GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 15, 2022

Steven Tyshka
Waltonwood at Lakeside
14650 Lakeside Circle
Sterling Heights, MI 48313

RE: License #: AH500285320
Waltonwood at Lakeside
14650 Lakeside Circle
Sterling Heights, MI 48313

Dear Mr. Tyshka:

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 licensee or licensee designee or 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,

Brender L. Howard

Brender Howard, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(313) 268-1788
enclosure

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

I. IDENTIFYING INFORMATION

LicenseLicense #:	AH500285320
Licensee Name:	Waltonwood At Lakeside I, L.L.C.
Licensee Address:	Suite #200 7125 Orchard Lake Rd. West Bloomfield, MI 48325
Licensee Telephone #:	(248) 865-1600
Authorized Representative:	Steven Tyshka
Administrator:	Gina Steigerwald
Name of Facility:	Waltonwood at Lakeside
Facility Address:	14650 Lakeside Circle Sterling Heights, MI 48313
Facility Telephone #:	(586) 532-7601
Original Issuance Date:	07/16/2007
Capacity:	90
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 3/14/2022

Date of Bureau of Fire Services Inspection if applicable: 2/16/2022

Inspection Type: ☐ Interview and Observation ☒ Worksheet ☐ Combination

Date of Exit Conference: 3/14/2022

No. of staff interviewed and/or observed 11
No. of residents interviewed and/or observed 41
No. of others interviewed 1 Role Resident's family member

- 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. No funds held for residents
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.

- Fire drills reviewed? Yes ☐ No ☒ If no, explain. Interviewed staff on the policy and procedures
- 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: 3/17/2021 2021A1019024 1933 (2)
- Number of excluded employees followed up? N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

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.

I observed that Resident A had a bed rail attached to her bed frame. It was a device commonly referred to as a “bed assist” that slid underneath the mattress and was held in place solely by the weight of the occupant and mattress. Inspection revealed that the distance between the slats (horizontal or vertical supports between the perimeter of the bed rails) was large enough for a hand, foot or limb to fit through and cause possible entanglement or entrapment. This device easily slid away from the device when manipulated and posed an entrapment hazard to the occupant of the bed.

The facility had no manufacturer’s guidelines available for review to determine proper installation, ongoing maintenance and correct resident assessment and use of the bed devices. Employment records reviewed for three care staff did not include any evidence of training related to the use of mobility devices.

In addition, there was no evidence that staff were instructed on how to assess the device was secured appropriately to the bed, maintained it integrity over time, did not pose an entrapment or entanglement risk, or allowed for an open distance between the device the resident could become entrapped or entangled within. There were no manufacturer instructions for appropriate use available for review.

The use of beside assistive devices without an organized plan of protection that considers physician authorization, resident assessment for competency of safe use, proper service plan development and training to ensure staff are aware of their responsibilities to ensure safe use does not reasonably comply with this rule.

R 325.1964 **Interiors.**

(9) Ventilation shall be provided throughout the facility in the following manner:

(b) Bathing rooms, beauty shops, toilet rooms, soiled linen rooms, janitor closets, and trash holding rooms shall be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.

The residents’ bathing/toilet facilities located in rooms 1005, 1004, 2008, 2004, 3012, and 3007 lacked adequate and discernable air flow.

IV. RECOMMENDATION

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

Brenda L. Howard

3/15/2022

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Date

Licensing Consultant