



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
FAMILY INDEPENDENCE AGENCY
OFFICE OF CHILDREN AND ADULT LICENSING



MUSETTE A. MICHAEL
INTERIM DIRECTOR

December 23, 2003

Joseph Whitney
Brighton Gardens of Northville
15870 Haggerty Rd
Plymouth, MI 48170

RE: Application #: AH820259978
Brighton Gardens of Northville
15870 Haggerty Rd
Plymouth, MI 48170

Dear: Mr. Whitney:

Attached is the Original Licensing Study Report for the above referenced facility. Due to the severity of the violations, 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.

Upon receipt of an acceptable corrective action plan, a temporary 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 feel free to 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 (248) 975-5053.

Sincerely,

Loma M Campbell, Licensing Staff
Office of Children and Adult Licensing
Suite 358
41000 Woodward
Bloomfield Hills, MI 48304
(248) 975-5062

enclosure

**MICHIGAN FAMILY INDEPENDENCE AGENCY
OFFICE OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AH820259978
Applicant Name:	Solomon Holdings I - The Triangle, LLC
Applicant Address:	1000 Treyburn Run Alpharetta, GA 30004
Applicant Telephone #:	(678) 566-0034
Administrator/Licensee Designee:	Joseph Whitney
Name of Facility:	Brighton Gardens of Northville
Facility Address:	15870 Haggerty Rd Plymouth, MI 48170
Facility Telephone #:	(734) 420-7917 07/26/2003
Application Date:	
Capacity:	120
Program Type:	Aged Alzheimer Dementia

II. METHODOLOGY

03/31/2003	Inspection Completed-Fire Safety : C Inspection completed by OFS
06/02/2003	Inspection Completed-Fire Safety : A Reinspection completed by OFS.
07/26/2003	Enrollment
12/19/2003	Inspection Completed On-site
12/19/2003	Inspection Completed-BFS Sub. Compliance Inspection occurred on 12/19, 2003 and 12/22, 2003.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The Brighton Gardens Home is located at 15870 Haggerty Road in Plymouth, MI. The facility is a three story building with an elevator provided in the front and the back of the building to aid the residents throughout the facility.

B. Program Description

The Brighton Gardens of Northville provides services and supports to individuals who are over the age of 60 years of unless a waiver has been obtained from the Department Director. These services and supports include provision of 24-hour supervision and persona care assistance as needed.

C. Rule/Statutory Violations

MCL 20175

Maintaining record for each patient; wrongfully altering or destroying records;

Maintaining record for each patient; wrongfully altering or destroying records; noncompliance; fine; licensing and certification records as public records; confidentiality; disclosure; report or notice of disciplinary action; information provided in report; nature and use of certain records, data, and knowledge.
(1) A health facility or agency shall keep and maintain a record for each patient including a full and complete record of tests and examinations performed, observations made, treatments provided, and in the case of a hospital, the purpose of hospitalization.

During the inspection 11 residents' records were reviewed. In five of the eleven records reviewed tests and treatments provided were not documented/kept as required. Examples of this finding include the following: wound care provided to the resident by a health care agency, changing of the Foley bag by a health agency, documentation of blood pressures, documentation of medications such as Norvasc for one resident, etc.

Also on December 19, 2003 the Licensing Staff observed that the 8:00 AM medications were being administered between 10:00 AM and 11:00 AM. The staff indicated that there was an emergency in the morning and this threw the medication administration schedule off. Documentation was not available in the record that would indicate that the medications were not administered at the appropriate time.

VIOLATION ESTABLISHED

MCL 333.20173 Nursing home, county medical care facility, or home for the aged; criminal history check of employment applicants; definitions.

(2) Except as otherwise provided in this subsection and subsection (5), a health facility or agency that is a nursing home, county medical care facility, or home for the aged shall not employ, independently contract with, or grant privileges to an individual who regularly provides direct services to patients or residents in the health facility or agency after the effective date of the amendatory act that added this section until the health facility or agency complies with subsection (4) or (5), or both. This subsection and subsection (1) do not apply to an individual who is employed by, under independent contract to, or granted clinical privileges in a health facility or agency before the effective date of the amendatory act that added this section.

