

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

November 22, 2021

Lisa Mancini Windemere Park Assisted Living I 31900 Van Dyke Avenue Warren, MI 48093

> RE: License #: AH500315395 Investigation #: 2022A0784003

> > Windemere Park Assisted Living I

Dear Ms. Mancini:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. 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 (517) 284-9730.

Sincerely,

Aaron Clum, Licensing Staff

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(517) 230-2778

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH500315395
Investigation #:	2022A0784003
Complaint Receipt Date:	10/11/2021
	40/44/0004
Investigation Initiation Date:	10/11/2021
Panart Dua Data:	12/10/2021
Report Due Date:	12/10/2021
Licensee Name:	Van Dyke Partners LLC
	Vali Bylic i araioio 220
Licensee Address:	Suite 300
	30078 Schoenherr Rd.
	Warren, MI 48088
Licensee Telephone #:	(586) 563-1500
Administrator:	Aaron Rodino
	1
Authorized Representative:	Lisa Mancini
Name of Facility:	Windemere Park Assisted Living I
Name of Facility.	Willdeffiele Falk Assisted Living I
Facility Address:	31900 Van Dyke Avenue
	Warren, MI 48093
	,
Facility Telephone #:	(586) 722-2605
Original Issuance Date:	11/15/2012
Line and Otal	DEOLH AD
License Status:	REGULAR
Effective Date:	03/02/2021
Lifective Date.	UUI UZI ZUZ I
Expiration Date:	03/01/2022
Capacity:	90
Program Type:	ALZHEIMERS
	AGED

II. ALLEGATION(S)

Violation Established?

Resident A is not allowed adequate smoke breaks	Yes
The facility did not provide appropriate instructions for Resident A's medications	No
Additional Findings	No

III. METHODOLOGY

10/11/2021	Special Investigation Intake 2022A0784003
10/11/2021	Special Investigation Initiated - Telephone Interview with complainant
10/20/2021	Inspection Completed On-site
10/20/2021	Inspection Completed-BCAL Sub. Compliance
11/19/2021	Exit Conference – Telephone Conducted with authorized representative Lisa Mancini

ALLEGATION:

Resident A is not allowed adequate smoke breaks

INVESTIGATION:

According to the compliant, Resident A is a smoker and is not allowed sufficient opportunities for smoke breaks. The facility does not allow Resident A to go outside and smoke after 4pm.

When interviewed, complainant stated administrator Aaron Rodino has been asked why Resident A is not allowed to go outside and smoke after 4:30pm and that he has responded by stating he did not smoke so he does not understand why it would be important. Complainant stated Resident A smokes in the courtyard at the facility by a door located just outside the cafeteria. Complainant stated Resident A can be in the courtyard unsupervised.

On 10/20/21, I interviewed administrator Aaron Rodino at the facility. Mr. Rodino stated the facility has designated times for Residents to smoke at 9:30am, 11:30am, 1:30pm and 4:00pm. Mr. Rodino stated Resident A has inquired about being able to smoke other times of day, but that he did not feel she was being reasonable. Mr. Rodino stated Resident A wants to be able to smoke anytime time and that it is not feasible for staff assistance as Resident A requires staff to light her cigarette for her. Mr. Rodino stated that because Resident A did not appear to want to be reasonable, he has maintained the allowed smoking times as they have generally been at the facility.

On 10/20/21, I interviewed Resident A at the facility. Resident A stated that while she preferred to be able to smoke more frequently, she did feel the facilities times for smoking were too limiting. Resident A stated she would prefer to be able to smoke at least once after dinner and before bed but would at least like to be able to smoke one more time in the evening after 4:30pm. Resident A stated that to have to wait to smoke from 4:30pm until the next morning at 9:30am is way too long.

I reviewed the facility's *RESIDENT SMOKE SCHEDULE*, provided by Mr. Rodino which was consistent with statements provided by Mr. Rodino.

I reviewed Resident A's service plan. The plan did not provide information regarding Resident A's smoking preferences.

