

Team Advocacy Inspection for April 13, 2019
Burgess Residential Care #3
Inspection conducted by Kristy Caldwell, P&A Team Advocate,
Lauren Smith, MSW Intern, and Tabitha Hanna, Volunteer



Facility Information

Burgess Residential Care #3 is located in Florence County at 615 W Evans Street, Florence, SC 29501-3409. Team arrived at the facility at 10:30 AM and exited the facility at 12:30 PM. The administrator, Sandy Burgess, was not present for the inspection. The facility is operated by Dellavision LLC. There was one staff member present when Team arrived. The facility is licensed for nine beds. The census was nine with all residents being present on the day of Team's inspection. The DHEC license had an expiration date of August 31, 2019. An administrator's license was posted but not current. A written emergency evacuation plan was not available for review.

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 posted menu listed pizza, tossed salad, cake and water for lunch. Team observed staff prepping sandwiches for lunch; there was no substitution meal posted. Team conducted an exit interview with the staff.

Report Summary

The hot water temperatures in the kitchen only reached 99°. The TB risk assessment was not available. 2018-2019 fire drill records were not available. The fire extinguishers were not monitored monthly and did not have inspection tags. DHEC, HVAC and fire alarm inspection reports were not available. One resident did not have sheets; this resident's room and mattress were dirty. Labels and dates were needed on several items in the refrigerator and freezer. There were several items in the pantry that had exceeded their best-by dates. Resident A's most recent physical was 6/13/17. Resident B's individual care plan was missing diagnosis and physician information. Resident B and Resident C needed January-March 2019 quarterly reports. The bathrooms did not have toilet paper, soap or a hand drying device available. The blinds in the upstairs bathroom were broken. The hand rail by the office was loose. The flooring was torn in multiple areas upstairs. The light by the washer was missing a cover. The front door was difficult to open and close. A light switch cover was missing by the office. The outdoor fence had multiple missing and broken boards.

Areas of Commendation

- The front sitting area had tables and the walls had recently been painted with a light blue color.
- Team observed residents coming and going as they pleased.
- A current activity calendar was posted. Activities included church, checkers, card games, movies and arts & crafts.
- Residents reported recreational activities occurring at the facility.
- Residents appeared to have a good rapport with the staff.
- Residents were offered snacks.
- The facility was kept at a comfortable temperature.
- Current First Aid/CPR training documentation was present. SLED checks were completed.
- Prescribed medications were present; the MAR was accurately documented. The controlled substance log coincided with the amount of medication present.
- Observation notes were current.

Areas Needing Improvement

Health/Safety

- The hot water temperatures in the kitchen only reached 99°.
- The TB risk assessment was not available.
- 2018-2019 fire drill records were not available.
- DHEC, HVAC and fire alarm inspection reports were not available.
- The fire extinguishers were not monitored monthly; one did not have an inspection tag.

Supervision & Administrator

- A written emergency evacuation plan was not available for review.

Residents' Rights

- No concerns noted.

Recreation

- Residents would like to do more in the community.

Residents' Activities of Daily Living (ADLs)

- One resident had a dirty mattress with no sheets.

Medication Storage and Administration

- No concerns noted.

Meals & Food Storage

- Labels and dates were needed on multiple items in the refrigerator and freezer.
- Multiple items in the pantry had exceeded their best-by dates.

Resident Records

- Resident A's most recent physical was dated 6/13/17.
- Resident B's individual care plan was missing diagnosis and physician information.

Resident Personal Needs Allowances

- Resident B and Resident C did not have January-March 2019 quarterly reports.

Appropriateness of Placement

- No concerns noted.

Personnel Records

- No concerns noted.

Housekeeping, Maintenance, Furnishings

- The bathrooms did not have toilet paper, soap or a hand drying device available.
- Blinds in the upstairs bathroom were broken.
- The hand rail by the office was loose.
- The flooring upstairs was torn in multiple places.
- The light above the washer was missing its cover.
- The fence outside had missing and broken boards.
- The front door was difficult to open and close.
- A light switch cover was missing by the office.

Additional Recommendations

- Two residents would like to move.
- Two residents would like 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.