

SUMMARY SHEET  
 BOARD OF HEALTH AND ENVIRONMENTAL CONTROL  
 July 10, 2014

\_\_\_\_\_ ACTION/DECISION

  X   INFORMATION

- I. TITLE: Administrative Orders, Consent Orders, and Sanction Letters issued by HEALTH REGULATION (HR).
- II. SUBJECT: Sanctions completed during the period May 1, 2014, through May 31, 2014.
- III. FACT: For the period May 1, 2014, through May 31, 2014, Health Regulation is reporting one (1) Consent Order, with total penalty of \$10,000, and one (1) Administrative Order.

Program	Consent Orders	Administrative Orders	Emergency Suspension Orders	Amount
Health Licensing	1			\$10,000
Health Licensing		1		\$0

IV. ANALYSIS **Low Country Home #2, 1005 Cooper Store Road, Moncks Corner, SC 29461-8317.** By Consent Order (CO-HL-07-2014), executed on May 1, 2014, the Department imposed a \$10,000 monetary penalty. A term of this Consent Order requires Low Country Home #2 to make payment of \$3,600 of the assessed monetary penalty to the Department in twelve (12) monthly installments of \$300. The remainder of the assessed penalty (\$6,400) was held in abeyance pending Low Country Home #2 remaining in substantial compliance with Regulation 61-84 and the Consent Order for twelve (12) months following execution of the Consent Order. In addition, Low Country Home #2 was required to correct the violations that led to the Department's imposition of the monetary penalty, and to schedule and attend a compliance assistance meeting with representatives from the Department within forty-five (45) days of execution of the Consent Order (by June 15, 2014). The compliance assistance meeting was held on June 23, 2014.

Previous Sanctions: None

**Robin's Residential Care Facility, 1216 Hyatt Avenue, Columbia, SC 29203-5932.** By Administrative Order, executed on April 14, 2014, the Department revoked the license issued to Lillian R. Jamison to operate

Robin's Residential Care Facility ("Robin's") as a community residential care facility. Previously, Ms. Jamison failed to attend an enforcement conference meeting conducted on November 13, 2013. By letter, dated April 28, 2014, the Facility's owner requested a final review by the DHEC Board. On April 28, 2014, the DHEC Board received Ms. Jamison's Request for Final Review (RFR). By letter, dated May 19, 2014, the Department's Board advised Ms. Jamison that they would not conduct a Final Review Conference (FRC) in the matter.

Previous Sanctions: None

Approved By:

  
\_\_\_\_\_  
Jamie Shuster  
Director of Public Health

# HEALTH REGULATION

## Bureau of Health Facilities Licensing

Sanctions Imposed for the Period from May 1, 2014 – May 31, 2014

- Facility:** **Low Country Home #2**
- Street address: 1005 Cooper Store Road, Moncks Corner, SC  
29461-8317
- Mail address: 1005 Cooper Store Road, Moncks Corner, SC  
29461-8317
- Type:** Community Residential Care Facility
- Sanction Imposed:** By Consent Order executed on May 1, 2014, the Department imposed a \$10,000 monetary penalty. A term of this Consent Order requires Low Country Home #2 to make payment of \$3,600 of the assessed monetary penalty to the Department in twelve (12) monthly installments of \$300. The remainder of the assessed penalty (\$6,400) was held in abeyance pending Low Country Home #2 remaining in substantial compliance with Regulation 61-84, *Standards for Licensing Community Residential Care Facilities* and the Consent Order for twelve (12) months following execution of the Consent Order. In addition, Low Country Home #2 was required to correct the violations that led to the Department's imposition of the monetary penalty, and to schedule and attend a compliance assistance meeting with representatives from the Department within forty-five (45) days of execution of the Consent Order (by June 15, 2014). The compliance assistance meeting was held on June 23, 2014. The Department will perform a follow-up inspection of the facility within 45 days of the compliance assistance meeting to ensure compliance.
- Reason for Sanction:** The sanction was imposed against Low Country Home #2 due to violations and repeat violations of 7 S.C. Code Ann. Regulation 61-84, *Standards for Licensing Community Residential Care Facilities*. Department representatives visited Low Country Home #2 to conduct general inspections on May 11, 2012 and June 5, 2013. A resident care focused inspection was completed on December 19, 2012; a complaint investigation on December 19, 2012. Two citations were sent on October 11, 2012 and January 7, 2013 for failure to submit timely and complete plans of correction. Violations consisted of failing to provide timely and acceptable plans of correction to violations cited in reports of visit (repeat