APPLICABLE I	RULE	
R 325.1921	Governing bodies, administrators, and supervisors.	
	(1) The owner, operator, and governing body of a home shall do all of the following: (b) Assure that the home maintains an organized	
	program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.	

For Reference: R 325.1901	Definitions
	(21) "Service plan" means a written statement prepared by the home in cooperation with a resident and/or the resident's authorized representative or agency responsible for a resident's placement, if any, and that identifies the specific care and maintenance, services, and resident activities appropriate for each individual resident's physical, social, and behavioral needs and well-being and the methods of providing the care and services while taking into account the preferences and competency of the resident.
ANALYSIS:	The complaint alleged Resident A is not allowed adequate smoke breaks as she is not able to smoke after 4:30pm in the afternoon. Interviews with the administrator and Resident A confirm the smoking times are strictly limited to the end time of 4:30pm each afternoon. While Mr. Rodino reported that afternoon and evening smoking times have not been offered due to his feeling that Resident A has been unreasonable, Resident A has expressed her preference to smoke in the evening time even if she is only limited to one more opportunity before bed. Resident A's service plan provided no information regarding Resident A's smoking preferences. Based on the findings the facility is not in compliance with this rule.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

The facility did not provide appropriate instructions for Resident A's medications

INVESTIGATION:

On 10/11/21, the department received this online complaint.

According to the complaint, when Resident A leaves the facility for overnight stays, the facility does not provide a medication list.

On 10/11/21, I interviewed Complainant by telephone. Complainant stated Resident A left the building recently for an overnight staff away from the facility. Complainant

stated the facility provided medications for each of the two days she was going to be away in two separate clear backs, preset for each day within the bags without a medication list or any instructions regarding the administration of the medications.

When interviewed, Mr. Rodino stated Resident A was recently picked up by Relative A1 for a couple night stay away from the facility. Mr. Rodino stated it was his understanding that Resident A's medications were separated in plastic bags by day and time, morning and night, per Resident A's orders. Mr. Rodino stated Resident A was provided with a medication list with all the instructions on when to take the medications.

On 10/20/21, I interviewed assisted living director Kristal Stemplewski at the facility. Ms. Stemplewski provided statements consistent with those of Mr. Rodino. Ms. Stemplewski stated Resident A's medications were separated for each of the two days she was to be out of the facility. Ms. Stemplewski stated Resident A prefers her medications to be put in small plastic "med crush" pockets so the medications for each morning and each evening were put in these pockets, labeled by day and time of day to take and separated with envelopes, one for each day. Ms. Stemplewski stated each envelope had Resident A's medication list stapled to it. Ms. Stemplewski stated when Relative A1 came to pick up Resident A, Resident A took her medications to go out to the care and pulled the medication list off of the envelopes stating she did not need it because she knew when to take her medications.

When interviewed Resident A confirmed she was provided her medications in the manner described by Ms. Stemplewski. When asked about being provided a medication list with the medications, Resident A changed the subject stating she would not be staying at the facility much longer.

I reviewed the facilities *MEDICATION ADMINISTRATION POLICY*, provided by Mr. Rodino. Under a section titled Residents Who Are Temporarily Away from the Facility, the policy read, in part, "Windemere Park requires advanced notice if a resident will be away from Windemere Park for one or more medication passes in order to properly package and label medications that the resident will need while away".

APPLICABLE RULE	
R 325.1932	Resident medications.
	(4) If a resident requires medication while out of the home, then the home shall assure that the resident, or the person who assumes responsibility for the resident, has all of the appropriate information, medication, and instructions.

ANALYSIS:	The complaint alleged the Resident A was not provided appropriate information with her medications when leaving the facility for a couple days. Interviews and document review did not support the allegation. Based on the findings the allegation is not substantiated.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 11/19/21, I discussed the findings of the investigation with authorized representative Lisa Mancini

IV. **RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, it is recommended that the status of the license remain unchanged.

aron L. Clum	11/4/21
Aaron Clum Licensing Staff	Date
Approved By:	11/18/21
Russell B. Misiak	Date

Area Manager