



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

September 20, 2021

Courtney Carver  
Crystal Creek Assisted Lvng Inc  
8121 Lilley  
Canton, MI 48187

RE: License #: AL820294548  
Investigation #: 2021A0992028  
Crystal Creek Assisted Living 3

Dear Ms. Carver:

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 (313) 456-0380.

Sincerely,



Denasha Walker, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 300-9922

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL820294548
<b>Investigation #:</b>	2021A0992028
<b>Complaint Receipt Date:</b>	08/11/2021
<b>Investigation Initiation Date:</b>	08/12/2021
<b>Report Due Date:</b>	10/10/2021
<b>Licensee Name:</b>	Crystal Creek Assisted Lvng Inc
<b>Licensee Address:</b>	8121 Lilley Canton, MI 48187
<b>Licensee Telephone #:</b>	(734) 927-7025
<b>Administrator:</b>	Courtney Carver
<b>Licensee Designee:</b>	Courtney Carver
<b>Name of Facility:</b>	Crystal Creek Assisted Living 3
<b>Facility Address:</b>	8011 Lilley Canton, MI 48187
<b>Facility Telephone #:</b>	(734) 453-3203
<b>Original Issuance Date:</b>	03/16/2009
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	05/14/2020
<b>Expiration Date:</b>	05/13/2022
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
On 7/4/2021, Sierra Harvielle (nurse) was not able to pass medications to residents as scheduled due to a lack of staff and not being able to leave building #2. It is believed that the other residents are not getting their medications as needed.	Yes

**III. METHODOLOGY**

08/11/2021	Special Investigation Intake 2021A0992028
08/12/2021	Special Investigation Initiated - Telephone Complainant
08/17/2021	Inspection Completed On-site Helen Brown, President of Crystal Creek
08/18/2021	Contact - Document Received Medication Administration Records for Residents A-K
08/20/2021	Contact - Document Received Assessment Plans for Residents A-K and staff schedule
09/10/2021	Contact - Telephone call made Courtney Carver, licensee designee
09/10/2021	Contact - Telephone call made Gangdhi Anyanhun, direct care staff
09/16/2021	Exit Conference Ms. Carver
09/16/2021	Exit Conference Ms. Brown

**ALLEGATION:** On 7/4/2021, Sierra Harvielle (nurse) was not able to pass medications to residents as scheduled due to a lack of staff and not being able to leave building #2. It is believed that the other residents are not getting their medications as needed.

**INVESTIGATION:** On 8/12/2021, I contacted the complainant and discussed the allegations. The complainant explained that Crystal Creek campus has four buildings, and three of the four buildings are occupied with residents. The complainant further explained that on the day in question, there were only two direct care staff (DCS) on shift, one was working in building one, the other was working in

building three and there was one nurse working in building two. The complainant said the nurse is responsible for administering medications to the residents in all three buildings. However, on this particular day the nurse was alone in building two and there wasn't a DCS to assist her, which prevented her from administering medications timely to the residents in the other buildings. The complainant said the DCS in building one was relatively new and needed a lot of assistance. The complainant further stated the Resident A in building one requires morphine every hour and the DCS kept calling the nurse for Resident A's medication but due to the lack of staffing, the nurse couldn't leave the residents in building two unattended which ultimately delayed Resident A getting the medication. The complainant said several calls were made to Candice Gerard, who was the licensee designee at the time and Paula Cousino, medication coordinator making them aware of the situation. The complainant said Ms. Girard didn't answer the phone. However, Ms. Cousino came in at approximately 10:00 p.m. to assist with staffing.

On 8/17/2021, I completed an unannounced onsite inspection and interviewed Helen Brown, President of Crystal Creek regarding the allegations. Ms. Brown explained that she has some knowledge of the allegations, but she doesn't typically work in the facility. She said she resides in Indiana and manages several assisted living facilities including Crystal Creek. She said she will be onsite for a week to oversee staffing and resident care. She said the Director of Nursing will be arriving this week as well to oversee medications. As it pertains to the allegations, Ms. Brown said she recalled receiving a telephone call on the evening of 7/4/2021 from Sierra Harvielle, nurse. She said Ms. Harvielle was "frantic and yelling" stating she was on shift alone, she's a nurse not a DCS and she does not perform direct care duties. Ms. Brown said according to Ms. Harvielle, she called Ms. Girard and Ms. Cousino and Ms. Cousino came in to assist her. Ms. Brown said she is not sure what time Ms. Cousino arrived on shift. Ms. Brown said she's not sure where the breakdown in staffing occurred, but as a nurse, Ms. Harvielle is capable of doing direct care duties but refused to do so. She said typically the staff ratio is 1 (staff) to 15 (residents) with a "floating" supervisor, DCS and nurse. She said since this incident occurred, Ms. Girard and Ms. Cousino have resigned, and she is in the process of filling their positions. She said currently she is in the process transitioning Courtney Carver into the licensee designee position and all required paperwork has been submitted to Edith Richardson, licensing consultant. She said she's also hiring DCS and nurses. I requested the following documents for all residents in building three to assist with the investigation: resident register, medication administration records (MARs) to verify their medications were administered as prescribed; assessment plans to determine level of care and the staff schedule to determine if there was sufficient staff to fulfill the responsibilities and attend to the resident's needs.

