

**Team Advocacy Inspection for August 22, 2018**  
**Pondview Residential Care Home #1**  
**Inspection conducted by Kristy Caldwell, P&A Team Advocate,**  
**and Synolta Morris, Volunteer**



### **Facility Information**

Pondview Residential Care Home #1 is located in Richland County at 5342 Hardscrabble Road, Blythewood, SC 29016-9171. Team arrived at the facility at 9:48 AM and exited the facility at 12:32 PM. The administrator, Katherine Thomas, was present for part of the inspection. The facility is operated by Katherine W. Thomas. There was one staff member present when Team arrived; the administrator arrived approximately an hour later. The facility is licensed for 12 beds. The census was 12 with 10 residents being present on the day of Team's inspection. The DHEC license had an expiration date of April 30, 2019. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to Carson Community Care Home, 10219 Farrow Road, Blythewood, SC 29016.

### **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 meal scheduled for the day consisted of fish sticks, French fries, corn and a choice of beverage. Team conducted an exit interview with the administrator.

### **Report Summary**

There was one staff member present with ten residents when Team arrived. The water temperature in the kitchen was 115.4 degrees. There was a bed and bedframe blocking one of the exit doors in a side hallway. A current TB Risk Assessment was not available for review.

Resident B was prescribed Lactase 3,000-unit caplet, take one tablet by mouth twice a day. The medication was not available. Some of the labels on items in the freezer did not identify the contents. Resident A's and Resident C's personal funds ledgers did not reflect their August funds disbursement. Resident A and Resident C did not have completed quarterly reports for April-June 2018. In the second hallway bathroom, water leaked from the hot water knob when it was turned on.

### **Areas of Commendation**

- The facility was homelike. It contained wall hangings, nice placemats and center pieces, plants and was well furnished. Residents had a nice sitting area in the backyard.
- Resident rooms were clean and personalized.
- Team observed a good rapport between residents and staff.
- Staff was very helpful during the inspection.
- All residents reported feeling safe and respected at the facility.
- The MAR was accurately documented.
- DHEC inspections were available for review.
- Current First Aid/CPR training documentation was present. Necessary SLED background checks were present.
- Emergency evacuation routes were posted throughout the facility.
- Fire drills were completed monthly.

### **Areas Needing Improvement**

#### **Health/Safety**

- There was one staff member present with ten residents when Team arrived.
- The water temperature in the kitchen was 115.4 degrees.
- There was a bed and bedframe blocking one of the exit doors in a side hallway [Note: The administrator stated that the bed was getting picked up later that day].

#### **Supervision & Administrator**

- A current TB Risk Assessment was not available for review.

#### **Residents' Rights**

- No concerns noted.

#### **Recreation**

- One resident would like to do more in the community.

#### **Residents' Activities of Daily Living (ADLs)**

- One resident reported needing shorts.

- Two residents would like additional cigarettes during the day [Note: The administrator stated residents are allowed a total of three cigarettes each day, one after each meal].

### **Medication Storage and Administration**

- Resident B was prescribed Lactase 3,000-unit caplet, take one tablet by mouth twice a day. The medication was not available [Note: Staff at the facility called the pharmacy and confirmed the medication would be arriving in a delivery later that day].

### **Meals & Food Storage**

- One perishable item had exceeded its best-by date [Note: Staff disposed of the item during Team's visit].
- Some of the labels on items in the freezer did not identify the contents.

### **Resident Records**

- No concerns noted.

### **Resident Personal Needs Allowances**

- Resident A's and Resident C's personal funds ledgers did not reflect their August funds disbursement.
- Resident A and Resident C did not have completed quarterly reports for April-June 2018.

### **Appropriateness of Placement**

- No concerns noted.

### **Personnel Records**

- No concerns noted.

### **Housekeeping, Maintenance, Furnishings**

- Neither bathroom had toilet paper, a hand drying device, or hand soap available. [Note: The administrator reported residents get paper towels as they need it due to issues with residents clogging toilets with it in the past. Residents keep personal rolls of toilet paper and hand soap in their rooms.]
- In the second hallway bathroom, water leaked from the hot water knob when it was turned on.

### **Additional Recommendations**

- One resident 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.