



STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

ORLENE HAWKS
DIRECTOR

June 22, 2023

Connie Clauson
Baruch SLS, Inc.
Suite 203
3196 Kraft Avenue SE
Grand Rapids, MI 49512

RE: License #: AM450382467
Investigation #: 2023A0230030
Effie's

Dear Mrs. Clauson:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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 (231) 922-5309.

Sincerely,

A handwritten signature in cursive script that reads "Rhonda Richards".

Rhonda Richards, Licensing Consultant
Bureau of Community and Health Systems
Suite 11
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4942

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM450382467
Investigation #:	2023A0230030
Complaint Receipt Date:	06/13/2023
Investigation Initiation Date:	06/14/2023
Report Due Date:	08/12/2023
Licensee Name:	Baruch SLS, Inc.
Licensee Address:	Suite 203, 3196 Kraft Avenue SE Grand Rapids, MI 49512
Licensee Telephone #:	(616) 285-0573
Administrator:	Jere Green
Licensee Designee:	Connie Clauson
Name of Facility:	Effie's
Facility Address:	300 Grand Avenue, Leland, MI 49654
Facility Telephone #:	(231) 256-8874
Original Issuance Date:	07/29/2016
License Status:	REGULAR
Effective Date:	01/29/2023
Expiration Date:	01/28/2025
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED, AGED, ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Resident A has Covid-19 and infected six other residents. There is a concern that staff are not following prevention protocol.	No

III. METHODOLOGY

06/13/2023	Special Investigation Intake 2023A0230030
06/14/2023	Special Investigation Initiated - On Site Interview with staff member Chris Rodge
06/15 2023	APS Referral
06/15/2023	Contact - Telephone call made Administrator Jere Green
06/21/2023	Contact - Telephone call made Sharon Plamondon
06/22/2023	Exit Conference with administrator Jere Green

ALLEGATION: Resident A has Covid-19 and infected six other residents. There is a concern that staff are not following prevention protocol.

INVESTIGATION: On 06/14/2023, I conducted an unannounced on-site investigation at the facility. I was greeted at the door by facility staff member Chris Rodge who was wearing an N-95 mask. I observed a sign posted on the front door indicating that there are Covid-19 infections in the facility.

Ms. Rodge stated that on 06/09/2023 Resident A went to the emergency room for an illness which they suspected was pneumonia. While at the hospital she was tested for Covid-19 and was positive. The following day which was Saturday all residents were tested and six others tested positive. One staff member was positive and was off work for five days following symptoms improving. Ms. Rodge stated she tested negative and all staff are using protocol for prevention of Covid-19. This includes wearing masks and washing hands.

On 06/15/2023, I spoke with Administrator Jere Green who stated that the facility staff have followed all recommendations from the public health department and Center for Disease Control (CDC) which indicates that individuals who test positive

with Covid-19 should isolate from others for five days from the onset of symptoms. After five days if a person is fever free, they may come out of isolation but should still mask for five days from the onset of symptoms. I confirmed this information to be accurate based on information located on the CDC website.

On 06/21/2023, I spoke with Sharon Plamondon who is the facility and manager and also the staff member who tested positive for Covid-19. She confirmed that she did not return to work in the facility until five days after the onset of her symptoms and even then, did not work with the one resident who has not tested positive for Covid-19. As of this date he still had not tested positive and the other residents are increasingly improving with their symptoms. She stated staff members immediately began wearing masks and using extra precautions such as frequent handwashing after learning of the seven residents having a positive Covid-19 test. Ms. Plamondon is currently testing negative and is symptom free.

On 06/22/2023, I conducted an exit conference with Administrator Jere Green. She had no additional questions but indicated the staff will continue to protect the one resident that does not have covid-19.

APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
ANALYSIS:	<p>All staff members are using proper Covid-19 prevention protocol to protect the resident who does not yet have Covid-19. They are wearing masks and handwashing. The staff member who tested positive did not work with the uninfected resident and did not come back to work until five days after the onset of her symptoms. She also did not do any direct care with the uninfected resident.</p> <p>All resident needs are being attended to including their protection and safety due to the above precautions that are being taken. There is only one resident out of eight who did not get infected and this was discovered all on the same day when they tested all residents after learning of the positive test from Resident A.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

I recommend the status of this license remain unchanged.



06/22/2023

Rhonda Richards
Licensing Consultant

Date

Approved By:



06/22/2023

Jerry Hendrick
Area Manager

Date