Eight personnel files were reviewed. In eight of the eight personnel files reviewed documentation was not available which indicated that a criminal history check was completed using the appropriate method required by this statute.

VIOLATION ESTABLISHED

MCL 333.20178 Nursing home, home for the aged, or county medical care facility; description of services to patients or residents with Alzheimer's disease; contents; "represents to the public" defined.

(1) Beginning not more than 90 days after the effective date of the amendatory act that added this section, a health facility or agency that is a nursing home, home for the aged, or county medical care facility that represents to the public that it provides inpatient care of services or residential care or services, or both,

to persons with Alzheimer's disease or a related condition shall provide to each prospective patient, resident, or surrogate decision maker a written description of the services provided by the health facility or agency to patients or residents with Alzheimer's disease or a related condition. A written description shall include, but not be limited to, all of the following:

- (a) The overall philosophy and mission reflecting the needs of patients or residents with Alzheimer's disease or a related condition.
- (b) The process and criteria for placement in or transfer or discharge from a program for patients or residents with Alzheimer's disease or a related condition.
- (c) The process used for assessment and establishment of a plan of care and its implementation.
- (d) Staff training and continuing education practices.
- (e) The physical environment and design features appropriate to support the function of patients or residents with Alzheimer's disease or a related condition.
- (f) The frequency and types of activities for patients or residents with Alzheimer's disease or related condition.
- (g) Identification of supplemental fees for services provided to patients or residents with Alzheimer's disease or a related condition.

Eight personnel files were reviewed. In one of the eight personnel files reviewed it could not be determined if the employee had received training as required by this statute.

VIOLATION ESTABLISHED

MCL 333.20201 Policy describing rights and responsibilities of patients or residents; adoption; posting and distribution; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights.

(2) The policy describing the rights and responsibilities of patients or residents shall include as a minimum:

(I) A patient or resident is entitled to be free from mental and physical abuse and from physical and chemical restraints, except those restraints authorized in writing by the attending physician for a specified and limited time or as are necessitated by an emergency to protect the patient or resident from injury to

self or others, in which case the restraint may only be applied by a qualified professional who shall set forth in writing the circumstances requiring the use of restraints and who shall promptly report the action to the attending physician. In case of a chemical restraint a physician shall be consulted within 24 hours after the commencement of the restraint.

Eleven residents' records were reviewed. In one of the eleven records reviewed an order for the use of a hospital bed with ½ side rails was not available for review. Also an order indicating when the ½ side rails should be used, who should implement the order, when the ½ side rails should be used, what was the purpose of the ½ side rails, etc. was not available for review.

VIOLATION ESTABLISHED

MCL 333.20201 Policy describing rights and responsibilities of patients or residents; adoption; posting and distribution; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights.

(3) The following additional requirements for the policy described in subsection (2) shall apply to licensees under parts 213 and 217: (a) The policy shall be provided to each nursing home patient or home for the aged resident upon admission, and the staff of the facility shall be trained and involved in the implementation of the policy.

Eight personnel files were reviewed. In one of the eight personnel files reviewed it could not be determined if the staff had received the appropriate training as required by this statute.

VIOLATION ESTABLISHED

MCL 333.20201 Policy describing rights and responsibilities of patients or residents; adoption; posting and distribution; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights.

(6) A nursing home patient or home for the aged resident is entitled to be fully informed, as evidenced by the patient's or resident's written acknowledgment, before or at the time of

admission and during stay, of the policy required by this section. The policy shall provide that if a patient or resident is adjudicated incompetent and not restored to legal capacity, the rights and responsibilities set forth in this section shall be exercised by a person designated by the patient or resident. The facility or agency shall provide proper forms for the patient or resident to provide for the designation of this person at the time of admission.

Eleven residents' records were reviewed. In three of the eleven records it could not be determined if the resident or the person designated by the resident had been provided with the appropriate policies as written acknowledgement that the policies were provided were not available for review.

