

Team Advocacy Inspection for July 11, 2017

Willie S II RCH

Inspection conducted by Nicole Davis, P&A Team Advocate, and Emily Caldwell, Volunteer



Facility Information

Willie S II RCH is located in Sumter County at 46 Wilson Street, Sumter, SC 29150-3050. Team arrived at the facility at 10:38 AM and exited the facility at 12:22 PM. The administrator, Tracy Cooper, was present for part of the inspection. The facility is operated by Tracy Cooper. There was one staff member present when Team arrived; the administrator arrived approximately an hour later. The facility is licensed for five beds. The census was five with all residents present on the day of Team's inspection. The DHEC license had an expiration date of December 31, 2017. A current administrator's license was not posted. The facility had a written emergency plan to evacuate to Family Residential Care Home I, 21 Edwards Street, Sumter, SC 29150.

Overview of Visit

During Team's visit we interviewed two residents; talked to residents and staff; reviewed three residents' records, medications and medication administration records; and toured the facility. Lunch was not observed but was posted as Salisbury steak, baked potatoes, broccoli, biscuit, melons and a drink. Team conducted an exit interview with the administrator.

Report Summary

The hot water temperature in the kitchen only reached 106°. The shed in the background was unlocked and contained miscellaneous items. One resident reported needing a podiatrist appointment. Leftovers in the refrigerator was not labelled or dated appropriately. Resident A's most recent individual care plan was dated 1/10/17. Resident B's most recent individual care plan was dated 12/16/16. Resident C's most recent physical had the residents diet listed as "ADA". In contrast, the resident's most recent individual care plan had the diet listed as "regular". Resident B's most recent quarterly financial report was dated 12/1/16. Also, the residents'

ledger did not show documentation of the 2017 COLA increase. The administrator reported she did not receive a letter authorizing the increase. The one staff member available at the time of the inspection did not have CPR training. The administrator reported training was scheduled for 7/13/17. Staff also did not have documentation of a completed two-step TB test. The vent in the hallway had thick dust. Bingo was scheduled for 9am-11am on the day of Team's inspection. Residents were watching television when Team arrived.

Areas of Commendation

- The facility has a spacious yard. Resident rooms were personalized. The tables contained decorative placemats and tablecloths.
- A current activity calendar was posted. Activities included bingo, cardio time, walk-a-thon and flash back memories. Residents reported recreational activities occurring at the facility.
- Staff was very helpful during the inspection.
- Residents appeared to have a good rapport with the staff.
- The facility was kept at a comfortable temperature.
- There was an adequate supply of food present.
- Residents reported receiving large meal portions.
- DHEC inspections were available for review.
- Prescribed medications were present and the MAR was accurately documented. The controlled substance log coincided with the amount of medication present.
- A current TB risk assessment was available for review.
- Annual HVAC, electrical and fire alarm inspections were current.
- SLED checks were completed.
- Emergency evacuation routes were posted throughout the facility. Fire drills were completed monthly.
- Observation notes were current.

Areas Needing Improvement

Health/Safety

- The hot water temperature in the kitchen only reached 106°.
- The shed in the background was unlocked and contained miscellaneous items.

Supervision & Administrator

- The posted administrator's license had expired 6/30/17. The administrator reported her license had been renewed but that she had not received a replacement. [Note: Team verified on LLR's website that the administrator has a current license.]

Residents' Rights

- No concerns noted.

Recreation

- Residents would like to do more in the community.
- Bingo was scheduled for 9am-11am on the day of Team's inspection. Residents were watching television when Team arrived.

Residents' Activities of Daily Living (ADLs)

- One resident reported needing a podiatrist appointment.

Medication Storage and Administration

- No concerns noted.

Meals & Food Storage

- Leftovers in the refrigerator was not labelled or dated appropriately.

Resident Records

- Resident A's most recent individual care plan was dated 1/10/17.
- Resident B's most recent individual care plan was dated 12/16/16.
- Resident C's most recent physical had the residents diet listed as "ADA". In contrast, the resident's most recent individual care plan had the diet listed as "regular".

Resident Personal Needs Allowances

- Resident B's most recent quarterly financial report was dated 12/1/16. Also, the residents' ledger did not show documentation of the 2017 COLA increase. The administrator reported she did not receive a letter authorizing the increase.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- The one staff member available at the time of the inspection did not have CPR training. The administrator reported training was scheduled for 7/13/17. Staff also did not have documentation of a completed two-step TB test.

Housekeeping, Maintenance, Furnishings

- The sink in the bathroom was clogged. [Note: Staff began unclogging while Team was present.]
- The vent in the hallway had thick dust.

Additional Recommendations

- Two residents would like to move.

- One resident 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.