On 8/18/2021, I received the MARs for Residents A, B, C, D, E, F, G, H, I, J and K for the month of July 2021. It should be noted that this facility uses Quick MAR a system that electronically records medications and initials of the individual administering medication. The Quick Mar system also provides an area to enter an explanation if the medications weren't administered for any reason such as resident

refusal, leave of absence, awaiting medications and etc. Based on the MARs records, there were several medications that were not initialed for Residents A through K throughout July 2021. The medications that were not initialed were as follows and no documented explanation was provided:

#### Resident A

- Atorvastatin TAB 80MG; take 1 tablet by mouth daily at bedtime for Hyperlipidemia was not initialed on 7/26/2021 at 7:00 p.m.
- Divalproex TAB 250MG DR; take 3 tablets (750MG) by mouth every 12 hours for epilepsy was not initialed on 7/26/2021 at 10:00 a.m., 10:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Duloxetine CAP 60MG; take 1 capsule by mouth once daily for Depression was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Famotidine TAB 20MG; take 1 tablet by mouth once daily for Gerd was not initialed on 7/26/2021 at 10:00 a.m., 7:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Levetiracetam TAB 1000MG; take 2 tablets (2,000MG) by mouth twice daily for Epilepsy was not initialed on 7/26/2021 at 10:00 a.m., 7:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Metoprolol TAR TAB 50MG; take 1 tablet by mouth every 12 hours for Hypertension was not initialed on 7/26/2021 at 10:00 a.m., 10:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Senna Plus 8.6-50MG (senexon-S); take 1 tablet by mouth daily at bedtime for Constipation was not initialed on 7/26/2021 at 7:00 p.m.
- Tamsulosin CAP 0.4MG; take 1 capsule by mouth twice for BPH was not initialed on 7/26/2021 at 10:00 a.m., 7:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Trazadone TAB 50MG; take ½ tablet (25MG) by mouth daily at bedtime for Depression was not initialed on 7/26/2021 at 7:00 p.m.
- Vimpat TAB 100MG; take 1 tablet by mouth every 12 hours for Epilepsy in addition to 200MG to total 300MG was not initialed on 7/26/2021 at 10:00 a.m., 10:00 p.m. or on 7/27/2021 at 10:00 a.m.

#### Resident B

- Aspirin Low TAB 81MG EC; take 1 tablet by mouth once daily was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Carvedilol TAB 6.25MG; take 1 tablet by mouth twice daily was not initialed on 7/26/2021 at 10:00 a.m., 7:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Dutasteride CAP 0.5MG; take 1 capsule by mouth once daily in the morning was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Ensure Chocolate-B4150; drink 1 can by mouth twice daily was not initialed on 7/26/2021 at 10:00 a.m., 3:00 p.m. or on 7/27/2021 at 10:00 a.m. and 3:00 p.m.
- Losartan POT TAB 100MG; take 1 tablet by mouth once daily in the morning was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Vitamin B-12 100MCG; take 1 tablet by mouth once daily was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Vitamin D#-2000UNIT-TABS; take 1 tablet by mouth once daily was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.

### Resident C

- Carb/Levo TAB 10-10MG; take 1 tablet by mouth every 6 hours was not initialed on 7/10/2021 at 6:00 a.m.; 7/12/2021 at 6:00 p.m. or 7/13/2021 at 12:00 a.m. and 6:00 a.m.

