

SUMMARY SHEET
SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

May 13, 2021

- () 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 March 1, 2021, through March 31, 2021.
- III. FACTS:** For the period of March 1, 2021 through March 31, 2021, Healthcare Quality reports two (2) Consent Order(s) totaling \$1,885 in assessed monetary penalties, thirty-nine (39) Notices of Violation and Civil Penalty totaling \$13,350 in assessed monetary penalties, and (1) Administrative Order.

Name of Bureau	Facility, Service, Provider, or Equipment Type	Notices of Violation and Civil Penalty	Administrative Orders	Consent Orders	Assessed Penalties
Bureau of Facilities Oversight	Community Residential Care Facility	34	0	0	\$11,750
	Nursing Home	5	0	0	\$1,350
	Body Piercing Facility	0	0	1	\$0
Bureau of Radiological Health	Chiropractic Facility	0	0	1	\$1,885
	Mammography Facility	0	1	0	\$0
TOTAL		39	1	2	\$14,985

Submitted By:

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

May 13, 2021

Bureau of Facilities Oversight

1. Facilities in Violation of Public Health Order No. COVID-19-5

Violations: The Department found that the thirty-four (34) community residential care facilities (CRCFs) and five (5) nursing homes listed below failed to submit a weekly visitation report to the Department by the mandatory deadline. Failure to submit the report by the deadline is in violation of the Department’s October 7, 2020, Public Health Order that requires all nursing homes and CRCFs licensed by the Department to submit a weekly report on their visitation status.

Enforcement Action: In March 2021, the Department issued Notices of Violation and Civil Penalty against thirty-four (34) CRCFs and five (5) nursing homes. All of the facilities listed below were required to pay the full amount of their accumulated penalties within twenty (20) days of the dated notices.

Name of Facility	Facility Type	Civil Penalty	Payment Received
Abundant Life Adult Care	CRCF	\$250	Yes
Beard Residential Care Facility #1	CRCF	\$350	Yes
Black’s Drive Community Residence	CRCF	\$350	Yes
Bostick’s Adult Residential Care Facility	CRCF	\$350	Yes
Brian’s Residential Care	CRCF	\$350	Yes
Brian’s Residential Care II	CRCF	\$250	Yes
Carson’s Community Care	CRCF	\$450	Yes
Cascades Verdae Assisted Living	CRCF	\$250	Yes
Catherine’s Manor II	CRCF	\$250	Yes
Dayspring Assisted Living	CRCF	\$250	No
Dayspring of Johns Island	CRCF	\$250	No
Generations of Batesburg	CRCF	\$350	Yes
Harborchase Of Aiken	CRCF	\$250	Yes
Harborchase Of Columbia	CRCF	\$250	Yes
Ladson’s Residential Home Care	CRCF	\$250	No
Lakeview Assisted Living	CRCF	\$450	No
Lemonaide House	CRCF	\$450	Yes
New Haven	CRCF	\$250	Yes
Oakridge Community Care Home #1	CRCF	\$1,000	Yes
Oakridge Community Care Home #2	CRCF	\$450	Yes
Oaks of Loris	CRCF	\$250	Yes
Pondview Residential Care Home #1	CRCF	\$250	Yes
Pondview Residential Care Home #2	CRCF	\$250	Yes

Name of Facility	Facility Type	Civil Penalty	Payment Received
Reese's Community Care Home #1	CRCF	\$350	No
Reese's Community Care Home #2	CRCF	\$350	No
Ridgeview Community Care Homes Unit B	CRCF	\$350	No
Serenity Manor of Holly Hill	CRCF	\$350	No
Stokes Residential Care	CRCF	\$250	Yes
Westminster Memory Care-Lexington	CRCF	\$250	Yes
Wildewood Downs Assisted Living Community	CRCF	\$1,000	Yes
Williams Community Care Home	CRCF	\$350	Yes
Willies II RCH	CRCF	\$350	No
Woodland Place	CRCF	\$350	No
John Edward Harter Nursing Center	Nursing Home	\$250	Yes
Life Care Center of Hilton Head	Nursing Home	\$250	No
Linville Courts at The Cascades Verdae	Nursing Home	\$250	Yes
McCormick Rehabilitation and Healthcare Center	Nursing Home	\$250	Yes
Wildewood Downs Nursing and Rehabilitation Center	Nursing Home	\$350	Yes

