

SUMMARY SHEET
SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

March 9, 2017

() ACTION/DECISION

(X) INFORMATION

I. TITLE: Health Regulation Administrative and Consent Orders.

II. SUBJECT: Health Regulation Administrative Orders, Consent Orders, and Emergency Suspension Orders for the period of December 1, 2016, through January 31, 2017.

III. FACTS: For the period of December 1, 2016, through January 31, 2017, Health Regulation reports three (3) Administrative Orders, five (5) Consent Orders, one (1) License Renewal Denial, and three (3) Emergency Suspension Orders with a total of twelve thousand six hundred dollars (\$12,600) in assessed monetary penalties.

Health Regulation Bureau	Health Care Facility, Provider or Equipment	Administrative Orders	Consent Orders	Emergency Suspension Orders	License Renewal Denial	Assessed Penalties
Health Facilities Licensing	Community Residential Care Facility	1	0	0	1	\$0
	Unlicensed In-Home Care Provider	2	0	0	0	\$6,800
Radiological Health	Dental X-Ray Facility	0	1	0	0	\$800
EMS & Trauma	Paramedic	0	1	3	0	\$0
	Advanced EMT	0	1	0	0	\$0
	Ambulance Services Provider	0	1	0	0	\$5,000
	EMT	0	1	0	0	\$0
TOTAL		3	5	3	1	\$12,600

Approved By:

Shelly Bezanson Kelly
Director of Health Regulation

HEALTH REGULATION ENFORCEMENT REPORT
SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

March 9, 2017

Bureau of Health Facilities Licensing

Facility Type	Total # of Beds or Participants	Total # of Licensed Facilities in South Carolina
Community Residential Care Facility	17,840	467
In-Home Care Provider (Unlicensed)	N/A	508

1. Low Country Home (CRCF) – Moncks Corner, SC

Investigation: The Department visited Low Country Home ("Low Country") numerous times to conduct routine inspections that the Department conducts on all CRCFs, including: general inspections, inspections, kitchen and sanitation inspections, fire and life safety inspections, as well as follow-up inspections as warranted. Most recently, the Department visited Low Country on July 7, 2016, to conduct a general inspection and a food and sanitation inspection.

Violations: Based upon inspections conducted between June 26, 2014, and July 7, 2016, the Department cited Low Country for seventy-two (72) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities, which included forty (40) Class I violations, twenty-seven (27) Class II violations, and five (5) Class III violations. Specifically, Low Country was cited one (1) time for violating Section 103.B, by failing to maintain a current copy of Regulation 61-84 at the facility; two (2) times for violating Section 202.E, by failing to have reports of inspections or investigations conducted by the Department, including the facility's responses, available for review; two (2) times for violating Section 401, by failing to have the facility's policies and procedures available for review and by failing to document the facility's review of its policies and procedures; five (5) times for violating Section 501, by failing to maintain required employee documentation; eighteen (18) times for violating Section 504, by failing to maintain documentation of staff training; two (2) times for violating Section 505.A, by failing to have documentation of a health assessment for staff members completed within twelve (12) months prior to initial resident contact available for review; one (1) time for violating Section 701.B.6, by failing to ensure that notes of observation were documented at least monthly in several residents' records; two (2) times for violating Section 702, by failing to have a resident's written assessment available for review and failing to ensure a resident's written assessment was signed by the staff member that conducted the assessment; seven (7) times for violating Section 703, by failing to adequately update and maintain residents' ICPs; four (4) times for violating Section 901, by failing to provide the required services to residents; four (4) times for violating Section 1101, by failing to have documentation of physical examinations and PPD tests for residents; one (1) time for violating Section 1201.A, by failing to have available for administration residents' medications prescribed by a physician or other authorized healthcare provider; five (5) times for violating Section 1203, by failing to comply with medication administration requirements; two (2) times for violating Section 1205, for noncompliance with medication storage and destruction requirements; two (2) times for violating Section 1206, by failing to have documented reviews of controlled substances and failing to label nonlegend medications as stock medications; four (4) times for violating Section 1300, by failing to comply with dietary requirements; two (2) times for violating Section 1503.B, by failing to post a plan for the evacuation of residents, staff members, and visitors in conspicuous public areas throughout the facility; two (2) times for violating

