



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

Amber James
Sunrise Of West Bloomfield
7005 Pontiac Trail
West Bloomfield, MI 48323

December 01, 2023

RE: License #: AH630391473
Investigation #: 2024A1011001
Sunrise Of West Bloomfield

Dear Amber James:

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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the licensee's authorized representative and a date.

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. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 (877) 458-2757.

Sincerely,

A handwritten signature in black ink, appearing to read "Andrea Krausmann".

Andrea Krausmann, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street P.O. Box 30664
Lansing, MI 48909
(586) 256-1632
enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH630391473
Investigation #:	2024A1011001
Complaint Receipt Date:	10/25/2023
Investigation Initiation Date:	10/30/2023
Report Due Date:	12/24/2023
Licensee Name:	Welltower OpCo Group LLC
Licensee Address:	4500 Dorr Street Toledo, OH 43615
Licensee Telephone #:	(419) 247-2800
Authorized Representative/ Administrator:	Amber James
Name of Facility:	Sunrise Of West Bloomfield
Facility Address:	7005 Pontiac Trail West Bloomfield, MI 48323
Facility Telephone #:	(248) 738-8101
Original Issuance Date:	12/23/2019
License Status:	REGULAR
Effective Date:	06/23/2023
Expiration Date:	06/22/2024
Capacity:	70
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Two staff assaulted and stole money from Resident A.	No
Additional Findings	Yes

III. METHODOLOGY

10/25/2023	Special Investigation Intake 2024A1011001
10/30/2023	Special Investigation Initiated - Telephone Upon return to office (been on LOA) I called both involved APS workers and left voice mails requesting call back for clarification of information and possible joint investigation.
10/31/2023	Contact - Telephone call made Interviewed APS worker Donna Dennis
10/31/2023	Contact - Document Sent Contact information provided to APS worker Donna Dennis - also, requested phone numbers of others involved in this case.
11/06/2023	Contact - Document Received APS worker Donna Dennis emailed info and scheduled on-site for Wednesday 11/08/2023.
11/08/2023	Inspection Completed On-site Met with APS worker Donna Dennis and her co-worker/trainee Jackie Motley on-site. Interviews conducted, observations made and records reviewed.
11/08/2023	Contact - Telephone call made Interviews conducted with Witness #1 and Staff #3.
11/08/2023	Contact - Telephone call made Called complainant and when interview began the phone hung up. I called back and it went directly to voice mail.
11/08/2023	Contact - Telephone call made Left voice mail for Staff #2 requesting call back.
11/08/2023	Contact - Telephone call received Complainant called back and said this is all "hearsay" that was discussed by Witness #1 and "other staff", who the complainant

	could not be remember specifically. The complainant said none of the staff that the complainant had spoken with had witnessed any of these allegations.
11/08/2023	Contact - Telephone call made Interviewed Resident A's family member.
11/09/2023	Contact - Telephone call made Interviewed licensee's authorized representative/administrator Amber James.
11/09/2023	Exit Conference – Conducted with licensee's authorized representative/administrator Amber James by telephone.

ALLEGATION:

Two staff assaulted and stole money from Resident A.

INVESTIGATION:

On 10/25/2023, I received the allegations via the on-line intake unit, as forwarded by adult protective services (APS). The complainant was not identified and could not be contacted at that time. According to the allegations, Staff #1 and Staff #2 were assaulting Resident A and stole \$180.00 from him. There were no dates and times of the alleged incidents and no witnesses identified. The allegations included, Amber James is in charge of the facility, and she is aware of the information but not reporting it because she is friends with Staff #1.

On 11/08/2023, I went to the facility. The licensee's authorized representative/administrator Amber James was not present on this date. Activity director Patrick Pantloni filled in for her during her absence. Mr. Pantloni was aware of the allegations, as previously investigated by adult protective services and the police. Mr. Pantloni provided documentation from Resident A's record and documentation of Resident A's funds held by the facility. Mr. Pantloni explained that Resident A's family will leave petty cash with the facility's receptionist. The money is kept in a safe and given to Resident A, when he goes on outings with his family and friends. Mr. Pantloni provided a copy of handwritten notes about Resident A's funds. It read as follows:

7/18/23 - 180.00
 Gave 40 to [Resident A]
 7/18/23 – 140.00
 Gave [Resident A's friend] 120.00 per [Resident A's Family Member #1]
 Balance 20.00
 Put back 20.00

10/24 Gave [Resident A's friend] 10.00 for [Resident A]
Balance 30.00
10/27 [Resident A's friend] 10.00
\$40.00 total

Mr. Pantloni explained the documentation such that Resident A's family initially dropped off \$180.00. Monies were then given to Resident A and to his friend whenever the two of them would leave on outings. Although the documentation was cursory, it could be understood and followed. Mr. Pantloni also provided documentation that appointed Family Member (FM) #1, as Resident A's Durable Power of Attorney for finances. FM #1's name was listed as directing the \$120.00 to be given to Resident A's friend on 7/18/2023.

