



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

April 5, 2022

Cynthia Tovey  
Beechwood Manor Inc.  
24600 Greater Mack  
St. Clair Shores, MI 48080

RE: License #: AH500236755  
Investigation #: 2022A1027043  
Beechwood Manor Inc.

Dear Ms. Tovey:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed by the authorized representative and dated.

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) 241-1970.

Sincerely,

A handwritten signature in cursive script that reads "Jessica Rogers".

Jessica Rogers, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(517) 241-1970  
enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH500236755
<b>Investigation #:</b>	2022A1027043
<b>Complaint Receipt Date:</b>	03/09/2022
<b>Investigation Initiation Date:</b>	03/11/2022
<b>Report Due Date:</b>	05/08/2022
<b>Licensee Name:</b>	Beechwood Manor Inc.
<b>Licensee Address:</b>	24600 Greater Mack St. Clair Shores, MI 48080
<b>Licensee Telephone #:</b>	(248) 879-1994
<b>Administrator/Authorized Representative:</b>	Cynthia Tovey
<b>Name of Facility:</b>	Beechwood Manor Inc.
<b>Facility Address:</b>	24600 Greater Mack St. Clair Shores, MI 48080
<b>Facility Telephone #:</b>	(586) 773-5950
<b>Original Issuance Date:</b>	08/01/1999
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	05/23/2021
<b>Expiration Date:</b>	05/22/2022
<b>Capacity:</b>	98
<b>Program Type:</b>	ALZHEIMERS AGED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Resident A's family was denied visitation during COVID.	No
Resident A was discharged from the facility.	Yes
Additional Findings	Yes

## III. METHODOLOGY

03/09/2022	Special Investigation Intake 2022A1027043
03/11/2022	Special Investigation Initiated - Letter Email sent to authorized representative Michele Verbeke requesting documentation for Resident A and COVID policy
03/14/2022	Contact - Telephone call received Voicemail received from administrator Cynthia Tovey
03/14/2022	Contact - Telephone call made Telephone interview conducted with administrator Ms. Tovey
03/14/2022	Contact - Document Received Email received from Ms. Tovey with COVID visitation guidelines
03/14/2022	Contact - Telephone call received Telephone interview conducted with Employee #1
03/17/2022	Contact - Document Received Email received from legal representation Kim Corbin informing the department requested documentation will be sent by mail
03/21/2022	Contact - Document Sent Email sent to legal representation Ms. Corbin providing mail address for requested documentation
04/01/2022	Contact - Document Sent Email sent to administrator Cyndie Tovey inquiring when requested documentation was mailed.
04/01/2022	Contact - Document Received

	Email received from legal counsel Ms. Corbin with mail tracking number and confirmation which read mail was received at the Lansing office on 3/23/2022
04/04/2022	Contact - Document Received Mailed documentation received from Lansing office
04/05/2022	Inspection Completed-BCAL Sub. Compliance
04/14/2022	Exit Conference Conducted with authorized representative Cynthia Tovey

**ALLEGATION:**

**Resident A's family was denied visitation during COVID.**

**INVESTIGATION:**

On 3/9/2022, the department received a complaint which read Resident A's family was denied entry to visit during COVID after the state opened for visitations. Additionally, the complaint read the facility enforced COVID testing upon entry to the facility.

On 3/14/2022, I conducted a telephone interview with administrator Cythnia Tovey. Ms. Tovey stated the facility had followed Michigan Department of Health and Human Services (MDHHS) recommendations regarding family visitations during COVID. Ms. Tovey stated Resident A's family had concerns regarding the restrictions and had taken Resident A home for approximately two weeks during the COVID-19 pandemic. Ms. Tovey stated after the visitation restrictions were lifted, the facility had followed MDHHS guidance which recommended visitors be tested upon entry to the facility. Ms. Tovey stated visitors were not denied entry to the facility if they declined testing, however they continued to recommend visitors to check in at the front desk, wear a facemask and visit in the resident's room to social distance which was guidance received by MDHHS. Ms. Tovey stated on 2/18/2022 Relative A1 "stormed" into the facility without checking in at the front desk, insisting to visit her mother without a mask on and visited her in the dining area in which she asked other residents to leave their seats. Ms. Tovey stated Relative A1 refused to sign the facility's visitation guidelines and was not compliant with the facility's rules. Ms. Tovey stated the facility offered private areas within the facility for families and residents to visit if needed in which they offered to Resident A's family.

On 3/14/2022, I interviewed Employee #1 regarding COVID-19 visitor testing in which her statements were consistent with Ms. Tovey.

