

SUMMARY SHEET  
SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

May 9, 2018

( ) 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 February 1, 2018, through March 31, 2018.

**III. FACTS:** For the period of February 1, 2018, through March 31, 2018, Health Regulation reports four (4) Consent Orders, and two (2) Emergency Suspension Orders with a total of thirty-two thousand nine hundred dollars (\$32,900) in assessed monetary penalties.

Health Regulation Bureau	Health Care Facility, Provider, or Equipment	Administrative Orders	Consent Orders	Emergency Suspension Orders	Assessed Penalties
Health Facilities Licensing	Community Residential Care Facility	0	2	0	\$15,000
	Adult Day Care	0	1	0	\$1,100
	Nursing Home	0	1	0	\$16,800
EMS & Trauma	Paramedic	0	0	2	\$0
<b>TOTAL</b>		<b>0</b>	<b>4</b>	<b>2</b>	<b>\$32,900</b>

Approved By:

  
Shelly Bezanson Kelly  
Director of Health Regulation

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

May 9, 2018

**Bureau of Health Facilities Licensing**

Facility Type	Total # of Beds	Total # of Licensed Facilities in South Carolina
Community Residential Care Facility	19,351	480

**1. Crossroads at Catawba (CRCF) – Catawba, SC**

Investigation: The Department visited Crossroads at Catawba (“Crossroads”) on July 25, 2017, and December 6, 2017, to conduct general inspections, and February 29, 2016, November 14, 2016, December 2, 2016, December 20, 2016, February 3, 2017, February 16, 2017, and March 16, 2017, to conduct complaint investigations.

Violations: Based upon the inspections and investigations, the Department cited Crossroads for twenty-six (26) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, Crossroads was cited one (1) time for violating Section 504.A.6, for failing to have documentation of required training on the use of restraints for a staff member; one (1) time for violating Section 505.A, for failing to have documentation of a health assessment for a staff member; two (2) times for violating Section 701.B.6, for failing to document notes of observation in resident records on at least a monthly basis; two (2) times for violating Section 703.A, for failing to update residents’ Individual Care Plans (“ICP”), and for failing to ensure ICPs were signed by the appropriate parties; four (4) times for violating Section 704, for failing to maintain compliance with record retention and maintenance requirements; one (1) time for violating Section 801.C.8, for retaining a resident in need of treatment for ulcers and widespread skin disorder; two (2) times for violating Section 901.C, for failing to administer medications to residents as prescribed by a physician; three (3) times for violating Section 1101, for failing to have documentation of required physical examinations and tuberculin skin tests for residents; three (3) times for violating Section 1201.A, for failing to have medications prescribed by physicians available for administration; one (1) time for violating Section 1205.B, for failing to follow medication container and medication review requirements; one (1) time for violating Section 1206.F, for failing to ensure medications were not kept in a resident’s room; two (2) times for violating Section 1300, for failing to follow dietary and menu requirements; two (2) times for violating Section 1702.B, for failing to have documentation of a current annual tuberculosis risk assessment; and one (1) time for violating Section 2604.C, for failing to have liquid soap in public and communal resident bathrooms.

Enforcement Action: Pursuant to the Consent Order executed February 9, 2018, the Department assessed a ten thousand dollar (\$10,000) monetary penalty against Crossroads. The Consent Order required Crossroads to submit five thousand dollars (\$5,000) of the assessed monetary penalty in three (3) installments, with the first payment due within thirty (30) days of execution of the Consent Order. The remainder of the assessed monetary penalty will be stayed upon a six (6) month period of substantial compliance. Additionally, Crossroads agreed to initiate action to correct the violations that initiated this enforcement action. Finally, Crossroads agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order. The Department received Crossroads’ first payment on March 26, 2018, and second payment on April 13, 2018. Crossroads’ final payment is due May 9, 2018. Crossroads attended a compliance assistance meeting with Department representatives March 20, 2018.

Prior Sanctions: None.

## **2. B & B Assisted Living (CRCF) – Dillon, SC**

Investigation: The Department visited B & B Assisted Living (“B & B”) on June 23, 2016, January 3, 2017, and December 6, 2017, to conduct routine fire and life safety inspections, and on November 8, 2016, and January 31, 2018, for follow-up fire and life safety inspections. Following the January 2018 follow-up inspection, the South Carolina State Fire Marshal issued an order stating that B & B’s deficient kitchen exhaust hood suppression system was not compliant with Chapter 9 of the 2015 International Fire Code and constituted a clear and inimical threat to human life and safety. The Fire Marshal’s order further required B & B to repair or replace the suppression system within thirty (30) days of the order.

