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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

January 3, 2025

Carrie Dextrom
Union Square AFC Home, LLC
4045 N. Seeley Rd.
Manton, MI 49663

RE: License #: AL570403996 Investigation #: 2025A0870011

Magnolia Care Estates AFC home

Dear Carrie Dextrom:

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 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 (231) 922-5309.

Sincerely,

Bruce A. Messer, Licensing Consultant

Brene C. Klessen

Bureau of Community and Health Systems

Suite 11

701 S. Elmwood

Traverse City, MI 49684

(231) 342-4939

enclosure

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

### I. IDENTIFYING INFORMATION

License #:	AL570403996
Investigation #:	2025A0870011
Complaint Receipt Date:	12/16/2024
Investigation Initiation Date:	12/19/2024
Report Due Date:	02/14/2025
Licensee Name:	Union Square AFC Home, LLC
Licensee Address:	4045 N. Seeley Rd.
	Manton, MI 49663
Licensee Telephone #:	(231) 878-8352
Administrator:	Carrie Dextrom
Licensee Designee:	Carrie Dextrom
Name of Facility:	Magnolia Care Estates AFC home
Facility Address:	2439 E Houghton Lake Road
	Lake City, MI 49651
- ··· - · · · · · · · · · · · · · · · ·	(004) 000 0405
Facility Telephone #:	(231) 328-2105
Oniminal Issues as Date:	00/04/0000
Original Issuance Date:	09/21/2020
License Status:	REGULAR
License Status:	REGULAR
Effective Date:	03/21/2023
Effective Date.	03/21/2023
Expiration Data:	02/20/2025
Expiration Date:	03/20/2025
Canacity	20
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED, MENTALLY ILL
Frogram Type.	DEVELOPMENTALLY DISABLED, AGED
	DEVELORIMENTALLI DISABLED, AGED

### II. ALLEGATION(S)

### Violation Established?

Residents are not served enough food.	No
There is insufficient heat to keep the residents warm.	Yes

### III. METHODOLOGY

12/16/2024	Special Investigation Intake 2025A0870011
12/17/2024	APS Referral This referral came from MDHHS APS Centralized Intake unit.
12/19/2024	Special Investigation Initiated - On Site Interviews conducted with staff and residents.
12/23/2024	Contact - Telephone call made Telephone interview with Licensee Designee Carrie Dextrom.
12/23/2024	Inspection Completed-BCAL Sub. Compliance
12/23/2024	Exit Conference Completed with Licensee Designee Carrie Dextrom.

### **ALLEGATION:** Residents are not served enough food.

**INVESTIGATION:** On December 19, 2024, I conducted an unannounced on-site special investigation at the Magnolia Care Estates AFC home. I met with staff member Courtney Mizga and informed her of the above allegations. Ms. Mizga stated that she feels that the facility has "no issues with food at all." She noted she feels that all of the residents are fed a well-balanced and nutritious diet and all of the residents "get enough to eat." Ms. Mizga stated that typically enough food is prepared, and residents can have a second helping if they desire.

Ms. Mizga showed me the current week's menu plan along with menu plans for the past several months. I reviewed the menus and noted that they contained a listing of food items containing proteins, fruits and vegetables.

Ms. Mizga accompanied me into the facility kitchen and food pantry areas. I observed a large variety of food items stored in the facility refrigerators, freezers and pantry. I noted a variety of proteins, vegetables and fruit.

On December 19, 2024, I conducted a private interview, at the facility, with Resident A. Resident A stated he "gets enough food to eat, no problem with the food at all."

On December 19, 2024, I conducted a private interview, at the facility, with Resident B. Resident B stated, "we get lots of food here."

On December 19, 2024, I conducted a private interview, at the facility, with Resident C. Resident C stated he was happy with the food served at this facility and noted "we get lots of food, there are no issues with food here."

On December 19, 2024, I conducted a private interview, at the facility, with Resident D. Resident D stated he has "no issues with the food, we get plenty to eat here."

On December 19, 2024, I conducted a private interview, at the facility, with staff member Veronica Dorcey. Ms. Dorcey stated she feels that the facility serves enough food to the residents. She noted that each resident is offered breakfast, lunch, dinner and a snack. Ms. Dorcey noted that she feels each meal is properly prepared, well balanced and nutritious. She stated enough food is prepared so that residents can have a second helping if they desire. Ms. Dorcey further stated that she had "not heard of any resident complain about not getting enough to eat."

