

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 22, 2022

Lauren Gowman Appledorn Assisted Living Center 727 Apple Avenue Holland, MI 49423

> RE: License #: AH700236753 Investigation #: 2022A1021041 Appledorn Assisted Living Center

Dear Mrs. Gowman:

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,

Kinvergeteest

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

1:00:000 #:	AL 17000007F0
License #:	AH700236753
Investigation #:	2022A1021041
Complaint Receipt Date:	04/06/2022
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Investigation Initiation Date:	04/06/2022
Report Due Date:	07/06/2022
Report Due Date.	07/00/2022
Licensee Name:	Appledorn Living Center LLC
Licensee Address:	950 Taylor Ave.
	Grand Haven, MI 49417
Licensee Telephone #:	(616) 842-2425
	las en Dushan
Administrator:	Jason Bucher
Authorized Representative:	Lauren Gowman
Name of Facility:	Appledorn Assisted Living Center
Facility Address:	727 Apple Avenue
	Holland, MI 49423
Facility Tolophone #	(616) 202 4650
Facility Telephone #:	(616) 392-4650
Original Issuance Date:	03/01/2000
License Status:	REGULAR
Effective Date:	05/12/2022
Expiration Date:	05/11/2023
Conceitur	474
Capacity:	174
Program Type:	AGED
	ALZHEIMERS

# II. ALLEGATION(S)

	Violation Established?
Resident B's service plan not reflective of care needs.	Yes
Additional Findings	Yes

# III. METHODOLOGY

04/06/2022	Special Investigation Intake 2022A1021041
04/06/2022	Special Investigation Initiated - Letter referral sent to centralized intake at APS
04/19/2022	Inspection Completed On-site
04/22/2022	Contact - Document Received received chart documentation
08/08/2022	Exit Conference exit conference with AR by telephone

# ALLEGATION:

#### Resident B's service plan not reflective of care needs.

#### INVESTIGATION:

On 4/6/22, the licensing department received a complaint with allegations Resident B is neglected at the facility. The complainant alleged Resident B has hired private duty caregivers to assist with care because caregivers do not provide care to her. The complainant alleged there was urine-soaked laundry in Resident B's room.

On 4/6/22, the allegations in this report were sent to centralized intake at Adult Protective Services (APS).

On 4/19/22, I interviewed Resident B at the facility. Resident B reported she has hired private duty caregivers that come every morning and evening to assist with care. Resident B reported these caregivers have been hired for months. Resident B reported the private duty caregivers assist with getting her dressed, showered,

laundry, and social interactions. Resident B reported staff members at the facility are to assist her with toileting but often they take a long time and do not provide her the care she needs. Resident B reported at times she has complete the toileting process. Resident B reported she has special ointments and creams to be applied after toileting and staff will not assist her with this.

On 4/19/22, I interviewed administrator Jason Bucher at the facility. Mr. Bucher reported it is very difficult to meet Resident B's expectations. Mr. Bucher reported Resident B is mostly independent. Mr. Bucher reported Resident B has private duty care Monday-Friday in the morning and evening. Mr. Bucher reported the private duty caregivers assist with dressing, bathing, and laundry. Mr. Bucher reported Resident B has no confidence that his staff can complete tasks required by Resident B. Mr. Bucher reported to care.

On 4/19/22, I interviewed staff person 1 (SP1) at the facility. SP1 reported Resident B has private duty caregivers that assist with morning and evening cares. SP1 reported the private duty caregivers also assist with housekeeping and laundry. SP1 reported Resident B is very particular about her laundry and does not like staff to complete or touch her laundry. SP1 reported Resident B can transfer herself on and off the toilet but wants staff to assist her with toileting tasks. SP1 reported staff are available and ready to assist but Resident B is not receptive to care.

On 4/19/22, I interviewed SP2 at the facility. SP2 reported staff members are to assist Resident B with toileting and incontinence products. SP2 reported the private duty caregivers complete all other required tasks.

I observed Resident B's room. Within Resident B's bathroom there was baskets of water to wash clothes and there were clothes hanging on the shower rod. I did not observe any dirty clothes within Resident B's room.

I reviewed Resident B's service plan. The service plan read,

"Peri-Care: I need one person to assist me with Peri Care twice daily as part of my daily hygiene.

"Toileting: I need the assistance of 1 person to help me meet my daily toileting needs."

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 Resident B and staff persons revealed inconsistence statements as to the level of assistance Resident B requires with toileting. Review of Resident B's service plan omitted specific information as to the amount and level of assistance she requires with toileting.
CONCLUSION:	VIOLATION ESTABLISHED

# ADDITIONAL FINDINGS:

# INVESTIGATION:

Interviews with Resident B and staff persons revealed Resident B has private duty caregivers to complete dressing, showering, and laundry. Resident B's service plan read,

"Showering: I need one staff person to assist me with all of my showering and or bathing. She would like a spa bath.

Dressing: I need one staff to assist me with choosing proper attire and with dressing/undressing."

APPLICABLE RU	JLE
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:	Resident B's service plan was not correctly updated to reflect the current needs of Resident B as evidenced by there was lack of detail that Resident B had private duty caregivers to complete specific tasks.
CONCLUSION:	VIOLATION ESTABLISHED

On 8/8/22, I conducted an exit conference with authorized representative Lauren Gowman by telephone.

# IV. RECOMMENDATION

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

Kinvergttost 5/3/22

Kimberly Horst Licensing Staff Date

Approved By:

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09/07/2022

Date

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