



STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

ORLENE HAWKS
DIRECTOR

April 1, 2022

Manda Ayoub
Pomeroy Living Sterling Assisted
2200 15 Mile Road
Sterling Heights, MI 48310

RE: License #:	AH500317073
Investigation #:	2022A1021033
	Pomeroy Living Sterling Assisted

Dear Ms. Ayoub:

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 authorized representative 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) 284-9730.

Sincerely,

Kimberly Horst, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
Lansing, MI 48909
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH500317073
Investigation #:	2022A1021033
Complaint Receipt Date:	03/04/2022
Investigation Initiation Date:	03/07/2022
Report Due Date:	05/03/2022
Licensee Name:	Pomkal Sterling Assisted LLC
Licensee Address:	Suite 100 25480 Telegraph Rd Southfield, MI 48033
Licensee Telephone #:	(248) 356-4060
Administrator:	Mary Zolno
Authorized Representative:	Manda Ayoub
Name of Facility:	Pomeroy Living Sterling Assisted
Facility Address:	2200 15 Mile Road Sterling Heights, MI 48310
Facility Telephone #:	(586) 554-7200
Original Issuance Date:	02/27/2014
License Status:	REGULAR
Effective Date:	06/26/2021
Expiration Date:	06/25/2022
Capacity:	74
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Resident A receives inadequate care.	No
Additional Findings	Yes

III. METHODOLOGY

03/04/2022	Special Investigation Intake 2022A1021033
03/04/2022	APS Referral intake came from APS
03/07/2022	Inspection Completed On-site
03/08/2022	Contact-Telephone call made Interviewed Accent Care nurse practitioner Kendra Khan
03/08/2022	Contact-Document Received Received hospice documentation
03/09/2022	Contact-Telephone Call Made Interviewed Accent Care hospice nurse Dorothy Brown
04/01/2022	Exit Conference Exit conference with authorized representative Manda Ayoub

ALLEGATION:

Resident A receives inadequate care.

INVESTIGATION:

On 3/4/22, the licensing department received an intake from Adult Protective Services (APS) with allegations Resident A receives inadequate care at the facility. It was alleged Resident A has gangrene on her left foot and a bedsore on her buttocks. It was alleged Resident A is not provided with the proper range of motions. It was alleged Resident A has a sore on her right leg because she is not repositioned every two hours. It was alleged Resident A is not provided with bandages for her sores. It was alleged Resident A is dehydrated.

On 3/7/22, I interviewed administrator Mary Zolno at the facility. Ms. Zolno reported that Resident A is active with Accent Care Hospice. Ms. Zolno reported Resident A

has had a decline in health status after her diagnosis with Covid-19. Ms. Zolno reported Resident A is bed bound. Ms. Zolno reported Resident A has a circulation issue which has caused the gangrene and wounds on her lower extremities. Ms. Zolno reported Accent Care Hospice provides nursing and wound care visits three times a week. Ms. Zolno reported the facility is not responsible for wound care. Ms. Zolno reported Resident A does have a wound on her buttocks. Ms. Zolno reported Resident A's family finally agreed to have a hospital bed for Resident A which has allowed Resident A to have pressure relief on her buttocks. Ms. Zolno reported Resident A is rotated and turned at least every two hours. Ms. Zolno reported Resident A is on a dysphagia diet due to pocketing of food and difficulty swallowing. Ms. Zolno reported Resident A has decreased her water and food intake. Ms. Zolno reported caregivers offer fluids when they check on Resident A. Ms. Zolno reported Resident A receives adequate care at the facility.

On 3/7/22, I interviewed staff person 1 (SP1) at the facility. SP1 reported Resident A has declined since her Covid-19 diagnosis. SP1 reported Resident A was sent to the hospital and came back with a wound on her toe due to her circulation issue. SP1 reported Resident A's family requested for her to be in her recliner which made it difficult to rotate and for her to have pressure relief on her bottom. SP1 reported Resident A now has a hospital bed which has helped with pressure relief on her bottom. SP1 reported caregivers are to rotate Resident A every two hours and float her heels on pillows for pressure relief. SP1 reported Resident A was a water drinker but since has decreased her fluid intake. SP1 reported caregivers still offer and provide fluids during checks.

On 3/7/22, I interviewed SP2 at the facility. SP2 reported Resident A is active with Accent Care hospice and they provide wound care to Resident A's wounds. SP2 reported Resident A is to be checked and changed every two hours but typically a caregiver is checking on Resident A more frequently than that. SP2 reported Resident A receives adequate care at the facility.

