



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

January 14, 2022

Dustin Burritt
Grand Vista Living, LLC
99 Vista Drive
Coldwater, MI 49036

RE: License #: AL130363312
Investigation #: 2022A0466013
Grand Vista Of Marshall

Dear Mr. Burritt:

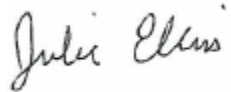
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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) 284-9727.

Sincerely,

A handwritten signature in cursive script that reads "Julie Elkins".

Julie Elkins, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL130363312
Investigation #:	2022A0466013
Complaint Receipt Date:	11/19/2021
Investigation Initiation Date:	11/30/2021
Report Due Date:	01/18/2022
Licensee Name:	Grand Vista Living, LLC
Licensee Address:	99 Vista Drive Coldwater, MI 49036
Licensee Telephone #:	(517) 227-4055
Administrator:	Dustin Burritt
Licensee Designee:	Dustin Burritt
Name of Facility:	Grand Vista Of Marshall
Facility Address:	208 Winston Drive Marshall, MI 49068
Facility Telephone #:	(517) 227-4055
Original Issuance Date:	06/15/2016
License Status:	REGULAR
Effective Date:	12/15/2020
Expiration Date:	12/14/2022
Capacity:	20
Program Type:	AGED

II. ALLEGATION:

	Violation Established?
The facility is not taking necessary precautions to prevent the spread of COVID-19.	No
Additional Findings	Yes

III. METHODOLOGY

11/19/2021	Special Investigation Intake- 2022A0466013.
11/29/2021	Special Investigation Intake- assigned.
11/30/2021	Special Investigation Initiated – Letter to assigned consultant Nile Khabeiry.
12/06/2021	Contact - Document Sent to LD/Admin Dustin Burritt to see if the facility still has any active COVID cases.
12/07/2021	Contact- Telephone call received from LD/Admin Dustin Burritt who could not report a date when the last COVID positive case was but reported that is has been in the facility.
12/07/2021	Contact - Telephone call made to DCW Kelly Winfree, message left.
01/11/2022	Inspection conducted on site.
01/12/2022	Contact - Document Sent to LD/Admin Dustin Burritt to request documents.
01/13/2022	Contact – Document Received from LD/Admin Dustin Burritt.
01/13/2022	Contact-Telephone call made to LD/Admin Dustin Burritt, interviewed.
01/13/2022	Contact- Telephone call made to Staff Member 1, interviewed.
01/13/2022	Contact- Telephone call made to Staff Member 2, interviewed.
01/13/2022	Contact- Telephone call made to DCW Erica Burritt, interviewed.
01/14/2021	Exit Conference with LD/Admin Dustin Burritt.

--	--

ALLEGATION: The facility is not taking necessary precautions to prevent the spread of COVID-19.

INVESTIGATION:

On 11/17/2021, anonymous Complainant reported several residents at the facility have tested positive for COVID-19 and the direct care workers (DCW)s are not changing personal protective equipment (PPE) while assisting residents in different rooms. Complainant reported that in the last two weeks, there have been several residents sent to the hospital and a couple of deaths due to COVID-19. Complainant reported DCWs have come to work after testing positive for COVID-19. Complainant reported the owners of the facility are aware and either fire DCWs that voice their concerns or DCWs just leave because nothing changes. Complainant was anonymous and therefore no additional information could be gathered.

Due to the facility having active COVID-19 cases, I was not able to conduct an on-site investigation until 01/11/2022.

On 01/11/2022, I conducted an unannounced investigation on site and when I walked into the facility there was an office on my right and a large reception desk straight ahead. Both the office and the reception desk were unmanned. After waiting about five minutes and walking around the facility to find a DCW, a DCW who came from one of the residents' hallways saw me. DCW Alexis Griffin allowed me into the building to interview DCWs without conducting any screening procedure to assure I was not symptomatic. I was not asked any COVID-19 screening questions nor was my temperature taken. Additionally, none of the DCWs working at the facility were wearing a facial covering for the duration of time I was at the facility.

