



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 30, 2024

Megan Burch  
AH Kentwood Subtenant LLC  
Ste 1600  
1 Towne Sq  
Southfield, MI 48076

RE: License #: AL410397696  
Investigation #: 2024A0467051  
AHSL Kentwood Fieldstone

Dear Ms. Burch:

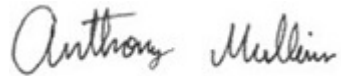
Attached is the Special Investigation Report for the above referenced facility. Due to the violation identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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 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 (616) 356-0183.

Sincerely,

A handwritten signature in cursive script that reads "Anthony Mullins".

Anthony Mullins, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL410397696
<b>Investigation #:</b>	2024A0467051
<b>Complaint Receipt Date:</b>	07/18/2024
<b>Investigation Initiation Date:</b>	07/23/2024
<b>Report Due Date:</b>	09/16/2024
<b>Licensee Name:</b>	AH Kentwood Subtenant LLC
<b>Licensee Address:</b>	Ste 1600 1 Towne Sq Southfield, MI 48076
<b>Licensee Telephone #:</b>	(248) 203-1800
<b>Administrator:</b>	Megan Burch
<b>Licensee Designee:</b>	Megan Burch
<b>Name of Facility:</b>	AHSL Kentwood Fieldstone
<b>Facility Address:</b>	5980 Eastern Ave SE. Kentwood, MI 49508
<b>Facility Telephone #:</b>	(616) 455-1357
<b>Original Issuance Date:</b>	01/22/2019
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	07/22/2023
<b>Expiration Date:</b>	07/21/2025
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Resident's do not have access to ice water after 7:00 pm daily	Yes

## III. METHODOLOGY

07/18/2024	Special Investigation Intake 2024A0467051
07/23/2024	Inspection Completed On-site
07/23/2024	Special Investigation Initiated - On Site
07/23/2024	Exit conference completed Onsite with licensee designee, Megan Burch
07/30/2024	APS Referral

**ALLEGATION:** Resident's do not have access to ice water after 7:00 pm daily.

**INVESTIGATION:** On 7/18/24, I received a BCAL online complaint stating that residents are not being provided with ice water after 7:00 pm daily. The complaint stated that the facility has one ice maker that is locked in the kitchen, which staff does not have access to after 7:00 pm. The complaint alleged that this issue was brought to the attention of licensee designee, Megan Burch, and she reportedly stated, "old people don't like ice water, they like warm water." The issue has yet to be addressed.

On 7/23/24, I made an unannounced onsite investigation at the facility. Upon arrival, licensee designee, Ms. Burch greeted me at the door and allowed entry into the facility. Ms. Burch denied the allegation while adding that residents always have access to ice water. Ms. Burch also denied stating that old people like warm water. Ms. Burch stated that this complaint stems from a now ex-employee who was recently terminated. The ex-employee reportedly told Ms. Birch that she would be filing a complaint with the State of Michigan regarding her concerns. Ms. Birch confirmed that the kitchen is locked after 7:00 pm, which is where the ice maker is. Ms. Birch stated that the code to get into the kitchen is the same code to gain access to the facility, which staff should have.

Ms. Birch stated that with the increased heat/humidity this week, residents have been served popsicles in addition to ice water. Ms. Burch stated that residents are given ice water daily during mealtimes, medication passes, and whenever they request it.

After speaking to Ms. Burch, I spoke to staff member, Linda Guyton. Ms. Guyton stated that she primarily works first shift, which is scheduled 7:00 am to 3:00 pm. Ms. Guyton also stated that she occasionally works second shift, which is scheduled from 3:00 pm to 11:00 pm. When asked about residents not having access to ice water after 7:00 pm, Ms. Guyton stated “this is true.” Ms. Guyton shared that within the last week, a family member of one of the residents requested ice water for their loved one. Staff was unable to provide the resident with ice water due to the ice machine being locked in the kitchen after 7:00 pm daily. Due to not having access to ice water after 7:00 pm, one of the resident’s sons bought mini water bottles and placed them in the resident’s mini fridge as needed. Ms. Guyton stated that the code to enter the facility is not the same code to access the kitchen. Ms. Guyton stated that she knows this to be true as she has tried to gain access to the ice maker in the kitchen after 7:00 pm and the code did not work. Ms. Guyton shared that management is aware of this issue. However, the issue has yet to be addressed.

After speaking to Ms. Guyton, I spoke to AFC staff member, Samantha Pratt. Ms. Pratt stated that she works first and second shift. Ms. Pratt denied the allegation and stated that residents always have access to ice water. Ms. Pratt stated that residents are served water during mealtimes, medication passes, and whenever they request it. Ms. Pratt confirmed that the kitchen is locked around 7:00 or 7:30 pm daily when the kitchen staff leave for the day. When the kitchen staff leaves for the night, staff fill a water pitcher with ice water to give to residents as needed. Ms. Pratt denied there being a time that she was unable to provide a resident with ice water, despite the kitchen being locked after 7:00 pm.

Ms. Pratt was asked about the door code to the kitchen. Ms. Pratt stated that the door codes are changed monthly, and the door code to enter the building is not the same code to the kitchen. To confirm this, Ms. Pratt entered different codes to the main door and the kitchen door. Ms. Pratt stated that she did not know the code to the kitchen door, but she was able to guess it while I was present.

Due to the facility housing memory care residents, none of the residents were interviewed. After speaking to Ms. Pratt, I spoke to Resident A’s wife regarding the allegation. This is due to Resident A’s wife being at the facility daily from approximately 11:15 am to 4:00 pm. Resident A’s wife stated that her husband has never asked for water. However, she confirmed that Resident A is served water daily with every meal. Resident A’s wife shared that staff would get her husband ice water if he asked. Resident A’s wife spoke highly of Ms. Guyton and Ms. Sanders. Despite Resident A’s wife having unrelated concerns at the facility, she stated that staff members Ms. Sanders and Ms. Guyton address them for her.

I then spoke to assistant wellness director, Kanisha Sanders and regional wellness director, Diana Head. Both Ms. Sanders and Ms. Heard confirmed that the allegations are true, and this has been an issue since they both started their role. Ms. Sanders stated that she has text messages from staff members dating back to April 2024 complaining about not having access to fresh ice water for residents. Ms.

Sanders stated that after the kitchen staff leaves at 7:00 pm, staff members are unable to access ice for residents due to the kitchen being locked. Ms. Sanders stated that she was told by Ms. Burch that the kitchen is locked to prevent staff members from stealing. Ms. Sanders stated that upper management is aware, and she was told that they are unable to afford another ice maker.

I then returned to Ms. Burch's office and conducted an exit conference. Ms. Burch is aware that due to multiple staff members confirming the allegation to be true, the facility is being cited. Ms. Burch is aware that a corrective action plan is due within 15 days of receipt of this report.

<b>APPLICABLE RULE</b>	
<b>R 400.15305</b>	<b>Resident protection.</b>
	<b>(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.</b>
<b>ANALYSIS:</b>	Ms. Guyton, Ms. Sanders, and Ms. Head all confirmed that residents don't have access to ice water after 7:00 pm. All staff members interviewed confirmed that the kitchen is locked after 7:00 pm, which is where the ice maker is located. Ms. Guyton and Ms. Pratt denied having access to the ice maker after 7:00 pm. Therefore, there is a preponderance of evidence to support the allegation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, I recommend no change to the current license status.

*Anthony Mullins*

07/30/2024

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Anthony Mullins, Licensing Consultant      Date

Approved By:

*Jerry Hendrick*

07/30/2024

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Jerry Hendrick, Area Manager      Date