On 11/08/2023, I interviewed Resident A at the facility, along with APS worker, Donna Dennis, Ms. Dennis' co-worker/trainee, Jackie Motley. Unfortunately, given his cognitive difficulties related to dementia, Resident A's responses did not address our questions. Ms. Dennis then provided the name and contact information of the complainant and the one reported witness to the events.

On 11/08/2023, I interviewed the complainant by telephone. The complainant said the allegations were not witnessed but reportedly said by Witness #1. The complainant then said it was "All hearsay".

On 11/08/2023, I interviewed Witness #1 by telephone. Witness #1 denied knowledge of any such allegations and explained that the allegations were untrue and no assaults or stealing of money had been observed. Witness #1 said, "People here like to gossip. . . If something happened, I would say. . . This was definitely made up."

On 11/08/2023, I interviewed Staff #3 by telephone. Staff #3 has worked at the facility for years. Staff #3 denied knowledge of any inappropriate treatment of Resident A and denied knowledge of any money taken from him.

On 11/08/2023, I interviewed Resident A's Family Member (FM) #2 by telephone. FM#2 explained that he routinely sees Resident A at the facility, and he assists FM #1 with Resident A's finances. FM #2 said there are no issues with the care that Resident A receives, and FM #2 disbelieves the allegations. FM #2 affirmed that Resident A's friend being given the monies for outings is appropriate and accounted for. FM #2 said Resident A routinely frequents a specific restaurant, where meals can run over \$100.

APPLICABLE RULE	
R 325.1931	Employees; general provisions.
	(2) A home shall treat a resident with dignity and his or her personal needs, including protection and safety, shall be attended to consistent with the resident's service plan.
ANALYSIS:	The complainant said the allegations were “hearsay” and reportedly said by Staff #1. Staff #1 denied having made such statements nor witnessed the allegations, dismissing all and reporting it to be gossip. Resident A’s family member #2 affirmed the use of Resident A’s money as appropriately distributed to him and his friend for outings.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 11/09/2023, I interviewed the licensee’s authorized representative/administrator Amber James by telephone. Ms. James confirmed that the facility does hold some residents’ funds in a safe, and distributes the monies to those residents, according to each authorize representative’s permission. Ms. James said currently the facility is holding funds for Resident A and Resident B. Funds were being held for other residents, but those residents have since passed away. When asked, Ms. James said she is unaware of whether the licensee has a surety bond approved by the department. I explained that according to documentation on file with licensing, on 12/15/2017, Welltower OpCo Group LLC’s authorized person, Michael J. Stein, signed an attestation that the facility does not hold or handle resident funds. There is no surety bond on file with the department for this facility.

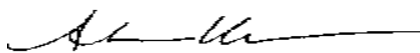
APPLICABLE RULE	
MCL 333.21321	Bond required. [M.S.A. 14.15(21321)]
	(1) Before issuance of a license under this article, the owner, operator, or governing body of the applicant shall give a bond with a surety approved by the department. The bond shall insure the department for the benefit of the residents. The bond shall be conditioned that the applicant do all of the following: (a) Hold separately and in trust all resident funds deposited with the applicant.

	<p>(b) Administer the funds on behalf of a resident in the manner directed by the depositor.</p> <p>(c) Render a true and complete account to the resident, the depositor, and the department when requested.</p> <p>(d) Account, on termination of the deposit, for all funds received, expended, and held on hand.</p> <p>(2) The bond shall be in an amount equal to not less than 1-1/4 times the average balance of resident funds held during the prior year. The department may require an additional bond or permit filing of a bond in a lower amount, if the department determines that a change in the average balance has occurred or may occur. An applicant for a new license shall file a bond in an amount which the department estimates as 1-1/4 times the average amount of funds which the applicant, upon issuance of the license, is likely to hold during the first year of operation.</p>
ANALYSIS:	Contrary to a signed 12/15/2017 attestation letter from Welltower OpCo Group LLC's authorized person, the facility is currently holding resident funds and has not given a bond with a surety approved by the department.
CONCLUSION:	VIOLATION ESTABLISHED

On 11/09/2023, I conducted an exit conference with the licensee's authorized representative/administrator Amber James by telephone.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, it is recommended that the status of the license remain unchanged.



11/09/2023

Andrea Krausmann
Licensing Staff

Date

Approved By:



11/29/2023

Andrea L. Moore, Manager
Long-Term-Care State Licensing Section

Date