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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 17, 2020

Carol Gardiner
Pleasant View Manor Inc
6153 Brown Road
Parma, MI 49269

RE: License #: AL380007066
Investigation #: 2020A0007010
Pleasant View Manor Inc

Dear Ms. Gardiner:

Attached is the Special Investigation Report for the above referenced facility. Due to the severity of the violations, disciplinary action against your license is recommended. You will be notified in writing of the department's action and your options for resolution of this matter.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, please contact the local office at (313) 456-0380.

Sincerely,

A handwritten signature in cursive script that reads "Mahtina Rubritius".

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
301 E. Louis Glick Hwy
Jackson, MI 49201
(517) 262-8604

Enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AL380007066
Investigation #:	2020A0007010
Complaint Receipt Date:	12/26/2019
Investigation Initiation Date:	12/26/2019
Report Due Date:	02/24/2020
Licensee Name:	Pleasant View Manor Inc
Licensee Address:	6153 Brown Road Parma, MI 49269
Licensee Telephone #:	(517) 531-4226
Administrator:	Carol Gardiner
Licensee Designee:	Carol Gardiner
Name of Facility:	Pleasant View Manor Inc
Facility Address:	6153 Brown Road Parma, MI 49269
Facility Telephone #:	(517) 531-4226
Original Issuance Date:	05/28/1985
License Status:	REGULAR
Effective Date:	08/08/2019
Expiration Date:	08/07/2021
Capacity:	16
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Several residents are wearing coats, hats, and mittens, while inside the home. The owner keeps the thermostat set lower than the residents prefer.	Yes
The residents are always hungry, they are not getting enough food, and their meals are not portion sized.	No

III. METHODOLOGY

12/26/2019	Special Investigation Intake - 2020A0007010
12/26/2019	Special Investigation Initiated - Face to Face contact with APS Worker #1.
01/02/2020	Inspection Completed On-site- Unannounced - Face to face contact with Ms. Gardiner, Ms. Serrano, Direct Care Staff, Resident B, Resident C, Resident D, Resident E, Resident F, Resident G, Resident H, Resident I and Resident K.
01/21/2020	Inspection Completed On-site Unannounced - Face to face contact with Ms. Gardiner and the residents.
02/07/2020	Contact - Document Received Subsequent Complaint - SIR # 2020A0007017.
02/18/2020	Contact - Telephone call received from Family Member #1. Ms. Gardiner has passed away.

ALLEGATIONS:

Several residents are wearing coats, hats, and mittens, while inside the home. The owner keeps the thermostat set lower than the residents prefer.

INVESTIGATION:

On December 26, 2019, I spoke with APS Worker #1, who stated that Resident A is on her caseload and she resides in the home. APS Worker #1 will be visiting Resident A in January. During the last visit with Resident A, she was observed to be clean and comfortable. Resident A likes the adult foster care home. She enjoys gardening. Resident A reported no issues with the home.

On January 2, 2020, I conducted an unannounced on-site investigation and made face to face contact with Ms. Gardiner, Licensee, Ms. Serrano, Direct Care Staff, Resident B, Resident C, Resident D, Resident E, Resident F, Resident G, Resident H, and Resident K.

When I arrived in the home, Ms. Gardiner was observed wearing a sweater jacket, and three residents, sitting in the upper dining room, were also observed with coats on. The home is heated with an electrical heating system. I asked Ms. Gardiner about the temperature setting on the thermostat, and we observed it to be set at 67 degrees Fahrenheit in the dining room. Ms. Gardiner stated that electric heat is different than heat from a forced air furnace. We also checked the thermostat in the large bedroom on the first floor (with 4 resident beds), and it was set at 68 degrees Fahrenheit.

I inquired about Ms. Gardiner and some of the residents wearing coats in the home. Ms. Gardiner stated that she is always cold and recalled that Resident B wears her coat, even in the summer.

Resident C and Resident D were observed sitting next to each other. I inquired about the temperatures in the home. Resident D was observed wearing gloves. I inquired if she was cold and she stated "yes" but then replied that she was "just joking." She didn't provide another explanation as to why she was wearing gloves in the home.

Resident E was observed sitting in the lower dining room, finishing breakfast. I was unable to interview her, due to her cognitive diagnosis. She was observed wearing a sweatshirt and jeans.

Resident F was observed wearing a coat in the home. I asked why she was wearing a coat and she stated that it was cold, and that she also had a tendency to be cold.

Resident G reported that the home temperatures were warm for him.

Resident H was observed wearing a coat, and she stated this was because she just returned into the home from smoking outside. Resident H reported that the temperature of the home was fine for her.

Ms. Gardiner and I walked through the home to check the temperatures in the bedrooms. Resident B's room temperature was set at 62 degrees Fahrenheit. Ms. Gardiner turned up the thermostat before continuing the walkthrough of the home. Resident C's room temperature was acceptable. Resident I and Resident J's room was observed to be below 68 degrees Fahrenheit; however, they had a fan on and the window open. Resident I reported that he sprayed too much air freshener, he shut off the heat, and opened the window to air out the room. Resident K and Resident L's room temperature was observed to be 78 degrees Fahrenheit. The temperature

in Resident D and Resident M's room was observed to be set at 70 degrees Fahrenheit.

