



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 18, 2024

Catherine Reese
Vibrant Life Senior Living, OC Temperance LLC
5720 Williams Lake Road
Waterford, MI 48329

RE: License #: AL580355938
Investigation #: 2024A0778020
Jackman Lodge

Dear Ms. Reese:

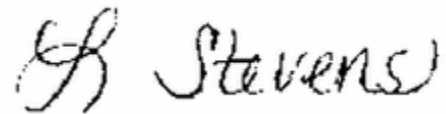
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 responsible party 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 (313) 456-0380.

Sincerely,

A handwritten signature in black ink that reads "LaKeitha Stevens". The signature is written in a cursive, flowing style.

LaKeitha Stevens, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 949-3055

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL580355938
Investigation #:	2024A0778020
Complaint Receipt Date:	02/21/2024
Investigation Initiation Date:	02/26/2024
Report Due Date:	04/21/2024
Licensee Name:	Vibrant Life Senior Living, OC Temperance LLC
Licensee Address:	5720 Williams Lake Road Waterford, MI 48329
Licensee Telephone #:	(734) 847-3217
Administrator:	Catherine Reese
Licensee Designee:	Catherine Reese
Name of Facility:	Jackman Lodge
Facility Address:	7342 Jackman Rd Temperance, MI 48182
Facility Telephone #:	(734) 847-3217
Original Issuance Date:	05/09/2014
License Status:	REGULAR
Effective Date:	11/09/2022
Expiration Date:	11/08/2024
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Not enough staff on duty. No lifting aides available.	Yes

III. METHODOLOGY

02/21/2024	Special Investigation Intake 2024A0778020
02/26/2024	Special Investigation Initiated - Telephone Telephone call made to complainant. I left a message requesting a return call.
02/26/2024	Contact - Document Sent Email sent to the complainant.
02/29/2024	Inspection Completed On-site Unannounced onsite inspection. Interviews with Staff Lasha Riccardi, Meagan Richards, Jordan Morgan and licensee designee Catherine Reese. Face to face interviews with Resident A.
02/29/2024	Contact - Document Received Received Residents Assessment Plans and Guardian info.
04/02/2024	Contact - Telephone call made. Telephone interview with Guardian B-F.
04/16/2024	Exit Conference Telephone exit conference with Catherine Reese licensee designee.
04/16/2024	Inspection Completed-BCAL Sub. Compliance

ALLEGATION: Not enough staff on duty. No lifting aides available.

INVESTIGATION: On 02/24/2024, I completed an unannounced onsite inspection. I interviewed Staff, Lasha Riccardi and Meagan Richards, Home Manager, Jordan Morgan, licensee designee, Catherine Reese and Resident A.

During my interview with Meagan Richards, she indicated its generally 1-2 staff on shift but if additional assistance is needed, they can pull staff from another facility. She stated the other facility is across the lot and close in proximity. Meagan indicated many of the residents have ambulatory issues and there are no lifting aides in the facility.

According to Lasha Riccardi, the facility has 1-2 staff on shift. She indicated there are 8 residents and approximately 5 of them have ambulatory issues. She stated there are no lifting aides in the facility.

While onsite Catherine Reese, licensee designee and Jordan Morgan, home manager came into the facility. Ms. Reese stated the facility has 1-2 depending on the shift. She stated there are 8 residents and 6 with ambulatory issues. Mr. Morgan indicated he will assist if needed but his primary role is office manager. I was informed there are no lifting aides in the facility. I requested copies of guardian contact information and residents' assessment plans.

I completed an interview with Resident A. He indicated most times its 1 person on shift and sometimes at night there is no one.

On 02/24/2024, I received copies of guardian contact information and resident assessment plans. Per resident plans 7 of the 8 residents require full assistance with toileting, bathing, grooming, dressing and personal hygiene. In addition, 6 of the 8 residents require assistance ambulating.

On 04/02/24, I made telephone calls to Guardians A-F. Guardian B had no staffing concerns. Guardian C had concerns because there is generally 1 staff on shift during the midnight shift. Guardian C indicated Resident C is falling more frequently during that shift and it's believed to be related to the need for more staffing. Guardian D stated there is generally 1 staff on shift and that does not appear to be sufficient staffing. Guardian D stated a resident has previously fallen in the facility while 1 staff on was on shift and that staff was unable to get him up. According to Guardian D staff had to call for assistance from another facility. Guardian E indicated 1 staff is generally on shift and does not feel that is sufficient staffing to meet the needs of the residents. Guardian F had no issues with staffing.

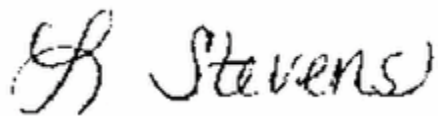
On 04/16/2024, I completed a telephone exit conference with licensee designee, Catherine Reese. She was informed this complaint would be substantiated. I informed Ms. Reese 1 staff per shift is not sufficient staffing. Out of the 8 residents, 6

have issues ambulating and 7 require full assistance with toileting, bathing, grooming, dressing and personal hygiene. Ms. Reese had no questions or concerns.

APPLICABLE RULE	
R 400.15206	Staffing requirements.
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.
ANALYSIS:	<p>Licensee designee, Catherine Reese, does not always have sufficient staff on duty for personal care and protection of the residents. There are shifts in which there is 1 staff on duty. 1 staff is not sufficient to meet the needs of the residents. Per resident assessments plans, 6 of the 8 residents require total assistance with toileting, bathing, grooming, dressing and personal hygiene and 7 of the 8 residents have issues ambulating.</p> <p>Per Resident A there are times when no staff is present during the midnight shift.</p> <p>Per interviews with the guardians, 3 of the 5 guardians expressed concerns regarding staffing. Guardian C had concerns because there is generally 1 staff on shift during the midnight shift. Guardian C indicated Resident C is falling more frequently during that shift and it's believed to be related to the need for more staffing. Guardian D stated there is generally 1 staff on shift and that does not appear to be sufficient staffing. Guardian D indicated a resident has previously fallen in the facility while 1 staff on was on shift and that staff was unable to get him up. According to Guardian D staff had to call for assistance from another facility. Guardian E indicated 1 staff is generally on shift and does not feel there is sufficient staffing to meet the needs of the residents.</p>
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend the status of the license remain unchanged.



04/18/2024

LaKeitha Stevens
Licensing Consultant

Date

Approved By:



04/18/2024

Ardra Hunter
Area Manager

Date