



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

December 5, 2018

Ryan Goleski
The Haworth Center
30301 W. 13 Mile Road
Farmington Hills, MI 48334

RE: License #: AH630236793
The Haworth Center
30225 13 Mile Road
Farmington Hills, MI 48334

Dear Mr. Goleski:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action may result. Please review the enclosed documentation for accuracy and contact me with any questions.

Sincerely,

A handwritten signature in blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff

Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(810) 347-5503

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #:	AH630236793
Licensee Name:	Detroit Baptist Manor
Licensee Address:	30301 W 13 Mile Rd. Farmington Hills, MI 48334
Licensee Telephone #:	(810) 626-6100
Authorized Representative:	Ryan Goleski
Administrator:	Ryan Goleski
Name of Facility:	The Haworth Center
Facility Address:	30225 13 Mile Road Farmington Hills, MI 48334
Facility Telephone #:	(248) 539-3131
Original Issuance Date:	05/09/1999
Capacity:	59
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/04/2018

Date of Bureau of Fire Services Inspection if applicable: 03/19/2018

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 12/04/2018

No. of staff interviewed and/or observed 14

No. of residents interviewed and/or observed 34

No. of others interviewed N/A Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of fire services reviews fire drills, but facility disaster planning procedures were reviewed.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A, no citations within the last two licensing periods.
- Number of excluded employees followed up? N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

MCL 333.20201 Policy describing rights and responsibilities of patients or residents; adoption; posting and distribution; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights; definitions.

(1) A health facility or agency that provides services directly to patients or residents and is licensed under this article shall adopt a policy describing the rights and responsibilities of patients or residents admitted to the health facility or agency. Except for a licensed health maintenance organization, which shall comply with chapter 35 of the insurance code of 1956, 1956 PA 218, MCL 500.3501 to 500.3580, the policy shall be posted at a public place in the health facility or agency and shall be provided to each member of the health facility or agency staff. Patients or residents shall be treated in accordance with the policy.

The facility did not have the full "Resident Rights & Responsibilities" posted. While onsite, the facility did post the document in its entirety on a bulletin board outside of the dining room.

MCL 333.20201 Policy describing rights and responsibilities of patients or residents; adoption; posting and distribution; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights; definitions.

(2) The policy describing the rights and responsibilities of patients or residents required under subsection (1) shall include, as a minimum, all of the following:

(I) A patient or resident is entitled to be free from mental and physical abuse and from physical and chemical restraints, except those restraints authorized in writing by the attending physician or a physician's assistant to whom the physician has delegated the performance of medical care services for a specified and limited time or as are necessitated by an emergency to protect the patient or resident from injury to self or others, in which case the restraint may only be applied by a qualified professional who shall set forth in writing the circumstances requiring the use of restraints and who shall promptly report the action to the attending physician or physician's assistant. In case of a chemical restraint, a physician shall be consulted within 24 hours after the commencement of the chemical restraint.

While onsite, it was observed that four residents were physically restrained in their wheelchairs with a cushion device commonly referred to as a "lap buddy" that prevented them from getting out of the wheelchair. All residents observed with the device in place did not have the mental capacity to explain the necessity of the device and were not able to independently remove the device.

R 325.1932 Resident medications.

(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.

Review of medical records revealed that the facility staff did not administer medications as prescribed for Resident A, B and C. Facility staff did not document any explanation in the medication administration record (MAR) as to why the medications were not administered as prescribed. Staff nurse Kathie Ogden stated that staff are taught to document the specific reason whenever a medication is not given.

R 325.1954 Meal and food records.

The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.

Facility administrator and authorized representative Ryan Goleski stated that staff do not keep a record of the meal census.

R 325.1964 Interiors.

(9) Ventilation shall be provided throughout the facility in the following manner:

(a) A room shall be provided with a type and amount of ventilation that will control odors and contribute to the comfort of occupants.

(b) Bathing rooms, beauty shops, toilet rooms, soiled linen rooms, janitor closets, and trash holding rooms shall be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.

The exhaust ventilation was not functioning in the soiled linen room, spa room or resident bathrooms located in the "Maple Street" hallway.

R 325.1976 Kitchen and dietary.

(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.

Inspection of the facility kitchen revealed that the refrigerator and freezer contained several items that were opened, unsealed and not labeled or dated.

R 325.1976 Kitchen and dietary.

(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.

Kitchen staff interviewed could not demonstrate the commercial kitchen dish machine was adequately sanitizing the dishes. Mr. Goleski stated that the dish machine utilizes heat sanitation to clean the dishes but stated that staff do not check or record the temperatures of the machine.

R 325.1979 General maintenance and storage.

(3) Hazardous and toxic materials shall be stored in a safe manner.

Multiple chemicals and cleaning agents were located in the unlocked soiled linen room in an unlocked cabinet. The soiled linen room did not have any locking mechanism on the door to restrict entry into the room.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and closure of special investigation 2019A1019010, renewal of the license is recommended.



12/5/18

Elizabeth Gregory- Weil
Licensing Consultant

Date