

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

ORLENE HAWKS DIRECTOR

September 7, 2022

Kimberly Gee Symphony of Brighton Health Care Center LLC Suite 167 30150 Telegraph Road Bingham Farms, MI 48025

> RE: License #: AL470378851 Investigation #: 2022A0466052 Van Gogh House Inn

Dear Mrs. Gee:

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 responsible party 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) 284-9727.

Sincerely, Kevin L. Sellers

Kevin Sellers, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909

enclosure

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

#### I. IDENTIFYING INFORMATION

| 1:                             | 41 470070054                                |
|--------------------------------|---|
| License #:                     | AL470378851                                 |
|                                |   |
| Investigation #:               | 2022A0466052                                |
|                                |   |
| Complaint Receipt Date:        | 07/18/2022                                  |
| • •                            |   |
| Investigation Initiation Date: | 07/19/2022                                  |
|                                |   |
| Bonort Duo Data:               | 09/16/2022                                  |
| Report Due Date:               | 09/10/2022                                  |
|                                |   |
| Licensee Name:                 | Symphony of Brighton Health Care Center LLC |
|                                |   |
| Licensee Address:              | Suite 167                                   |
|                                | 30150 Telegraph Road                        |
|                                | Bingham Farms, MI 48025                     |
|                                |   |
| Licensee Telephone #:          | (219) 252-3904                              |
|                                | (219) 232-3904                              |
|                                | Kimhanh (Coo                                |
| Administrator:                 | Kimberly Gee                                |
|                                |   |
| Licensee Designee:             | Kimberly Gee                                |
|                                |   |
| Name of Facility:              | Van Gogh House Inn                          |
|                                |   |
| Facility Address:              | 1014 E. Grand River Ave.                    |
|                                | Brighton, MI 48116                          |
|                                |   |
| Facility Tolophono #           | (910) 220 5222                              |
| Facility Telephone #:          | (810) 220-5222                              |
|                                |   |
| Original Issuance Date:        | 01/24/2017                                  |
|                                |   |
| License Status:                | REGULAR                                     |
|                                |   |
| Effective Date:                | 07/24/2021                                  |
|                                |   |
| Expiration Date:               | 07/23/2023                                  |
|                                |   |
| Capacitu                       | 20  |
| Capacity:                      | 20  |
|                                |   |
| Program Type:                  | AGED  |

# II. ALLEGATIONS:

|  | Violation<br>Established? |
|--|---------------------------|
| Resident A was administered medications that were not prescribed to her. | No                        |
| The facility has poor food quality and small portion sizes.              | No                        |
| Resident A's room is dirty.  | No                        |
| Resident A is not bathed often enough.                                   | No                        |
| Additional Findings  | Yes                       |

# III. METHODOLOGY

| 07/18/2022 | Special Investigation Intake- 2022A0466052.  |
|------------|--|
| 07/19/2022 | Special Investigation Initiated – Telephone call to Complainant,<br>Complainant interviewed. |
| 07/26/2022 | Inspection Completed On-site_with licensing consultant Julie Elkins.                         |
| 07/29/2022 | Contact Document Sent to Louise Verbeke- MI Long Term Care Ombudsman.                        |
| 07/29/2022 | Contact Document Received from Louise Verbeke, MI Long Term Care Ombudsman.                  |
| 08/01/2022 | Contact-Documents- Received from Katie Edwards.  |
| 08/02/2022 | Contact- Left voice mail message for Louise Verbeke- MI Long<br>Term Care Ombudsman.         |
| 08/30/2022 | Contact- Message-left for Katie Edwards.   |
| 08/30/2022 | Contact-Received from Katie Edwards.   |
| 09/08/2022 | Exit Conference with licensee designee Kimberly Gee.   |

# ALLEGATION: Resident A was administered medications that were not prescribed to her.

#### **INVESTIGATION:**

On 07/18/2022, Complainant reported direct care workers (DCW)s have mixed up Resident A's medications a few times.