VIOLATION ESTABLISHED

R 325.1833 Admission and retention of residents.

Admission and retention of residents.

(3) A person admitted to residence in the home shall have a chest x-ray or shall have had a chest x-ray performed within the 3 months prior to admission. A report of the results of the chest x-ray shall be available in the home.

Eleven records were reviewed. In four of the eleven records a chest x-ray performed within the 3-months prior to admission was not available for review.

VIOLATION ESTABLISHED

R 325.1835 Employees' health.

Employees' health.

(1) A person on duty in the home shall be in good health and free from communicable disease. Files shall be maintained containing evidence of adequate health supervision, such as results of preemployment and periodic physical examinations, including intradermal skin tests for tuberculosis and chest x-rays, and records of illnesses and accidents occurring on duty.

Eight personnel files were reviewed. In two of the eight personnel files reviewed result of the preemployment physicals were not available for review.

VIOLATION ESTABLISHED

R 325.1836 Illnesses and accidents.

Illnesses and accidents.

(1) In case of an accident or sudden change in a resident's condition, the administrator or his designated representative

shall immediately notify the physician, the next of kin or legal guardian, and the person or agency responsible for placing and maintaining the resident in the home.

Thirty-eight incident reports were reviewed. In 13 of the 38 incident reports the physician was not notified as required. Also in 8 of the 38 incident reports the next of kin was not notified as required.

VIOLATION ESTABLISHED

R 325.1857 Accident records and incident reports.

Accident records and incident reports.

An accident record or incident report shall be prepared for each accident to a resident, personnel, and visitor, and shall include the following information:

- (a) Name of person involved in accident or incident.
- (b) Date, hour, place, and cause of accident or incident.
- (c) Effect of accident or incident on person involved.
- (d) Name of physician notified and time of notification.
- (e) Physician's statement regarding extent of injuries, treatment ordered, and disposition of person involved.
- (f) Corrective measures taken to avoid repetition of accident or incident.

Thirty-eight incident reports were reviewed. In nine of the 38 incident reports corrective measures to be taken to avoid repetition of the accident or incident was not available for review.

VIOLATION ESTABLISHED

R 325.1863 Meals and special diets.

- (2) Fluid, supplementary nourishments, and therapeutic or special diets ordered by a physician shall be provided as required.

Eleven residents' records were reviewed. In five of the eleven records reviewed special diets were ordered by the physician and it could not be determined if these diets were provided as ordered.

VIOLATION ESTABLISHED

R 325.1865 Menus.

- (1) The menu for regular and therapeutic or special diets for the current week shall be posted. Changes shall be written on the planned menu to show the menu as actually served.

The menu for special or therapeutic diets for the current week was not posted as required.

VIOLATION ESTABLISHED

R 325.1880 Water supply systems.

- (9) The temperature of hot water at plumbing fixtures used by residents shall be regulated to provide tempered water not exceeding 110 degrees Fahrenheit.

On December 19, 2003 the Licensing Staff tested temperature of the hot water at the plumbing fixtures used by the residents. In all of the areas tested the hot water temperature exceeded 110 degrees Fahrenheit.

VIOLATION ESTABLISHED

R 325.1882 Solid wastes.

- (1) The collection, storage, and disposal of solid wastes, including garbage and refuse, shall be accomplished in a manner which will minimize the danger of disease transmission and avoid creating a public nuisance or a breeding place for insects and rodents.
- (2) Suitable containers for garbage, refuse, and other solid wastes shall be provided and emptied at frequent intervals and maintained in a clean and sanitary condition.

Observation by the Licensing Staff on December 19, 2003 at approximately 3:00 PM revealed that the garbage containers were not maintained in a clean and sanitary condition as garbage was observed at the bottom of the container although a garbage bag was in place.

Also the area around the garbage dumpster was observed to have garbage on the ground which could present a breeding place for insects and rodents.

VIOLATION ESTABLISHED

R 325.1886 Kitchen and dietary.

