

SUMMARY SHEET
SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

October 12, 2023

- () 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 August 1, 2023, through August 31, 2023.
- III. FACTS:** For the period of August 1, 2023, through August 31, 2023, Healthcare Quality reports 3 Consent Orders totaling \$19,600 in assessed monetary penalties.

Bureau	Facility, Service, Provider, or Equipment Type	Administrative Orders	Consent Orders	Assessed Penalties	Required Payment
Community Care	Residential Treatment Facility for Children and Adolescents		1	\$19,000	\$19,000
Healthcare Systems and Services	In-Home Care Provider		1	\$300	\$300
	Body Piercing Facility		1	\$300	\$300
TOTAL			3	\$19,600	\$19,600

Submitted By:

Gwendolyn C. Thompson

Gwen C. Thompson
Deputy Director
Healthcare Quality

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

October 12, 2023

Bureau of Community Care

Facility Type	Total Number of Licensed Facilities	Total Number of Licensed Beds
Residential Treatment Facility for Children and Adolescents	8	518

1. Palmetto Pines Behavioral Health – Summerville (64 beds)

Investigation and Violations: On November 8, 2022, Department staff visited the facility to conduct three complaint investigations. Staff observed and cited the following violations:

- The Facility failed to implement its policy regarding resident care, rights and operation of the facility.
- The Facility failed to have one registered nurse immediately accessible by phone, and available in the Facility within 30 minutes.
- The Facility failed to notify the Department of a serious accident and/or incident within 24 hours.
- The Facility failed to submit a written report of its investigation of a serious accident and/or incident within five calendar days of the accident and/or incident.
- The Facility failed to delineate the responsibilities of the Facility in meeting the needs of residents, including provisions for the sponsor to monitor the care and the effectiveness of the Facility in meeting those needs.
- The Facility failed to ensure that residents were free from harm.
- The Facility failed to ensure residents were able to communicate with parents and friends.
- The Facility failed to ensure medications were available for administration.
- The Facility Failed to ensure that all orders, including verbal orders, were signed and dated by a physician or other authorized healthcare provider.

Staff provided the Facility with a copy of the Report of Visit, which stated that the Plan of Correction was due by November 30, 2022. The Department received an untimely Plan of Correction on December 16, 2022, and December 28, 2022.

Enforcement: The Department notified the Facility via certified mail on February 9, 2023, that an enforcement action was being considered. The Department and the Facility met on February 28, 2023, and agreed to resolve this matter through a Consent Order. The Facility agreed to the assessment of a \$19,000 monetary penalty. The Facility paid the penalty in full on August 22, 2023.

Remedial Action: The Facility agreed to limit its daily census to no more than 40 residents for 120 calendar days following the execution of the consent order. The Facility also agrees to correct the violations that prompted this enforcement action, and to ensure that any other violations are not repeated. Finally, the Facility participated in a compliance assistance meeting on September 11, 2023.

Prior Orders: A Consent Order was executed in June of 2022. The Facility was cited for failing to ensure that residents were free from harm, abuse or neglect. The Facility paid a \$5,000 monetary penalty. Another Consent Order was executed in 2021 after several violations were observed and cited during a complaint investigation. A \$12,100 monetary penalty was assessed. However, the Facility was only required to pay \$7,260 with the remainder held in abeyance.

Bureau of Healthcare Systems and Services

Facility Type	Total Number of Licensed Facilities
In-Home Care Provider	945

1. Goldstar Care Agency

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

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

Remedial Action: none

Prior Orders: None in the past 5 years.

Facility Type	Total Number of Licensed Facilities
Body Piercing Facilities	46

1. Heat Street - Florence

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

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

Remedial Action: none

Prior Orders: None in the past 5 years.