

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

September 2, 2022

Nichole VanNiman
Beacon Specialized Living Services, Inc.
Suite 110
890 N. 10th St.
Kalamazoo, MI 49009

RE: License #: AS390406167 Investigation #: 2022A1024043

Beacon Home at Interlochen

Dear Mr. Beltran:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan was required. On August 31, 2022, you submitted an acceptable written corrective action plan.

It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan.

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 (616) 356-0183.

Sincerely,

Ondrea Johnson, Licensing Consultant Bureau of Community and Health Systems

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427 East Alcott

Kalamazoo, MI 49001

enclosure

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

I. IDENTIFYING INFORMATION

| License #: | A C200406467 |
|--------------------------------|--|
| License #: | AS390406167 |
| | |
| Investigation #: | 2022A1024043 |
| _ | |
| Complaint Receipt Date: | 07/11/2022 |
| Complaint Receipt Bate. | 0171172022 |
| | 0=14=10000 |
| Investigation Initiation Date: | 07/15/2022 |
| | |
| Report Due Date: | 09/09/2022 |
| • | |
| Licensee Name: | Boscon Specialized Living Services, Inc. |
| Licensee Name. | Beacon Specialized Living Services, Inc. |
| | |
| Licensee Address: | Suite 110 |
| | 890 N. 10th St. |
| | Kalamazoo, MI 49009 |
| | 7 tanan 13 20 3 , m. 10 00 0 |
| Licences Telephone # | (260) 427 9400 |
| Licensee Telephone #: | (269) 427-8400 |
| | |
| Administrator: | Kimberly Howard |
| | |
| Licensee Designee: | Nichole VanNiman |
| | Thomas variation |
| Nome of Escility | Beacon Home at Interlochen |
| Name of Facility: | Deacon nome at interiornen |
| | |
| Facility Address: | 8038 Interlochen St. |
| | Kalamazoo, MI 49009 |
| | |
| Facility Telephone #: | (269) 353-6941 |
| r denity receptions #. | (203) 000-0041 |
| | 00/04/0004 |
| Original Issuance Date: | 06/21/2021 |
| | |
| License Status: | REGULAR |
| | |
| Effective Date: | 12/21/2021 |
| Liiotivo Dato. | |
| Fundamenta of Data | 40/00/0000 |
| Expiration Date: | 12/20/2023 |
| | |
| Capacity: | 6 |
| | |
| Program Type: | DEVELOPMENTALLY DISABLED |
| Frogram Type. | |
| | MENTALLY ILL |

II. ALLEGATION(S)

Violation Established?

| Resident A has not bathed in 6 months and his clothes were | No |
|--|-----|
| covered in feces. There is concern care is not being provided. | |
| Additional Findings | Yes |

III. METHODOLOGY

| 07/11/2022 | Special Investigation Intake 2022A1024043 | | |
|------------|---|--|--|
| 07/15/2022 | Special Investigation Initiated – Telephone with physician Joshua Recknabel | | |
| 07/15/2022 | Contact - Telephone call made with Adult Protective Service (APS) Specialist Lauren Cook | | |
| 07/15/2022 | Contact - Telephone call made with Resident A's public guardian Molly Chase | | |
| 07/25/2022 | Contact - Document Received Resident A's Assessment Plan for AFC Residents and Health Care Appraisal | | |
| 08/19/2022 | Inspection Completed On-site with home manager Artmetria Williams, direct care staff member Marissa Deleon and Resident A | | |
| 08/19/2022 | Contact - Telephone call made with direct care staff member Anthony Wilburn | | |
| 08/29/2022 | Contact - Telephone call made with nurse Melissa Louden from Visiting Physicians | | |
| 08/29/2022 | Contact - Telephone call made with case manager Paige Materi from Milestone Senior Services | | |
| 08/30/2022 | Exit Conference with licensee designee Nichole VanNiman | | |
| 08/30/2022 | Inspection Completed-BCAL Sub. Compliance | | |
| 08/30/2022 | Corrective Action Plan Requested and Due on 08/30/2022 | | |
| 08/31/2022 | Corrective Action Plan Received | | |
| 08/31/2022 | Corrective Action Plan Approved | | |

ALLEGATION:

Resident A has not bathed in 6 months and his clothes were covered in feces. There is concern care is not being provided.