Section 1601, by failing to ensure that the facility's structure, component parts, and equipment were properly maintained and in good operating condition; one (1) time for violating Section 1702.D.2.a, by failing to have documentation available for review evidencing that the second step of a two-step PPD had been administered to two (2) staff members prior to resident contact; five (5) times for violating Section 1703, by failing to comply with housekeeping requirements; one (1) time for violating Section 1801.A, by failing to have documentation of a written quality improvement program available for review; one (1) time for violating Section 2602.A, by failing to ensure that residents' beds were furnished with moisture-proof covers; and one (1) time for violating Section 2604.C, by failing to ensure that liquid soap was provided in bathrooms used by more than one (1) resident.

Enforcement Action: Pursuant to the Administrative Order executed December 13, 2016, Low Country Home's license to operate as a CRCF is hereby revoked.

Prior Sanctions: Laila Bey is the registered agent of Rainbow Residential Home, LLC, the licensee of Low Country Home. On April 24, 2014, the Department executed an Administrative Order for Ms. Bey's operation of an unlicensed CRCF, unrelated to Low Country Home, which is a violation of the Act and R.61-84. As of December 12, 2016, Ms. Bey has not remitted payment of the five thousand dollar (\$5,000) assessed monetary penalty pursuant to the terms of the April 2014 Administrative Order. Additionally, the Department executed a Consent Order on May 1, 2014, with Low Country Home #2, another CRCF owned and operated by Ms. Bey, for violations of R.61-84.

2. Low Country Home #2 (CRCF) – Moncks Corner, SC

Investigation: The Department visited Low Country Home #2 ("Low Country #2") numerous times to conduct the routine types of inspections that the Department conducts on all CRCFs, including: general inspections, kitchen and sanitation inspections, fire and life safety inspections, as well as follow-up inspections as warranted. Most recently, the Department visited Low Country #2 on August 18, 2016, to conduct a complaint investigation.

Violations: Based upon inspections conducted between July 9, 2015, and August 18, 2016, the Department cited Low Country #2 for thirty-nine (39) violations of Regulation 61-84, which included sixteen (16) Class I violations, twenty-two (22) Class II violations, and one (1) Class III violation. Specifically, Low Country #2 was cited one (1) time for violating Section 501.A, by failing to have documentation of a criminal background check for staff members available for review and failing to ensure that a criminal background check for a staff member was conducted prior to employment; one (1) time for violating Section 503.C, by failing to maintain documentation to ensure that the facility met the staffing requirements of Regulation 61-84; five (5) times for violating Section 504, by failing to maintain documentation of staff training; one (1) time for violating Section 505.A, by failing to ensure that health assessments for staff members were signed by a physician or other authorized healthcare provider; four (4) times for violating Section 703, by failing to update and maintain residents' ICPs; three (3) times for violating Section 902, by failing to maintain accurate accountings of residents' person monies; one (1) time for violating Section 903.E, by failing to ensure that the facility's posted monthly activity schedule included dates and locations of activities; five (5) times for violating Section 1101, by failing to comply with physical examination requirements for residents; one (1) time for violating Section 1301.A, by failing to comply with Regulation 61-25, Retail Food Establishments; one (1) time for violating Section 1601, by failing to ensure that the facility's structure, component parts, and equipment were properly maintained and in good operating condition; three (3) times for violating Section 1702.D.2.a, by failing to have documentation of the second step of a two-step tuberculin skin test for staff members available for review; seven (7) times for violating Section 1703, by failing to comply with housekeeping requirements; two (2) times for violating Section 2301.B, by failing to ensure that water temperatures at hot water fixtures did not exceed one hundred twenty (120) degrees Fahrenheit; and four (4) times for violating

Section 2604, by failing to ensure that liquid soap and a sanitary method of drying hands was available in bathrooms used by residents and failing to properly store personal bath linens.