On, 01/11/2021 I interviewed DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney who all reported that the facility did not currently have any COVID-19 positive cases. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported the facility has had both residents and DCWs test positive for the COVID-19 virus beginning in late October 2021. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported the facility was not allowing any visitors into the building while the facility had active COVID-19 cases. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that Staff Member 1 and Staff Member 2 were the two DCWs that tested positive for COVID-19. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that Staff Member 1 and Staff Member 2 did not work at the facility while they were COVID-19 positive, other staff covered their shifts. DCW Griffin reported that the facility was provided with personal protection equipment from hospice for the hospice residents that tested positive for COVID-19. DCW Griffin reported that hospice provided gloves, some gowns, and masks. DCW Griffin reported that she would change gloves and gown every time

she went into a resident's room while the facility had COVID-19 positive residents. DCW Kamree Delaney and DCW Kailey Delaney reported that they changed both gloves and masks every time they went from a COVID-19 positive resident to another room. DCW Kamree Delaney and DCW Kailey Delaney reported that the facility did not have gowns. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that the gloves are stored in each residents' rooms. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that they had access to surgical masks, hand sanitizer, gloves and soap for handwashing while working at the facility. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that while residents were positive for COVID-19, they kept the COVID-19 positive residents isolated as best they could. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney could explain how they would care for a COVID-19 positive resident even though they did not receive any formal training from the facility. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that DCWs at the facility no longer wear face coverings when residents are COVID free as they are not required to do so. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that the facility COVID-19 tests DCWs/residents when they are feeling ill or have COVID-19 symptoms.

On 01/11/2021, DCW Kailey Delaney took me in Resident A's room to show me the gloves that were in the residents' rooms. When DCW Kailey Delaney and I went into Resident A's room, the box of gloves was empty. DCW Kailey Delaney reported that the facility had spare boxes of gloves in the supply closet. DCW Kailey Delaney took me to the supply closet but DCW Kailey Delaney could not find any extra boxes of gloves. DCW Kailey Delaney also went through all of the delivery boxes that were on the floor and could not find any gloves. DCW Kailey Delaney reported that this is the only supply closet that she is aware of in the facility. DCW Kailey Delaney showed me the hand sanitizer, cleaning products and hand soap that was in the supply closet. DCW Kailey Delaney and I went into Resident B's room which did contain a box of gloves with gloves in the box.

On 01/13/2021, I interviewed Staff Member 1 who reported that she tested positive for COVID-19 on October 29, 2021. Staff Member 1 reported that she did not work at the facility while she was COVID-19 positive. Staff Member 1 reported that she did not work at the facility from October 29, 2021, through November 12, 2021. Staff Member 1 reported returning to work on November 13, 2021. Staff Member 1 reported that staff at the facility can be tested for COVID-19 if they are feeling ill or are exhibiting COVID-19 symptoms. Staff Member 1 reported that she worked when residents were COVID-19 positive. Staff Member 1 reported that DCWs would encourage the residents to stay in their rooms. Staff Member 1 reported that she and all staff were provided a COVID training in March 2020. Staff Member 1 reported that DCWs would wear a facial covering, use clean gloves and a clean gown when they entered a COVID-19 positive room. Staff Member 1 reported that when they were done in the COVID-19 positive room the gown and gloves would be thrown away. Staff Member 1 reported that the facility has a screening procedure posted on the front door that says if you are feeling ill, do not enter. Staff Member 1

reported that there are gloves, facial coverings, and hand sanitizer at the reception desk. Staff Member 1 reported that DCWs wear facility coverings at their own discretion when the facility does not have any COVID-19 positive residents. Staff Member 1 reported that due to a COVID-19 outbreak licensee designee Dustin Burritt locked down the facility for several weeks in November 2021, Staff Member 1 did not know the exact dates as she believed that she was off during part of the time the building was locked down. Staff Member 1 reported that when she returned to work there were signs on the door stating that no visitors could enter. Staff Member 1 reported that medical professionals were still being allowed to enter to care for the residents. Staff Member 1 reported that PPE is available and located in the supply closet or medication room in the building.

