STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

GRETCHEN WHITMER
GOVERNOR

MARLON I. BROWN, DPA
ACTING DIRECTOR

December 15, 2023

Lisa Cavaliere-Mancini
Windemere Park Assisted Living I
31900 Van Dyke Avenue
Warren, MI 48093

RE: License #: AH500315395
Investigation #: 2024A1019019

Dear Licensee:

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. Failure to submit an acceptable corrective action plan will result in disciplinary action. 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 authorized representative and a date.

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) 284-9730.

Sincerely,

Elizabeth Gregory-Weil, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 347-5503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH500315395
Investigation #:	2024A1019019
Complaint Receipt Date:	11/29/2023
Investigation Initiation Date:	12/01/2023
Report Due Date:	01/29/2024
Licensee Name:	Van Dyke Partners LLC
Licensee Address:	30078 Schoenherr Rd., Suite 300 Warren, MI 48088
Licensee Telephone #:	(586) 563-1500
Administrator:	Shelly DeKay
Authorized Representative:	Lisa Cavaliere- Mancini
Name of Facility:	Windemere Park Assisted Living I
Facility Address:	31900 Van Dyke Avenue Warren, MI 48093
Facility Telephone #:	(586) 722-2605
Original Issuance Date:	11/15/2012
License Status:	REGULAR
Effective Date:	03/02/2023
Expiration Date:	03/01/2024
Capacity:	90
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Resident A’s personal hygiene needs are not being met.	Yes
Additional Findings	Yes

III. METHODOLOGY

11/29/2023	Special Investigation Intake 2024A1019019
12/01/2023	Comment Complaint was forwarded to LARA from APS. APS denied the referral and is not investigating.
12/01/2023	Special Investigation Initiated - Telephone Called complainant to conduct interview, left voicemail requesting return phone call.
12/07/2023	Contact - Telephone call made Second call placed to complainant- left voicemail.
12/07/2023	Inspection Completed On-site
12/07/2023	Inspection Completed-BCAL Sub. Compliance

ALLEGATION:

Resident A’s personal hygiene needs are not being met.

INVESTIGATION:

On 11/29/23, the department received an intake alleging that Resident A was observed to be disheveled, wearing dirty clothing and having body odor. The complainant had concerns that his personal care needs are not being met.

On 12/7/23, I conducted an onsite inspection. I interviewed administrator Shelly DeKay and Employee 1 at the facility. Ms. DeKay described Resident A is “failing to

thrive". Employee 1 reported that he lacks motivation, will hardly leave his room and minimally requires staff cueing and prompting to complete activities of daily living (ADL). Ms. DeKay and Employee 1 reported that Resident A does not like staff to help him and often refuses care and medication. Ms. DeKay reported that there have been concerns over Resident A's hygiene, which was recently addressed during a staff in-service on 11/27/23.

While onsite, Resident A's service plan was reviewed and it instructs that he needs standby assistance from staff with personal care/hygiene related tasks. Ms. DeKay and Employee 1 reported that there is a shower and laundry schedule in place, which was also reviewed. I observed that Resident A is assigned to shower and have laundry completed every Monday on the afternoon shift. Ms. DeKay and Employee 1 reported that staff are to complete an ADL log to demonstrate that care tasks are completed and are also to complete a skin assessment document every time Resident A bathes. I was provided the ADL log and skin assessment forms for the previous six-week period. Facility staff documented bathing activities occurred on the following dates during the timeframe reviewed: 12/4/23, 11/18/23 and 11/11/23 and facility staff documented one refusal on 11/27/23. I observed that Resident A's ADL log was incomplete. There were repeated blank entries, and in some cases, there were full days that lacked any documentation at all. Ms. DeKay reported that the expectation is that staff complete the logs during each shift and confirmed that Resident A was not hospitalized or on leave of absence during the timeframe reviewed so there shouldn't be gaps in the log.

APPLICABLE RULE	
R 325.1933	**Personal care of residents.**
	(2) A home shall afford a resident the opportunity and instructions when necessary for daily bathing, oral and personal hygiene, daily shaving, and hand washing before meals. A home shall ensure that a resident bathes at least weekly and more often if necessary.
ANALYSIS:	Facility staff could not demonstrate that personal care tasks, including weekly bathing were completed.
CONCLUSION:	**VIOLATION ESTABLISHED**

ADDITIONAL FINDINGS:

INVESTIGATION:

Ms. DeKay and Employee 1 both reported that staff administer Resident A's medications to him and acknowledged that he often refuses medications. Resident A's service plan does not identify if Resident A requires staff assistance with medications and lacks any instruction for staff on how to address or combat his frequent medication refusals.

APPLICABLE RULE	
R 325.1932	**Resident medications.**
	(1) A service plan must identify prescribed medication to be self-administered or managed by the home.
For Reference: R 325.1901	**Definitions.**
	(t) "Service plan" means a written statement prepared by the home in cooperation with a resident, the resident's authorized representative, or the agency responsible for a resident's placement, if any, that identifies the specific care and maintenance, services, and resident activities appropriate for the individual resident's physical, social, and behavioral needs and well-being, and the methods of providing the care and services while taking into account the preferences and competency of the resident.
ANALYSIS:	Resident A's service plan does not contain the information required in this rule.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon approval of an acceptable corrective action plan, I recommend no changes to the status of the license at this time.

12/11/2023

Elizabeth Gregory-Weil Date
Licensing Staff

Approved By:

12/14/2023

Andrea Moore Date
Area Manager