Enforcement Action: By letter dated December 21, 2016, the Department denied Low Country Home #2's renewal application based upon the above-referenced violations of R.61-84, and Ms. Bey's failure to pay the assessed monetary penalty for her operation of an unlicensed CRCF.

Prior Sanctions: On April 24, 2014, the Department executed an Administrative Order for Ms. Bey's operation of an unlicensed CRCF, unrelated to Low Country Home #2, which is a violation of the Act and R.61-84. As of December 12, 2016, Ms. Bey has not remitted payment of the five thousand dollar (\$5,000) assessed monetary penalty pursuant to the terms of the April 2014 Administrative Order. Additionally, the Department executed a Consent Order on May 1, 2014, with Low Country Home #2 for violations of R.61-84.

3. Paula Therrien (d/b/a All Types of Care) (Unlicensed In-Home Care Provider) – Rock Hill, SC

Investigation: On July 11, 2016, the Department received a complaint alleging Ms. Therrien and All Types of Care were operating as an unlicensed in-home care provider. Department representatives visited All Types of Care on July 26, 2016, to conduct a complaint investigation and found the following violation.

Violations: Based upon the investigation, the Department cited All Types of Care for violating Section 103.A of Regulation 61-122, for operating, maintaining, and representing itself through advertising and/or marketing as an in-home care provider without first obtaining a license from the Department.

Enforcement Action: Pursuant to the Administrative Order executed January 10, 2017, the Department assessed a five thousand dollar (\$5,000) monetary penalty against Ms. Therrien.

Prior Sanctions: None.

4. Koger Home Care, LLC (Unlicensed In-Home Care Provider) – West Columbia, SC

Investigation: On July 19, 2016, the Department received a complaint alleging Koger Home Care, LLC ("Koger"), was operating as an unlicensed in-home care provider. Department representatives visited Koger on July 28, 2016, to conduct a complaint investigation and found the following violation.

Violations: Based upon the investigation, the Department cited Koger for violating Section 103.A of Regulation 61-122, for operating, maintaining, and representing itself through advertising and/or marketing as an in-home care provider without first obtaining a license from the Department.

Enforcement Action: Pursuant to the Consent Order executed January 11, 2017, the Department assessed a one thousand eight hundred dollar (\$1,800) monetary penalty against Koger.

Prior Sanctions: None.

Bureau of Radiological Health

Facility Type	Total # of Registered Providers in South Carolina
Dental Facilities	1,676

5. J. Don Kelley, DMD (Dental Facility) – Taylors, SC

Investigation: On August 3, 2005, the Department conducted a routine inspection of J. Don Kelley, DMD (“Kelley”) and found the facility in violation of Regulation 61-64, X-Rays, for failure to perform equipment performance testing, which is required every two (2) years. The Department did not receive a response to the August 2005 violation from Kelley within the time specified by R.61-64. Therefore, the Department mailed another letter to Kelley in February 2006 citing him for failing to correct all violations within sixty (60) calendar days of the citation. On April 24, 2006, Kelley submitted evidence of acceptable equipment performance testing. On April 9, 2011, the Department conducted another routine inspection and determined Kelley’s last equipment performance testing to be April 6, 2006. The Department did not receive a response to the April 2011 violation from Kelley within the time specified by R.61-64. The Department then notified Kelley that compliance was past due and documentation of corrective action should be submitted to the Department by November 23, 2011. Kelley indicated to the Department that testing was scheduled for the next day and would provide evidence to the Department upon completion. Kelley submitted evidence of acceptable equipment performance testing on January 9, 2012. On July 19, 2016, the Department conducted another routine inspection and found that Kelley failed to perform equipment performance testing in years 2013 and 2015 as required. Kelley submitted evidence of acceptable equipment performance testing on September 14, 2016.