INVESTIGATION:

On 7/11/2022, I received this complaint through the Bureau of Community and Health Systems (BCHS) online complaint system. This complaint alleged Resident A has not bathed in 6 months and his clothes were covered in feces. There is concern care is not being provided. This complaint also stated the home had to call 911 due to Resident A not bathing and Resident A's toenails were observed to be 3 inches long.

On 7/15/2022, I conducted an interview with physician Joshua Recknabel who stated that the home sent Resident A to the emergency room because he refused to bathe or change his clothes. Dr. Recknabel stated Resident A was observed at the hospital with feces on his clothes and he suspected Resident A had not bathed in 6 months. Dr. Recknabel stated while at the hospital, Resident A took a shower encouraged by the emergency room nurse. Dr. Recknabel also stated Resident A was able to shower on his own without assistance. Dr. Recknabel stated Resident A is nonverbal therefore was not able to be interviewed while at the hospital.

On 7/15/2022, I conducted an interview with APS Specialist Lauren Cook regarding this allegation. Ms. Cook stated she found no substantial evidence to support allegations of neglect by staff members. Ms. Cook stated Resident A has been refusing to shower and change his clothes for many years and continues to be resistant with staff. Ms. Cook stated Resident A is not cooperative concerning his his hygiene and the staff members are not able to force him to shower.

On 7/15/2022, I conducted an interview with Resident A's public guardian Molly Chase. Ms. Chase stated Resident A has been fighting to take showers for the last five years and takes a shower about once or twice a year. Ms. Chase stated staff members have routinely tried to encourage and prompt Resident A to showers and change his clothes however Resident A refuses. Ms. Chase stated Resident A will become agitated if he feels pressured therefore staff is required to only prompt him. Ms. Chase stated she has worked with Resident A's case manager regarding interventions and at this time they have run out of options to get Resident A to get shower. Ms. Chase further stated in the past 5 years she has known Resident A to only shower if he goes to the hospital which is about once or twice a year.

On 7/25/2022, I reviewed Resident A's *Assessment Plan for AFC Residents (plan)* dated 5/4/2022. According to this plan Resident A requires prompting with bathing, grooming, dressing, and personal hygiene however, Resident A ignores the prompts and will often refuse.

I also reviewed Resident A's *Health Care Appraisal* (appraisal) dated 5/4/2021. According to this appraisal, Resident A is diagnosed with Schizophrenia and nails are extremely long however Resident refuses podiatry.

On 8/19/2022, I conducted an onsite investigation at the facility with home manager Armetria Williams, direct care staff member Marissa Deleon and Resident A. Ms. Williams stated she works regularly with Resident A, and he refuses to shower and change his clothes daily. Ms. Williams stated Resident A has resided in the home since 2019 and she has known him to shower about twice a year. Ms. Williams stated Resident A is physically capable of showering on his own however requires prompting from staff members. Ms. Williams staff members prompt Resident A to take a shower or change his clothes throughout the day however he refuses. Ms. Williams stated staff members have had many meetings regarding this issue and have talked with Resident A's case manager and guardian to get any additional assistance with getting Resident A to shower however no interventions have been able to work at this time. Ms. Williams stated staff members have to be careful not to escalate Resident A as he will become extremely agitated when he feels pressured. Ms. Williams further stated Resident A does not have an odor and his refusal to do his hygiene does not disrupt the home environment. Ms. Williams stated recently Resident A defecated on himself and refused to change his clothes and shower therefore 911 had to be called since this became a sanitary issue. Ms. Williams stated when he went to the hospital, Resident A chose to change his clothes and shower while at the hospital. Ms. Williams further stated Resident A does not have any toileting issues, so she was unsure why Resident A defecated on himself. Ms. Williams stated the home has called 911 to get Resident A to shower twice in one year due to Resident A defecating on himself at which time Resident A showered. Ms. Williams further stated they have started a tracking log to show documentation of their efforts in prompting Resident A to shower or change his clothes.

