



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

March 16, 2023

Amy Borzymowski
Brookdale Adrian
1200 Corporate Drive
Adrian, MI 49221

RE: License #: AH460264382
Brookdale Adrian
1200 Corporate Drive
Adrian, MI 49221

Dear Ms. Borzymowski:

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 home for the aged 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 #:	AH460264382
Licensee Name:	BLC Adrian-GC, LLC
Licensee Address:	330 N. Wabash Ave. Chicago, IL 60611
Licensee Telephone #:	(312) 977-3648
Authorized Representative:	Amy Borzymowski
Administrator/Licensee Designee:	Christopher Lender
Name of Facility:	Brookdale Adrian
Facility Address:	1200 Corporate Drive Adrian, MI 49221
Facility Telephone #:	(517) 263-8199
Original Issuance Date:	06/04/2004
Capacity:	65
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/16/2023

Date of Bureau of Fire Services Inspection if applicable: 10/6/2022, 10/20/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 3/16/2023

No. of staff interviewed and/or observed 12

No. of residents interviewed and/or observed 18

No. of others interviewed One Role Resident's daughter

- 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 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 5/25/2021 to CAP dated 4/26/2021: R 325.1921(1)(b)
- Number of excluded employees followed up? Two N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 325.1964

R 325.1964

(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 of resident bathing/toileting facilities located in room 30 lacked adequate and discernable air flow.

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.

Interview with the director of dining services revealed the facility maintained weekly regular menus in the computer, however posted menus for the current day.

Review of residents' diet orders revealed they were prescribed therapeutic or special diets such as but not limited to no added salt and mechanical moist. Interview with the director of dining services revealed the facility did not prepare and post weekly therapeutic or special diet menus.

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.

Review of the January, February, and March 2023 dish machine temperature logs revealed they were incomplete. For example, the log was left blank on the following dates: 1/7/2023, 1/10/2023, 1/14/2023, 1/17/2023, 1/21/2023, 1/24/2023, and 1/28/2023. Additionally, the log had been completed for future dates in March 2023. For example, the log was completed on the following dates: 3/18/2023 through 3/20/2023, 3/22/2023, 3/23/2023, 3/25/2023, 3/26/2023, 3/28/2023 through 3/30/2023. Thus, it could not be confirmed if proper and adequate sanitization of dishware was completed.

VIOLATION ESTABLISHED

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.

Interview with Mr. Lender and the health and wellness director revealed the facility had not conducted and maintained an annual tuberculosis risk assessment.

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 #1 revealed medication technicians were to conduct a narcotic count at the change of each shift. Employee #1 stated if the narcotic count was correct then staff would sign the narcotic count sheet coming onto their shift. Employee #1 stated after completion of the count with next shift, they would sign the narcotic count sheet when leaving their shift. Observation of the narcotic count sheets revealed staff did not always sign narcotic counts were completed. For example, on the following dates and shifts the narcotic count sheet was left blank: second shift on 2/23/2023, second shift on 3/8/2023, second shift on 3/12/2023, first and second shifts on 3/14/2023, and first shift on 3/15/2023. Additionally, Employee #1 had signed the narcotic count sheet for leaving her shift on 3/16/2023 in which a narcotic count had not been completed with the next shift at that time.

VIOLATION ESTABLISHED

IV. RECOMMENDATION

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



03/16/2023

Date

Licensing Consultant