



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 19, 2021

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

RE: License #: AH630236793

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. 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 home for 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#: | 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 |
| 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 |
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II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/17/2021

Date of Bureau of Fire Services Inspection if applicable: 03/30/2021

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 11/19/2021

No. of staff interviewed and/or observed 11

No. of residents interviewed and/or observed 24

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.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Services reviews fire drills, however 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:
SIR2021A1027045- CAP dated 9/10/21 (R 325.1931 (2)), SIR2020A1019063-
CAP dated 7/20/20 (R 325.1921 (1)(b))
- Number of excluded employees followed up? 2 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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| <p>This facility was found to be in non-compliance with the following homes for the aged administrative rules:</p> | |
| R 325.1913 | Licenses and permits; general provisions. |
| | (4) The current license, provisional license, or temporary nonrenewable permit shall be posted in a conspicuous public area of the home. |
| <p>The facility did not have their home for the aged license posted.</p> | |
| R 325.1917 | Compliance with other laws, codes, and ordinances. |
| | (1) A home shall comply with all applicable laws and shall furnish such evidence as the director shall require to show compliance with all local laws, codes, and ordinances. |
| <p>Facility staff were not abiding by government ordered face mask mandates during the COVID-10 pandemic. Out of the eleven staff members observed, only two were wearing face masks before licensing staff prompted the others to wear their masks. This included staff preparing and serving meals as well as providing direct care to residents.</p> | |
| R 325.1922 | Admission and retention of residents. |
| | (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 |

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| | multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents. |
| TB risk assessments for residents were not being completed annually. | |
| 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 annually. Homes that are low risk do not need to conduct annual TB testing for employees. |
| TB risk assessments for employees were not being completed annually. | |
| 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. |
| <p>The facility has not always administered medications or adhered to orders pursuant the labeling instructions. Medication administration records (MAR) were reviewed for a six week period. Resident A's MAR reads "Take and record blood sugar 3 times a day before meals, notify physician of >400". On the following dates during the timeframe reviewed, Resident A did not receive three blood sugar readings as instructed: 10/1/21, 10/2/21, 10/3/21, 10/7/21, 10/9/21, 10/10/21, 10/11/21, 10/12/21, 10/15/21, 10/17/21, 10/19/21, 10/22/21, 10/23/21, 10/24/21, 10/25/21, 10/26/21, 10/29/21, 10/31/21, 11/4/21, 11/5/21, 11/14/21, 11/15/21 and 11/16/21. Staff failed to document any reason for not following the physician's orders and the MAR was blank on the above-mentioned dates for Resident A's morning blood sugar reading.</p> | |

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| 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 menus posted were only for the current day and did not reflect the entire week. | |
| 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. |
| The meal census provided listed the number of meals served but did not differentiate the kind of food served when multiple options were available. | |

IV. RECOMMENDATION

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



11/19/21

Elizabeth Gregory-Weil
Licensing Consultant

Date