### Resident E

- Aspirin CHW 81MG; chew 1 tablet by mouth once daily for Prophylaxis was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Eliquis TAB 5MG; take 1 tablet by mouth twice daily was not initialed on 7/26/2021 at 10:00 a.m., 10:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Ensure; drink 1 can by mouth once daily with lunch was not initialed on 7/26/2021 at 12:00 p.m.
- Famotidine TAB 20MG; take 1 tablet by mouth every 12 hours was not initialed on 7/26/2021 at 10:00 a.m., 10:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Mag Oxide TAB 400MG; take 2 tablets (800MG) by mouth four times daily for supplement was not initialed on 7/12/2021 at 6:00 p.m.; 7/26/2021 at 10:00 a.m., 2:00 p.m., 6:00 p.m. 10:00 p.m. or on 7/27/2021 at 10:00 a.m.
- Sertraline TAB 50MG; take 1 tablet by mouth once daily for depression was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Vitamin B-12 100MCG; take 1 tablet by mouth once daily was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.

### Resident F

- Beneprotein 227 GM PWD; mix 1 scoop in 4oz of liquid and drink by mouth twice daily was not initialed on 7/12/2021 at 10:00 a.m.
- Escitalopram TAB 5MG; take 1 tablet by mouth once daily for Depression was not initialed on 7/12/2021 at 10:00 a.m.
- Famotidine TAB 20MG; take 1 tablet by mouth every 12 hours was not initialed on 7/12/2021 at 10:00 a.m.
- Lisinopril TAB 10MG; take 1 tablet by mouth once daily was not initialed on 7/12/2021 at 10:00 a.m.
- Quetiapine TAB 25MG; take 1 tablet by mouth twice daily was not initialed on 7/12/2021 at 10:00 a.m.

### Resident G

- Gabapentin CAP 100MG; take 1 capsule by mouth three times daily was not initialed on 7/9/2021 at 2:00 p.m.

### Resident H

- Ammonium LAC CRE 12%; apply to bilateral LE daily at bedtime was not initialed on 7/26/2021 at 7:00 p.m.
- Ativan Gel 1MG/ML PBM (C-IV); apply to inner wrist or other hairless area three times daily for agitation was not initialed on 7/26/2021 at 10:00 a.m., 2:00 p.m., 7:00 p.m. or 7/27/2021 at 10:00 a.m.
- Beneprotein 227 GM PWD; mix 1 scoop in fluid of choice and drink by mouth once daily was not initialed on 7/22/2021, 7/26/2021, 7/27/2021 or 7/30/2021 at 9:30 a.m.

- Carbidopa/levodopa 25/100MG; take 1 tablet by mouth twice daily was not initialed on 7/12/2021 at 5:30 p.m.; 7/16/2021 at 5:30 p.m.; 7/22/2021 at 9:30 a.m.; 7/26/2021 at 9:30 a.m. or 5:30 p.m. or 7/27/2021 at 9:30 a.m. or 5:30 p.m. or 7/30/2021 at 9:30 a.m.
- Deep Sea SPR 0.65%; instill 1 spray in each nostril three times daily was not initialed on 7/12/2021 at 5:30 p.m.; 7/22/2021 at 9:30 p.m.; 7/26/2021 at 9:30 a.m., 1:30 p.m., 5:30 p.m.; 7/27/2021 at 9:30 a.m., 5:30 p.m. or 7/30/2021 at 9:30 a.m.
- Ensure LIQ Strawberry B41500; drink 1 can once daily with lunch was not initialed on 7/26/2021 at 12:00 p.m.
- Furosemide TAB 20MG; take 1 tablet by mouth once daily was not initialed on 7/26/2021 and 7/27/2021 at 10:00 a.m.
- Levetiracetam TAB 750MG; take 1 tablet by mouth every 12 hours was not initialed on 7/22/2021 at 9:30 a.m.; 7/26/2021 at 9:30 a.m., 9:30 p.m.; 7/27/2021 at 9:30 a.m. or 7/30/2021 at 9:30 a.m.
- Levothyroxine TAB 88MCG; take 1 tablet by mouth daily was not initialed on 7/22/2021, 7/26/2021, 7/27/2021 or 7/30/2021 at 9:30 a.m.
- Metamucil POW PACJ SF; mix 1 packet with 8oz of water and drink one daily was not initialed on 7/22/2021, 7/26/2021, 7/27/2021 or 7/30/2021 at 9:30 a.m.
- Metoprolol TAR TAB 25MG; take ½ tablet (12.25MG) by mouth twice daily was not initialed on 7/12/2021 at 5:30 p.m., 7/16/2021 at 5:30 p.m. 7/22/2021 at 9:30 a.m., 7/26/2021 at 9:30 a.m., 5:30 p.m. and 7/27/2021 at 9:30 a.m., 5:30 p.m.
- POT Chloride TAB 10MEQ ER; take 1 tablet by mouth once daily was not initialed on 7/22/2021, 7/26/2021, 7/27/2021 or 7/30/2021 at 9:30 a.m.
- Prednisone 5MG TAB; take 1 tablet by mouth twice daily was not initialed on 7/26/2021 at 10:00 a.m., 7:00 p.m. or 7/27/2021 at 10:00 a.m.
- Vitamin B-1-100MG (Thiamine); take 1 tablet by mouth once daily was not initialed on 7/22/2021, 7/26/2021, 7/27/2021 or 7/30/2021 at 9:30 a.m.
- Vitamin D3-2000Unit TABS; take 2 tablets (4000units) by mouth once daily was not initialed on 7/22/2021, 7/26/2021, 7/27/2021 or 7/30/2021 at 9:30 a.m.
- Zeasorb-AF POW 2%; apply topically to affected area(s) twice daily was not initialed on 7/12/2021 at 5:30 p.m.; 7/16/2021 at 5:30 p.m.; 7/26/2021 at between 9:00 a.m. to 2:00 p.m., 5:30 p.m. or 7/27/2021 at 5:30 p.m.