On 3/7/22, I interviewed SP3 at the facility. SP3 statements were consistent with those made by SP1 and SP2.

On 3/8/22, I interviewed Accent Care nurse practitioner Kendra Khan by telephone. Ms. Khan reported Resident A has a circulation issue that has caused her gangrene on her foot and the wound on her other foot. Ms. Khan reported the wounds are not caused by lack of care provided by the facility or the hospice company. Ms. Khan reported the gangrene looks painful but Resident A is not in pain. Ms. Khan reported Resident A is near end of life and therefore has decreased her fluid intake. Ms. Khan reported there has been no instances when Resident A has been dehydrated. Ms. Khan reported Accent Care provides wound care to Resident A and the facility does not provide this level of care. Ms. Khan reported when she has observed Resident A at the facility, her sheets are clean, she is not in a soiled depend, and Resident A is clean. Ms. Khan reported Resident A receives adequate care at the facility.

On 3/9/22, I interviewed Accent Care nurse Dorothy Brown by telephone. Ms. Brown reported Accent Care provides wound care to Resident A. Ms. Brown reported Resident A's heels are to be floated on pillows and she has always seen Resident A's heels floated. Ms. Brown reported Resident A is to be rotated every two hours for pressure relief on her bottom. Ms. Brown reported this is being done at the facility. Ms. Brown reported she has never observed Resident A to be dehydrated at the facility. Ms. Brown reported facility staff are attentive to Resident A's needs. Ms. Brown reported Resident A receives quality care at the facility.

I reviewed facility observation notes. The notes read,

*“3/3: patient seen by hospice today. Patient is in room lying in bed. All vitals within normal limits. Wound care provided for feet bilaterally. The bottom and 3rd and 4th digit on left foot now discolored. No S/S of infection or distress noted.
2/16: Accent Care Hospice: writer in to assess patients wounds on bil feet and buttocks. Patient has purple discoloration present on bilateral dorsal feet, and L foot 5th toe. Surrounding skin noted to be red and warm. Bilateral heels with stable eschar. Posterior patella pulses palpable, 0 dorsal pulses attempted due to areas of discoloration. Wounds on feet needed to have betadine wipes over wounds and dried to skin. Betadine wipes needed to be soaked gently with wound cleanser to be removed to not disturb the outer layer of skin. Wounds then pained gently with betadine and left open to air. 0 outer dressing applied due to patients compromised circulation. Discussed interventions to keep feet warm with use of blankets vs use of socks or dressings. (Relative A1) at bedside, education provided that patients circulation is compromised and that healing is not likely. Discussed generalized declines. (Relative A1) tearful reporting wounds have gotten progressively worse. Reassurance provided with supportive listening. Assessed skin breakdown on bilateral buttocks. Current treatment appropriate. Writer assessed support surfaces to request air mattress to assist with pressure redistribution, Encouraged use of wheelchair cushion in recliner. Encouraged patient to be laid in bed earlier in the day to redistribute pressure. (Relative A1) verbalized understanding.”*

APPLICABLE RULE	
R 325.1931	Employees; general provisions.
	(2) A home shall treat a resident with dignity and his or her personal needs, including protection and safety, shall be attended to consistent with the resident's service plan.
ANALYSIS:	Interviews with facility and hospice staff revealed Resident A has compromised circulation which has caused the wounds on the lower extremities. Resident A is near end of life and has decreased fluid intake. The facility collaborates with Accent

	Hospice to ensure proper treatment is implemented and followed. There is lack of evidence to support the allegations.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

Ms. Brown reported Resident A's heels are to be floated on pillows. Ms. Brown reported Resident A is to be rotated in bed every two hours for pressure relief on her bottom. Ms. Brown reported only the hospice company is to provide wound care and dressing changes.

Resident A's service plan read,

*"Assist resident to reposition using pillows to maintain positioning.
Use a more absorptive dressing that can stay on longer reducing the need for frequent dressing changes."*

APPLICABLE RULE	
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.
ANALYSIS:	Review of Resident A's service plan revealed lack of detail regarding her specific needs. Resident A is to be rotated every two hours, heels are to be floated, and Accent Care is to provide wound care. This information is not included in Resident A's service plan.
CONCLUSION:	VIOLATION ESTABLISHED

On 4/1/22, I conducted an exit conference with authorized representative Manda Ayoub by telephone.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the status of the license.

Kimberly Horst 3/17/2022

Kimberly Horst Date
Licensing Staff

Approved By:

Andrea Moore 03/31/2022

Andrea L. Moore, Manager Date
Long-Term-Care State Licensing Section