



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 7, 2021

Todd Dockerty
The Heritage Assisted Living Community
14420 S. Helmer Road
Battle Creek, MI 49015

RE: License #: AH130403563
The Heritage Assisted Living Community
14420 S. Helmer Road
Battle Creek, MI 49015

Dear Mr. Dockerty:

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,

A handwritten signature in cursive script that reads "Jessica Rogers".

Jessica Rogers, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #: AH130403563

Licensee Name: Battle Creek Assisted Living Operator, LLC

Licensee Address: 111 W. Ferry St. #1
Berrien Springs, MI 49103

Licensee Telephone #: (574) 261-1124

Authorized Representative: Todd Dockerty

Administrator: Jonathan Zima

Name of Facility: The Heritage Assisted Living Community

Facility Address: 14420 S. Helmer Road
Battle Creek, MI 49015

Facility Telephone #: (269) 969-4000

Original Issuance Date: 12/10/2020

Capacity: 78

Program Type: AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/07/2021

Date of Bureau of Fire Services Inspection if applicable:

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 6/10/2021

No. of staff interviewed and/or observed 14
No. of residents interviewed and/or observed 25
No. of others interviewed [REDACTED] Role No visitors in the facility at this time due to COVID-19 pandemic.

- 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.
Bureau of Fire Services reviews fire drills. Staff interviewed regarding disaster plan.
- 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: N/A
- 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:

R 325.1921 Governing bodies, administrators, and supervisors.

(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.

At the time of the on-site inspection, one resident had a bedside assistive device. Resident A had an assist bar on the left side of the bed with approximately 18 inches between bars. The space was large enough for a hand/foot to fit through and cause possible entangle/entrapment. It was not directly affixed to the bedframe but instead was held in place by the weight of the mattress allowing for possible unrestricted movement away from the mattress possibly causing an area of entrapment. Facility administrator Courtney Banker stated Resident A affixed the assistive device to the bed himself, so there was not physician order, manufacturer instructions nor was it included in Resident A's service plan. Ms. Banker stated the use of assistive devices are prohibited by the facility which is in the admission contract that all residents or their authorized representatives sign prior to admission to the facility. Ms. Banker stated the maintenance staff removed the assistive device from Resident A's bed at the time of inspection.

Given the observations listed above and the lack of oversight the facility has not provided reasonable protective measures to ensure resident well-being and safety during the use of a bedside assistive device.

R 325.1923 Employee's health.

(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. 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? (<http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf>), Appendices B

and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each 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 need to conduct annual TB testing for employees.

Review of Maise Shuemann's employee file revealed no record of a completed tuberculosis (TB) screening within 10 days of hire and before occupational exposure prior to her hire date of 6/25/20.

R 325.1931 Employees; general provisions.

(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:

- (a) Reporting requirements and documentation.**
- (b) First aid and/or medication, if any.**
- (c) Personal care.**
- (d) Resident rights and responsibilities.**
- (e) Safety and fire prevention.**
- (f) Containment of infectious disease and standard precautions.**
- (g) Medication administration, if applicable.**

Review of Maise Shuemann's employee file revealed no completed trainings with the facility upon her hire date of 6/25/20.

R 325.1932 Resident medications.

(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.

Review of Resident B's medication administration records (MARs) revealed the following medications were not initialed as given on 5/14/21: Furosemide and Potassium. Resident B's MARs revealed the accucheck on 5/14 was not initialed.

Review of Resident C's MARs revealed facility staff did not initial checking oxygen on 4/2, 4/4, 4/5, and 4/7 at 6:00 AM and 4/17 at 10:00 PM.

Facility staff did not mark any reason for the missed doses and the MARs were left blank, therefore it cannot be confirmed why the medication administration was not completed as scheduled

I shared the findings of this report with facility authorized representative Todd Dockerty on 6/10/21. Mr. Dockerty verbalized understanding of the citations.

IV. RECOMMENDATION

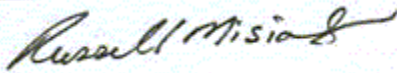
Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.



6/8/21

Date

Licensing Consultant



6/8/21

Date

Russell Misiak
Area Manager