



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

September 9, 2022

Paul Buchholz
Spring Arbor Assisted Living Center
3700 S. Dearing Rd.
Spring Arbor, MI 49283

RE: License #: AH380237409
Spring Arbor Assisted Living Center
3700 S. Dearing Rd.
Spring Arbor, MI 49283

Dear Mr. Buchholz:

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 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,

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
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License#:	AH380237409
Licensee Name:	Ganton Retirement Centers, Inc.
Licensee Address:	7925 Spring Arbor Rd. Spring Arbor, MI 49283
Licensee Telephone #:	(517) 750-0500
Authorized Representative:	Paul Buchholz
Administrator:	Catina Lowe
Name of Facility:	Spring Arbor Assisted Living Center
Facility Address:	3700 S. Dearing Rd. Spring Arbor, MI 49283
Facility Telephone #:	(517) 750-2700
Original Issuance Date:	07/16/2001
Capacity:	88
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/07/2022

Date of Bureau of Fire Services Inspection if applicable: 7/22/2022 and 8/29/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 9/9/2022

No. of staff interviewed and/or observed 15

No. of residents interviewed and/or observed 28

No. of others interviewed One Role Southern Care Hospice Nurse

- 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.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Services reviews fire drills. Disaster plan reviewed and staff interviewed regarding disaster plans.
- 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: SIR 2021A1027027 dated 7/23/2021 to CAP dated 8/31/2021: R 325.1964(11), R 325.1924(2), R 325.1933(1)
- Number of excluded employees followed up? Two N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1923

Employee's health.

(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR ?Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005? (<http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf>), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.

Interim facility nurse Employee #1 stated the facility had not conducted and maintained an annual tuberculosis risk assessment.

VIOLATION ESTABLISHED

R 325.1931

Employees; general provisions.

(3) The home shall designate 1 person on each shift to be supervisor of resident care during that shift. The supervisor of resident care shall be fully dressed, awake, and on the premises when on duty.

At the time of inspection, review of the August 2022 staff schedule revealed there was more than one supervisor of resident care assigned to each shift.

VIOLATION ESTABLISHED

R 325.1932 Resident medications.

(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.

The giving, taking, or applying of prescription medications was not always addressed in the resident's service plan.

For example: According to Resident A's July and August 2022 Medication Administration Records (MAR), she was prescribed Ativan 0.5 mg by mouth twice daily and then once daily as needed. Resident A's service plan did not specify that Resident A had anxiety behaviors requiring medication treatment. Additionally, Resident A's service plan did not provide information as to how the resident demonstrates this behavior to alert and inform staff or include specific care methodology for staff to address the behavior including non-medicinal interventions. According to Resident B's July and August 2022 MARs, he was prescribed Hydrocodone-APAP one tablet every six hours as needed for pain. Resident B's service plan lacked instruction of identifying the source or type of pain.

VIOLATION ESTABLISHED

R 325.1953 Menus.

(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.

Interview with Dietary Manager Employee #2 revealed the facility served puree and chopped therapeutic diets; however, those diet menus were not posted.

VIOLATION ESTABLISHED

R 325.1976 Kitchen and dietary.

(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and

sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.

Interview with Dietary Manager Employee #2 revealed the use of chemical sanitization was utilized and tested daily then recorded to demonstrate the task was completed, however the September 2022 records were incomplete. For example, the log was left blank on the following dates: 9/2/2022, 9/3/2022, and 9/4/2022 thus it could not be confirmed if proper and adequate sanitization of dishware was completed.

VIOLATION ESTABLISHED

R 325.1976 Kitchen and dietary.

(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.

Inspection of the facility kitchen revealed the refrigerator contained items that were not dated including but not limited to French dressing, Ranch dressing, Italian dressing, Fat Free Raspberry Vinaigrette Dressing, and Grey Poupon Mustard. Additionally, there was a container of pineapple uncovered and not dated.

VIOLATION ESTABLISHED

IV. RECOMMENDATION

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



9/9/2022

Date

Licensing Consultant