Facility Type	Total # of Permitted Facilities
Body Piercing Facility	41

2. Raw Body Piercing – Columbia, SC

Inspections and Investigations: The Department conducted routine inspections in February 2019 and September 2020, and cited the facility for regulatory violations.

Violations: As a result of the inspections, the Department found the facility violated Regulation 61-109, *Standards for Permitting Body Piercing Facilities*, by failing to have an autoclave for proper sterilization, and failing to maintain proper documentation at the facility. The facility also repeatedly failed to submit its plans of correction for the cited violations.

Enforcement Action: The parties agreed to resolve the matter with a consent order. The facility agreed to probation until they satisfy the conditions described in the Consent Order. The facility agreed to schedule and attend a compliance assistance meeting with the Department. The facility also acknowledged the Department will conduct a follow-up inspection to determine compliance and whether the facility's probation status will be lifted.

Remedial Action: The parties have conducted the compliance assistance meeting. As of May 3, 2021, the Department's follow-up inspection has not yet taken place and the facility continues to be on probation.

Prior Enforcement Actions: None in the past five years.

Bureau of Radiological Health

Facility Type	Total # of Registered Facilities
Chiropractic Facility	487

3. Easterling Chiropractic – Hartsville, SC

Inspections and Investigations: The Department conducted routine inspections in November 2019 and discovered that the registrant was in violation of regulatory standards.

Violations: The Department found that the registrant failed to comply with Regulation 61-64, *X-Rays*, by failing to conduct its annual equipment performance testing. The last documented test was 2019 and the registrant provided additional records indicating that 2016 was the last year a test was performed before 2019. The registrant failed to submit a plan of corrections within the required timeframe.

Enforcement Action: The parties agreed to resolve the matter with a consent order. As a term of the Consent Order, the Department imposed a \$1,885 monetary penalty against the registrant. The registrant is required to pay a total of \$285 in eight (8) installments while the remaining \$1,600 balance is stayed.

Remedial Action: The registrant has paid two (2) of the eight (8) installments.

Prior Enforcement Actions: None in the past five years.

Facility Type	Total # of Certified Facilities
Mammography Facilities	104

3. MUSC Hollings Cancer Center Mobile Mammography – Charleston, SC

Inspections and Investigations: This facility was accredited and certified to operate a mammography facility prior to the actions summarized herein. The facility had not been providing mammography services since October 2019. Because the facility maintained its accreditation and certification, it was still subject to applicable state and federal mammography facility requirements. The Department conducted federal and state inspections in September 2020 that resulted in regulatory violations. As a result of the Department’s findings and at the Department’s request, the accrediting body, the American College of Radiology, performed additional reviews in November 2020 and January 2021. The Department then investigated the American College of Radiology’s additional findings.

Violations: The Department found the facility failed to comply with Regulation 61-64, *X-Rays*, by failing to perform ten quality control tests on the required frequency. Based on these quality control program violations, the Department requested the American College of Radiology perform an additional review. Upon performing additional review, the American College of Radiology determined the quality of mammography at the facility poses a “serious risk to human health” and revoked the facility’s accreditation.

Enforcement Action: Following the Department's investigation into reasons for the American College of Radiology's revocation of accreditation, the Department suspended the facility's certificate effective February 24, 2021.

Remedial Action: The facility is suspended from performing mammography services and may no longer display the "SC DHEC Mammography Certificate" until the Department determines the emergency situation is no longer present and the facility has taken necessary action to obtain accreditation and compliance with applicable law.

Prior Enforcement Actions: None in the past five years.