

Team Advocacy Inspection for November 7, 2018
Rapha Residential Care Inc.
Inspection conducted by Kristy Caldwell, P&A Team Advocate,
Alysia Gustavsen, MSW Intern, and Lauren Smith, MSW Intern



Facility Information

Rapha Residential Care Inc. is located in Lexington County at 3959 Fish Hatchery Road, Gaston, SC 29053-9038. Team arrived at the facility at 10:00 AM and exited the facility at 2:30 PM. The administrator, Paula C. Prosser, was present for the inspection. The facility is operated by Mastermind Limited Partnership LLC. There were 9 staff members present when Team arrived. The facility is licensed for 92 beds. The census was 62 with 60 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 Reformation Lutheran Church, 1118 Union Street, Columbia, SC 29201.

Overview of Visit

During Team's visit we interviewed eight residents; talked to residents and staff; reviewed eight resident records, medications and medication administration records; and toured the facility. Residents were given the opportunity to decide between teriyaki chicken or beef fajitas for lunch. The rest of the lunch meal consisted of au gratin potatoes, buttered carrots, egg roll, black bean and corn salsa, mandarin orange cake and iced tea. A current menu was posted. Team conducted an exit interview with the administrator.

Report Summary

Rat droppings were in the dry goods storage area. The hot water temperature in one bathroom was 125°. Blood drops were in a residential bathroom. Residents reported no privacy when using the telephone. Residents reported that they are required to pay for transportation to doctor's appointments. Residents reported fear of retaliation from administration for voicing concerns. Residents reported a fear of money mismanagement by the administration. Several residents would like the facility to explain their finances to them. Residents would like to do more in the community. Residents stated that most of the activities on the board are not implemented. Resident B had the following prescriptions for medications, these medications were not available: DOK 100 mg, take one capsule by mouth 3x daily for stool softener; Dicyclomine 20mg, take one tablet 2x daily as needed; Vitamin D2 1.25 mg, take one capsule once a week. Resident E had a prescription for Esomeprazole mag DR 40 mg, take one tablet daily. The MAR was not signed for the 11/6/18 administration. Resident C had prescriptions for Cutar Emulsion, apply to affected area everyday as needed; Acetaminophen 325mg, take one tablet by mouth every 4 hours as needed. The medications were not available. Resident G had a prescription for Miralax 17gm, mix 17gm in 8 oz. liquid as needed. The medication was not available. Resident F had a prescription for Vitamin D2 1.25 mg, take one tablet every Saturday; Prevident 5000+ cream, use 3x daily; Ondansetron ODT 4 mg, take one tablet every 6 hours as needed and Promacta 50 mg, take one tablet daily. The medications were not available. Several nonperishable items and seasonings had exceeded their best-by dates. Several residents reported the facility does not accommodate their diabetic diets. Several residents stated the food was not always served at the right temperature. Resident B's physical did not have a date. Resident B's most recent physical listed they needed 24/7 care by a licensed nurse. Resident D did not have a TB test available for review. Resident D's individualized care plan was last updated on April 26, 2018. Resident E's most recent physical listed their diet as no added salt. In contrast, their ICP had the resident's diet as regular. Resident F needs a new photo: the current one is dated 6/16/16. Resident F's most recent individualized care plan does not indicate diet. Resident F's individualized care plan was last updated on 4/5/18 and did not have the resident's signature. Resident H's most recent ICP had their diet as regular. In contrast, their most recent physical had no added salt. Resident A did not have a July-September 2018 quarterly report. Resident C did not have a July-September 2018 quarterly report. Resident F's personalized funds ledger was not signed since May 2018. Resident F needs a July-September 2018 quarterly report. Resident G only has a personal funds ledger for September, and no quarterly reports. One staff member's most current annual training record was dated August 3rd, 2017. One resident had stained clothing and dirt on the floor of the room.

Areas of Commendation

- The facility was nicely decorated. Season appropriate decorations were inside and outside of the facility. The yard was nicely landscaped and included a garden.

