

Care with Love II
Team Advocacy Inspection for December 12, 2017
Inspection conducted by Toni Etheridge, P&A Team Advocate and Clarissa Guerrero
Volunteer



Photo Date 12-12-17

Service Provider Information

Care with Love II is located in Charleston County at 2109 Commander Road, North Charleston, South Carolina 29405-7704. Team arrived at the facility at 4:10 PM and exited the facility at 6:15 PM. The administrator, Sheila Nelson, arrived during the inspection. There was one staff member present when Team arrived. The facility is licensed for 5 beds. The census was 5 and there were 5 residents present on the day of Team's inspection. The DHEC license expired date on 8-31-17. The administrator's license expired date on 6-30-17. The facility had a written emergency plan to evacuate to Stay Bridge Hotel 1913 Huger Street, Columbia, South Carolina 29210.

Overview of Visit

During Team's visit we talked to the residents, the staff, the administrator and interviewed one resident; reviewed one resident's records, medication, and medication administration records; and toured the service provider's facility. Dinner consisted of whiting fillet fish, brown rice, mixed vegetables, spaghetti, chili dog and pudding. In response to the Teams' request for the name of the staff member on duty during the inspection, the staff member told Team one name while the administrator provided a different one for that worker. A November menu was posted at the time of Teams inspection. Before team left, the facility changed the posted menu to a December one. Team conducted an exit interview with the administrator, Sheila Nelson.

Report Summary

During Team's inspection, the kitchen water temperature tested at 115° Fahrenheit. The fire evacuation route was not posted in a conspicuous location in the facility. The fire drills were not documented for November and December. (The administrator stated fire drills had been conducted). In the bathroom, near the desk, the sink drained slowly. The facility's smoke detector beeped continually during the inspection. Laundry products were out in the open, and the laundry room light did not work.

Resident A had stained sheets; needed more socks; wanted to go to the park; wanted to fellowship more, and did not have a photograph on file. The medication administration records on the following dates did not have staff signatures: December 1-12th, December 11th at 7 AM, 4 PM and 11 PM for the Gabapentin medication.

The on-duty staff member stated her name was Linda Jenkins but, the administrator stated that her name was Brenda Gathers (or Gaithers). A current facility license and a current administrator's license was to be faxed to Team by Friday, December 15, 2017. To date, the Team has not received a current administrator's license.

In the kitchen, a can of El Paso Chile had a December 2015 best used by date. The administrator disposed of the can of food. The on-duty staff member's orientation and in-service records were not current. In the kitchen, the entire faucet base was loose. In the bathroom, the sink was not secured to the wall, the shower head was loose, and the grab-bar next to the toilet was loose. The bathroom, near the desk, a light bulb over the mirror needed a cover and the water in the sink drained slowly. In the foyer, one wall had two large holes, and light bulbs were needed. The air vent over the dining area needed to be cleaned.

Areas of Commendation

- The administrator and staff were polite.
- The facility was free of offensive odors
- The bathroom water temperatures were within the regulatory temperature guideline.
- The facility had been at a comfortable temperature setting.
- There were enough perishable and non-perishables food items available.
- One resident stated they felt safe in the facility and enjoyed living at the facility.
- The exterior grounds of the property were debris free.

Areas Needing Improvement

Health/Safety

- In the kitchen, the water temperature tested at 115° Fahrenheit.
- The fire evacuation route was not posted in a conspicuous location in the facility.
- The fire drills were not documented for November and December. (The administrator stated fire drills had been conducted).
- In the bathroom, near the desk, the water in the sink drained slowly.
- The facility's smoke detector continually beeped during the inspection.
- Laundry products were out in the open.
- The laundry room light did not work.
- Resident A had stained sheets.

Supervision & Administrator

- When asked, the on-duty staff member stated her name was Linda Jenkins, but the administrator stated the staff member's name was Brenda Gathers (or Gaithers).
- A current facility license was to be faxed to Team by Friday, December 15, 2017. (DHEC license document was received on 12/15/17 and was current).
- A current administrator's license was to be faxed to Team by Friday, December 15, 2017. (To date, Team has not received a current administrator's license).

Residents' Rights

- Resident A needed more socks.

Recreation

- Resident A wanted to fellowship more.
- Resident A wanted to go the park.

Residents' Activities of Daily Living (ADLs)

- No concerns were noted.

Medication Storage and Administration

- Resident A no staff signature on December 1-12th (Gabapentin).
- Resident A no staff signature on December 11th at 7 AM, 4 PM or 11 PM (Gabapentin).

Meals & Food Storage

- In the kitchen, a can of El Paso Chile had a December 2015 best used by date (The administrator disposed of the can, once the Team brought this to her attention).

Resident Records

- Resident A had no photograph on file.

Resident Personal Needs Allowances

- No concerns were noted.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- The on-duty staff member's orientation and in-service records were not current.

Housekeeping, Maintenance, Furnishings

- In the kitchen, the entire faucet base was loose.
- In the bathroom, near the desk, the water drained slowly and a light cover is needed.
- In the other bathroom, the shower head was loose, and the grab-bar next to the toilet was loose.
- In the foyer, one wall had two large holes.
- In the foyer, light bulbs were needed.
- The air vent over the dining area needed to be cleaned.

Additional Recommendations

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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.