I reviewed a letter sent from the facility to resident's families which was titled "Long-term Care Visitation Guidance" and read

- Visitation is allowed at all times. Routine COVID-19 testing is strongly encouraged.*
- All residents and visitors, regardless of vaccination status, should wear masks and physically distance at all times while inside.*
- Outdoor visits are preferred during times of warmer weather when the resident or visitor is not fully vaccinated.*
- Residents wanting physical contact with their visitors may choose to do so.*

Additionally, the letter read

*“We would like to update you from our last webinar from MDHHS with the current recommended guidelines.*

*Right now, the MDHHS is HIGHLY RECOMMENDING covid testing for every visitor that enters the building on a daily basis since testing provides an additional layer of protection for everyone; especially our most vulnerable and high-risk residents, but it is not mandatory for visits. As of now we will continue with the mandates of wearing masks, monitor with the temperature check and the covid questionnaire at the front door as well as sanitizing your hands as you enter the building. We strongly suggest that visitors have a covid test done periodically when entering the building.*

*Families that have a loved one in a semi-private room should go directly to the visitation room when in room visitation can not occur. Families shall refrain from walking the hallways while visiting. Due to limited spacing, we ask families to refrain from participating in group activities and communal dining. To adequately accommodate all visits, we do appreciate somewhat of an advanced notice to properly space out families as we are limited to visiting rooms.*

*Our main objective is to provide a safe environment for the residents and staff. We appreciate everyone’s continued support. If you ever have any comments questions or concerns, please do not hesitate to reach out at any time. Hillary and I are always available.”*

I reviewed Resident A’s chart notes from September 2021 through March 2022. Note dated 9/24/2021 read Relative A1 visited with Resident A in the facility. Notes dated 12/16/2021 and 1/19/2022 read staff spoke with Resident A’s family and encouraged visitations in which they would accommodate anytime that worked best for them to visit. Note dated 1/22/2022 read Resident A’s family visited for a meeting with the facility staff and a call with Resident A’s nurse practitioner to discuss medications. Note 2/1/2022 read Resident A’s family visited to wash her hair. Note dated 2/11/2022 read facility staff received a call from the county commissioner asking if the facility required COVID testing upon entry. The note read the facility was following MDHHS recommendations and had testing available but never forced anyone to be tested. Note dated 2/16/2022 read staff encouraged importance of visiting Resident

A. The note read “as of yet, visits have been sporadic,” Note dated 2/18/2022 read consistent with the interview conducted with Ms. Tovey.

I reviewed emails sent from Ms. Tovey to Beechwood families which read on 11/22/2021, the facility resumed family visits by appointment. Email dated 12/28/2021 read three staff members had COVID, but visitors would still be allowed in the building since they had the ability to test upon entry. The email read all staff and visitors were required to wear a mask while in the building. Email dated 1/16/2022 read visits could be made by appointment.

<b>APPLICABLE RULE</b>	
<b>MCL 333.20201</b>	<b>Policy describing rights and responsibilities of patients or residents</b>
	<b>(3) The following additional requirements for the policy described in subsection (2) apply to licensees under parts 213 and 217:</b> <b>(b) Each nursing home patient may associate and communicate privately with persons of his or her choice. Reasonable, regular visiting hours, which shall be not less than 8 hours per day, and which shall take into consideration the special circumstances of each visitor, shall be established for patients to receive visitors. A patient may be visited by the patient's attorney or by representatives of the departments named in section 20156, during other than established visiting hours. Reasonable privacy shall be afforded for visitation of a patient who shares a room with another patient. Each patient shall have reasonable access to a telephone. A married nursing home patient or home for the aged resident is entitled to meet privately with his or her spouse in a room that assures privacy. If both spouses are residents in the same facility, they are entitled to share a room unless medically contraindicated and documented in the medical record by the attending physician or a physician's assistant to whom the physician has delegated the performance of medical care services.</b>

<b>ANALYSIS:</b>	Interview with Ms. Tovey and facility documentation revealed although the facility followed MDHHS guidelines and restricted visitations, the facility accommodated Resident A’s family for visits as early as September 2021. Review of facility documentation revealed the facility recommended COVID-19 testing prior to entry, but it was not mandatory to visit the facility.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

**Resident A was discharged from the facility.**

**INVESTIGATION:**

On 3/9/2022, the department received a complaint which read Resident A was “evicted” from the facility.

On 3/14/2022, I interviewed administrator Cynthia Tovey who stated Relative A1 had been upset from the beginning of the COVID-19 pandemic regarding visiting her mother in her room and the facility’s COVID-19 rules. Ms. Tovey stated Relative A1 was “banned” from the facility due to her “irate” behaviors in the facility but then was allowed to visit again. Ms. Tovey stated on 2/18/2022, Relative A1 “stormed” into the facility without checking in at the front desk, insisting to visit her mother without a mask on in the dining room. Ms. Tovey stated Relative A1’s behaviors were what lead to Resident A’s discharge notification. Ms. Tovey stated Resident A had dementia with progression and had declined leading her to requiring a private room, but staff were still able to accommodate her needs.

