



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 19, 2021

Allison Morrow
Arden Courts of Bingham Farms
24005 W. 13 Mile Rd.
Bingham Farms, MI 48025

RE: License #: AH630292963

Dear Ms. Morrow:

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. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 aged authorized representative and a date.

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,

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

Elizabeth Gregory-Weil, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 347-5503

enclosure

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

I. IDENTIFYING INFORMATION

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| License #: | AH630292963 |
| Licensee Name: | Arden Courts of Bingham Farms MI, LLC |
| Licensee Address: | 24005 W. 13 Mile Rd. Bingham Farms, MI 48025 |
| Licensee Telephone #: | (419) 252-5500 |
| Authorized Representative: | Allison Morrow |
| Administrator: | Sandra Salvati |
| Name of Facility: | Arden Courts of Bingham Farms |
| Facility Address: | 24005 W. 13 Mile Rd. Bingham Farms, MI 48025 |
| Facility Telephone #: | (248) 644-8100 |
| Original Issuance Date: | 05/21/2009 |
| Capacity: | 56 |
| Program Type: | ALZHEIMERS AGED |

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/07/2021

Date of Bureau of Fire Services Inspection if applicable: 04/05/2021

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 10/19/21

No. of staff interviewed and/or observed 17

No. of residents interviewed and/or observed 14

No. of others interviewed 0 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. The facility does not hold resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
The Bureau of Fire Services is responsible for reviewing fire drills, however 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: CAP dated 5/4/20, R 325.1913 (2) and R 325.1924 (3).
- Number of excluded employees followed up? 1 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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| This facility was found to be in non-compliance with the following administrative rules: | |
| R 325.1922 | Admission and retention of residents. |
| | (5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any. |
| Resident A's service plan had not been updated within the previous twelve months. The last service plan update for Resident A occurred on 9/17/2020. | |
| R 325.1922 | Admission and retention of residents. |
| | (7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home which consists of an intradermal skin test, chest x-ray, or other methods recommended by the local health authority performed within 12 months before admission. |
| Resident B and C's files did not contain evidence of a TB screen within twelve months prior to move in. Resident B moved into the facility on 6/29/21 and had her TB screen completed on 7/17/21. Resident C moved into the facility on 4/27/21 and had no evidence that a TB screen was completed. | |
| R 325.1923 | Employee's health. |
| | (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 (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 |

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| | annually. Homes that are low risk do not need to conduct annual TB testing for employees. |
| The employee files for Antoinique Brown (date of hire 5/14/21), Dominique Jones (date of hire 6/23/21), Destiny Lindsay (date of hire (2/8/21) and Jaleesa Palmer (date of hire 2/8/21) did not contain a tuberculosis screen. | |
| R 325.1924 | Reporting of incidents, accidents, elopement. |
| | (3) The home shall report an incident/accident to the department within 48 hours of the occurrence. The incident or accident shall be immediately reported verbally or in writing to the resident's authorized representative, if any, and the resident's physician. |
| While onsite, the facility's <i>incident report binder</i> was reviewed. Three incidents dated 9/26/21, 9/9/21 and 2/19/21 should have been reported to the department, as they involved more than minimal harm, hospitalization and/or a change in resident's baseline condition. REPEAT VIOLATION ESTABLISHED [see special investigation report (SIR) 2020A1019053, CAP dated 5/4/20, BCAL 3239 form dated 7/1/120] | |
| R 325.1953 | Menus. |
| | (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. |
| The facility did not post a menu for the week and only had the current day's menu posted. | |
| 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. |

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| Facility staff were unable to produce a meal census record. | |
| 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. |
| The facility uses a three compartment sink to wash cookware and utensils. The cook, Nancy Williams, identified that chemicals are used to ensure that the dishes are cleaned however stated that the facility does not have any test strips to test the chemical levels. Ms. Williams stated that the facility has been out of test strips “for months” and cannot recall when the last time the chemicals had been tested. | |

IV. RECOMMENDATION

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



10/19/21

Elizabeth Gregory-Weil
Licensing Consultant

Date