Violations: Based upon the inspections and investigations, the Department cited B & B for five (5) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, B & B was cited five (5) times for violating Section 1502, for failing to maintain fire protection and suppression systems in accordance with provisions of the codes officially adopted by the South Carolina Building Codes Council and the South Carolina State Fire Marshal applicable to community residential care facilities.

Enforcement Action: Pursuant to the Consent Order executed February 21, 2018, the Department assessed a five thousand dollar (\$5,000) monetary penalty against B & B. The Consent Order required B & B to submit one thousand dollars (\$1,000) of the assessed monetary penalty within thirty (30) days of execution of the Consent Order. The remainder of the assessed monetary penalty will be stayed upon B & B replacing or making any necessary repairs to the suppression system by March 2, 2018, as ordered by the Fire Marshal. Additionally, B & B agreed to comply with the Fire Marshal’s order and initiate action to correct deficiencies within thirty (30) days of the order; and not utilize, replace, or alter the stove or any of the appliances and/or equipment subject to the suppression system prior to repairs or replacements being completed and approved by the Fire Marshal and the Department’s Division of Health Facilities Construction. Finally, B & B agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order. B & B complied with the terms of the Fire Marshal’s order on March 1, 2018, and the assessed monetary penalty has been paid. B & B attended a compliance assistance meeting with Department representatives April 20, 2018.

Prior Sanctions: None.

<b>Facility Type</b>	<b>Total # of Participants</b>	<b>Total # of Licensed Facilities in South Carolina</b>
Day Care Facility for Adults	4,557	94

## **3. Dillon Adult Day Care (ADC) – Little Rock, SC**

Investigation: The Department visited Dillon Adult Day Care (“Dillon”) to conduct general inspections on August 6, 2015, and July 12, 2016, and issued citations by mail on November 3, 2015, and November 2, 2016.

Violations: Based upon the inspections and investigations, the Department cited Dillon for sixteen (16) violations of Regulation 61-75, Standards for Licensing Day Care Facilities for Adults. Specifically, Dillon was cited two (2) times for violating Section 202.D, for failing to timely submit Plans of Correction for violations cited following the August 2015 and July 2016 inspections; one (1) time for violating Section 403.A, for failing to have documentation of an annual fire inspection; two (2) times for

violating Section 403.D, for failing to have daily menus for meals; four (4) times for violating Section 404.F, for failing to have documentation of required training for staff members; two (2) times for violating Section 404.G, for failing to have annual performance evaluations for staff members; one (1) time for violating Section 502.E, for failing to ensure the first aid kit or equivalent first aid supplies included a tourniquet; one (1) time for violating Section 503.A, for failing to have photographs in participant records; one (1) time for violating Section 602.B, for failing to post weekly menus where they may be observed by participants; one (1) time for violating Section 702.B, for failing to have documentation of fire drills performed at least every three (3) months; and one (1) time for violating Section 807.A, for failing to have an annual tuberculosis risk assessment.

Enforcement Action: Pursuant to the Consent Order executed March 13, 2018, the Department assessed a one thousand one hundred dollar (\$1,100) monetary penalty against Dillon. The Consent Order required Dillon to submit six hundred dollars (\$600) of the assessed monetary penalty within thirty (30) days of execution of the Consent Order. The remainder of the assessed monetary penalty will be held stayed upon a six (6) month period of substantial compliance. Additionally, Dillon agreed to initiate action to correct the violations that initiated this enforcement action and ensure that all violations of R.61-75 are not repeated. Finally, Dillon agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order. The Department received Dillon’s payment of the assessed monetary penalty on April 16, 2018. Dillon attended a compliance assistance meeting with Department representatives April 20, 2018.

Prior Sanctions: None.

Facility Type	Total # of Beds	Total # of Licensed Facilities in South Carolina
Nursing Home	20,436	196

#### 4. Bayview Manor, LLC (Nursing Home) – Beaufort, SC

Investigation: The Department visited Bayview Manor, LLC (“Bayview”) on June 14, 2016, to conduct a general inspection, November 3, 2016, for a follow-up inspection, March 1, 2017, and April 26, 2017, for complaint investigations, and issued a citation by mail on May 16, 2017.

