

Team Advocacy Inspection for January 23, 2019
Twilite Manor Adult Residential Care
Inspection conducted by Kristy Caldwell, P&A Team Advocate
and Lauren Smith, MSW Intern

Facility Information

Twilite Manor Adult Residential Care is located in Lexington County at 2306 Forrest Street, Cayce, SC 29033-2124. Team arrived at the facility at 12:30 PM and exited the facility at 3:30 PM. The administrator, Kathy Mingus, was present for the inspection. The facility is operated by Seashar LLC. There was four staff present when Team arrived. The facility is licensed for 29 beds. The census was 24 with 22 residents present during Team's inspection. The DHEC license had an expiration date of May 31, 2019. An administrator's license was current and posted. The facility had a written emergency plan to evacuate to Harbison Hall Assisted Living, 534 Wil Stel Road, Columbia, SC 29210.

Overview of Visit

During Team's visit we interviewed five residents; talked to residents and staff; reviewed six residents' records, medications and medication administration records; and toured the facility. Team observed lunch of pork chops, rice, gravy, pinto beans, corn bread, fruit and tea. The posted meal was the meal observed by the team. Team conducted an exit interview with the administrator.

Report Summary

Lighter fluid and Miracle Grow were found in the back porch of house #2. Miscellaneous items like a grill, wood pallets, and cleaning tools were also found in this area. The water temperature in the pink bathroom in house #1 was 131 degrees. House #2 had chairs blocking the front exit. Resident progress notes indicated two incidents where residents were taken to the emergency room and one incident where police were contacted. There were not incident/accident reports completed for these occurrences. A current HVAC inspection was not available for review. One resident reported needing dental, vision and cardiologist appointments. Resident A had a prescription for Haloperidol 2mg, take 1 tab as needed. The medication was not available. Resident D had a prescription for Polyethylene Glycol 3350, mix 17gm with 8oz of water as needed. The medication was not available. Several items in the refrigerator were not properly labeled and dated. Several perishable items had exceeded their best-by dates. Resident A's most recent physical examination was dated 12/20/16. Resident A's most recent individual care plan was dated 10/3/17. Resident B's most recent physical had their diet as no added sugar. In contrast their most recent individual care plan ordered no added salt. Resident C's most recent physical did not have a date. Resident C did not have an individual care plan available for review. The resident only had a 72-hour assessment available.

The 72-hour assessment did not indicate if the resident had an advance directive. Resident D's most current physical examination was dated 6/17/17. Resident D's most current individual care plan was dated 6/9/17. Resident E's most current physical examination was dated 10/26/17. Resident E's most current individual care plan was dated 7/18/18. Resident E's most current physical resulted in an order for a regular diet. In contrast, their most recent individual care plan had diabetic. Resident F's most recent individual care plan was dated 6/14/17. Resident F's most recent physical exam had their diet as no added sugar. In contrast, their most recent individual care plan called for a diabetic diet. Residents' quarterly reports were not available for review. Residents' personal funds ledgers were only available from 11/9/18. The bathroom in house #2 had various toiletries in the cabinet. The ramp in between houses #1 and #2 was loose. The rail on ramp into house #2 was loose.

Areas of Commendation

- The facility was clean and free of any odors. Resident rooms were organized. There were several sitting areas inside and outside of the facility for residents to use.
- Resident rooms were personalized.
- A current activity calendar was posted throughout the facility. Activities included Church, bingo, word games and puzzles.
- Staff was very helpful during the inspection.
- Residents appeared to have a good rapport with the administrator and staff.
- The facility was kept at a comfortable temperature.
- There was an adequate supply of food present.
- DHEC inspections were available for review.
- Annual fire alarm inspections were current.
- Current First Aid/CPR training documentation was present. SLED checks were completed.
- Fire drills were completed monthly.

Areas Needing Improvement

Health/Safety

- Lighter fluid and Miracle Grow were found in the back porch of house #2. Miscellaneous items like a grill, wood pallets, and cleaning tools were also found in this area.
- The water temperature in the pink bathroom in house #1 was 131 degrees.
- House #2 had chairs blocking the front exit.

Supervision & Administrator

- Resident progress notes indicated two incidents where residents were taken to the emergency room and one incident where police were contacted. There were not incident/accident reports completed for these occurrences.
- A current HVAC inspection was not available for review.

Residents' Rights

- No concerns noted.

Recreation

- Residents would like more activities to do at the facility.
- One resident reported wanting to go on walks outside.

Residents' Activities of Daily Living (ADLs)

- One resident reported needing dental, vision and cardiologist appointments.

Medication Storage and Administration

- Resident A had a prescription for Haloperidol 2mg, take 1 tab as needed. The medication was not available.
- Resident D had a prescription for Polyethylene Glycol 3350, mix 17gm with 8oz of water as needed. The medication was not available.

Meals & Food Storage

- Several items in the refrigerator were not properly labeled and dated.
- Several perishable items had exceeded their best-by dates.

Resident Records

- Resident A's most recent physical examination was dated 12/20/16.
- Resident A's most recent individual care plan was dated 10/3/17.
- Resident B's most recent physical had their diet as no added sugar. In contrast their most recent individual care plan called for no added salt.
- Resident C's most recent physical did not have a date.
- Resident C did not have an individual care plan available for review. The resident only had a 72-hour assessment available. The 72-hour assessment did not indicate if the resident had an advance directive.
- Resident D's most current physical examination was dated 6/17/17.
- Resident D's most current individual care plan was dated 6/9/17.
- Resident E's most current physical examination was dated 10/26/17.
- Resident E's most current individual care plan was dated 7/18/18.
- Resident E's most current physical had their diet as regular. In contrast, their most recent individual care plan had diabetic.
- Resident F's most recent individual care plan was dated 6/14/17.
- Resident F's most recent physical exam had their diet as no added sugar. In contrast, their most recent individual care plan had diabetic.
- Not all residents had an October 2018 progress note.
- Resident A did not have December 2018 progress note.

Resident Personal Needs Allowances

- Residents' quarterly reports were not available for review. Residents' personal funds ledgers were only available from 11/9/18. [Note: The facility received a new administrator in October 2018. The administrator stated she has not been able to locate the quarterly reports and personal funds ledgers from before her arrival.]

Appropriateness of Placement

- No concerns noted.

Personnel Records

- No concerns noted.

Housekeeping, Maintenance, Furnishings

- The bathroom in house #2 had various toiletries in the cabinet.
- The ramp in between houses #1 and #2 was loose.
- The rail on ramp into house #2 was loose.

Additional Recommendations

- Two residents reported wanting 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.