

Team Advocacy Inspection for August 8, 2018
Midway Residential Care Facility #5
Inspection conducted by Kristy Caldwell, P&A Team Advocate,
and Arjun Gaikwad, Volunteer

Facility Information

Midway Residential Care Facility #5 is located in Spartanburg County at 4026 Moore Duncan Hwy., Moore, SC 29369-9721. Team arrived at the facility at 11:28 AM and exited the facility at 3:14 PM. The administrator, Linda Walker, was not present during the inspection. The facility is operated by Midway Residential Care Facility Inc. The staff assisted Team with information and documentation needed for the inspection. Two staff members were present when Team arrived. The facility is licensed for twelve beds. The census was twelve with twelve residents present on the day of Team's inspection. The DHEC license had an expiration date of 12/31/2018. The administrator's license was current and posted. The facility had a written emergency plan to evacuate to Poplar Springs Baptist Church, 790 Highway 417, Moore, SC 29369.

Overview of Visit

During Team's visit we interviewed three residents; talked to residents and the staff; reviewed three residents' records, medication, and medication administration records; and toured the facility. The meal listed on the menu was turkey and gravy over toast, mashed potatoes, green beans and peaches with topping. Residents reported the meal served was the same as posted. Team conducted an exit interview with staff.

Report Summary

The handrails by the back door of the facility were loose. The water temperature in the kitchen was 117 degrees. The handicapped women's bathroom stall by the activity room was cluttered with tables, chairs, and other storage. One resident reported not having privacy on the telephone. Items in the refrigerator and freezer were not labeled appropriately, the labels did not specify what the items were. Resident A's most recent individual care plan listed their diet as Diabetic (ADA). In contrast, the resident's most recent physical listed their diet as Regular. Resident B's quarterly report for April-June 2018 was not signed by the resident. The central bathroom and men's restroom in the activity room did not have toilet paper. The men's restroom in the activity room also had a light flickering and the toilet was dirty. The exit sign hanging from the ceiling in the activity room was loose.

Areas of Commendation

- Residents reported they enjoyed living at the facility.
- A wide-variety of activities were available to residents daily.
- All residents reported having enough toiletries.
- There was an adequate supply of food.
- Residents' diets were displayed and dietary substitutions were available.
- The facility had two types of fire extinguishers available.
- Current First Aid/CPR training documentation was present. SLED checks were completed.
- Emergency evacuation routes were posted throughout the facility.
- Fire drills were completed monthly.
- Observation notes were current.
- Records were well organized and documented.
- The controlled substance log was properly documented. The amount of medication present coincided with the log.

Areas Needing Improvement

Health/Safety

- The handrails by the back door of the facility were loose.
- The water temperature in the kitchen was 117 degrees.
- The handicapped women's bathroom stall by the activity room was cluttered with tables, chairs, and other storage.

Supervision & Administrator

- No concerns noted.

Residents' Rights

- One resident reported not having privacy on the telephone.

Recreation

- One resident reported wanting to do more in the community.
- One resident would like more opportunities to eat at local restaurants.

Residents' Activities of Daily Living (ADLs)

- No concerns noted.

Medication Storage and Administration

- No concerns noted.

Meals & Food Storage

- Items in the refrigerator and freezer were not labeled appropriately, the labels did not specify what the items were.

Resident Records

- Resident A's most recent individual care plan listed their diet as Diabetic (ADA). In contrast, the resident's most recent physical listed their diet as Regular.

Resident Personal Needs Allowances

- Resident B's quarterly report for April-June 2018 was not signed by the resident.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- No concerns noted.

Housekeeping, Maintenance, Furnishings

- The central bathroom and men's restroom in the activity room did not have toilet paper.
- The men's restroom in the activity room also had a light flickering and the toilet was dirty.
- The exit sign hanging from the ceiling in the activity room was loose.

Additional Recommendations

- One resident reported wanting to move.
- One resident reported wanting 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.