On 07/19/2022, I interviewed Complainant who\_reported Resident A told him Resident A was administered medications she was not prescribed on several occasions. Complainant reported he witnessed Resident A being administered medications she was not prescribed but Complainant could not recall the month nor the date this occurred.

On 07/26/2022, AFC licensing consultant Julie Elkins and I conducted an unannounced investigation, and we interviewed the director of assisted living, Katie Edwards who\_reported that there have been no missing medications and no medication errors with Resident A's medications. Additionally, Ms. Edwards reported she was not aware of Resident A being administered any medications that were not prescribed to her.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed Resident A who reported facility direct care staff members administer her prescribed medications. Resident A denied being administered medications that she was not prescribed.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed DCW Ammar Gilliam, DCW Jacquelyn Kelly and DCW Amber Gibbs all of whom reported resident medication is being handled correctly and medication administration records (MAR)s are kept electronically. DCW Gilliam, DCW Kelly and DCW Gibbs were not aware of any medication errors with Resident A\_or anytime Resident A was administered any medications that were not prescribed to Resident A. On 07/29/2022, I reviewed Resident A's MARs from 06/01/2022 through 07/31/2022 and did not observe any errors documented including anytime Resident A was administered medication that was not prescribed to her.

| APPLICABLE RULE |   |
|-----------------|---|
| R 400.15312     | Resident medications.   |
|                 | (6) A licensee shall take reasonable precautions to insure<br>that prescription medication is not used by a person other<br>than the resident for whom the medication was prescribed. |

| ANALYSIS:   | Complainant reported medication is being administered to<br>Resident A that is not prescribed to her. Resident A denied<br>being administered medications that were not prescribed to her.<br>DCW Gillian, DCW Kelly, DCW Gibbs and Ms. Edwards all<br>reported medication is being administered to Resident A as<br>prescribed. DCW Gillian, DCW Kelly, DCW Gibbs and Ms.<br>Edwards all reported that they were not aware of anytime<br>Resident A was administered medications that were not<br>prescribed to her. I reviewed the Resident A's medication<br>administration records and did not observe any medication<br>errors including anytime Resident A was administered<br>medication that was not prescribed to her. Ms. Edwards<br>reported that there have been no missing medications and no<br>medication errors. Based on my investigation, there is no<br>evidence indicating Resident A was administered medications<br>that were not prescribed to her. |
|-------------|--|
| CONCLUSION: | VIOLATION NOT ESTABLISHED  |

### ALLEGATION: The facility has poor food quality and small portion sizes.

#### **INVESTIGATION:**

On 07/19/2022, Complainant reported the facility provides Resident A with poor food quality, skimpy portions and the DCWs leave food on the counter in her bedroom for three or four hours before Resident A eats it which is causing her to have bowel problems.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed Resident A who reported she is receiving/eating at least three meals a day. Resident A reported she does not always like the menu items served. Resident A also stated at times the meat served is "too tough or has a bad flavor." Resident A reported she can put in a "special request" for alternative meals. Resident A reported a "special request" for lunch and dinners are requested at breakfast. Resident A said a "special request" for breakfast must be done the previous day. Resident A said she can get food she likes such as "chief salads, grilled cheese and peanut butter sandwiches." Resident A denied having any complaints with the portion sizes of meals. Resident A reported if she eats her meals in her bedroom, the DCWs place the meals at her desk. Resident A said DCWs will assist her moving\_over to her desk so she can eat her meal. Resident A reported if she does not eat all her meal, she is able to put in her refrigerator for later. Resident A also shared that her room has a microwave for heating things up. Resident A denied that any of her meals have sat out for hours prior to her to consuming it.

