

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

August 2, 2021

Justin Stein Lansing Bickford Cottage 3830 Okemos Road Okemos, MI 48864

RE: License #:	AH330278347
	Lansing Bickford Cottage
	3830 Okemos Road
	Okemos, MI 48864

Dear Ms. Walker:

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,

Cimbarly Harat Licensing Staff

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

License #:	AH330278347
Licensee Name:	Lansing Bickford Cottage L.L.C.
Licensee Address:	13795 S. Murlen
	Olathe, KS 66062
Licensee Telephone #:	(913) 782-3200
	(0.0).02 0200
Authorized Representative:	Justin Stein
Administrator:	Marie Jonzun
7 tallillioti atoli	Wallo College
Name of Facility:	Lansing Bickford Cottage
Facility Address:	3830 Okemos Road
	Okemos, MI 48864
Facility Telephone #:	(517) 706-0300
Original Issuance Date:	09/08/2008
	10,700,200
Capacity:	55
Program Type:	ALZHEIMERS
riogiaili Type.	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection	(s): 07/2	21/2021	
Date of Bureau of Fire Ser	vices Inspection if applicab	le: 1/26/20	
Inspection Type:	☐Interview and Observat ☐Combination	ion ⊠Worksheet	
Date of Exit Conference:	08/02/2021L		
No. of staff interviewed and No. of residents interviewed No. of others interviewed		15 20	
Medication pass / sim	ulated pass observed? Ye	s ⊠ No □ If no, explain.	
explain. ■ Resident funds and as Yes □ No ☑ If no, €	dication records(s) reviewessociated documents reviewes explain. Resident funds not vice observed? Yes 🖂 N	wed for at least one resider kept in trust	nt?
Diaster plans reviewed	res		
Incident report follow-uCorrective action plan	p? Yes ☐ IR date/s: compliance verified? Yes	N/A CAP date/s and rule/s:	:
Number of excluded er	nployees followed up?	N/A 🖂	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was	found to be in non-compliance with the following rules:
R 325.1932	Resident medications.
	 (3) If a home or the home's administrator or direct care staff member supervises the taking of medication by a resident, then the home shall comply with all of the following provisions: (b) Complete an individual medication log that contains all of the following information: (i) The medication. (ii) The dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administered the medication, which shall be entered at the time the medication is given. (vi) A resident's refusal to accept prescribed medication or procedures.
was prescribed V ensure it is on re	ent A's medication administration record (MAR) revealed Resident A Vander Guard with instruction to check wander guard every shift to sident. For the month of July, there were multiple instances where d not attest on the MAR that the wander guard was checked to son the resident.
R 325.1953	Menus.
	(2) A home shall maintain a copy of all menus as actually served to residents for the preceding 3 months.
Interviews with k for the preceding	itchen staff revealed the facility does not keep a copy of the menus three months.
R 325.1968	Toilet and bathing facilities.
	(4) A resident toilet room or bathroom shall not be used for storage or housekeeping functions.

R 325.1976

Kitchen and dietary.

(9) An individual portion of food which is served and not eaten shall be destroyed.

Inspection of the facility revealed the bathroom in the memory care unit was being

Inspection of the refrigerator and freezer in the memory care unit revealed left over food, such as ice cream, pie, and a dinner meal, that was served and was not destroyed.

REPEAT VIOLATON ESTABLISHED

[Reference; Licensing Study Report (LSR) #20180904 dated 8/6/19 CAP dated 8/20/19]

0,20,101	
R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.

Inspection of the facility revealed in the memory care unit there was disinfection cleaning solution that was unlocked and easily accessible to residents. Easily accessible and hazardous and toxic materials are an unnecessary ingestion and poisoning risk to residents with poor safety awareness.

REPEAT VIOLATON ESTABLISHED

[Reference; Licensing Study Report (LSR) #20180904 dated 8/6/19 CAP dated 8/20/19]

IV. RECOMMENDATION

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

Date

Kinvery Hood

Licensing Consultant