#### Resident I

- Admelog Solo INJ 100U/ML; inject subcutaneously per sliding scale three times daily meals less than 200=0Units / greater than 400 give 10Units. Was not initialed on 7/10/2021 at 6:00 a.m.; 7/12/2021 at 5:00 p.m.; 7/13/2021 at 6:00 a.m.; 7/26/2021 at 12:00 p.m., 5:00 p.m.; 7/27/2021 at 6:00 a.m.
- Amlodipine Besylate 10MG TABS; take 1 tablet by mouth once daily was not initialed on 7/12/2021 at 5:00 p.m.
- Apriso CAP; take 1 capsule by mouth twice daily was not initialed on 7/10/2021 at 6:00 a.m., 7/12/2021 at 5:00 p.m., 7/26/2021 at 5:00 p.m. or 7/27/2021 at 6:00 a.m.
- Atorvastatin TAB 40MG 7/12/2021; take 1 tablet by mouth daily at bedtime was not initialed on 7/12/2021 at 5:00 p.m. or 7/26/2021 at 5:00 p.m.
- Basaglar INJ 100Unit; inject 46 units (0.46ML) subcutaneously into the fatty tissue daily was not on 7/26/2021 at 10:00 a.m. or 7:00 p.m.



- Clopidogrel TAB 75MG; take 1 tablet by mouth once daily was not initialed on 7/10/2021, 7/13/2021 or 7/27/2021 at 6:00 a.m.
- Fenofibrate TAB 48MG; take 1 tablet by mouth once daily was not initialed on 7/10/2021, 7/13/2021 or 7/27/2021 at 6:00 a.m.
- Ferrous Sulf TAB 325MG; take 1 tablet by mouth once daily was not initialed on 7/10/2021, 7/13/2021 or 7/27/2021 at 6:00 a.m.
- Finasteride TAB 5MG; take 1 tablet by mouth once daily was not initialed on 7/12/2021 or 7/26/2021 at 5:00 p.m.
- Fish Oil CAP 100MG; take 1 tablet by mouth three time daily was not initialed on 7/10/2021 at 6:00 a.m., 7/12/2021 at 5:00 p.m., 7/13/2021 at 6:00 a.m., 7/26/2021 at 12:00 p.m., 5:00 p.m., or 7/27/2021 at 6:00 a.m.
- Gabapentin CAP 300MG; take 1 capsule by mouth twice daily was not initialed on 7/10/2021 at 6:00 a.m., 7/12/2021 at 5:00 p.m., 7/13/2021 at 6:00 a.m., 7/26/2021 at 5:00 p.m., 7/27/2021 at 6:00 a.m.
- Hydralazine HCL 25MG; take 1 tablet by mouth twice daily was not initialed on 7/10/2021 at 6:00 a.m.; 7/12/221 at 5:00 p.m.; 7/26/2021at 5:00 p.m. or 7/27/2021 at 6:00 a.m.
- Janumet XR TAB 50-100; take 1 tablet by mouth in the evening with dinner was not initialed on 7/12/2021 or on 7/26/2021 at 5:00 p.m.
- MAPAP 500MG TAB (Tylenol); take 2 tablets (1000MG) by mouth twice daily not to exceed 3MG/ 24hr from all Tylenol sources; was not initialed on 7/10/2021 at 6:00 a.m., 7/12/2021 at 5:00 p.m. 7/13/2021 at 6:00 a.m.; 7/26/2021 at 5:00 p.m. 7/27/2021 at 6:00 a.m.
- Metoprol TAR TAB 100MG; take 1 tablet by mouth daily was not initialed on 7/10/2021 at 6:00 a.m., 7/12/2021 at 5:00 p.m. 7/13/2021 at 6:00 a.m.; 7/26/2021 at 5:00 p.m. 7/27/2021 at 6:00 a.m.
- Niacin ER TAB 500MG; take 1 capsule by mouth daily in the evening was not initialed 7/12/2021 or 7/26/2021 at 5:00 p.m.
- Nystatin POW 100000; apply to abdomen and groin twice daily was not initialed on 7/10/2021 at 6:00 a.m., 7/12/2021 at 5:00 p.m. 7/13/2021 at 6:00 a.m.; 7/26/2021 at 5:00 p.m. 7/27/2021 at 6:00 a.m.
- Trazadone TAB 100MG; take 1 tablet by mouth daily in the evening was not initialed 7/12/2021 or 7/26/2021 at 5:00 p.m.
- Vitamin D3-50,000- CAPS; take 1 capsule by mouth once daily was not initialed 7/26/2021 at 10:000 a.m.
- Ziprasidone CAP 20MG; take 2 capsules (40MG) by mouth once daily with food was not initialed 7/26/2021 at 10:00 a.m.
- Ziprasidone CAP 20MG; take 1 capsule (40MG) by mouth once daily with food was not initialed 7/12/2021 or 7/26/2021 at 5:000 p.m.

