

Team Advocacy Inspection for October 22, 2018
Ladson's Residential Care Home
Inspection conducted by Kristy Caldwell, P&A Team Advocate,
and Jessica Garrido, Volunteer



Facility Information

Ladson's Residential Home Care is located in Charleston County at 1116 Camp Road, Charleston, SC 29412-8831. Team arrived at the facility at 11:20 AM and exited the facility at 1:30 PM. The administrator was present for the inspection. The facility is operated by Pauline Ladson. The facility is licensed for five beds. The census was two with two residents present on the day of Team's inspection. The DHEC license had an expiration date of September 30, 2019. The administrator's license was current. The facility had a written emergency plan to evacuate to Pettis Angels Residential Care, 2614 Madden Drive, Charleston, SC 29405.

Overview of Visit

During Team's visit we interviewed two residents; talked to residents and staff; reviewed two resident records, medications and medication administration records; and toured the facility. Team did not observe lunch. The posted menu was low sodium vegetable soup, crackers, applesauce, and a choice of beverage. The administrator confirmed the meal posted would be the same meal prepared. Team observed items for lunch in the kitchen that corresponded with the posted lunch menu. Team conducted an exit interview with the administrator.

Report Summary

The water temperature in the bathroom was 122.8 degrees. Fire extinguishers were last monitored August 1, 2018. The most recent HVAC inspection was 6/27/17. The most recent Fire Safety inspection was 6/27/17. An activities calendar was not posted. Resident A and

Resident B had loose and unidentified medication at the bottom of their medication boxes. Resident A was prescribed Sertraline HCL 100 mg, take 1.5 tablets once a day. The MAR had Sertraline HCL 100 ml, take one tablet once a day. Resident B was prescribed Dorzolamide 2% Ophthalmic Solution, place one drop into both eyes three times a day. The MAR was not signed for the 8 AM administration on 10/22/18. Resident B was prescribed Metformin (Glucophage) 500 mg, take two tablets twice a day with breakfast and dinner. The MAR was pre-signed for the 8 PM 10/22/18 and 8 AM 10/23/18 administrations. Resident B was prescribed Meloxicam 7.5 mg, take one tablet daily as needed. The MAR had Meloxicam 7.5 mg, take one tablet daily. Resident B's medication box included Acetaminophen 325 mg, take two tablets every 6 hours as needed. This was not listed on his MAR. Food items in the pantry and refrigerator were dated but not labeled. Resident A's most recent individual care plan update was not signed by the resident. Resident B's most recent individual care plan update was not signed by the resident. Resident B did not have a photograph in his resident file. Resident B's admission TB test was not available for review. Resident B did not have quarterly reports available. Resident B's personal funds ledger was last updated on 6/4/18. One staff record did not have a SLED background check available for review. There were several cracked and broken floor tiles by the door of the bathroom. The bathtub was missing the hot water knob as well as the central knob needed to turn the shower on. The left railing by the backdoor was loose. There was a large gap between the backdoor and the hallway flooring. Miscellaneous items and trash were found in the side yard.

Areas of Commendation

- The facility had comfortable furniture for the residents to use. The living room contained a television, nice couches, plants, and wall hangings. Residents had recently received new bedroom furniture.
- Residents reported being able to come and go as they pleased.
- Team observed a good rapport between residents and staff.
- The facility had two types of fire extinguishers throughout. Fire drills were conducted monthly.
- Resident records reviewed were organized.
- Staff records reviewed had current CPR/first aid training.
- There was an adequate supply of food.
- The facility was kept at a comfortable temperature.

Areas Needing Improvement

Health/Safety

- The water temperature in the bathroom was 122.8 degrees [Note: Acceptable range is 100-120 degrees].
- Fire extinguishers were last monitored August 1, 2018.
- The most recent HVAC inspection was 6/27/17.
- The most recent Fire Safety inspection was 6/27/17.

Supervision & Administrator

- No concerns noted.

Residents' Rights

- No concerns noted.

Recreation

- An activities calendar was not posted.

Residents' Activities of Daily Living (ADLs)

- One resident reported needing dentures.

Medication Storage and Administration

- Resident A and Resident B had loose and unidentified medication at the bottom of their medication boxes.
- Resident A was prescribed Sertraline HCL 100 mg, take 1.5 tablets once a day. The MAR had Sertraline HCL 100 ml, take one tablet once a day.
- Resident B was prescribed Dorzolamide 2% Ophthalmic Solution, place one drop into both eyes three times a day. The MAR was not signed for the 8 AM administration on 10/22/18.
- Resident B was prescribed Metformin (Glucophage) 500 mg, take two tablets twice a day with breakfast and dinner. The MAR was pre-signed for the 8 PM 10/22/18 and 8 AM 10/23/18 administrations.
- Resident B was prescribed Meloxicam 7.5 mg, take one tablet daily as needed. The MAR had Meloxicam 7.5 mg, take one tablet daily.
- Resident B's medication box included Acetaminophen 325 mg, take two tablets every 6 hours as needed. This was not listed on his MAR.

Meals & Food Storage

- Food items in the pantry and refrigerator were dated but not labeled.
- Five perishable items in the pantry had exceeded their best-by dates.

Resident Records

- Resident A's most recent individual care plan update was not signed by the resident.
- Resident B's most recent individual care plan update was not signed by the resident.
- Resident B did not have a photograph in his resident file.
- Resident B's admission TB test was not available for review.

Resident Personal Needs Allowances

- Resident B did not have quarterly reports available.
- Resident B's personal funds ledger was last updated on 6/4/18.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- One staff record did not have a SLED background check available for review.

Housekeeping, Maintenance, Furnishings

- There were several cracked and broken floor tiles by the door of the bathroom.
- The bathtub was missing the hot water knob as well as the central knob needed to turn the shower on.
- The left railing by the backdoor was loose.
- There was a large gap between the backdoor and the hallway flooring.
- Miscellaneous items and trash were found in the side yard.

Additional Recommendations

- No concerns noted.

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.