Violations: Based upon the inspections and investigations, the Department cited Bayview for twenty-one (21) violations of Regulation 61-17, Standards for Licensing Nursing Homes. Specifically, Bayview was cited one (1) time for violating Section 302.D, for failing to timely submit a Plan of Correction for violations cited following the April 2017 complain investigation; one (1) time for violating Section 601.A, for failing to have criminal background checks for staff members; one (1) time for violating Section 606.B, for failing to have documentation of orientation for staff members; one (1) time for violating Section 606.F.1.a, for failing to ensure a resident’s Individual Care Plan was signed by the appropriate parties; three (3) times for violating Section 1303.A, for failing to administer medications in accordance with physician orders; one (1) time for violating Section 1303.G, for failing to have documented reviews of controlled substances; one (1) time for violating Section 1305.B, for failing to destroy damaged or compromised medication containers; one (1) time for violating Section 1307.A, for failing to maintain records of medication administration in sufficient detail; one (1) time for violating Section 1308.D, for failing to ensure the nursing staff documented the use of contents from the emergency medication kit; three (3) times for violating Section 1700, for failing to comply with tuberculosis testing requirements; one (1) time for violating Section 1706.A.1, for failing to have documentation of a Hepatitis B vaccine series or a documented offer and refusal for a staff member; two (2) times for violating Section 1707.A, for failing to ensure the facility was clean and free of vermin and offensive odors; one (1) time for violating Section 1710.B.4, for failing to follow dirty linen requirements; one (1)

time for violating Section 2100, for failing to maintain the facility’s equipment in good repair; one (1) time for violating Section 2300, for failing to maintain required temperatures for plumbing fixtures; and one (1) time for violating Section 2612.C, for storing supplies directly on the floor.

**Enforcement Action:** Pursuant to the Consent Order executed March 27, 2018, the Department assessed a sixteen thousand eight hundred dollar (\$16,800) monetary penalty against Bayview. The Consent Order required Bayview to submit ten thousand dollars (\$10,000) of the assessed monetary penalty within thirty (30) days of execution of the Consent Order. The remainder of the assessed monetary penalty will be held stayed upon a six (6) month period of substantial compliance. Additionally, Bayview agreed to initiate action to correct the violations that initiated this enforcement action and ensure that all violations of R.61-17 are not repeated. Finally, Bayview agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order. The Department received Bayview’s payment of the assessed monetary penalty on April 20, 2018. Bayview attended a compliance assistance meeting with Department representatives April 26, 2018.

**Prior Sanctions:** None.

**Bureau of EMS & Trauma**

EMS Provider Type	Total # of Providers in South Carolina
EMT	6,218
Advanced EMT	399
Paramedic	3,688
Athletic Trainers	1,000
Ambulance Services Provider	264
First Responder Services Provider	2

**5. Douglas F. Maness (Paramedic)**

**Investigation:** On March 17, 2018, the Department was notified of Mr. Maness’s arrest. Upon notification, the Department initiated an investigation into the matter. The Department discovered that Mr. Maness was arrested on March 15, 2018, and charged with second degree assault and battery, including allegations of nonconsensual touching of private parts of a person, either above or below the clothing.

**Violations:** The charge against Mr. Maness is a crime involving moral turpitude and gross immorality and therefore may rise to the level of misconduct as prescribed in S.C. Code Section 44-61-80(F)(2) and Regulation 61-7, Section 1100(B)(2). The Department believes Mr. Maness’s arrest demonstrates a capacity for inappropriate and criminal behavior towards individuals placed within his trust.

**Enforcement Action:** Mr. Maness’s Paramedic certificate was immediately suspended on an emergency basis pursuant to the Emergency Suspension Order executed March 20, 2018. The Department will continue to monitor Mr. Maness’s criminal matters.

**Prior Sanctions:** None.

**6. Keith F. Maldonado (Paramedic)**

Investigation: On March 16, 2018, the Department was notified of Mr. Maldonado's arrest. Upon notification, the Department initiated an investigation into the matter. The Department discovered that Mr. Maldonado was arrested on March 15, 2018, and charged with eavesdropping, peeping, voyeurism. Pursuant to the arresting agency's incident report, the charge was based on allegations that Mr. Maldonado placed a camera in a sleeping quarters room within Chester County EMS for the purpose of spying upon and invading the privacy of another person without consent.

Violations: The charge against Mr. Maldonado is a crime involving moral turpitude and gross immorality and therefore may rise to the level of misconduct as prescribed in S.C. Code Section 44-61-80(F)(2) and Regulation 61-7, Section 1100(B)(2). The Department believes Mr. Maldonado's arrest demonstrates a capacity for inappropriate and criminal behavior towards individuals placed within his trust.

Enforcement Action: Mr. Maldonado's Paramedic certificate was immediately suspended on an emergency basis pursuant to the Emergency Suspension Order executed March 20, 2018. The Department will continue to monitor Mr. Maldonado's criminal matters.

Prior Sanctions: None.