#### Resident J

- Anlodipine; take 1 tablet by mouth once daily was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- Aspirin CHW 81MG; chew 1 tablet by mouth once daily was not administered 7/26/2021 or 7/27/2021 at 10:00 a.m.

- Hydralazine HCL 50MG; take 1 tablet by mouth every 8 hours for hypertension was not initialed on 7/26/2021 at 10:00 a.m., 12:00 p.m.; 7:00 p.m.; 7/27/2021 at 7:00 a.m.
- Losartan POT TAB 100MG; take 1 tablet by mouth once daily was not initialed on 7/26/2021 or 7/27/2021 at 10:00 a.m.
- MAPAP 325MG TAB (Tylenol); take 2 tablets (6650MG) by mouth three times daily was not initialed on 7/26/2021 at 10:00 a.m., 2:00 p.m. or 7:00 p.m.; or 7/27/2021 at 10:00 a.m.
- Calmoseptine OIN (Risamine); apply to the buttock and groin area with each brief change was not initialed on 7/26/2021 between 7:00 a.m. to 3:00 p.m. or 3:00 p.m. to 11:00 p.m. or on 7/27/2021 between 12:00 a.m. to 7:00 a.m.
- Glipizide ER TAB 10MG; take 1 tablet by mouth once daily in the morning was not initialed on 7/26/2021 or 7/27/2021 at 8:00 a.m.
- Senna TAB 806MG; take 2 tablets (17.2<G) by mouth daily in the evening was not initialed on 7/12/2021, 7/26/2021, or 7/27/2021 at 5:00 p.m.

On 8/20/2021, I received copies of Residents A through K's adult foster care assessment plan. Based on the assessment plans Resident A is a fall risk and requires assistance with toileting, bathing, grooming, dressing, personal hygiene and walking/mobility. Resident C is bedbound and requires total assistance. Resident D requires assistance with bathing, grooming, dressing and personal hygiene. Residents E, F and J require assistance with toileting, bathing, grooming, dressing and personal hygiene. Residents H, I and K use an assistance device and require assistance with toileting, bathing, grooming, dressing and personal hygiene. I also reviewed the staff schedule for the day in question, which was 1 staff to 11 residents. Based on the documented care needs of Residents A through K, it is apparent that one direct care staff is not sufficient to meet the needs of the residents.

On 9/10/2021, I contacted Courtney Carver, licensee designee and discussed the allegations with her. Ms. Carver said unfortunately she can't provide much information because she only recently became the licensee designee in August 2021, and the former licensee designee resigned. She said although she was made aware of the allegations when she came onboard, she doesn't have any explanation or insight.

On 9/10/2021, I contacted Gangdhi Anyanhun, direct care staff and attempted to interview him regarding the allegations. Unfortunately, Mr. Anyanhun said he couldn't recall the day in question. However, he said as it pertains to the staffing ratio for each building it's typically one caregiver on shift, a nurse that administers medications for all four buildings, a floating direct care staff to assist and provide relief for all four buildings and a floating supervisor. He said he no longer works for Crystal Creek but denied inadequate staffing was an issue while he was employed there.

