### **SUMMARY SHEET** SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

### March 7, 2024

- ACTION/DECISION
- ( ) (X) **INFORMATION**
- I. **TITLE:** Healthcare Quality Administrative and Consent Orders.
- II. SUBJECT: Healthcare Quality Administrative Orders and Consent Orders for the period of January 1, 2024, through January 31, 2024.
- FACTS: For the period of January 1, 2024, through January 31, 2024, Healthcare Quality reports III. five Consent Orders totaling \$56,200 in assessed monetary penalties.

Bureau	Facility, Service, Provider, or Equipment Type	Administrative Orders	Consent Orders	Assessed Penalties	Required Payment
Community Care	Community Residential Care Facilities	0	4	\$55,900	\$55,900
Healthcare Systems and Services	Hospice Programs	0	1	\$300	\$300
TOTAL			5	\$56,200	\$56,200

Submitted By:

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## HEALTHCARE QUALITY ENFORCEMENT REPORT SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

March 7, 2024

#### **Bureau of Community Care**

Facility Type	Total Number of Licensed Facilities	Total Number of Licensed Beds
Community Residential Care Facilities (CRCFs)	460	22,222

### 1. Pacifica Skylyn LLC d/b/a Pacifica Senior Living Skylyn – Spartanburg County – 169 licensed beds

**Investigation and Violations:** From April 11, 2023, to September 11, 2023, the Department visited Pacifica Senior Living Skylyn (the Facility) multiple times to conduct various types of inspections and investigations that it does of all licensed CRCFs. As a result of those visits, Department staff observed and cited the following violations of Regulation 61-84:

- The Facility failed to implement its policies and procedures regarding resident care, rights, and operation of the Facility.
- The Facility failed to submit written reports of its investigations to the Department within five days of the incidents and/or accidents.
- The Facility failed to coordinate a resident's medical care as ordered by a physician.
- The Facility failed to render care in accordance with a physician's orders for administering medications.
- The Facility failed to maintain fire protection and suppression systems in accordance with the codes adopted by the SC Building Code Council and the SC Fire Marshall.
- The Facility failed to ensure all equipment and building components were in good repair and operating condition, and in compliance with the International Fire Code.
- The Facility failed to ensure it was clean and free from vermin and offensive odors.
- The Facility failed to ensure each specific interior area of the Facility was clean.
- The Facility failed to submit to the Department for review and approval plans for additions and/or alterations for the renovations being conducted on the second and third floors.
- The Facility failed to maintain halls, corridors, and other means of egress from the building free of obstructions.
- The Facility failed to maintain documentation of the annual HVAC system inspection.
- The Facility failed to maintain a temperature between 72 and 78 degrees in resident areas.

**Enforcement:** The Department notified the Facility that an enforcement action was being considered. The Department and the Facility met and agreed to resolve this matter through a Consent Order, which was executed on January 4, 2024. The Facility agreed to the assessment of a \$40,900 monetary penalty. The Facility has paid the penalty.

**Remedial Action:** The Facility also agreed to schedule and attend a compliance assistance meeting. The Facility had its compliance assistance meeting.

**Prior Orders:** In March 2022, the Facility executed a consent order for various regulatory violations. Pursuant to that consent order, the Facility agreed to a \$14,000 monetary penalty, with \$10,000 being paid and \$4,000 being held in abeyance.

# 2. Cunningham-Waters Construction Company Inc. d/b/a Patriot Living of Florence – Florence County – 80 licensed beds

**Investigation and Violations:** From May 2, 2023, to September 11, 2023, the Department visited Patriot Living of Florence (the Facility) multiple times to conduct various types of inspections and investigations that it does of all licensed CRCFs. As a result of those visits, Department staff observed and cited the following violations of Regulation 61-84:

- The Facility failed to review and/or revise residents' individual care plans at least semi-annually.
- The Facility failed to have a resident's physician-ordered medication available for administration.
- The Facility failed to record the administration of medications by initialing the medication administration records as medications were administered.
- The Facility failed to maintain records of controlled substances in sufficient detail to enable an accurate reconciliation.
- The Facility failed to ensure all equipment and building components were in good repair and operating condition, and in compliance with the International Fire Code.
- The Facility failed to ensure it was clean and free from vermin and offensive odors.
- The Facility failed to ensure each specific interior area was clean.
- The Facility failed to ensure window treatments in the bathroom and resident rooms were arranged in a manner to provide privacy.

**Enforcement:** The Department notified the Facility that an enforcement action was being considered. The Department and the Facility met and agreed to resolve this matter through a Consent Order, which was executed on January 24, 2024. The Facility agreed to the assessment of a \$5,000 monetary penalty, which will be paid through two installments of \$2,500.

