



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 21, 2022

Jeremiah Johnson
Portage Bickford Cottage
4707 W. Milham Ave.
Portage, MI 49024

RE: License #:	AH390278221
Investigation #:	2022A1021061
	Portage Bickford Cottage

Dear Mr. Johnson:

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,

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

License #:	AH390278221
Investigation #:	2022A1021061
Complaint Receipt Date:	09/13/2022
Investigation Initiation Date:	09/16/2022
Report Due Date:	11/13/2022
Licensee Name:	Portage Bickford Cottage LLC
Licensee Address:	Suite 301 13795 S. Mur-Len Road Olathe, KS 66062
Licensee Telephone #:	(810) 962-2445
Administrator:	Rick Garlick
Authorized Representative:	Jeremiah Johnson
Name of Facility:	Portage Bickford Cottage
Facility Address:	4707 W. Milham Ave. Portage, MI 49024
Facility Telephone #:	(269) 372-2100
Original Issuance Date:	03/05/2007
License Status:	REGULAR
Effective Date:	06/28/2021
Expiration Date:	06/27/2022
Capacity:	71
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Facility has insufficient staff.	Yes
Additional Findings	No

III. METHODOLOGY

09/13/2022	Special Investigation Intake 2022A1021061
09/16/2022	Inspection Completed On-site
09/20/2022	Contact - Telephone call made Interviewed administrator
09/21/2022	Contact - Document Received Received staff schedule
09/26/2022	Contact-Telephone call made fin
11/21/2022	Exit Conference Exit conference with authorized representative Jeremiah Johnson

ALLEGATION:

Facility has insufficient staff.

INVESTIGATION:

On 9/13/22, the licensing department received a complaint from Adult Protective Services (APS) with allegations the facility has insufficient staff. The complainant alleged on 9/2 and 9/9 there was only one staff member for the first shift.

On 9/16/22, I interviewed facility nurse Kara Tolliver at the facility. Ms. Tolliver reported there are 35 residents in assisted living and 14 residents in memory care. Ms. Tolliver reported in assisted living there are four residents that are an elopement risk, one resident with a catheter, two residents with oxygen, and two residents that are a fall risk. Ms. Tolliver reported in memory care all residents require assistance with dressing and bathing. Ms. Tolliver reported the facility has gone through management changes and is in the process of hiring new staff. Ms. Tolliver reported the facility is currently using agency staff on all shifts. Ms. Tolliver reported during

the weekdays, management will assist the floor staff as needed. Ms. Tolliver reported during the mealtimes, maintenance and activities assist with serving food and providing drinks as the facility has decreased dietary staff. Ms. Tolliver reported there is no mandation policy at the facility but that the medication technician cannot leave the facility until the medication cart keys are handed over to the next staff member.

On 9/16/22, I interviewed staff person 1 (SP1) at the facility. SP1 reported she typically works first shift. SP1 reported the facility has insufficient staff as there should be three caregivers on first shift but there are usually only one or two. SP1 reported the activity department is on the schedule as caregivers but they are providing activities to the residents. SP1 reported call lights are not answered in a timely manner and at times residents do not receive showers because of lack of staff.

On 9/19/22, I interviewed interim administrator Kim Davis by telephone. Ms. Davis reported in assisted living on first and second shift there is to be one medication technician and two caregivers. Ms. Davis reported in assisted living on third shift there is to be two caregivers. Ms. Davis reported in memory care on first and second shift there is to be one medication technician and two caregivers. Ms. Davis reported in memory care on third shift there is to be two caregivers. Ms. Davis reported the memory care unit caregivers stay in the unit. Ms. Davis reported the facility recently lost staff members and are using agency for 75% of the shifts. Ms. Davis reported during the busy times, such as the meal services, axillary staff, such as maintenance and activities, will assist with serving food and providing drinks.

On 9/26/22, I interviewed SP2 by telephone. SP2 reported there has been staffing concerns at the facility and the facility has worked with short staff. SP2 reported at times, there has only been medication technicians in the unit and no caregivers. SP2 reported when this occurred, resident care needs were not met. SP2 reported the facility has a new administrator and the staffing levels have gotten better.

I reviewed the staff schedule for 9/2 and 9/9. The schedule revealed on 9/2 on third shift there were only three caregivers that worked. On 9/9, on first shift there were only three caregivers that worked and a caregiver that worked until 8:30am. In addition, on third shift there were only three caregivers that worked.

I reviewed call light response times for 9/2 and 9/9. The average wait time was 12 minutes.

APPLICABLE RULE	
R 325.1931	Employees; general provisions.
	(5) The home shall have adequate and sufficient staff on duty at all times who are awake, fully dressed, and capable

	of providing for resident needs consistent with the resident service plans.
ANALYSIS:	Interviews with staff members and schedule review revealed the facility is not operating at their desired staffing levels.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 11/21/22, I conducted an exit conference with authorized representative Jeremiah Johnson by telephone.

IV. RECOMMENDATION

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



9/26/22

Kimberly Horst
Licensing Staff

Date

Approved By:



11/15/2022

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

Date