On December 23, 2024, I conducted a telephone interview with Licensee Designee Carrie Dextrom. Ms. Dextrom stated she feels the facility staff do a "really good job" at preparing healthy meals for the residents. She noted that the facility kitchen is well stocked with a variety of food items for staff to prepare and she has always instructed her staff to prepare enough food so that residents can have "seconds" if they want.

APPLICABLE RULE	
R 400.15313	Resident nutrition.
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal. (2) Meals shall meet the nutritional allowances recommended pursuant to the provisions of "Appendix I: Recommended Dietary Allowances, Revised 1980" contained in the publication entitled "Basic Nutrition Facts: A Nutrition Reference," Michigan Department of Public Health publication no. H-808, 1/89. This publication may be obtained at cost from The Division of Research and Development, Michigan Department of Public Health, P.O. Box 30195, Lansing, Michigan 48909.

ANALYSIS:	Staff members Courtney Mizga and Veronica Dorcey both stated they feel the facility prepares and serves healthy well-balanced and nutritious meals to the residents. They noted they feel that "enough food is prepared for the residents so they can have a second helping if desired".  Residents A, B, C, and D all stated they "get enough" food to eat and there "are no issues with food" at this facility.  During the unannounced on-site investigation, it was observed that the facility had a large variety of food items in the kitchen refrigerator, freezer and pantry.  The Licensee is providing a minimum of three regular, nutritious meals daily.
CONCLUSION:	VIOLATION NOT ESTABLISHED

### ALLEGATION: There is insufficient heat to keep the residents warm.

**INVESTIGATION:** During my unannounced on-site investigation of December 19, 2024, I met with Sean Dextrom. Mr. Dextrom oversees maintenance for the Licensee at their facilities. He stated that the boiler at Magnolia Care Estates AFC has been having "issues" and he has ordered a new pump for the boiler. Mr. Dextrom stated that "at times it gets colder" but the facility typically is at an acceptable temperature. He noted that the facility has two thermostats, one in each hallway, and they are set at 72 degrees Fahrenheit.

I placed a thermometer on a shelf in the south hallway and left it for approximately 5 minutes. I observed that the thermometer read 65 degrees Fahrenheit. The facility thermostat in this same hallway was set at 72 degrees Fahrenheit and read a temperature of 65 degrees. The north hallway thermostat was set at 74 degrees Fahrenheit and indicated that the temperature was 66 degrees.

I felt the heat register in Resident A's bedroom, located off the south hallway. The register was cold to the touch. Resident A stated he was "ok." I noted he was sitting in a recliner and covered with a blanket.

During the on-site investigation Mr. Dextrom informed me that the heat pump is "out," and he is going today to get a new pump.

Staff member Courtney Mizga stated, "we have had issues with heat, but it is improving."

Licensee Designee Carrie Dextrom informed me on December 23, 2024, that Mr. Dextrom had "changed out two heat pumps" later the same day of my on-site investigation. She stated the heat is now working and the facility is maintaining a temperature of 69 to 70 degrees Fahrenheit throughout. Ms. Dextrom stated she is unsure how long the issue with the heat in this facility was going on but is confident that the issue is now resolved.

APPLICABLE RULE	
R 400.15406	Room temperature.
	All resident-occupied rooms of a home shall be heated at a temperature range between 68 and 72 degrees Fahrenheit during non-sleeping hours. Precautions shall be taken to prevent prolonged resident exposure to stale, noncirculating air that is at a temperature of 90 degrees Fahrenheit or above. Variations from the requirements of this rule shall be based upon a resident's health care appraisal and shall be addressed in the resident's written assessment plan. The resident care agreement shall address the resident's preferences for variations from the temperatures and requirements specified in this rule.
ANALYSIS:	The facility boiler pump was noted to be inoperable. As a result, the boiler was unable to maintain a temperature of 68 to 72 degrees Fahrenheit in resident occupied rooms.
CONCLUSION:	VIOLATION ESTABLISHED

On December 23. 2024, I conducted an exit conference with Licensee Designee Carrie Dextrom. I explained my findings as noted above. Ms. Dextrom stated she understood the findings and noted that the heat issue had been rectified later the same day as my on-site investigation. She stated she had no additional questions or information to provide related to this special investigation.

#### IV. RECOMMENDATION

I recommend, contingent upon the submission of an acceptable corrective action plan, that the status of the license remain unchanged.

Brene Of Hasser January 3, 2025

Bruce A. Messer Date

Licensing Consultant

Approved By:	
Jen Handle	
	January 3, 2025
Jerry Hendrick Area Manager	Date