



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

January 18, 2024

Daniela Popaj
Bella Vita of Hartland, LLC
Suite A
2430 E Hill Rd
Grand Blanc, MI 48439

RE: License #: AH470393393
Serene Gardens of Hartland
2799 Bella Vita Dr.
Hartland, MI 48353

Dear Licensee:

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 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 877-458-2757.

Sincerely,

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 #: AH470393393

Licensee Name: Bella Vita of Hartland, LLC

Licensee Address: Suite A
2430 E Hill Rd
Grand Blanc, MI 48439

Licensee Telephone #: (810) 603-7228

Authorized Representative: Daniela Popaj

Administrator/Licensee Designee: Megan Rheingans

Name of Facility: Serene Gardens of Hartland

Facility Address: 2799 Bella Vita Dr.
Hartland, MI 48353

Facility Telephone #: (810) 746-7800

Original Issuance Date: 08/19/2020

Capacity: 79

Program Type: AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/17/2024

Date of Bureau of Fire Services Inspection if applicable: 10/2/2023, 10/4/2023

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 1/17/2024

No. of staff interviewed and/or observed 9
No. of residents interviewed and/or observed 18
No. of others interviewed One Role Careline Hospice Nurse

- 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: CAP dated 3/30/2023 to Renewal Licensing Study Report (LSR) dated 3/23/2022: R 325.1923(2), R 325.1922(7), R 325.1953(1), R 325.1964(9)(b)
- Number of excluded employees followed up? Three N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1931 Employees; general provisions.

(3) The home shall designate 1 person on each shift to be supervisor of resident care during that shift. The supervisor of resident care shall be fully dressed, awake, and on the premises when on duty.

Review of the January 2024 staff schedule revealed it lacked designation of a supervisor of resident care for each shift.

VIOLATION ESTABLISHED.

R 325.1932 Resident medications.

(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.

Review of Resident A's December 2023 and January 2024 medication administration records (MARs) revealed the scheduled medication Acetaminophen was left blank on 12/5/2023 at 5:00 PM, therefore it could not be confirmed if the medication was administered or not. Additionally, the MARs read Resident A was prescribed Haloperidol 1 mg, take one tablet by mouth every six hours as needed in which lacked written instructions for staff describing the circumstances or reasons to necessitate administration of the as needed medications.

Review of Resident B's December 2023 and January 2024 MARs revealed scheduled medication Brimonidine/Timolol was left blank on 12/4/2023 at 4:00 PM, therefore it could not be confirmed if the medication was administered or not. Additionally, the MARs read Resident B was prescribed Albuterol Sulfate, inhale two puffs by mouth every six hours as needed which lacked written instructions for staff describing the circumstances or reasons to necessitate administration of the as needed medication.

Review of Resident C's December 2023 and January 2024 MARs revealed he was prescribed the following as needed medications Albuterol Sulfate, Alprazolam, Artificial tears, Cooling pain relief, and Nystatin which lacked written instructions for staff describing the circumstances or reasons to necessitate administration of the as needed medications. Additionally, Resident C was prescribed three as needed medications for pain Acetaminophen, Ibuprofen and Morphine Sulfate in which lacked sufficient instructions to determine whether the medications were to be given together, separately, in tandem, or one instead of the other according to the severity of pain. Furthermore, Resident C's prescribed Lidocaine patch was documented as unavailable for several dates during December 2023 in which it could not be confirmed why it was not administered as prescribed.

Review of Resident D's December 2023 and January 2024 MARs revealed she was prescribed as Lorazepam as needed in which lacked written instructions for staff describing the circumstances or reasons to necessitate administration of the as needed medication. Resident D's January 2024 MAR read she was prescribed two medications Acetaminophen and Morphine Sulfate for pain in which it lacked sufficient instructions to determine whether the medications were to be given together, separately, in tandem, or one instead of the other according to the severity of pain.

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.

Observation of the posted therapeutic and special diet menus including diabetic, pureed, and mechanical soft which revealed they lacked change or modification to the menus consistent with the diet served. For example, on 1/15/2024, the pureed diet menu read residents prescribed this diet were served tuna salad croissant and potato chips.

REPEAT VIOLATION ESTABLISHED.

[For reference, see Renewal LSR dated 3/23/2022, CAP dated 3/30/2023].

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.

Interview with Employee #1 revealed the meal census did not record the amount food used and served to residents.

VIOLATION ESTABLISHED.

R 325.1964 Interiors.

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

(a) A room shall be provided with a type and amount of ventilation that will control odors and contribute to the comfort of occupants.

(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.

Observation of the assisted living and memory care soiled linen rooms revealed they lacked ventilation to control odors.

REPEAT VIOLATION ESTABLISHED.

[For reference, see Renewal LSR dated 3/23/2022, CAP dated 3/30/2023].

R 325.1976 Kitchen and dietary.

(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored,

prepared, transported, and served so as to be safe for human consumption.

Observation of the kitchen refrigerator revealed condiments such as but not limited to ranch dressing, Italian dressing, barbeque sauce, and mayonnaise, lacked expiration dates.

VIOLATION ESTABLISHED.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and receipt of payment of licensed bed fee, renewal of the license is recommended.

Jessica Rogers

01/18/2024

Date

Licensing Consultant