



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 7, 2023

Crystal Caldwell
Brightside Assisted Living LLC
2140 Robinson Road
Jackson, MI 49203

RE: License #: AH380381401
Brightside Assisted Living & Memory Care
2388 Robinson Road
Jackson, MI 49203

Dear Ms. Caldwell:

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 licensee 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) 241-1970.

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) 285-7433

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #: AH380381401

Licensee Name: Brightside Assisted Living LLC

Licensee Address: 2140 Robinson Road
Jackson, MI 49203

Licensee Telephone #: (517) 787-4150

Authorized Representative: Crystal Caldwell

Administrator/Licensee Designee: Maegen Lowder

Name of Facility: Brightside Assisted Living & Memory Care

Facility Address: 2388 Robinson Road
Jackson, MI 49203

Facility Telephone #: (517) 787-4150

Original Issuance Date: 09/01/2017

Capacity: 38

Program Type: AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/07/2023

Date of Bureau of Fire Services Inspection if applicable: 07/12/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 3/08/2023

No. of staff interviewed and/or observed 11

No. of residents interviewed and/or observed 25

No. of others interviewed One Role Resident's spouse

- 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. No resident funds held.
- 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 the disaster plan.
- 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:
Renewal LSR dated 2/18/2021 to CAP dated 2/24/2021: R 325.1923(2) and R 325.1932(3)(b)
- Number of excluded employees followed up? 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.

Review of Employee #1's file revealed her first day worked in the facility was 9/1/2021. Employee #1's tuberculosis (TB) was administered on 9/7/2021 and read on 9/9/2021. Interview with administrator Maegen Lowder revealed staff started working on the floor shadowing other staff on their first day worked.

REPEAT VIOLATION ESTABLISHED [For Reference, see Renewal Licensing Study Report (LSR) dated 2/18/2021, CAP dated 2/24/2021].

R 325.1931 Employees; general provisions.

(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:

- (a) Reporting requirements and documentation.**
- (b) First aid and/or medication, if any.**
- (c) Personal care.**
- (d) Resident rights and responsibilities.**
- (e) Safety and fire prevention.**
- (f) Containment of infectious disease and standard precautions.**
- (g) Medication administration, if applicable.**

Review of Employee #1's file revealed her first day worked was 9/1/2021. Review of Employee #1's training records revealed she completed the following *Relias* training: Basics of Hand Hygiene on 10/25/2021, Fire Safety: The Basics on 10/27/2021, First Aid – Part 1 on 10/31/2021, Infection Control and Prevention on 11/2/2021, Protecting resident rights in assisted living facilities on 11/6/2021.

Review of Employee #2's file revealed she was hired on 3/19/2021 and her first day worked was 3/29/2021. Review of Employee #2's training records revealed she completed training for fire prevention/policy, disaster plans, service plans on 10/13/2021 and reporting and documentation on 10/29/2021. Employee #2's *Relias* training records read she complete the following: Basics of Hand Hygiene on 10/29/2021, Bloodborne pathogens and standard precautions on 10/29/2021, first aid on 10/29/2021, resident rights on 1/13/2022, and infection control on 1/13/2022.

Interview with Ms. Lowder revealed employees shadowed on their first day of work and completed *Relias* training when time allowed. The files lacked evidence of training was conducted by shadowing. Additionally, Employee #1 and #2's training competencies were dated after they started working independently.

VIOLATION ESTABLISHED.

R 325.1932 Resident medications.

(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.

Review of Resident A's medication administration records (MARs) for January 2023 revealed the following medications were left blank for the 8:00 PM dose on 1/13/2023: Creon and Eliquis. Thus, it could not be determined if Resident A's medications were administered or not.

VIOLATION ESTABLISHED.

R 325.1932 Resident medications.

(5) A home shall take reasonable precautions to ensure or assure that prescription medication is not used by a person other than the resident for whom the medication is prescribed.

Interview with Employee #2 revealed medication technicians were to conduct a narcotic count at the change of each shift in which they would each initial that the narcotic counts were correct. Employee #2 stated third shift did not always sign the narcotic count log and they were working on “catching up.” Observations of the narcotic count log revealed staff did not always initial narcotic counts were completed. For example, on the following dates and shifts the narcotic count was left blank:

2/20/2023: first and third shifts
2/21/2023: first and third shifts
2/22/2023: first, second and third shifts
2/23/2023: first and second shifts
2/24/2023: third shift
2/25/2023: first and third shifts
2/26/2023: first and third shifts
2/27/2023: third shift
2/28/2023: second and third shifts
3/1/2023: first, second and third shifts

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.

Review of a *Dietary Cheat Sheet* in the kitchen revealed some residents received prescribed diets such as puree or mechanical soft. Review of the menus revealed the facility lacked therapeutic or special diet menus for February and March 2023. The therapeutic or special diet menus were incomplete for January 2023. Additionally, the therapeutic or special diet menus were not posted for the current week.

VIOLATION ESTABLISHED.

R 325.1954 Meal and food records.

The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.

Review of the meal census records revealed productions sheets for January, February and March 2023 were either incomplete or not completed.

VIOLATION ESTABLISHED.

R 325.1964 Interiors.

(9) Ventilation shall be provided throughout the facility in the following manner:

(b) Bathing rooms, beauty shops, toilet rooms, soiled linen rooms, janitor closets, and trash holding rooms shall be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.

Inspection with Ms. Lowder of the public restroom located next the dining area lacked adequate and discernable air flow.

VIOLATION ESTABLISHED.

R 325.1970 Water supply systems.

(7) The temperature of hot water at plumbing fixtures used by residents shall be regulated to provide tempered water at a range of 105 to 120 degrees Fahrenheit.

Inspection of resident room 302 revealed a water temperature of 96.6 degrees Fahrenheit. Inspection of resident room 308 revealed a water temperature of 84.0 degrees Fahrenheit.

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 Ms. Lowder revealed the facility utilized chemical and heat sanitization in which the chemical sanitization was expected to be tested daily. Interview with kitchen staff revealed a record was not maintained of the daily chemical and heat sanitization testing, thus it could not be confirmed if proper and adequate sanitization of dishware was completed.

VIOLATION ESTABLISHED.

R 325.1976 Kitchen and dietary.

(5) The kitchen and dietary area, as well as all food being stored, prepared, served, or transported, shall be protected against potential contamination from dust, flies, insects, vermin, overhead sewer lines, and other sources.

Inspection of the facility kitchen revealed the refrigerator contained items that were opened and not dated including but not limited a can of tomato soup, mayonnaise, turkey, and salad dressing.

VIOLATION ESTABLISHED.

IV. RECOMMENDATION

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



03/08/2023

Licensing Consultant Date