On 01/13/2021, I interviewed Staff Member 2 who reported that she tested positive for COVID-19 on November 1, 2021 and reported that she was off 10 days before coming back to work. Staff Member 2 reported that DCWs do not have to wear facial coverings while working at the facility. Staff Member 2 reported that she did not work at the facility while she had COVID-19. Staff Member 2 reported that they used to wear face coverings but now everyone is vaccinated so DCWs only wear facial coverings when residents have COVID-19 or if the DCW has a cold. Staff Member 2 reported that the facility has a screening procedure posted on the front door that states if you are sick to not enter. Staff Member 2 reported that she worked while residents were positive with COVID-19 and that she wore gloves, facial covering and washed her hands. Staff Member 2 reported that she changed her gloves every time she was with a different resident. Staff Member 2 reported that she changed her mask after helping a COVID-19 positive resident. Staff Member 2 reported that she and all staff were provided a COVID training in March 2020. Staff Member 2 reported that the licensee designee Dustin Burritt locked down the facility for 20 days and no visitors were allowed inside. Staff Member 2 reported that the facility has an ample supply of PPE located in the supply closet or in the medication room in the facility. Additionally, Staff Member 2 reported that there are face coverings at the front desk, hand sanitizer and gloves in every resident room. Staff Member reported that residents and DCWs are tested for COVID-19 when they are not feeling well or exhibiting COVID-19 symptoms.

On 1/13/2021, I interviewed licensee designee Dustin Burritt and nurse Erica Burritt who both reported that the facility has a screening check list that is posted on the front door and that is their screening process. Licensee designee Dustin Burritt and nurse Erica Burritt reported that DCWs are only required to wear facial coverings when the residents have COVID-19. Licensee designee Dustin Burritt and nurse Erica Burritt reported that DCWs have access to gloves, facial coverings, hand soap and hand sanitizer. Licensee designee Dustin Burritt reported that he has had an issue being able to get gowns. Licensee designee Dustin Burritt reported that he did close the building to visitors when the facility had a COVID outbreak in early November 2021 for two weeks. Licensee designee Dustin Burritt and nurse Erica Burritt reported that if residents or DCWs have COVID-19 symptoms or are feeling ill it is to be reported to them and that facility will do a rapid COVID test. Licensee

designee Dustin Burritt and nurse Erica Burritt reported that no employee ever worked while they positive for COVID-19. Licensee designee Dustin Burritt reported that he does not have any written COVID-19 procedures as their infectious disease protocols are required to be followed when a resident has COVID-19.

APPLICABLE RULE	
R 400.15204	Direct care staff; qualifications and training.
	(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas: (g) Prevention and containment of communicable diseases.
ANALYSIS:	Direct care staff members interviewed reported facial coverings or masks are worn with residents who are COVID-19 positive but otherwise are not worn while in the work environment. Further the facility has an established screening protocol to limit potentially symptomatic individuals from entering the facility thus decreasing exposure.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 01/11/2022, I interviewed DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney who reported that Staff Member 1 and Staff Member 2 were the two DCWs that tested positive for COVID-19. DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that Staff Member 1 and Staff Member 2 did not work at the facility while they were COVID-19 positive,

On 01/13/2022, I interviewed Staff Member 1 who reported that she did not work at the facility from October 29, 2021, through November 12, 2021

On 01/13/2022, I interviewed Staff Member 2 who reported that she tested positive for COVID-19 on November 1, 2021 and reported that she was off 10 days before coming back to work.

