

Called office on aging 4 times

Jane Page Thompson

DHEC Issues

#1: 17 messages left with 9 different DHEC employees, several to the Ombudsman have gone unanswered.

#2: The regulations are written in such broad and generic terms yet are being interpreted in very rigid and restricted ways by the various inspectors. Originally, the broad and generic terms for DHEC were there to foster flexibility in serving the public and encouraging economic development.

#3: The inspectors will interpret the same regulations in different ways costing applicants time and money; often times requiring something on the plan then eliminating it in person during their inspections.

#4: Many of DHEC regulations are antiquated or lack business friendly options: for example:

- a) water fountains that are plumbed- why not use jug water units they are more sanitary
- b) mop sinks: who uses germ infested mops any more?
- c) paper charts for clients, we need to be modern and allow electronic charts for clients
- d) first aid kits required need to be standardized as to what's available on the market
- e) recliners in all day cares does not necessarily serve the actual clients in those day cares; therefore there needs to be a difference between a medical model day care and a social model day care
- f) meals served in day cares should be based on who is being served; for example: medical model day care may be required to have low sodium or pureed meals however, in a social model daycare the flavor of the food is more important and medical model day cares may need to have a registered dietitian help plan their meals but in a social model daycare the meals need to be flexible based on the activities

#5: The structural requirements of DHEC relating to adult day cares:

- a) regulations say you can have an engineer or an architect yet in practice some of the inspectors demand an architect not an engineer
- b) when a building is being remodeled and retrofitted to accommodate a day care it should not be forced to meet requirements that a new construction plan would require. Using local inspectors would ease the process.
- c) Adult day cares in South Carolina should be in two different categories: medical model which can be regulated like it is a small hospital and to the social model which should not be regulated like a hospital but more like an assembly facility
- d) the advent of modern technology should allow DHEC inspectors to review suggestions and plans through a shared document server instead making applicants have an in person meeting in Columbia every time there's a question or a change. This is a cost prohibitive procedure when businesses are willing to open to care for our senior population if DHEC would just split the way adult day cares are categorized
- e) Several inspectors with DHEC say they will treat application with the strictest possible code enforcement- because they can! This does not serve the tsunami that it's coming our way of dementia

#6: DHEC needs to work with business owners and not against them; they need to be a partner in the process of helping our elderly; not a hurdle to those people trying to serve the needs of patients with dementia.

South Carolina DHEC Reforms

Relating to Adult Day Cares

"The Grey Tsunami is coming and South Carolina needs to adopt flexible Adult Day Care models to address the needs of our population with dementia."

To accomplish this; Adult Day Cares in SC need to be in 2 categories:

Medical Model Day Cares- These facilities serve the needs of the Chronically Ill, the developmentally disabled, extremely physically disabled and those requiring assistance to maintain basic needs like special feeding programs, medication management and maintaining personal hygiene. The clients in these facilities need a nurse's supervision. These clients have corporal issues that limit their ability to assist in their own safety.

Under Medical Model: subcategories need to address the age, chronic illness, developmental disability and mental cognition of those being served. The Regulations need to reflect the needs of those being served.

(Currently, all Adult Day Cares in SC are approached as if they are Institutional Class 4 - Medical facilities)

Social Model Day Cares- Clients in these facilities are here to be active in exercise, to engage in cognitive game playing and to socialize with others. They do not need specialized or restricted diets, they do not need to be sitting in required recliners, they do not need the supervision of a nurse. These clients do not have corporal deterioration that needs constant medical attention they have the ability to assist in their own safety; they simply have dementia.

Under the current DHEC Regulations these facilities can't exist without complying to standards that they should not be force to meet.

***Dementia care under either the Medical Model or the Social Model is the primary objective. The State needs to recognize the difference between those with physical issues versus those simply advancing through the stages of dementia.

Submitted for attention by: Jane Page Thompson:
803-215-8232