

Team Advocacy Inspection for April 27, 2018
Dixon's Community Care Home
Inspection conducted by Kristy Caldwell, P&A Team Advocate,
Clarissa Guerrero, MSW Intern, and Hayley Cannon, Volunteer

Facility Information

Dixon's Community Care Home is located in Kershaw County at 1456 Dixon Road, Elgin, SC 29045-9030. Team arrived at the facility at 9:41 AM and exited the facility at 12:04 PM. The administrator, James Dixon, was present for part of the inspection. The facility is operated by Dixon's Community Care Home Inc. There was one staff member present when Team arrived; the administrator and his wife arrived shortly after Team. The facility is licensed for five beds. The census was five with four residents being present when Team arrived. The DHEC license had an expiration date of September 30, 2018. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to Blaney Elementary School, 1621 Smyrna Road, Elgin, SC 29045.

Overview of Visit

During Team's visit we interviewed three residents; talked to residents and staff; reviewed three residents' records, medications and medication administration records; and toured the facility. Team did not observe lunch. The posted menu consisted of pizza rolls, apple, tea and water. A substitution menu of chicken, mashed potatoes, tea and water was posted. Team conducted an exit interview with the administrator.

Report Summary

The water temperature in the kitchen was 116.9 degrees. The last Fire Alarm inspection was 3/2/17. One resident is concerned about how his money is being spent and would like staff to sit down and explain everything. Two residents feel staff does not treat them with respect. One resident did not have at least seven outfits of clothing for each season. Resident C had a prescription for Ondansetron ODT 4 mg TB, take one tablet by mouth every four to six hours as needed. The medication was not available. The facility did not have at least 2 days of perishable food and seven days of non-perishable food on site. Two residents reported they do not get enough food to eat and seconds are not available upon request. Residents had not signed the individual care plans reviewed by Team. Resident C's most recent individual care plan did not indicate whether the resident had an advance directive. Resident B's most recent physical had the resident's diet listed as "low calorie" but the resident's individual care plan listed the diet listed as "regular." Resident A's most recent quarterly financial report was June 2017. Resident B's most recent quarterly financial report was April 2017. Resident C did not have a quarterly financial report available. Resident A's personal funds ledger was not signed by the resident for the 4/1/18 distribution. One staff member did not have current medication management training. Two staff members did not have current in-service training, including basic first aid training. One staff member did not have a health assessment available for review. The hallway by the resident bedrooms smelled heavily of cigarette smoke. The dining area did not have enough tables and chairs for each resident.

Areas of Commendation

- Resident rooms were personalized.

- A current activity calendar was posted. Activities included card games, bingo, ball toss, and movie night.
- Team observed residents coming and going as they pleased.
- DHEC inspections were available for review.
- Emergency evacuation routes were posted throughout the facility.
- Observation notes were current. The facility reviewed monthly notes with each resident as shown by the residents' signatures.
- Fire drills were completed on a quarterly basis, on different shifts.
- Necessary SLED checks were completed.
- A current TB risk assessment was available for review.
- Records reviewed were organized.

Areas Needing Improvement

Health/Safety

- The water temperature in the kitchen was 116.9 degrees.
- The last Fire Alarm inspection was 3/2/17.

Supervision & Administrator

- No concerns noted.

Residents' Rights

- One resident is concerned about how his money is being spent and would like staff to sit down and explain everything.
- Two residents do not feel as though staff treat them with respect. They reported that staff 'talk down to residents'.
- One resident reported that they do not feel safe due to 'other residents fighting one another' and 'people stealing my stuff' [Note: No records of fighting were found in the facility incident reports. No occurrences of theft were documented in any of the resident's observation notes].

Recreation

- One resident would like to do more activities in the house.

Residents' Activities of Daily Living (ADLs)

- One resident reported needing pants.
- One resident did not have at least seven outfits of clothing for each season.
- One resident reported needing shampoo and toothpaste.
- One resident reported needing to go to the eye doctor.

Medication Storage and Administration

- Resident C had a prescription for Ondansetron ODT 4 mg TB, take one tablet by mouth every four to six hours as needed. The medication was not available.

Meals & Food Storage

- The facility did not have at least 2 days of perishable food and seven days of non-perishable food on site.
- Two residents reported they do not get enough food to eat and seconds are not available upon request.
- There were two non-perishable items that had exceeded their 'best by' dates of 7/1/18 and 01/2018.

Resident Records

- Residents had not signed the individual care plans reviewed by Team.
- Resident C's most recent individual care plan did not indicate whether the resident had an advance directive.
- Resident B's most recent physical had the resident's diet listed as "low calorie" but the resident's individual care plan listed the diet listed as "regular."

Resident Personal Needs Allowances

- Resident A's most recent quarterly financial report was June 2017.
- Resident B's most recent quarterly financial report was April 2017.
- Resident C did not have a quarterly financial report available.
- Resident A's personal funds ledger was not signed by the resident for 4/1/18.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- One staff member did not have current medication management training. The last training was 3/17/17.
- Two staff members did not have current in-service training, including basic first aid training. The last training was dated 3/17/17.
- One staff member did not have a health assessment available for review.
- Two staff members did not have current CPR cards available for review.

Housekeeping, Maintenance, Furnishings

- Flooring throughout the facility was soft and sunk when stepped on, especially in the kitchen and resident bathroom.
- The hallway by the resident bedrooms smelled heavily of cigarette smoke.
- The dining area did not have enough tables and chairs for each resident.

Additional Recommendations

- Two residents would like to do more in the community.
- Two residents would like to work.
- One resident would like to move.

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.