On 01/13/2022, I interviewed licensee designee Dustin Burritt and nurse Erica Burritt who reported that no DCW has worked while they were known to be COVID-19 positive. Licensee designee Dustin Burritt and nurse Erica Burritt reported that Staff Member 1 and Staff Member 2 did not work while COVID-19 positive, their shifts were covered by other DCWs.

On 01/13/2022, licensee Dustin Burritt provided a *Staff Schedule* for November 2021. The *Staff Schedule* documented that Staff Member 1 was scheduled for the following shifts:

- “November 1, 2021, 7a-7p
- November 3, 2021, 7a-1p
- November 5, 2021, 7a-7p
- November 6, 2021, 7a-7p
- November 7, 2021, 7a-7p
- November 10, 2021, 7a-7p
- November 12, 2021, 7a-8p”

On 01/13/2022, licensee Dustin Burritt provided a *Staff Schedule* for November 2021. The *Staff Schedule* documented that Staff Member 2 was scheduled for the following shifts:

- “November 1, 2021, 7a-7p
- November 3, 2021, 7a-7p
- November 4, 2021, 7a-7p
- November 8, 2021, 7a-7p
- November 9, 2021, 7a-7p”

APPLICABLE RULE	
R 400.15208	Direct care staff and employee records.
	(3) A licensee shall maintain a daily schedule of advance work assignments, which shall be kept for 90 days. The schedule shall include all of the following information: (c) Hours or shifts worked. (e) Any scheduling changes
ANALYSIS:	Everyone interviewed reported that DCWs did not work while they were COVID-19 positive, rather their shifts were covered by other DCWs. The <i>Staff Schedule</i> was not updated to reflect the schedule changes when Staff Member 1 and Staff Member 2 were off with COVID-19. Additionally on November 3, 2021, the shift that Staff Member 1 was scheduled to work was not defined as the scheduled lists “7-1.” On November 9, 2021, the shift that Staff Member 2 was scheduled to work was not defined as the schedule list “7-7,” therefore a violation has been established as the hours/shift worked were not defined on the schedule nor were schedule changes noted.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 01/11/2022, DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney reported that the facility was not allowing visitors while the facility had active COVID-19 cases.

On 01/13/2021, Staff Member 1 reported that due to a COVID-19 outbreak licensee designee Dustin Burritt locked down the facility for several weeks in November 2021, Staff Member 1 did not know the exact dates as she believed that she was off during part of the time the building was locked down.

On 01/13/2021, Staff Member 2 reported that the licensee designee Dustin Burritt locked down the facility for 20 days and no visitors were allowed inside due to the COVID-19 outbreak in the facility.

On 01/13/2021, licensee designee Dustin Burritt reported he closed the building to visitors when the facility had a COVID-19 outbreak in early November 2021 for two weeks.

APPLICABLE RULE	
R 400.15304	Resident rights; licensee responsibilities.
	(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights: (k) The right to have contact with relatives and friends and receive visitors in the home at a reasonable time. Exceptions shall be covered in the resident's assessment plan. Special consideration shall be given to visitors coming from out of town or whose hours of employment warrant deviation from usual visiting hours. (2) A licensee shall respect and safeguard the resident's rights specified in subrule (1) of this rule.

ANALYSIS:	Staff Member 1, Staff Member 2, licensee designee Dustin Burritt, DCW Griffin, DCW Kamree Delaney and DCW Kailey Delaney all reported that the facility was locked down to the COVID-19 outbreak and visitors were not allowed in the building. There is not an executive order or mandate that prohibits visitation for any reason, therefore a violation has been established as the closing of building impeded the residents' rights to have contact with relatives, friends, and visitors.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable plan of correction, I recommend no change in the current license status.

Julie Elkins

01/13/2022

Julie Elkins
Licensing Consultant

Date

Approved By:

Dawn Timm

01/14/2022

Dawn N. Timm
Area Manager

Date