.
- Staff records reviewed contained current First Aid/CPR training.
- Emergency evacuation routes were posted throughout the facility.
- Fire extinguishers were monitored monthly.
- Observation notes were current.
- Residents had individual checking accounts.
- The dogs had current vaccination records. Residents interviewed enjoyed having the dogs around.
- When Team arrived, doors with water damage were being replaced.

Areas Needing Improvement

Health/Safety

- The most recent HVAC inspection available for review was dated 2/2/12. [Note: The administrator was in the process of organizing her records when Team arrived and stated she would fax the current inspection to Team once located. Team received inspection on 10/26/15.]
- The most recent electrical inspection available for review was dated 2/2/12. [Note: The administrator was in the process of organizing her records when Team arrived and stated she would fax the current inspection to Team once located. Team received inspection on 10/26/15.]

- An annual TB risk assessment was not available for review. [Note: Team received a current form on 10/26/15.]
- The most recent fire drill was completed 1/8/15. [Note: Team received current documents on 10/26/15.]
- The hot water temperature in one bathroom was 77°.

Supervision & Administrator

- DHEC Inspections were not available for review. [Note: Administrator faxed Team a copy on 10/22/15.]

Residents' Rights

- No concerns noted.

Recreation

- Residents would like to do more in the community.

Residents' Activities of Daily Living (ADLs)

- One resident reported needing a vision exam.

Medication Storage and Administration

- Resident B had a prescription for Metformin HCL 1000mg tablet, take one tablet twice a day. In contrast the MAR had Metformin HCL 500 mg tablet, take one tablet twice a day.
- Resident C had a prescription for Cetirizine HCL 10mg, take one tablet by mouth daily. The medication was not labeled.

Meals & Food Storage

- Several food items had expiration dates in 2012, 2013 and the beginning of 2015. [Note: Facility still had ample amount of food present.]
- Items in the refrigerator and freezer were not labeled.

Resident Records

- Resident A's most recent individual care plan was dated 4/18/15.
- Resident B's most recent individual care plan was dated 4/18/15.
- Resident C's individual care plan was incomplete, did not include a date and was signed by a staff member.
- Resident C did not have a signed written agreement with the facility available for review.
- Resident A and Resident C did not have photographs available. [Note: The administrator reported Resident A will not let anyone take his photo.]

Resident Personal Needs Allowances

- No concerns noted.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- The SLED record, health assessment and TB test documentation of one staff was not available for review. The annual training record of the staff member was available. [Note: Team received the SLED record on 10/22/15 and the health assessment/TB documentation on 10/26/15 via fax.]

Housekeeping, Maintenance, Furnishings

- One bathroom had bar soap present.
- In one bathroom, the sink knobs were reversed, controlling the opposite water temperature.

Additional Recommendations

- Two residents would like to work.

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.