On 3/14/2022, I interviewed Employee #1 who stated Resident A’s 30-day notice of discharge was due to Relative A1’s behaviors and disruption within the facility.

I reviewed Resident A’s face sheet which read Relative A2 was her authorized representative and that she discharged from the facility on 3/1/2022 “by family.”

I reviewed Resident A’s admission agreement signed by Relative A2 which read

***Discharge Policy***

*(1) Resident may be transferred or discharged for any of the following reasons:*

- d. medical reasons*
- e. his or her welfare or that of any other resident*
- f. for nonpayment of his or her stay*

*g. transfer or discharge sought by resident or authorized representative*

I reviewed Resident A's discharge notification letter addressed to Relative A2 which read

*This office represents Beechwood Manor. (Resident A) is a resident at the facility, as you well know.*

*This notice is to indicate that (Resident A) will need to be relocated to other living arrangements.*

*This notice is in compliance with the Admission Agreement. You have thirty days to find suitable living arrangements for (Resident A).*

*The reason for this that family visitors, specifically (Relative A1) and her husband are causing difficulties at the facility when they appear. This includes failure to follow facility rules and regulations and to be considerate of rights of other residents and personnel.*

*You should know that the pandemic has caused extreme difficulties for many assisted living facilities. The lack of cooperation on the part of (Relative A1) has complicated and compounded these difficulties for Beechwood Manor.*

*Please keep us informed of the timeline for (Resident A) to be relocated. If you wish to meet with Beechwood Manor to discuss this further, you may contact my office.*

I reviewed a court order from Beechwood Manor to Relative A2 to have Resident A moved by 3/25/2022.

I reviewed the chart notes from September 2021 through March 2022 which read consistent with the interview conducted with Ms. Tovey.

<b>APPLICABLE RULE</b>	
<b>MCL 333.20201</b>	<b>Policy describing discharging</b>
	<b>(3) The following additional requirements for the policy described in subsection (2) apply to licensees under parts 213 and 217:</b> <b>(e) A home for the aged resident may be transferred or discharged only for medical reasons, for his or her welfare or that of other residents, or for nonpayment of his or her stay, except as provided by title XVIII or title XIX. A nursing home patient may be transferred or discharged only as provided in sections 21773 to 21777. A nursing home patient or home for the aged resident is entitled to be given</b>



	<b>reasonable advance notice to ensure orderly transfer or discharge. Those actions shall be documented in the medical record.</b>
<b>ANALYSIS:</b>	Review of facility documentation revealed Resident A was discharged for Relative A1 not following the facility's COVID protocols, visitation rules and for being considerate of other resident's rights. Review of the discharge letter and chart notes revealed, Relative A1 did not always act in accordance with the facility's policies and procedures, however Resident A's discharge was not for concerns for her own welfare or concern for her behaviors enacted upon that of other residents. Thus, Resident A was discharged for reasons not in compliance with the public health code.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

Resident A's admission contract reads

***Discharge Policy***

*(2) A resident and his or her authorized representative, if any, and the agency Responsible for the resident's placement, if any, will be provided with a written day notice before discharge from the home. The written notice shall consist of all of the following:*

- (a) The reasons for discharge*
- (b) The effective date of discharge*
- (c) A statement notifying the resident of the right to file a complaint with the department.*

Resident A's discharge letter read the reasons for Resident A's discharge and an effective date of discharge was 30 days.

<b>APPLICABLE RULE</b>	
<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<b>(13) A home shall provide a resident and his or her authorized representative, if any, and the agency responsible for the resident's placement, if any, with a 30-</b>

	<p><b>day written notice before discharge from the home. The written notice shall consist of all of the following:</b></p> <p><b>(a) The reasons for discharge.</b></p> <p><b>(b) The effective date of the discharge.</b></p> <p><b>(c) A statement notifying the resident of the right to file a complaint with the department. The provisions of this subrule do not preclude a home from providing other legal notice as required by law.</b></p>
<b>ANALYSIS:</b>	The discharge letter lacked a statement notifying Resident A's authorized representative of the right to file a complaint with the department, thus was not in compliance with this rule.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 4/14/2022, I shared the findings of this report with authorized representative Cynthia Tovey. Ms. Tovey verbalized understanding of the findings.

#### IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



4/6/2022

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Jessica Rogers  
Licensing Staff

Date

Approved By:



04/12/2022

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

Date