

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

March 13, 2024

Ellen Davis Trilogy Health Care of Clinton, LLC 303 N. Hurstbourne Pkwy Louisville, KY 40222-5185

> RE: License #: AH330336309 Investigation #: 2024A1021041 The Willows at East Lansing

Dear Ellen Davis:

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 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 (517) 284-9730.

Sincerely,

KinveryHost

Kimberly Horst, Licensing Staff Bureau of Community and Health Systems 611 W. Ottawa Street Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

1:	41100000000
License #:	AH330336309
Investigation #:	2024A1021041
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Complaint Receipt Date:	02/28/2024
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Investigation Initiation Date:	02/29/2024
Report Due Date:	04/29/2024
Licensee Name:	Trilogy Health Care of Clinton, LLC
Licensee Address:	#2
Licensee Address.	
	303 N. Hurstbourne Pkwy
	Louisville, KY 40222-5185
Licensee Telephone #:	(517) 203-4042
Administrator/ Authorized	Ellen Davis
Representative:	
Name of Facility:	The Willows at East Lansing
Facility Address:	3500 Coolidge Road
	East Lansing, MI 48823
	U.
Facility Telephone #:	(517) 203-4042
Original Jacuaras Data:	02/12/2014
Original Issuance Date:	02/13/2014
License Status:	REGULAR
Effective Date:	09/23/2023
Expiration Date:	09/22/2024
Capacity:	36
Program Type:	AGED
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II. ALLEGATION(S)

Violation -stablished?

	Established?
Facility has insufficient staffing.	Yes
Additional Findings	No

III. METHODOLOGY

02/28/2024	Special Investigation Intake 2024A1021041
02/29/2024	Special Investigation Initiated - Letter email sent to complainant for additional information
03/04/2024	Inspection Completed On-site
03/06/2024	Contact - Telephone call made interviewed SP1
03/07/2024	Contact - Telephone call made interviewed SP2
03/13/2024	Exit Conference

ALLEGATION:

Facility has insufficient staffing.

INVESTIGATION:

On 02/28/2024, the licensing department received a complaint with allegations there is insufficient staff at the facility. The complainant did not provide specific dates or shifts.

On 02/29/2024, I contacted the complainant for additional information. The complainant did not respond.

On 03/04/2024, I interviewed administrator Ellen Davis at the facility. Ms. Davis reported that the facility is currently hiring for all shifts but there is sufficient staff at the facility. Ms. Davis reported the facility currently has 26 residents. Ms. Davis reported on first shift there is one medication technician, one caregiver, and the assisted living director. Ms. Davis reported the assisted living director will assist with

medications and other care tasks, if needed. Ms. Davis reported on second shift there is one medication technician and one caregiver. Ms. Davis reported on third shift there is one caregiver or one medication technician. Ms. Davis reported if additional assistance is required on third shift, the caregiver can request assistance from the nurse on the health center side. Ms. Davis reported the facility has increased their census and the workload has increased. Ms. Davis reported the employees are only responsible for caregiving and are not responsible for housekeeping, janitor, or culinary tasks. Ms. Davis reported if there is an unexpected staff shortage management will call staff to come in, management will work the floor, or a staff member will be pulled from the health center side.

On 03/04/2024, I interviewed staff person 1 (SP1). SP1 reported she typically works first shift. SP1 reported typically there are two employees on first shift but on 03/04, there was only one employee for about one hour. SP1 reported the facility has 26 residents and two residents are a two person assist, all require medication administration, and 12 residents require some level of assistance. SP1 also reported the weekends are difficult because there is no culinary staff to assist with transporting residents to the dining room. SP1 reported tasks are accomplished but not always in a timely manner.

On 03/06/2024, I interviewed SP2 by telephone. SP2 reported the facility has 26 residents. SP1 reported there is one sit-stand transfer that requires two person assist. SP2 reported there is one resident that requires a Hoyer lift, but the resident is in bed all day. SP2 reported there is one resident with a catheter, one resident that calls for assistance frequently, and 14 residents require some level of assistance. SP2 reported there have been five new admissions in the past week. SP2 reported the facility is considering increasing staff during the busy afternoon hours. SP2 reported when the facility has an unexpected staff shortage, she calls other employees or an employee from the health center side will work.

On 03/07/2024, I interviewed SP3 by telephone. SP3 reported she typically works third shift. SP3 reported she works the floor by herself. SP3 reported if she requires additional assistance, she must leave the unit and go to the health center side to find the nurse. SP3 reported she tries to find the nurse as quickly as possible so that she can return to the unit. SP3 reported if a resident requires a PRN medication, she must find the health center nurse. SP3 reported there is a resident that requires two person assist to be changed and the health center nurse must come over to assist. SP3 reported it is very difficult to attend to all 26 residents in a timely manner.

I reviewed the staff schedule for 02/25-03/03. The schedule revealed on third shift only one employee was scheduled. The schedule revealed on 02/25, 02/26, 2/29, 3/1, and 3/2 the employee that was scheduled was an aid and not a medication technician. The schedule revealed on 02/26, 02/27, 02/28, 02/29, and 03/01 the assisted living director worked the floor due to a staff shortage. I reviewed Resident A's service plan. The service plan revealed Resident A was a two person assist Hoyer Lift and required PRN pain medication. I reviewed Resident B's service plan and the service plan revealed Resident B required PRN medication.

APPLICABLE RULE		
R 325.1931	Employees; general provisions.	
	(5) The home shall have adequate and sufficient staff on duty at all times who are awake, fully dressed, and capable of providing for resident needs consistent with the resident service plans.	
ANALYSIS:	Interviews conducted, review of documentation, and review of service plans revealed there is one resident that requires two person assist and two residents have PRN medications. Review of staff schedule revealed at times there is only one staff person scheduled to work the unit and that staff person is not always a medication technician. Additionally, if the assigned staff on third shift needs assistance, the staff must leave the unit to obtain additional staff leaving the unit unsupervised.	
CONCLUSION:	VIOLATION ESTABLISHED	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the status of the license.

KinveryHost

03/11/2024

Kimberly Horst Licensing Staff Date

Approved By:

03/11/2024

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