Violations: Based upon the above-referenced inspections, the Department finds Kelley in violation of RHB 4.2.18.1.3.1 on August 3, 2005, and RHB 4.2.16.1.3.1 on August 9, 2011, and July 19, 2016, by failing to complete equipment performance testing at the required intervals.

Enforcement Action: By Consent Order executed December 7, 2016, Kelley agrees to the imposition of an eight hundred dollar (\$800) civil penalty. The Consent Order requires Kelley to make payment of two hundred dollars (\$200) of the assessed monetary penalty within thirty (30) days of execution of the Consent Order. The remaining six hundred dollars (\$600) of the assessed monetary penalty will be stayed upon a forty-eight (48) month period of substantial compliance with R.61-64 and the terms of the Consent Order. The Consent Order further requires Kelley to provide the Department with documentation detailing how they will ensure that compliance with R.61-64 is maintained.

Prior Sanctions: None.

Bureau of EMS & Trauma

EMS Provider Type	Total # of Providers in South Carolina
EMT	5,387
EMT – Intermediate	375
Advanced EMT	322

Paramedic	3,671
Athletic Trainers	879
Ambulance Services Provider	258
First Responder Services Provider	2

6. William B. Gillespie (EMT)

Investigation: On September 28, 2016, the Department was notified that Mr. Gillespie posted on a social media platform information he obtained while in the performance of his job with McCormick County EMS. The Department initiated an investigation into the matter and found that on September 27, 2016, Mr. Gillespie responded to a call at the McCormick Correctional Institution. Subsequently, Mr. Gillespie posted a comment on social media in response to a report by local media regarding the patient he responded to at the McCormick Correctional Institution. The information contained in Mr. Gillespie's post revealed confidences entrusted to him in the course of his care of the patient.

Violations: As a result of its investigation, the Department found Mr. Gillespie committed "misconduct," as defined by S.C. Code Section 44-61-80(F)(9) and Section 1100(B)(9) of Regulation 61-7, by revealing confidences entrusted to him in the course of medical attendance, without the revelation being required by law or necessary to protect the welfare of the individual or the community.

Enforcement Action: The parties met and were able to resolve this matter pursuant to a Consent Order executed December 19, 2016. Pursuant to the terms of the Consent Order, Mr. Gillespie agreed to a six (6) month suspension of his EMT certificate. Mr. Gillespie's suspension shall be held in abeyance for six (6) months following execution of the Consent Order. Mr. Gillespie agrees to successfully complete a National Association of Emergency Medical Technicians Principles of Ethics and Personal Leadership course within six (6) months of execution of the Consent Order and submit proof of completion to the Department. Should Mr. Gillespie fail to comply with the abovementioned requirements, the Department may call in all or a portion of the six (6) month suspension and/or take other enforcement action in accordance with the EMS Act and Regulation 61-7.

Prior Sanctions: None.

7. Stephen M. Kitchens (Advanced EMT)

Investigation: On September 28, 2016, the Department was notified that Mr. Kitchens posted on a social media platform information he obtained while in the performance of his job with McCormick County EMS. The Department initiated an investigation into the matter. The facts of the investigation mirror those referenced above (Mr. Gillespie) as Mr. Kitchens responded to the same call with Mr. Gillespie and subsequently posted a comment on social media regarding the patient.

Violations: As a result of its investigation, the Department found Mr. Kitchens committed "misconduct," as defined by S.C. Code Section 44-61-80(F)(9) and Section 1100(B)(9) of Regulation 61-7, by revealing confidences entrusted to him in the course of medical attendance, without the revelation being required by law or necessary to protect the welfare of the individual or the community.

Enforcement Action: The parties met and were able to resolve this matter pursuant to a Consent Order executed December 19, 2016. Pursuant to the terms of the Consent Order, Mr. Kitchens agreed to a six (6) month suspension of his AEMT certificate. Mr. Kitchens's suspension shall be held in abeyance for six

(6) months following execution of the Consent Order. Mr. Kitchens agrees to successfully complete a National Association of Emergency Medical Technicians Principles of Ethics and Personal Leadership course within six (6) months of execution of the Consent Order and submit proof of completion to the Department. Should Mr. Kitchens fail to comply with the abovementioned requirements, the Department may call in all or a portion of the six (6) month suspension and/or take other enforcement action in accordance with the EMS Act and Regulation 61-7.

