GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 1, 2022

John Winden
Close To Home Assisted Living, Saginaw LLC
1805 South Raymond
Bay City, MI 48706

RE: License #: AL730398656
Investigation #: 2023A0580004
Close to Home Assisted Living Saginaw Side 2

Dear Mr. Winden:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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.

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) 643-7960.

Sincerely,

Sabrina McGowan, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 835-1019

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL730398656
Investigation #:	2023A0580004
Complaint Receipt Date:	10/31/2022
Investigation Initiation Date:	11/02/2022
Report Due Date:	12/30/2022
Licensee Name:	Close To Home Assisted Living, Saginaw LLC
Licensee Address:	1805 South Raymond Bay City, MI 48706
Licensee Telephone #:	(989) 401-3581
Administrator:	John Winden
Licensee Designee:	John Winden
Name of Facility:	Close to Home Assisted Living Saginaw Side 2
Facility Address:	2160 N. Center Rd Saginaw, MI 48603
Facility Telephone #:	(989) 778-2575
Original Issuance Date:	07/07/2020
License Status:	REGULAR
Effective Date:	01/07/2021
Expiration Date:	01/06/2023
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED

	TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Resident A was observed with a temperature recording catheter, meaning that the AFC staff has not changed his catheter since he was last discharged from the hospital. Resident has now developed a UTI due to the length of time that the catheter was in place.	Yes

III. METHODOLOGY

10/31/2022	Special Investigation Intake 2023A0580004
10/31/2022	APS Referral This referral was denied by APS for investigation.
11/02/2022	Special Investigation Initiated - Telephone A call was made to Ms. Stacey Rinnert, Home Manager.
11/02/2022	Contact - Document Received A faxed copy of documents requested were received.
11/04/2022	Inspection Completed On-site An onsite inspection was conducted.
11/22/2022	Contact - Face to Face A facetime interview was conducted with Resident A.
11/22/2022	Contact - Telephone call made A phone call was conducted with Ms. Rinnert.
11/22/2022	Contact - Document Received A faxed copy of documents requested were received.
11/29/2022	Contact - Face to Face A call was made to Supports Coordinator, Ms. Donna Fox of A & D Waiver.
11/29/2022	Exit Conference An exit conference was held with the licensee designee, Mr. John Winden.

ALLEGATION:

Resident A was observed with a temperature recording catheter, meaning that the AFC staff has not changed his catheter since he was last discharged from the hospital. Resident has now developed a UTI due to the length of time that the catheter was in place.

INVESTIGATION:

On 10/31/2022, I received a complaint via BCAL Online complaints regarding the above allegations. This complaint was denied by APS for investigation.

On 11/02/2022, I placed a call to Ms. Stacey Rinnert, home manager. She indicated that Resident A was placed in the facility effective 09/30/2022. Resident A came with a Foley Catheter already in place. Resident A received his initial medical visit on 10/05/2022 by the Nurse Practitioner, Ms. Karen Delaney of Careline Health Group, who ordered skilled nursing for the resident. Skilled nursing would be responsible for changing the Catheter. Close to Home staff are not trained on how to change a Foley Catheter. On 10/12/2022, Ms. Rinnert followed up with Ms. Delaney regarding skilled nursing care for Resident A. At that time, she was still checking on obtaining the skilled nursing services. On 10/18/2022, Ms. Delaney responded indicating that Resident A's health insurance did not cover the skilled nursing, however, she was still attempting to see what could be done to obtain the service. Resident A went to the hospital on 10/29/2022 due to stomach pains.

On 11/02/2022, I received a faxed copy of the AFC Assessment Plan for Resident A. For toileting, it indicates that Resident A requires assistance. He has a Foley Catheter. He is to be checked and changed every 2 hours. His initial medical assessment, completed by Ms. Karen Delaney of Careline Health Group on 10/05/2022, indicates that meatus of Resident A's Foley Catheter should be cleaned daily and changed monthly. Staff are also to monitor for signs of skin infection.

The incident report dated 10/29/2022, which had previously been sent to licensing, stated that Resident A complained of stomach pains and indicated that he wanted to go the hospital. Staff actions included calling 911 and management. Corrective measures taken indicate that the facility will follow discharge instruction. This incident report was signed by the assistant manager, Ms. Marilyn Reed and the licensee designee, Mr. John Winden on 10/29/2022. Copies were provided to AFC Licensing, Careline Health Group, A & D Waiver, and the residents licensing record.

On 11/04/2022, I conducted an onsite inspection at Close to Home Assisted Living. Contact was made with the assistant manager, Ms. Marilyn Reed. Resident A is still currently in the hospital. While onsite I observed Resident A's room. His room was clean. His personal belongings were in place. Other residents in the facility were observed while in the facility. Some residents were in their rooms, several residents were in the dining area sitting at the table eating lunch, while others were observed in

the living room area watching television. The residents appeared to be receiving adequate care.

On 11/22/2022, I conducted a facetime interview with Resident A. Resident A was observed clothed while lying in bed. He indicated that he is doing well since being back at the facility and receives good care from the staff.

On 11/22/2022, I spoke with Ms. Rinnert, who indicated that Resident A's Foley Catheter was removed during his hospital stay. A copy of the discharge paperwork was requested.

On 11/22/2022, I received a faxed copy of the Covenant Hospital discharge instructions for Resident A were received. The instructions indicate that Resident A's 10/29/2022 Admission Diagnoses as Adult Neglect, and a Urinary Tract Infection associated with indwelling urethral catheter. He with as diagnosed UTI and Pyuria. On 11/05/2022, Resident A had his Foley Catheter removed and returned to the AFC on Monday 11/07/2022.

On 11/29/2022, I spoke with Supports Coordinator, Ms. Donna Fox of A & D Waiver. She stated that she visits with Resident A every 90 days for reassessment of services. She also shared that she does not have any concerns regarding Resident A and the care he is receiving while at Close to Home Assisted Living. Resident A has not made any complaints.

APPLICABLE RULE	
R 400.15301	**Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.**
	(2) A licensee shall not accept or retain a resident for care unless and until the licensee has completed a written assessment of the resident and determined that the resident is suitable pursuant to all of the following provisions: (b) The kinds of services, skills, and physical accommodations that are required of the home to meet the resident's needs are available in the home.

ANALYSIS:	Resident A was admitted to this home on 9/30/2022 with a Foley Catheter. Ms. Rinnert, home manager and none of the staff had any knowledge of the required care of Resident A's Foley Catheter. Ms. Rinnert reported she attempted to obtain nursing care for Resident A's Foley Catheter but was unsuccessful. Resident A required hospitalization on 10/29/2022, with hospital records stating Adult Neglect and Urinary Tract Infection associated with indwelling urethral catheter. The home admitted Resident A and failed to ensure they could meet Resident A's Foley Catheter care, which resulted in a urinary tract infection and hospitalization. There is sufficient evidence to substantiate violation to this rule.
CONCLUSION:	**VIOLATION ESTABLISHED**

On 11/29/2022, I conducted an exit conference with the licensee designee, Mr. John Winden. Mr. Winden was informed of the findings of this investigation.

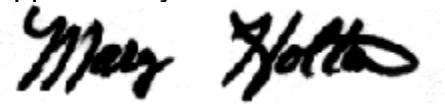
IV. RECOMMENDATION

Upon the receipt of an approved corrective action plan, no changes to the status of the license are recommended.

December 1, 2022

Sabrina McGowan Date
Licensing Consultant

Approved By:



December 1, 2022

Mary E. Holton Date
Area Manager