violation), failing to have documentation of health assessments for staff members conducted prior to resident contact (repeat violation), failing to update resident's individual care plans (ICPs) every six (6) months or as necessary, failing to ensure resident's ICPs were signed by the resident or their responsible party and the facility's administrator, or designee (repeat violation), failing to provide recreational and social activities which are suitable, desirable, and important to the well-being of residents in their ICPs (repeat violation), failing to have documentation available to show that the Facility had obtained the resident's permission to maintain their monies (repeat violation), failing to maintain accurate accounting of resident's personal monies with written evidence of purchases on behalf of the residents (repeat violation), failing to have documentation available showing that residents were being provided a quarterly balance of their finances (repeat violation), failing to have documentation of resident's current annual and/or admission physical examinations available for review (repeat violation), failing to maintain the facility structure and its component parts/equipment in good working condition (repeat violation), and, failing to have documentation available to show the facility conducted an annual tuberculosis assessment (repeat violation).

**Previous Sanctions:** No other sanction has been initiated against this facility in the past three years.

**Facility:** **Robin's Residential Care Facility**

Street address: 1216 Hyatt Avenue, Columbia, S.C. 29203-5932

Mail address: P.O. Box 3082, Columbia, S.C. 29230-3082

**Type:** Unlicensed Community Residential Care Facility

**Sanction Imposed:** By Administrative Order, executed on April 14, 2014, the Department revoked the license issued to Lillian R. Jamison to operate Robin's Residential Care Facility ("Robin's") as a community residential care facility. Previously, Ms. Jamison failed to attend an enforcement conference meeting scheduled on November 13, 2013. By letter, dated April 28, 2014, the Facility's owner requested a final review by the Department's Board. On April 28, 2014, the Department's Board received Ms. Jamison's Request for Final Review (RFR). By letter, dated May 19, 2014, the Department's Board advised Ms. Jamison that they would not conduct a Final Review Conference (FRC) in the matter.

**Reason for Sanction:** The sanction was imposed against Robin's for violations and repeat violations of 7 S.C. Code Ann. Regulation 61-84, *Standards for Licensing Community Residential Care Facilities*.

Department representatives visited Robin's Residential Care Facility to conduct general inspections on November 9, 2011, May 7, 2012, September 14, 2012, October 12, 2012, and May 21, 2013; resident focused inspections on July 20, 2011 and June 1, 2012; food and sanitation inspections on July 20, 2011, June 1, 2012, May 21, 2013 and July 26, 2013; complaint investigations on August 5, 2011, November 7, 2011 and May 21, 2013; fire and life safety inspections on March 16, 2012 and June 1, 2012. Citations were also sent to the facility on October 31, 2012 and November 13, 2012.