Ms. Deleon stated Resident A can perform his own activities of daily living however requires prompting from staff. Ms. Deleon stated she has worked in the home with Resident A for the past 2 years and Resident A refuses to bathe or change his clothes despite prompting from staff members. Ms. Deleon stated the very few times Resident A has taken a shower was due to Resident A being sent to the hospital by staff members. Ms. Deleon stated on 7/8/22, she had to call 911 because Resident A defecated on himself, and he refused to shower and change his clothes. Ms. Deleon stated she informed Resident A's guardian who also agreed this circumstance caused for medical intervention although when Resident A went to the hospital there were no medical issues identified. Ms. Deleon stated Resident A has a case manager who has also been trying to assist with Resident A encouraging Resident A to shower however there has been no successful interventions at this time.

I observed Resident A sitting on the couch. He was observed to be clean. It should be noted Resident A had just recently taken a shower while at the hospital on 7/8/2022.

While at the facility, I reviewed the facility's *AFC Licensing Division-Incident/Accident Report (report)* dated 7/8/2022. According to this report, Resident A was transported to Borgess ER to be seen for lack of hygiene care as Resident A has gone months without showering and changing his clothes. This report stated, in the past 2 days Resident A had incontinence of the bowels. This report stated Resident A's case manager came out to the home today to try to get Resident A to shower however was unsuccessful and has started a petition for him. This report stated EMS brought Resident A back to the home and they were able to get Resident A to shower and change his clothes while at the hospital.

While at the facility, I also reviewed Resident A's *Shower Tracking Log* for the Months of April, May, June, July and August of 2022. According to these logs, staff prompted Resident A to take a shower and change his clothes everyday however Resident A refused to do either of these tasks.

On 8/19/2022, I conducted an interview with direct care staff member Anthony Wilburn who stated that he works regularly with Resident A and he has known Resident A to take a shower about twice a year however only if he goes to the hospital. Mr. Wilburn stated he has observed Resident A to perform some grooming to himself such as washing his face and brushing his hair. Mr. Wilburn stated he prompts Resident A about twice a day to take a shower and change his clothes however Resident A always refuses to do so. Mr. Wilburn stated although Resident A only showers twice a year, he does not have a bad odor and will get aggressive if staff members continue to ask him to shower.

On 8/29/2022, I conducted an interview with nurse Melissa Louden from Visiting Physicians. Ms. Louden stated Resident A is seen by a physician every 3 months and he was last seen on 6/3/2022. Ms. Louden stated the home has asked if the physician can order Resident A to shower as Resident A refuses to shower and change his clothes. Ms. Louden stated Resident A cannot be forced to take a shower. Ms. Louden stated she has seen staff members prompt Resident A to take a shower and has seen staff member buy Resident A new clothes in order to convince him to change his clothes however Resident A will still refuse to take a shower or change his clothes. Ms. Louden stated she has also tried to encourage Resident A to take showers however he will refuse. Ms. Louden stated she has not seen any skin abnormalities which is something the physician will monitor since Resident A does not have good hygiene.