On 07/26/2022, licensing consultant Elkins and I interviewed DCW Gilliam. DCW Gilliam reported the facility has good quality food and reported she felt the food portions were small. DCW Gilliam shared how Resident A does come out of her

room for some of her meals but not all as Resident A likes to sleep in longer in the mornings so she might not come out to the dining room area for breakfast every day. DCW Gilliam reported there are times when Resident A will choose to eat her meals in her bedroom. DCW Gilliam said when Resident A eats her meals in her bedroom, direct care staff members place Resident A's meal on her desk in her bedroom. DCW Gilliam said the direct care staff member will then assist Resident A to the desk if needed so she can eat her meal. DCW Gilliam said if himself or any other DCW is overseeing Resident A, they will return to her room in roughly an hour to see what Resident A has eaten. DCW Gilliam said they will put any of Resident A's remaining food in her refrigerator to heat up for Resident A later. DCW Gilliam said Resident A does like grilled cheese sandwiches, ham sandwiches, potatoes, and chief salads. DCW reported Resident A does have some issues with chewing different meats if they are served with meals. DCW Gilliam reported cutting up certain meat for Resident A if served with a meal.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed DCW Kelly who reported the food quality and portion sizes at the facility are adequate for each of the residents. DCW Kelly said there is a variety of foods for each of the residents at the facility. DCW Kelly reported how Resident A occasionally comes out of her bedroom and eats her meals in the dining room. DCW Kelly also stated Resident A does eat some meals in her bedroom. DCW Kelly reported how Resident A prefers oatmeal, cereal, salads, and certain kinds of sandwiches. DCW Kelly then said Resident A has been eating more of her meals in her bedroom now. DCW Kelly said if Resident A's meals are served in her bedroom, she will place her meal tray on Resident A's deck inside her bedroom. DCW Kelly said she will assist Resident A over to her desk where her food is located. DCW Kelly said when Resident A begins eating her meal, she will ask Resident A if she would like any of her uneaten meals placed in her refrigerator for later. DCW Kelly said Resident A likes her to place any of her uneaten meal placed in the refrigerator and then asks for it to be reheated later.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed DCW Gibbs who denied there was any issues with the food quality and portions sizes at the facility. DCW Gibbs reported how Resident A does occasionally come down to the dining room to eat her meals. DCW Gibbs then said as of late, Resident A has been eating most of her meals in her bedroom. DCW Gibbs reported there is a variety of foods for each of the resident to choose. DCW Gibbs said Resident A does have certain foods she likes more than others like chief salads, grilled cheese sandwiches. DCW Gibbs stated if Resident A eats her meals in her bedroom. DCW Gibbs said she will ask Resident A if she wants assistance to her desk to eat every time. DCW Gibbs said she will return to Resident A does not want to eat any portion of her food, she will ask Resident A if she wants the food in her refrigerator to heat up later. DCW

Gibbs stated she has noticed how Resident A does not have a large appetite and might not eat all her meal.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed Ms. Edwards who denied there has been any issues with the portion sizes or food quality of the meals served at the facility. Ms. Edwards reported each of the residents can put in a "special request" for food. Ms. Edwards said if the "special request" is put in before breakfast that morning, the resident can get their "special request" meal for lunch or dinner. Ms. Edwards said the same process can be used for a "special request" for breakfast which must be put in the day before. Ms. Edwards stated the "special request" are food items from the A 'la Carte Menu. Ms. Edwards denied any resident is ever denied having any additional food or anything from the A 'la Carte Menu. Ms. Edwards shared examples of food items listed on the A 'la Carte Menu which include pudding, apple sauces, fruit plates, juices, and many other items.