- (8) A reliable thermometer shall be provided for each refrigerator and freezer.

Observation by the Licensing Staff on December 19, 2003 from 9:00 AM until 10:50 AM revealed that a reliable thermometer was not available in 11 of the 11 residents room refrigerator/freezer visited.

VIOLATION ESTABLISHED

R 325.1886

Kitchen and dietary.

- (12) Food service equipment and work surfaces shall be installed in such a manner as to facilitate cleaning and be maintained in a clean and sanitary condition, and in good repair.

Observation by the Licensing Staff on December 19, 2003 in the kitchen area at approximately 3:00 PM revealed that the equipment used to transport food to the Reminiscence Neighborhood was not maintained in a clean and sanitary condition.

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend that a temporary license be issued.

Loma M Campbell	Date
Licensing Staff	

Approved By:

Barbara Smalley	Date
Area Manager	

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
OFFICE OF CHILDREN AND ADULT LICENSING
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

Before license issuance of Brighton Gardens of Northville to Solomon Holdings I - The Triangle LLC on 7/26/2003, this facility was owned and licensed to Senior Care Associates, LLC. Following receipt of an acceptable corrective action plan to correct noncompliance in existence at the time of the change in ownership, a temporary license was issued.

The Brighton Gardens of Northville home is a three-story steel-framed building built in 1998. The building is fire suppressed, barrier-free and has elevators. The home has a bed unit capacity of 120. Twenty-six of the bed units are located on the first floor and are for residents with a diagnosis of dementia/Alzheimer's Disease. This unit is secured with the use of a keypad code system: The code must be entered on the keypad to enter and exit the unit. The remaining 94 bed units are located on the second and third floors. The home has twenty-four bedrooms on the first floor, forty-one bedrooms on the second floor, and forty-one bedrooms on the third floor. The bedrooms' square footage range from 128 square feet to 277 square feet. Each bedroom has a bathing/showering facility, and on each floor, there are bathing rooms with Jacuzzi type tubs. The home is a non-smoking home.

Brighton Gardens of Northville is located in an urban area, close to freeways (I-275, M-14, I-96) and many shopping centers. Brighton Gardens of Northville serves individuals who are 60 years or older including those residents diagnosed with dementia/Alzheimer's Disease or related condition. The home provides twenty-four hour supervision and assistance with personal care, including administration of medications. Three meals and snacks are offered daily. In addition, when medically indicated, room tray service is available to residents on a temporary basis. Many activities are provided that are based on the competency of the residents. These activities include needle crafting, card playing, bingo, church services, reading groups, shopping trips, daily exercise sessions, and outings. In addition, men's and women's clubs have been established based on the residents' interests. Around the perimeter of the home, there is a walking path with benches for sitting provided at various locations. A community bus is also available for transporting residents to special events and outings.

The Brighton Gardens of Northville home Alzheimer's/dementia program, known as the Reminiscence Program, is located on the first floor of the home. The Reminiscence Program is based on the concept of creating pleasant days through reminiscences (remembering the past) and multi-sensory experiences. This means finding ways to involve residents in activities that they prefer, that they can be successful at, and that are pleasurable to them. Four criteria are considered when admitting a resident to this program: cognitive status, behavioral presentation, functional level, and the benefits a resident would receive from placement in this setting. Staff members are trained in the

disease process using the Sunrise University Training process, and continuing training is provided using mini training session during monthly meetings. In order to compensate for residents' diminishing skills, program adaptations and environmental enhancements are made in a variety of areas. For example, to support continence and independence in toileting, bathroom enhancements have been implemented. Infrared motion sensors along with painted walls to highlight the toilet, cue residents to use the bathroom more independently. Bathroom door signage and contrasting color bathroom doors provide additional visual cues. In addition, a hydration program is put in place and is based on a schedule of encouraging water and juices six times each day to minimize illness, infections, and falls. The environment has a safe and secured courtyard with wandering paths for the residents.



6/20/2007

Loma M. Campbell
Licensing Staff

Date



6/20/07

Betsy Montgomery
Area Manager

Date