



STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

ORLENE HAWKS
DIRECTOR

May 3rd, 2021

Brent Hayes
Westlake Health Campus
10735 Bogie Lake Rd.
Commerce Township, MI 48382

RE: License #:	AH630309881 Westlake Health Campus 10735 Bogie Lake Rd. Commerce Township, MI 48382
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Dear Mr. Hayes:

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 will result. 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 feel free to contact the local office at (517) 284-9730.

Sincerely,

Kimberly Horst, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH630309881
Licensee Name:	Trilogy Healthcare of Oakland, LLC d/b/a
Licensee Address:	Westlake Health Campus 303 N Hurstbourne Pky 200 Louisville, KY 40222
Licensee Telephone #:	(502) 412-5847
Authorized Representative/ Administrator:	Brent Hayes
Name of Facility:	Westlake Health Campus
Facility Address:	10735 Bogie Lake Rd. Commerce Township, MI 48382
Facility Telephone #:	(248) 363-9400
Original Issuance Date:	08/31/2011
Capacity:	26
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 4/26/21

Date of Bureau of Fire Services Inspection if applicable: 7/24/20

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 5/3/2021

No. of staff interviewed and/or observed 7

No. of residents interviewed and/or observed 5

No. of others interviewed 0 Role N/A

- 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.
Disaster plans reviewed and staff interviewed
- 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:
- Number of excluded employees followed up? 1 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 325.1922	Admission and retention of residents.
	<p>(7) An individual admitted to residence in the home shall have evidence of initial tuberculosis screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR “Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005” (http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents.</p>
<p>The facility <i>Guidelines for TB Results Summary Documentation</i> policy read,</p> <p><i>“Upon admission each resident shall review a Two Step Mantoux PPD test to ensure they are free of tuberculosis. An order should be written upon admission to re-test annually to ensure each resident is re-tested on their admission anniversary date with a one-step Mantoux or Tuberculosis Screening questionnaire if they were a previous converter with a negative CXR. Facilities will also have a CXR administered no less than every 4-5 years for each resident who has a positive Mantoux reaction.”</i></p> <p>The facility tuberculosis policy does not ensure residents are properly screened for tuberculosis prior to their admission to the facility. In addition, the facility lack information on the type and frequency of TB testing as determined by the risk assessment.</p>	
R 325.1923	Employee's health.
	<p>(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis</p>

	<p>(TB) testing shall be determined by a risk assessment as described in the 2005 MMWR “Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005” (http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.</p>
<p>Review of Sade Moore employee record revealed Ms. Moore was hired on 4/9/13 but did not receive a tuberculosis test until 6/7/13.</p> <p>In addition, <i>Guidelines for TB testing policy</i> read, <i>“Prior to beginning employment, each employee will be screened within 90 days of hire for Tuberculosis. Annually, each employee will be screened for tuberculosis by a single TST or BAMT or employees that have had a single positive TST or BAMT shall have an annual TB Risk assessment.”</i></p> <p>The facility tuberculosis policy does not ensure staff are properly screened for tuberculosis prior to their occupational exposure. In addition, the facility policy lacks information on annual screening as determined by the risk assessment.</p>	
R 325.1953	Menus.
	<p>(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.</p>
<p>Review of facility menus revealed the facility does not document changes and modifications to the menus to reflect food that is served.</p>	
R 325.1954	Meal and food records.
	<p>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.</p>

Review of documentation revealed the facility is not maintaining a meal census to reflect the kind and amount of food used.	
REPEAT VIOLATION ESTABLISHED [Ref: Licensing Study Report (LSR) dated 6/4/19 with corrective action plan (CAP) dated 7/1/19.	
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 there was frozen chicken that was opened, unsealed, and not dated.	
R 325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
Inspection of the kitchen revealed the walk-in refrigerator did not have a thermometer.	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.



5/3/21

Licensing Consultant

Date