On 07/29/2022, I reviewed Caretel Inn Brighton's menu for the week of July 24-30, 2022. I reviewed the document and determined the facility provides nutritious meals for breakfast, lunch, and dinner meals. There are a variety of food items from which residents can choose. According to the menus, breakfast is served at 7:30 am, lunch at 11:30 am and dinner at 5:30 pm.

| APPLICABLE RULE |   |
|-----------------|---|
| R 400.15313     | Resident nutrition.   |
|                 | (1) A licensee shall provide a minimum of 3 regular,<br>nutritious meals daily. Meals shall be of proper form,<br>consistency, and temperature. Not more than 14 hours<br>shall elapse between the evening and morning meal.  |
| ANALYSIS:       | Based on interviews with Resident A, DCWs Gilliam, Kelly, and<br>Gibbs, and director of assisted living Katie Edwards, and my<br>review of Caretel <i>Inn Brighton Week 1 July 24-30, 2022</i> menus,<br>there is no evidence to support that the facility has poor food<br>quality, skimpy portions and or that Resident A's food sat on the<br>counter for 3 to 4 hours causing her bowel problems. |
| CONCLUSION:     | VIOLATION NOT ESTABLISHED   |

#### ALLEGATION: Resident A is not bathed often enough.

#### **INVESTIGATION:**

On 07/19/2022, Complainant reported Resident A is not bathed often enough. Complainant stated Resident A reported she has gone one week without a shower.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed Resident A who stated she receives a shower twice a week. Resident A was observed with no body

odor and was nicely groomed. On 07/26/2022, AFC licensing consultant Elkins and I interviewed DCWs Gilliam, Kelly and Gibbs who reported Resident A receives hospice care and is bathed twice a week on Wednesdays and Saturdays by a hospice aide. After reviewing Resident A's *Van Gough House Inn Cleaning and Shower Schedule* dated 05-23-2022through 07-23-2022, the schedule documented Resident A is bathed twice weekly on Wednesdays and Saturdays. This task was completed and initialed by Resident A's hospice aid on the following dates: 05/23, 05/25, 06/01, 06/08, 06/11 06/15,06/18,06/22,06/25,06/29,07/02,07/06,07/09, 07/13, 07/16, 07/20, 07/23, 07/27 and 07/30/2022.

| APPLICABLE RULE |   |
|-----------------|---|
| R 400.15314     | Resident hygiene.   |
|                 | (1) A licensee shall afford a resident the opportunity, and instructions, when necessary, for daily bathing and oral and personal hygiene. A licensee shall ensure that a resident bathes at least weekly and more often if necessary.  |
| ANALYSIS:       | Based on my investigation, through interviews with Resident A,<br>DCWs, Gilliam, Kelly, Gibbs, Director of Assisted Living and<br>reviewing Van Gough House Inn Cleaning and Shower<br>Schedule, there was no evidence to support allegations<br>Resident A is not bathed often enough. Resident A is assisted<br>with a shower twice a week on Wednesdays and Saturdays. As<br>documented in the monthly schedule, Resident A's hospice aid<br>is there on those days to assist Resident A with bathing. |
| CONCLUSION:     | VIOLATION NOT ESTABLISHED   |

# ALLEGATION: Resident A's room is dirty.

#### INVESTIGATION:

On 07/19/2022, Complainant reported Resident A's room not cleaned often enough.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed Resident A who reported that her room is swept, and dusting is done twice weekly. Resident A reported her linens and towels are changed and laundry is washed weekly on Wednesday and Saturdays. I observed Resident A's room to be clean, tidy, and free from dust and clutter.

On 07/26/2022, AFC licensing consultant Julie Elkins and I interviewed DCWs, Gillian, Kelly and Gibbs who reported Resident A's room is cleaned twice weekly. DCWs reported Resident A's floors were swept, furnishings are dusted and sanitized, linens and towels are changed, and laundry is done on Wednesday and Saturday's. DCW's Gillian, Kelly and Gibbs reported once a task is completed for Resident A like her shower, linens and towels changed, floors swept, furnishings

dusted and sanitized they initial the Van Gough House Inn Cleaning and Shower Schedule.