**Remedial Action:** The Facility also agreed to schedule and attend a compliance assistance meeting. The Facility has scheduled its compliance assistance meeting. Further, the Facility agreed to complete the necessary repairs and understands to notify and coordinate with the Department's Division of Health Facilities Construction, as required by applicable laws.

**Prior Orders:** None in the past five years.

# 3. Cunningham-Waters Construction Company Inc. d/b/a Patriot Living of Hartsville – Darlington County – 60 licensed beds

**Investigation and Violations:** From May 11, 2023, to September 13, 2023, the Department visited Patriot Living of Hartsville (the Facility) multiple times to conduct various types of inspections and investigations that it does of all licensed CRCFs. As a result of those visits, Department staff observed and cited the following violations of Regulation 61-84:

- The Facility failed to record the administration of medications by initialing the medication administration records as medications were administered.
- The Facility failed to maintain its kitchen and food preparation in compliance with *Retail Food Establishment*, Regulation 61-25.

- The Facility failed to ensure all equipment and building components were in good repair and operating condition, and in compliance with the International Fire Code.
- The Facility failed to ensure it was clean and free from vermin and offensive odors.
- The Facility failed to ensure each specific interior area was clean.
- The Facility failed to ensure plumbing fixtures accessible to residents were supplied with water that is controlled to a temperature of at least 100 degrees F and not to exceed 120 degrees F.

**Enforcement:** The Department notified the Facility that an enforcement action was being considered. The Department and the Facility met and agreed to resolve this matter through a Consent Order, which was executed on January 24, 2024. The Facility agreed to the assessment of a \$5,000 monetary penalty, which will be paid through two installments of \$2,500.

**Remedial Action:** The Facility also agreed to schedule and attend a compliance assistance meeting. The Facility has scheduled its compliance assistance meeting. Further, the Facility agreed to complete the necessary repairs and understands to notify and coordinate with the Department's Division of Health Facilities Construction, as required by applicable laws.

**Prior Orders:** None in the past five years.

## 4. Cunningham-Waters Construction Company Inc. d/b/a Patriot Living of Sumter – Sumter County – 60 licensed beds

**Investigation and Violations:** From May 4, 2023, to September 12, 2023, the Department visited Patriot Living of Sumter (the Facility) multiple times to conduct various types of inspections and investigations that it does of all licensed CRCFs. As a result of those visits, Department staff observed and cited the following violations of Regulation 61-84:

- The Facility failed to employ a licensed CRCF administrator.
- The Facility failed to notify the Department via telephone or email within 72 hours of the departure of its administrator.
- The Facility failed to render care to residents in accordance with orders of the physicians or authorized healthcare providers.
- The Facility failed to have residents' physician-ordered medications available for administration.
- The Facility failed to record the administration of medications by initialing the medication administration records as medications were administered.
- The Facility failed to maintain records of a controlled substance in sufficient detail to enable an accurate reconciliation.
- The Facility failed to ensure that the current weeks' menus included any substitutions or changes made
- The Facility failed to ensure all equipment and building components were in good repair and operating condition, and in compliance with the International Fire Code.
- The Facility failed to ensure it was clean and free from vermin and offensive odors.
- The Facility failed to ensure plumbing fixtures accessible to residents were supplied with water that is controlled to a temperature of at least 100 degrees F and not to exceed 120 degrees F.
- The Facility failed to maintain documentation of annual HVAC system inspections conducted by certified and/or licensed technicians.
- The Facility failed to maintain a temperature between 72 and 78 degrees in resident areas.

**Enforcement:** The Department notified the Facility that an enforcement action was being considered. The Department and the Facility met and agreed to resolve this matter through a Consent Order, which was

executed on January 24, 2024. The Facility agreed to the assessment of a \$5,000 monetary penalty, which will be paid through two installments of \$2,500.

**Remedial Action:** The Facility also agreed to schedule and attend a compliance assistance meeting. The Facility has scheduled its compliance assistance meeting. Further, the Facility agreed to complete the necessary repairs and understands to notify and coordinate with the Department's Division of Health Facilities Construction, as required by applicable laws.

**Prior Orders:** None in the past five years.

### **Bureau of Healthcare Systems and Services**

Provider Type	Total Number of Licensed Hearing Aid Specialists
Hospice Programs	100

### 1. Wren Hospice, LLC d/b/a Wren Hospice – Greenville County

**Investigation and Violations:** The Program failed to submit a timely renewal application and licensing fees by the license expiration date.

**Enforcement:** The Department and the Program decided to resolve the matter through a Consent Order. The Program paid the \$300 monetary penalty.

Remedial Action: none

**Prior Orders:** None in the past 5 years.