Prior Sanctions: None.

8. American Pride Medical Transport, LLC (Ambulance Services Provider)

Investigation: On September 21, 2016, the Department received complaints alleging American Pride ambulances were unclean and in need of repairs. Additionally, allegations were made that American Pride failed to submit multiple electronic patient care reports (“ePCRs”). The Department initiated an investigation into the complaints and found the following violations.

Violations: The Department found American Pride in violation of S.C. Code Sections 44-61-70(B)(3) and (5) by failing to maintain required equipment as evidenced by past compliance history and by failing to maintain equipment in working order. On September 23, 2016, American Pride failed to have a stretcher, folding stretcher, backboard, operable flashlight, and failed to securely store oxygen tanks in ambulance 32906. This failure to have the minimum required equipment on the ambulance is a Class II violation per Sections 701.A, 701.C.1, 701.V, and 702 of Regulation 61-7. Further, this ambulance had a crack in its interior, indicating a failure to maintain sanitation standards, which is a Class III violation, per Section 802.A of R.61-7. On September 23, 2016, American Pride failed to have retractable safety belts and a wheel-well in safe and sound condition on ambulance 32904, a Class III violation per Sections 601.D.2.A and 601.H.4 of R.61-7. Additionally, the interior of this ambulance was unsanitary and in need of cleaning, a Class III violation per Section 802.A of R.61-7. On September 23, 2016, American Pride failed to have unexpired nasopharyngeal airways on ambulance 32915, a Class II violation per Section 701.E of R.61-7. Additionally, the interior of this ambulance was unsanitary and in need of cleaning, a Class III violation per Section 802.A of R.61-7. Finally, from July 1, 2016, to September 28, 2016, American Pride failed to timely submit two hundred four (204) ePCRs into PreMIS, a Class III violation per Sections 1301.A and 1301.C of R.61-7.

Enforcement Action: Pursuant to the Consent Order executed December 20, 2016, American Pride agrees to a five thousand dollar (\$5,000) assessed monetary penalty, which shall be due within one hundred eighty (180) days of execution of the Consent Order. American Pride further agrees to a six (6) month suspension if the Department finds American Pride in violation of the EMS Act, Regulation 61-7, or the terms of the Consent Order within one (1) year following execution of the Consent Order.

Prior Sanctions: On March 1, 2016, American Pride was assessed a six hundred dollar (\$600) monetary penalty by way of a Consent Order for several regulatory violations involving American Pride’s ambulances.

9. Alison K.B. Harmon (Paramedic)

Investigation: On January 4, 2016, the Department was notified of alleged misconduct by Ms. Harmon. The Department initiated an investigation into the allegations and met with Ms. Harmon on April 19, 2016, to discuss the allegations. During the April 2016 meeting, Ms. Harmon informed the Department that she had voluntarily entered and completed a treatment program for drug addiction. At that time, the Department elected to monitor her progress toward resolving the alleged misconduct. Subsequently, the Department received notification on September 26, 2016, that Ms. Harmon was terminated by a licensed ambulance service for misconduct. The allegations described behavior similar to the initial January 2016

complaint which prompted the Department's investigation. The Department thereafter reopened its investigation into Ms. Harmon and on October 18, 2016, the Department issued an Administrative Order suspending Ms. Harmon's Paramedic certificate pending completion of its investigation.

Violations: As a result of its investigation, the Department found that while on duty as a Paramedic, Ms. Harmon was observed on several occasions appearing under the influence of narcotics. Ms. Harmon committed misconduct, as defined by S.C. Code Section 44-61-80(F)(3) and Section 1100(B)(3) of Regulation 61-7, as evidenced by her drug use to such a degree as to render her unfit to perform as a Paramedic. Ms. Harmon suffers from drug addiction which renders her a danger to patients under her care.

