



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

June 27, 2024

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

RE: License #:	AH330336314 <b>The Legacy at The Willows Legacy Bldg 3510 Coolidge Rd East Lansing, MI 48823</b>
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Dear Ellen Davis:

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 home for the aged 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 (517) 284-9730.

Sincerely,

*Kimberly Horst*  
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  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH330336314
<b>Licensee Name:</b>	Trilogy Health Care of Clinton, LLC
<b>Licensee Address:</b>	#2 303 N. Hurstbourne Pkwy Louisville, KY 40222-5185
<b>Licensee Telephone #:</b>	(517) 203-4042
<b>Authorized Representative/ Administrator</b>	Ellen Davis
<b>Name of Facility:</b>	The Legacy at The Willows
<b>Facility Address:</b>	Legacy Bldg 3510 Coolidge Rd East Lansing, MI 48823
<b>Facility Telephone #:</b>	(517) 203-4042
<b>Original Issuance Date:</b>	02/13/2014
<b>Capacity:</b>	35
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/25/2024

Date of Bureau of Fire Services Inspection if applicable: 01/16/2024

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 06/26/2024

No. of staff interviewed and/or observed 5  
No. of residents interviewed and/or observed 15  
No. of others interviewed 0 Role N/A

- 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.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
Disaster plans reviewed and staff interviewed.
- 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: 2023A1021090: CAP dated 10/23/2023:R 325.1921(1), 1922(5)
- Number of excluded employees followed up? N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
<b>MCL 333.20201</b>	<b>Policy describing rights and responsibilities of patients or residents; adoption; posting and distribution; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights; definitions.</b>
	<b>(1) A health facility or agency that provides services directly to patients or residents and is licensed under this article shall adopt a policy describing the rights and responsibilities of patients or residents admitted to the health facility or agency. Except for a licensed health maintenance organization, which shall comply with chapter 35 of the insurance code of 1956, 1956 PA 218, MCL 500.3501 to 500.3580, the policy shall be posted at a public place in the health facility or agency and shall be provided to each member of the health facility or agency staff. Patients or residents shall be treated in accordance with the policy.</b>
Inspection of the facility revealed Resident Rights and Responsibilities was not posted.	
<b>R 325.1921</b>	<b>Governing bodies, administrators, and supervisors.</b>
	<b>(1) The owner, operator, and governing body of a home shall do all of the following: (b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</b>
<b>For Reference: Definitions.</b>	<b>(p) "Protection" means the continual responsibility of the home to take reasonable action to ensure the health, safety, and well-being of a resident as indicated in the resident's service plan, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation while on the premises, while under the supervision of the home or an agent or employee of the home, or when the resident's service plan states that the resident needs continuous supervision.</b>

Inspection of the facility revealed Resident B had bedrails attached to his bed. I reviewed Resident B's records and found no physician orders for the bedside assistive devices. The service plan for Resident B lacked information about the devices related to purpose of use, staff responsibility to ensure devices were safe, and ongoing maintenance schedules. For instance, instruction regarding whether the resident could summon staff independently for help or require monitoring on a predetermined frequency was not defined. In addition, it lacked what staff were responsible for, and what methods were to be used in determining if the device posed a risk.

<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<b>(5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.</b>

Review of Resident A's service plan read, "*Resident has no pain.*" However, review of Resident A's MAR revealed Resident A was prescribed as needed pain medication. In addition, Resident C is active with hospice services, and this was not reflected in the service plan. The facility did not appropriately update resident's service plan to reflect the current care needs of the residents.

<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<p><b>(7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR ?Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005? (<a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a>) , Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents.</b></p>

Review of facility documentation revealed the facility is not completing the annual TB risk assessment.

<b>R 325.1968</b>	<b>Toilet and bathing facilities.</b>
	<b>(4) A resident toilet room or bathroom shall not be used for storage or housekeeping functions.</b>
Inspection of the facility revealed the spa bathroom had multiple durable medical equipment devices such as shower chairs, walkers, and commodes.	
<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(3) Hazardous and toxic materials shall be stored in a safe manner.</b>
Inspection of the facility revealed cleaning supplies were located unlocked and easily accessible to the cognitively impaired population.	

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

*Kimberly Host*

06/26/2024

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Licensing Consultant

Date