Violations included failing to provide information to Department representatives (who were on site for inspection) of the anticipated return of staff members (repeat violation), failing to provide individuals authorized by S.C. law (including Department and Protection & Advocacy representatives) access to facility's records in a timely manner (repeat violation), failing to provide an acceptable written plan of correction for violations cited during an inspection (repeat violation), failing to document basic first aid in-service training for staff members upon hire and annually (repeat violation), failing to have documentation of staff members in-service training in checking and recording vital signs prior to resident contact (repeat violation), failing to have documentation of staff members in-service training in management/care of persons with contagious and/or communicable diseases being provided annually and/or prior to resident contact (repeat violation), failing to have documentation of staff members in-service training in medication administration and management provided annually and/or prior to resident contact (repeat violation), failing to have documentation of in-service training of staff member in specific personal care being provided annually and/or prior to resident contact (repeat violation), failing to have documentation of in-service training of staff member in the use of restraints being provided annually and/or prior to resident contact (repeat violation), failing to have documentation of in-service training in OSHA standards regarding blood borne pathogens being provided annually and/or prior to resident contact (repeat violation), failing to have documentation of in-service training of staff member in confidentiality of resident information/records and the protection of resident rights being provided annually and/or prior to resident contact (repeat violation), failing to document fire response in-service training for staff members upon hire and annually (repeat

violation), failing to have documentation of in-service training of staff member in emergency procedures/disaster preparedness being provided annually and/or within 24 hours of their first day on the job, failing to have documentation of monthly notes of observations in resident records (repeat violation), failing to have photographs of residents in resident records or failing to have dated photographs of residents in resident records (repeat violation), failing to have documentation of individual care plans with participation by, as evidenced by their signatures, the resident, administrator (or designee), and/or the sponsor or responsible party, within seven (7) days of resident's admission and reviewed/revised at least semi-annually or as changes in resident needs occur (repeat violation), failing to address disclosure of fees for all care/services/equipment provided by the facility in the written agreement between the resident, and/or his/her responsible party, and the facility (repeat violation), failing to address advanced notice requirements to change the facility's fee amount in the written agreement between the resident, and/or his/her responsible party, and the facility (repeat violation), failing to address the facility's refund policy in the written agreement between the resident, and/or his/her responsible party, and the facility (repeat violation), failing to address the date a resident is to receive their personal needs allowance in the written agreement between the resident, and/or his/her responsible party, and the facility (repeat violation), failing to address the facility's transportation policy in the written agreement between the resident, and/or his/her responsible party, and the facility (repeat violation), failing to address the facility's discharge/transfer provisions in the written agreement between the resident, and/or his/her responsible party, and the facility (repeat violation), failing to document the explanation of the Resident's Bill of Rights and the facility's grievance procedures in the written agreement between the resident, and/or his/her responsible party, and the facility (repeat violation), failing to have a resident's medication available for administration (repeat violation), failing to properly label food items stored in the facility's kitchen (repeat violation), failing to ensure that food stored in the facility's refrigerator was of sound condition and failing to ensure raw, potentially hazardous food and ready-to-eat food was properly stored to prevent cross-contamination, failing to properly cover food stored in the refrigerator/freezer to prevent contamination and failing to properly label and/or date food stored in the refrigerator/freezer, failing to maintain surfaces for food-contact (example: countertops) and non-food-contact ( example: flooring, walls) in the kitchen in a clean and sanitary condition, failing to store wiping cloths in an approved sanitizer solution (repeat violation), failing to ensure that menus for the special diets of residents were available for review and/or planned by a

professionally-qualified dietitian or approved by a physician or other authorized healthcare provider (repeat violation), failing to ensure that the facility structure, including its component parts, was properly maintained (repeat violation), failing to ensure the facility and its grounds are maintained uncluttered, clean, neat and free of vermin and offensive odors (repeat violation), failing to ensure interior of facility was clean (repeat violation), failing to ensure that harmful chemicals and cleaning agents were stored in a secured manner and inaccessible to residents (repeat violation), failing to ensure that the facility's exterior and grounds were free of rubbish and other potential breeding sources for vermin (repeat violation), failing to have electrical installations in accordance with the National Fire Protection Association 70 [electrical] and 99 [air conditioning] (repeat violation), and failing to maintain the closures on residents' room doors in working condition (repeat violation) .

**Previous Sanctions:** No other sanction has been initiated against this facility in the past three years.