On 8/29/2022, I conducted an interview with Resident A's case manager Paige Materi who stated that she has tried various interventions to assist with getting Resident A to shower or change his clothes and nothing has been successful. Ms. Materi stated she has purchased new clothes and has physically gone out to the

home to assist with getting Resident A to shower and has not been successful. Ms. Materi stated Resident A refusing to shower and changing his clothes is considered Resident A's normal baseline and staff are doing everything they can do to assist him. Ms. Materi stated staff is required to provide prompting to Resident A as Resident A can perform his own activities of daily living however, he refuses to do so. Ms. Materi stated the home has a nurse that comes out monthly to ensure Resident A does not have any skin issues from not bathing. Ms. Materi further stated at this time staff is only able to provide prompting and call emergency services if Resident A's refusal to shower becomes a sanitary issue which staff members have done in the past. Ms. Materi stated staff members have done a great job prompting Resident A to perform his daily hygiene and can not force Resident A to shower or change his clothes. Ms. Materi also stated she regularly communicates with staff members in the home and Resident A is getting the care he needs and what he will allow to receive.

| APPLICABLE RULE | | |
|-----------------|---|--|
| R 400.14305 | Resident protection. | |
| | (2) A regident shall be treated with dignity and his or have | |
| | (3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of | |
| | the act. | |

ANALYSIS:

Based on my investigation which included interviews with physician Joshua Recknabel, Adult Protective Service (APS) Specialist Lauren Cook, home manager Artmetria Williams. direct care staff members Marissa Deleon and Anthony Wilburn, Resident A, public guardian Molly Chase, case manager Paige Materi, review of Resident A's Assessment Plan, Health Care Appraisal, Shower Tracking Log, AFC Licensing Division-*Incident/Accident Report* there is no evidence personal care is not being provided to Resident A even though Resident A does not bathe regularly at the facility. Direct care staff members provide daily prompting to encourage Resident A to shower and change his clothes. According to Dr. Recknabel, on 07/08/2022 Resident A was sent to the hospital because he refused to shower and had defecated on himself creating an unsanitary environment in the facility. According to Resident A's assessment plan, Resident A can conduct his own personal care with prompting however will ignore staff's prompts. Ms. Williams, Ms. Deleon, Mr. Wilburn all stated Resident A refuses to shower and change his clothes despite being regularly prompted by staff members. They also stated Resident A will usually shower twice in a year and that is only while at the hospital, Ms. Chase and Ms. Materi both stated they have tried interventions to get Resident A to shower and change his clothes however have not been successful. Ms. Chase and Ms. Paige also both stated staff make reasonable efforts to encourage Resident A to perform his activities of daily living and prompt him regularly. The staff members have also called 911 and have sent Resident A to the hospital when Resident A has posed a risk to the other residents by refusing to shower after defecating on himself. Resident A's skin is also observed regularly by the facility nurse and a visiting physician to ensure its integrity given his poor hygiene habits. I reviewed Resident A's Shower Tracking Log for the past 4 months which documented Resident A's refusal after staff's efforts in prompting Resident A to shower and change his clothes. Resident A's personal care needs have been attended to at all times.

CONCLUSION:

VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 7/25/2022, I reviewed Resident A's Health Care Appraisal dated 5/4/2021.

On 8/19/2022, Ms. Williams stated there is no other written health care appraisals on file for Resident A for the department to review.

| APPLICABLE R | ULE | |
|--------------|---|--|
| R 400.14301 | Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal. | |
| | (10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department. | |
| ANALYSIS: | On 7/25/2022, I reviewed Resident A's health care appraisal dated 5/4/2021 and on 8/19/2022 Ms. Williams stated there are no other written health care appraisals on file for the department to review. Therefore, I was not able to verify if a written health care appraisal was completed at least annually during this special investigation. | |
| CONCLUSION: | VIOLATION ESTABLISHED | |

On 8/30/2022, I conducted an exit conference with Nichole VanNiman. I informed Ms. VanNiman of my findings and allowed her an opportunity to ask questions or make comments.

On 8/31/2022, I received and approved an acceptable corrective action plan.

IV. RECOMMENDATION

An acceptable corrective action plan was approved; therefore, I recommend the current license status remain unchanged.

| Ondrea Ophi | Caer | 9/1/2022 |
|--|------------|----------|
| Ondrea Johnson Licensing Consultant | | Date |
| Approved By: | | |
| Maun Umm | 09/02/2022 | |
| Dawn N. Timm Area Manager | | Date |