



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 2, 2021

Paul Barber
Wyndham West
620 Phillips Street
Kalamazoo, MI 49001

RE: License #: AH390244166
Wyndham West
620 Phillips Street
Kalamazoo, MI 49001

Dear Mr. Barber:

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 licensee or licensee designee or 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 (616) 356-0100.

Sincerely,
Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 204-4300

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

I. IDENTIFYING INFORMATION

License #:	AH390244166
Licensee Name:	Heritage Community of Kalamazoo
Licensee Address:	2400 Portage St. Kalamazoo, MI 49001
Licensee Telephone #:	(269) 343-5345
Authorized Representative:	Paul Barber
Administrator/Licensee Designee:	Ashley Lubbers
Name of Facility:	Wyndham West
Facility Address:	620 Phillips Street Kalamazoo, MI 49001
Facility Telephone #:	(269) 385-9740
Original Issuance Date:	12/04/2001
Capacity:	40
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/30/2021

Date of Bureau of Fire Services Inspection if applicable: 1/19/21 - A

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 6/30/2021

No. of staff interviewed and/or observed 23

No. of residents interviewed and/or observed 18

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. N/A
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
- 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 325.1922	Admission and retention of residents.
	(7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home which consists of an intradermal skin test, chest x-ray, or other methods recommended by the local health authority performed within 12 months before admission.
ANALYSIS:	Review of resident records revealed that six out of the seven resident records reviewed did not show evidence of a tuberculosis screening for the resident within 12 months prior to admission.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1972	Solid wastes.
	All garbage and rubbish shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.
ANALYSIS:	While the facility has a designated trash closet with closed lid trash containers located on the first and second floor of the facility, items other than trash are being stored in the closets on both floors. During inspection it was discovered the trash closets contained vacuum cleaners, a set of table trays, and shelves of personal protective equipment (PPE) to include multiple boxes of gloves, masks, and gowns etc. A trash closet is intended for trash only and the mixing of items is not consistent with infection control methods.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Julie Hinson

7/1/21

Date

Licensing Consultant

Russell Misiak

7/1/21

Date

Russell Misiak
Area Manager