Enforcement Action: Upon execution of the Consent Order, executed December 29, 2016, the October 2016 Administrative Order suspending Ms. Harmon's Paramedic certificate is null and void. Furthermore, pursuant to the terms of the Consent Order, Ms. Harmon agrees to a suspension of her Paramedic certificate until March 30, 2018. The suspension is effective upon execution of the Consent Order and includes all levels of certification. On or after March 30 2017, Ms. Harmon may apply to the Department to lift the suspension and reinstate her Paramedic certificate. In order for the Department to list the suspension and reinstate her certificate, Ms. Harmon must provide the Department with proof of successful completion of an outpatient treatment program for drug addiction.

Prior Sanctions: On October 18, 2016, the Department issued an Administrative Order suspending Ms. Harmon's Paramedic certificate pending the completion of its investigation which is now null and void pursuant to the Consent Order executed December 29, 2016.

10. Douglas Hildebrand (Paramedic)

Investigation: On December 28, 2016, the Department was notified of Mr. Hildebrand's arrest in Charleston County. Upon notification, the Department initiated an investigation into the matter. The Department discovered that Mr. Hildebrand was arrested on December 22, 2016, and charged with attempted murder and possession of a weapon during the commission of, or attempt to commit, a violent crime.

Violations: The charges against Mr. Hildebrand, specifically, attempted murder and possession of a weapon during the commission of, or attempt to commit, a violent crime, are crimes involving moral turpitude and gross immorality. The Department found that Mr. Hildebrand's arrest demonstrated a capacity for inappropriate and criminal behavior towards individuals placed within his trust. The Department determines that a clear and present danger would exist to the public health, safety, and welfare if Mr. Hildebrand's Paramedic certificate was not immediately suspended pending further investigation.

Enforcement Action: Mr. Hildebrand's Paramedic certificate was immediately suspended on an emergency basis pursuant to the Emergency Suspension Order executed December 30, 2016. The Department will continue to monitor Mr. Hildebrand's criminal matters.

Prior Sanctions: None.

11. Sean Williams (Paramedic)

Investigation: On December 12, 2016, the Department was notified of Mr. Williams's arrest in Charleston County. Upon notification, the Department initiated an investigation into the matter. The Department discovered that Mr. Williams was arrested on December 12, 2016, and charged with first degree burglary.

Violations: The charge against Mr. Williams, specifically, first degree burglary, is a crime involving moral turpitude and gross immorality. The Department found that Mr. Williams's arrest demonstrated a capacity for inappropriate and criminal behavior towards individuals placed within his trust. The Department determines that a clear and present danger would exist to the public health, safety, and welfare if Mr. Williams's Paramedic certificate was not immediately suspended pending further investigation.

Enforcement Action: Mr. Williams's Paramedic certificate was immediately suspended on an emergency basis pursuant to the Emergency Suspension Order executed December 30, 2016. The Department will continue to monitor Mr. Williams's criminal matters.

Prior Sanctions: None.

12. Bryce Jones (Paramedic)

Investigation: On December 23, 2016, the Department was notified of Mr. Jones's arrest in Horry County. Upon notification, the Department initiated an investigation into the matter. The Department discovered that Mr. Jones was arrested on December 19, 2016, and charged with pointing or presenting a firearm at another person.

Violations: The charge against Mr. Jones, specifically, pointing or presenting a firearm at another person, is a felony. The Department found that Mr. Jones's arrest demonstrated a capacity for inappropriate and criminal behavior towards individuals placed within his trust. The Department determines that a clear and present danger would exist to the public health, safety, and welfare if Mr. Jones's Paramedic certificate was not immediately suspended pending further investigation.

Enforcement Action: Mr. Jones's Paramedic certificate was immediately suspended on an emergency basis pursuant to the Emergency Suspension Order executed January 4, 2017. The Department will continue to monitor Mr. Jones's criminal matters.

Prior Sanctions: None.