On 07/29/2022, I reviewed Van Gough House Inn Cleaning and Shower Schedule. The schedule is dated from 05-23-2022 through 07-23-2022. Resident A receives a shower and her room is cleaned twice weekly Wednesday and Saturdays. Resident A's room is swept, furnishings are dusted and sanitized, linens and towels changed along with her laundry washed. These tasked were completed and initialed on the schedule by DCWs and Resident A's hospice aid on 05/23,05/25,06/01, 06/08,06/11,06/15,06/18,06/22,06/25,06/29,07/02,07/06,07/09,07/13,07/16, 07/20,07/23,07/27 and 07/30/2022.

| APPLICABLE RULE |  |
|-----------------|--|
| R 400.15403     | Maintenance of premises.   |
|                 | (2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.  |
| ANALYSIS:       | There is no evidence to support that Resident A's room is not cleaned often enough. I interviewed Resident A, DCWs, Gilliam, Kelly, Gibbs, and the director of assisted living who all reported that Resident A's room is cleaned at least twice per week. I reviewed Vangogh House Inn Cleaning and Shower Schedule which documented that Resident A's room is cleaned twice a week on Wednesdays and Saturdays. I also observed Resident A's room to be tidy and free of any odors or clutter. |
| CONCLUSION:     | VIOLATION NOT ESTABLISHED  |

# ADDITIONAL FINDINGS

#### INVESTIGATION:

On 07/26/2022, AFC licensing consultant Elkins and I observed over the counter medications in Resident A's room that were sitting on her counter and were not locked. Medications observed in Resident A's bedroom were the following:

- methylprednisolone 4 mg tbpk,
- nepmycin-polymyxin-hc ear sol,
- standardized elderberry-immune syrup,
- standardized elderberry-original syrup,
- DHEA 50 mg dietary supplement-sugar metabolism-50 count tablets,
- D3 1000 IU (25 mcg) supplements bone, teeth, muscle health-Dietary Supplement.

On 07/26/2022, AFC licensing consultant Elkins and I interviewed Ms. Edwards and informed her about the unsecured over the counter and prescription medications

observed in Resident A's room. Ms. Edwards reported the prescribed medication for Resident A was old medication which she thought had been removed from Resident A's room. Ms. Edwards stated the over-the-counter medication observed in Resident A's room was probably brought in by Resident A's friend/guest. Ms. Edwards denied knowing these items were in Resident A's room.

On 07/29/2022, I reviewed Resident A's *Medication Administration Record* (MAR) dated 06/01/2022 through 07/31/2022 and none of the above identified medications were listed in Resident A's June or July 2022 MAR. However, observing the medications, methylprednisolone 4 mg tbpk and nepmycin-polymyxin-hc ear sol were prescribed to Resident A on 08/23/2021 by Dr. Eric Rosenbaum with instructions to discard after 08/23/2022. Resident A did not have a physician's order to pass her own medication as document in Resident A's MAR.

| APPLICABLE RU | APPLICABLE RULE   |  |
|---------------|---|--|
| R 400.15312   | Resident medications.   |  |
|               | (1) Prescription medication, including dietary supplements,<br>or individual special medical procedures shall be given,<br>taken, or applied only as prescribed by a licensed physician<br>or dentist. Prescription medication shall be kept in the<br>original pharmacy-supplied container, which shall be<br>labeled for the specified resident in accordance with the<br>requirements of Act No. 368 of the Public Acts of 1978, as<br>amended, being {333.1101 et seq. of the Michigan Compiled<br>Laws, kept with the equipment to administer it in a locked<br>cabinet or drawer, and refrigerated if required. |  |
| ANALYSIS:     | On 07/26/2022, AFC licensing consultant Elkins and I observed<br>both prescribed and over-the-counter medications in Resident<br>A's resident room that were not kept in a locked cabinet or<br>drawer. Resident A does not have a physician's order to pass<br>her own medications so therefore cannot maintain any<br>medication in her resident room.  |  |
| CONCLUSION:   | VIOLATION ESTABLISHED   |  |

# IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, no change in license is recommended.

Kevin L. Sellers 09/07/2022

Kevin Sellers Licensing Consultant Date

Approved By:

09/07/2022

Dawn N. Timm Area Manager Date