SECTION 700 - REPORTING

701. Incidents

A. A record of each incident involving residents or staff members or volunteers, occurring in the facility or on the facility grounds, shall be reviewed, investigated if necessary, evaluated in accordance with facility policies and procedures, and retained.

B. Serious incidents and/or medical conditions as defined in Section 701.C and any sudden or unexpected illness or medication administration error resulting in death or inpatient hospitalization shall be reported immediately via telephone to the attending physician and the resident’s next-of-kin or responsible party. (I)

C. A serious incident is one which results in death or a significant loss of function or damage to a body structure, not related to the natural course of a resident’s illness or underlying condition or normal course of treatment, and resulting from an incident occurring within the facility or on the facility grounds. A serious incident shall be considered as, but not limited to:

1. Falls or trauma resulting in fractures of major limbs or joints;
2. Resident suicides;
3. Medication errors;
4. Resident death or injury in restraints;
5. Criminal events or assaults against residents;
6. Medical equipment errors; or
7. Resident neglect or exploitation, suspected or confirmed resident abuse.

D. The Department’s Division of Health Licensing shall be notified in writing not later than ten (10) days of the occurrence of a serious incident.

E. Reports submitted to the Department shall contain at a minimum: facility name, resident age and sex, date of incident, location, witness names, extent and type of injury and how treated, e.g., hospitalization, identified cause of incident, internal investigation results if cause unknown, identity of other agencies notified of incident and the date of the report.

F. Incidents where residents have left the premises without notice to staff members of intent to leave and have not returned to the facility within twenty-four (24) hours shall be reported to the administrator or his or her designee, local law enforcement, and the resident’s responsible party, when appropriate. The Division of Health Licensing shall be notified in writing not later than ten (10) days of the occurrence.
G. Medication errors and adverse medication reactions shall be reported immediately after discovery to the prescriber and other staff in accordance with facility policies and procedures.

H. Changes in the resident’s condition, to the extent that serious health concerns, e.g., heart attack, are evident, shall be reported to the attending physician and the next-of-kin or responsible party in a timely manner, consistent with the severity or urgency of the change in accordance with facility policies and procedures. (I)

I. Abuse and suspected abuse, neglect, or exploitation of residents shall also be reported to the South Carolina Long-Term Care Ombudsman Program in accordance with S.C. Code of Law Section 43-35-25 (1976, as amended).

702. Fire/Disasters (II)

A. The Division of Health Licensing shall be notified immediately via telephone or fax regarding any fire, regardless of size or damage that occurs in the facility, and followed by a complete written report to include fire department reports, if any, to be submitted within a time period determined by the facility, but not to exceed seven (7) business days.

B. Any natural disaster in the facility which requires displacement of the residents, or jeopardizes or potentially jeopardizes the safety of the residents, shall be reported to the Division of Health Licensing via telephone or fax immediately, with a complete written report that includes the fire department report from the local fire department, if appropriate, submitted within a time period as determined by the facility, but not to exceed seven (7) business days.

703. Communicable Diseases and Animal Bites (I)
All cases of reportable diseases, animal bites, any occurrences such as epidemic outbreaks or poisonings, or other unusual occurrences that threaten the health and safety of residents or staff shall be reported in accordance with R.61-20.

704. Administrator Change
The Division of Health Licensing shall be notified in writing by the licensee within ten (10) days of any change in administrator. The notice shall include at a minimum the name of the newly-appointed individual, the effective date of the appointment, and a copy of the administrator’s license.

705. Joint Annual Report
Facilities shall complete and return a “Joint Annual Report” to the Department’s Planning and Certificate of Need Division within the time period specified by that Division.

706. Facility Closure

A. Prior to the permanent closure of a facility, the Department’s Division of Health Licensing shall be notified in writing of the intent to close and the effective closure date. Within ten (10) days of the closure, the facility shall notify the Division of Health
Licensing of the provisions for the maintenance of the facility records as required by regulation. On the date of closure, the current original license shall be returned to the Division of Health Licensing.

B. In instances where a facility temporarily closes, the Division of Health Licensing shall be given written notice within a reasonable time in advance of closure. At a minimum this notification shall include, but not be limited to, the reason for the temporary closure, the manner in which the records are being stored, and the anticipated date for reopening. The Department shall consider, upon appropriate review, the necessity of inspecting and determining the applicability of current construction standards to the facility prior to its reopening.

707. Zero Census
In instances when there have been no residents in a facility for any reason, for a period of ninety (90) days or more, the facility shall notify, in writing, the Department’s Division of Health Licensing no later than the one-hundredth (100th) day following the date of discharge or transfer of the last active resident. If the facility has no residents for a period longer than one (1) year, and there is a desire to reopen, the facility shall re-apply to the Department and shall be subject to all licensing requirements at the time of that application, including CON review and construction-related requirements for a new facility. Instances of zero census do not relieve the facility of the requirement to pay licensing fees that may be due during that time.