Ms. Gardiner stated that some areas of the home are cooler than others, it just depends on the direction of the wind. She has placed plastic outside in the porch area, to help reduce the draft. She reported that there used to be a nice wooden door between the main entrance hallway area and the lower level living areas; however, licensing made her remove the door several years ago. According to Ms. Gardiner, the door was removed because it separated the resident populations. She also informed me that the occupants of the home go in and out of the house to smoke, several times a day; therefore, the brick side of the home is cooler. She reported to had turned up the heat a few days ago.

I asked to review a copy of the electric bills. Ms. Gardiner reported that her bill last month was \$2200.00.

I interviewed Ms. Serrano, Direct Care Staff regarding the temperatures in the home. She reported that she has hot flashes and sometimes she's hot or cold. She also reported that her feet are always cold. I inquired if the residents complain about being cold and she stated they have not said anything to her.

On January 21, 2020, I conducted an unannounced on-site inspection at the facility and made face to face contact with Ms. Gardiner, Resident B, Resident G, and other residents. Ms. Gardiner and four residents were observed with coats on. The kitchen area and other parts of the home were observed to be cold. One thermostat was set at 66 degrees Fahrenheit in the common area of the home. I informed her that the home was too cold, and Ms. Gardiner turned up the heat to 68 degrees Fahrenheit, before the conclusion of the inspection. I explained to Ms. Gardiner that I understood the home had drafts and it was difficult to maintain a steady temperature in the home; however, it was her responsibility to monitor the home conditions and ensure that they were adequate.

While at the home, I interviewed Resident G. I inquired about the temperature in the home and he stated it was fine. I asked why he was wearing his coat, and he stated he was leaving the home soon. Regarding the other residents were wearing coats, Resident G stated they may be wearing them because they're going outside to smoke or leaving for a visit.

I interviewed Resident B and asked why she was wearing a hat, and she stated she liked to keep her head warm.

APPLICABLE RULE	
R 400.15406	Room temperature.
	All resident-occupied rooms of a home shall be heated at a temperature range between 68 and 72 degrees Fahrenheit during non-sleeping hours. Precautions shall be taken to prevent prolonged resident exposure to stale, noncirculating air that is at a temperature of 90 degrees Fahrenheit or above. Variations from the requirements of this rule shall be based upon a resident's health care appraisal and shall be addressed in the resident's written assessment plan. The resident care agreement shall address the resident's preferences for variations from the temperatures and requirements specified in this rule.
ANALYSIS:	Based on the information gathered during this investigation and provided above, it's concluded that there is a preponderance of the evidence to support the allegations that at times, the home was not heated and maintained at a temperature range between 68 and 72 degrees Fahrenheit during non-sleeping hours.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATIONS:

The residents are always hungry, they are not getting enough food, and their meals are not portion sized.

INVESTIGATION:

On January 2, 2020, during the on-site inspection, I inquired if the residents were getting enough to eat and if they could have seconds. Ms. Gardiner stated the residents could have seconds, if there was food left over from that meal. There were also other options available. Ms. Gardiner explained that she spends a lot of money on food each month to provide for the residents. I inquired what the residents had for breakfast, and Ms. Gardiner stated they had cereal, toast, and juice. I observed an adequate amount of food in the home.

I spoke to Resident C and he stated that if he is hungry, he could make a sandwich, or he can ask for more food.

Resident E was observed sitting in the lower dining room at the table, finishing breakfast (cereal, toast, and juice). She ate all of the food on her plate/tray.

Resident G reported to get enough food to eat. I inquired if he was allowed seconds, and he stated “sometimes.”

Resident H reported that the food was “good” and that she gets enough to eat.

I interviewed Ms. Serrano and inquired what she would be fixing for lunch and dinner that day. She reported they would be having ham or turkey sandwiches, sliced apples, chips, and milk for lunch. For dinner would be goulash, salad, bread and butter, and Jell-O. Ms. Serrano reported that they go to the store often for milk and juice, but there are other food items in the home. I observed an adequate amount of food in the kitchen cabinets, freezer, refrigerator, and the pantry.

On January 21, 2020, Ms. Gardiner reported to serve grilled cheese, cookies, fruit, and a beverage for lunch.

While at the facility, I interviewed Resident G. I inquired about the food and he reported to get enough to eat. He could also have a second helping of food, if he was still hungry, and if it was available.

I interviewed Resident B and asked what she had for lunch. She reported to have a sandwich, oranges, and milk. I inquired if she had enough to eat and she stated she did.

During the course of this investigation, a subsequent complaint was received (02/07/2020). There was a concern that Ms. Gardiner, Licensee, was unable to properly care for the residents, due to her own failing health. There was no one else to run the home. On February 18, 2020, Ms. Gardiner passed away. Please see SIR #2020A0007017 for additional information.

APPLICABLE RULE	
R 400.15313	Resident nutrition.
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.
ANALYSIS:	Based on the information gathered during this investigation and provided above, it's concluded that there is not a preponderance of the evidence to support the allegations that the licensee was not providing a minimum of 3 regular, nutritious meals daily.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Ms. Gardiner, Licensee, has passed away and there is no one else available to operate the home. Based on this information, I recommend revocation of the license.

Mahtina Rubritius

02/20/2020

Mahtina Rubritius
Licensing Consultant

Date

Approved By:

A. Hunter

02/20/2020

Ardra Hunter
Area Manager

Date