- A current activity calendar was posted. Activities included bingo, Walmart trips, word search and dominoes. The Activities Director was observed playing guitar and singing for residents.
- Staff was very helpful during the inspection and addressed most concerns immediately.
- The facility was kept at a comfortable temperature.
- DHEC inspections were available for review.
- Annual HVAC, electrical, sprinkler and fire alarm inspections were current.
- Current CPR training documentation was present. SLED checks were completed.
- Emergency evacuation routes were posted throughout the facility.
- There was an adequate supply of food present. At lunch, residents had two choices of meat.
- Lunch looked and smelled edible.

Areas Needing Improvement

Health/Safety

- Rat droppings were in the dry goods storage area.
- The hot water temperature in one bathroom was 125°.
- Blood drops were in a residential bathroom.

Supervision & Administrator

- No concerns noted.

Residents' Rights

- Residents reported no privacy when using the telephone; it is in an open room.
- Residents reported not being taken to vote or do absentee voting.
- Residents reported that they are required to pay for transportation to doctor's appointments.
- Residents reported fear of retaliation from administration for voicing concerns.
- Residents reported a fear of money mismanagement by the administration. Several residents would like the facility to explain their finances to them.
- Several residents reported a male resident was physically assaulting women and being nude in their rooms. They reported there were several incidents before measures were taken to protect the other residents.
- Resident A would like a hook to attach his shower head hose to the wall to make taking showers easier.

Recreation

- Residents would like to do more in the community.
- Residents stated that most of the activities on the board are not implemented.

Residents' Activities of Daily Living (ADLs)

- One resident needed glasses and dentures.
- Two residents reported needing a foot exam.
- One resident reported going 3 weeks without toothpaste.
- One resident reported needing an eye exam.
- Two residents reported needing dental exams.
- One resident reported needing a colonoscopy to remove polyps.
- One resident reported needing a mammogram and thyroid exam.

Medication Storage and Administration

- Resident B had the following prescriptions for medications, these medications were not available: DOK 100 mg, take one capsule by mouth 3x daily for stool softener; Dicyclomine 20mg, take one tablet 2x daily as needed; Vitamin D2 1.25 mg, take one capsule once a week.
- Resident E had a prescription for Esomeprazole mag DR 40 mg, take one tablet daily. The MAR was not signed for the 11/6/18 administration.
- Resident C had prescriptions for Cutar Emulsion, apply to affected area everyday as needed; Acetaminophen 325mg, take one tablet by mouth every 4 hours as needed. The medications were not available.
- Resident G had a prescription for Miralax 17gm, mix 17gm in 8 oz. liquid as needed. The medication was not available.
- Resident F had a prescription for Vitamin D2 1.25 mg, take one tablet every Saturday; Preident 5000+ cream, use 3x daily; Ondansetron ODT 4 mg, take one tablet every 6 hours as needed and Promacta 50 mg, take one tablet daily. The medications were not available.

Meals & Food Storage

- Several nonperishable items and seasonings had exceeded their best-by dates.
- Several residents reported the facility does not accommodate their diabetic diets.
- Several residents stated the food was not always served at the right temperature.

Resident Records

- Resident B's physical did not have a date.
- Resident B's most recent physical listed they needed 24/7 care by a licensed nurse.
- Resident D did not have a TB test available for review.
- Resident D's individualized care plan was last updated on April 26, 2018.
- Resident E's most recent physical listed their diet as no added salt. In contrast, their ICP had the resident's diet as regular.
- Resident F needs a new photo: the current one is dated 6/16/16.
- Resident F's most recent individualized care plan does not indicate diet.
- Resident F's individualized care plan was last updated on 4/5/18 and did not have the resident's signature.

- Resident H's most recent ICP had their diet as regular. In contrast, their most recent physical had no added salt.

Resident Personal Needs Allowances

- Resident A did not have a July-September 2018 quarterly report.
- Resident C did not have a July-September 2018 quarterly report.
- Resident F's personalized funds ledger was not signed since May 2018.
- Resident F needs a July-September 2018 quarterly report.
- Resident G only has a personal funds ledger for September, and no quarterly reports.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- One staff member's most current annual training record was dated August 3rd, 2017.

Housekeeping, Maintenance, Furnishings

- One resident had stained clothing and dirt on the floor of the room.

Additional Recommendations

- Six residents wanted to move either to a different CRCF or to independent living.
- Several residents reported wanting to work with accommodations.
- A resident requested online schooling and several residents wanted to do volunteer work in the community.

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.