On 9/16/2021, I completed an exit conference with Ms. Carver and made her aware of my findings including my determination that the facility was inadequately staffed, and the MARs were not being initialed. Ms. Carver reiterated that she wasn't working at the Crystal Creek location at the time, and she doesn't have any explanation or insight as to what occurred. However, Ms. Carver said she is aware that there have been a lot of changes implemented to assure that the residents are well cared for and that there is now sufficient staffing. She said, currently buildings three and four are not open for residents use due to staffing issues. She said the company is focusing on buildings one and two and making sure Crystal Creek maintains compliance. I informed Ms. Carver that due to the violations identified, a written corrective action plan is required, which she agreed to submit. I made Ms. Carver aware that since she's new to the position, that I would also conduct an exit conference with Ms. Brown.

On 9/16/2021, I conducted an exit conference with Ms. Brown. I made her aware of my findings including my determination that the facility was inadequately staffed, and the MARs were not being initialed. Ms. Brown said apparently staffing has been an issue and they weren't doing what they were hired to do. As a result, Ms. Brown said buildings three and four are not operational at this time and the focus is to hire competent and trained staff to provide direct care. She said her priority is resident care. Ms. Brown said she was onsite for over a week rearranging and implementing new protocol/procedures. She said she had the chief medication coordinator overlook medications to determine a process that will be sufficient. I informed Ms. Brown that due to the violations identified, a written corrective action plan is required, which she agreed to work along with Ms. Carver to submit.

<b>APPLICABLE RULE</b>	
<b>R 400.15206</b>	<b>Staffing requirements.</b>
	<b>(1) The ratio of direct care staff to residents shall be adequate as determined by the department, to carry out the responsibilities defined in the act and in these rules and shall not be less than 1 direct care staff to 15 residents during waking hours or less than 1 direct care staff member to 20 residents during normal sleeping hours.</b>
<b>ANALYSIS:</b>	During this investigation I interviewed Licensee Designee, Courtney Carver; President of Crystal Creek, Helen Brown; and Direct Care Staff, Gangdhi Anyanhun regarding the allegations. I also reviewed the assessment plans for Residents A through K and the staff schedule which was 1 staff to 11 residents. Based upon this review, it was determined 1:11 staffing ratio is not adequate to meet the needs of the residents.

	Based on the investigative findings, there is sufficient evidence to support the allegations that the direct care staff to resident ratio was inadequate to meet the residents' needs.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<b>(2) Medication shall be given, taken, or applied pursuant to label instructions.</b>
<b>ANALYSIS:</b>	<p>During this investigation I interviewed Licensee Designee, Courtney Carver; President of Crystal Creek, Helen Brown; and Direct Care Staff, Gangdhi Anyanhun regarding the allegations. I also reviewed the medication administration records for Residents A through K and there were several medications that were not initialed throughout July 2021 with no explanation provided.</p> <p>Based on the medication administration records, there is sufficient evidence to support that Residents A through K's medications were not given, taken, or applied pursuant to label instructions.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.15312</b>	<b>Resident medications.</b>
	<p><b>(4)(b) Complete an individual medication log that contains all of the following information:</b></p> <ul style="list-style-type: none"> <li><b>(i) The medication.</b></li> <li><b>(ii) The dosage.</b></li> <li><b>(iii) Label instructions for use.</b></li> <li><b>(iv) Time to be initialed.</b></li> <li><b>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</b></li> <li><b>(vi) A resident's refusal to accept prescribed medication or procedures.</b></li> </ul>

<b>ANALYSIS:</b>	<p>During this investigation I interviewed Licensee Designee, Courtney Carver; President of Crystal Creek, Helen Brown; and Direct Care Staff, Gangdhi Anyanhun regarding the allegations. I also reviewed the medication administration records for Residents A through K and there were several medications that were not initialed throughout July 2021 and no explanation was documented.</p> <p>There is sufficient to support that the direct care staff failed to initial the medication at the time it was given.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

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



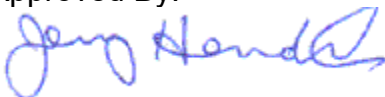
09/20/2021

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Denasha Walker  
Licensing Consultant

Date

Approved By:



09/20/2021

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Jerry Hendrick  
Area Manager

Date