



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 5, 2021

Daniela Soave
Brighton Manor LLC
7560 River Road
Flushing, MI 48433

RE: License #:	AH470387116 Brighton Manor 1320 Rickett Road Brighton, MI 48116
----------------	--

Dear Mrs. Soave:

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,

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 #:	AH470387116
Licensee Name:	Brighton Manor LLC
Licensee Address:	7560 River Road Flushing, MI 48433
Licensee Telephone #:	(989) 971-9610
Authorized Representative:	Daniela Soave
Administrator:	Sarah Molner
Name of Facility:	Brighton Manor
Facility Address:	1320 Rickett Road Brighton, MI 48116
Facility Telephone #:	(810) 247-8442
Original Issuance Date:	03/27/2019
Capacity:	93
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/05/2021

Date of Bureau of Fire Services Inspection if applicable: 6/22/21

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination

Date of Exit Conference: 10/5/2021

No. of staff interviewed and/or observed 5
No. of residents interviewed and/or observed 10
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. Resident funds not kept in trust
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
Disaster plans reviewed and staff interviewed.
- 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:
3/11/21: 2021A1026006 R 325.1931 (5); R 325.1933 (1)
- 9/10/21 2021A1021044 R 325.1932
- 4/9/21 2021A1021025 R 325.1933
- 2/17/21 2021A1021014 R 325.1931(1); R 325.1931 (2)
- 1/22/21 2021A1019015 R 325.01921 (1)(c); R 325.1924 (1)
- 5/4/21 2021A0585019 R 325.1932 (1)
-
- Number of excluded employees followed up? 1 N/A ☐

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 325.1923	Employee Health.
	<p>(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.</p>
<p>Review of employee records revealed employees did not receive an initial Tuberculosis (TB) test upon hire. Review of Dalisa Clinton's employee record revealed her date of hire was 3/24/21 and the facility had no record of a TB test. In addition, review of Emma Jordan's employee record revealed she was hired 1/10/20 and she did not receive a TB test until 3/25/21.</p> <p>REPEAT VIOLATION ESTABLISHED [Reference: Special Investigation Report (SIR) #2019A1021024 dated 6/28/19 Corrective Action Plan (CAP) dated 7/12/19; Licensing Study Report (LSR) #2019 dated 8/30/19 CAP dated 9/13/19; LSR 2020 dated 9/29/21 CAP dated 10/10/20.]</p>	
R 325.1932	Resident medications.
	<p>(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.</p>
<p>Review of Resident A's medication administration record (MAR) revealed Resident A was prescribed Methocarbam Tab 750mg with instruction to administer one tablet by mouth every eight hours as needed for pain or fever. In addition, Resident B was prescribed Morphine Sulfate with instruction to administer one pre-filled syringe by</p>	

<p>mouth every six hours as needed for pain. Also, Resident A was prescribed Tramadol HCL tab 50mg with instruction to administer one tablet by mouth every six hours as needed for pain. There is no instruction for staff to know whether to administer one over the other or if both can be given at the same time. The lack of instruction places residents at an unnecessary risk of harm due to administration based on what the staff feel is appropriate verses what the physician intended. Similar findings were found with Resident B.</p>	
R 325.1932	Resident medications.
	(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.
<p>Resident A was prescribed Lorazepam 1mg tablet with instruction to give 1/2 tablet by mouth every six hours as needed for agitation. Resident A's service plan lacked detailed information on how the resident demonstrates anxiety and what behaviors require the administration of the medication.</p> <p>REPEAT VIOLATION ESTABLISHED [Reference: LSR #2019 dated 8/30/19 CAP dated 9/13/19; LSR #2020 dated 9/29/20 CAP dated 10/10/20]</p>	
R 325.1976	Kitchen and dietary.
	(1) A home shall have a kitchen and dietary area of adequate size to meet food service needs of residents. It shall be arranged and equipped for the refrigeration, storage, preparation, and serving of food, as well as for dish and utensil cleaning and refuse storage and removal.
<p>Inspection of the facility kitchen revealed the dishwasher sanitized with a heat and chemical cycle. The kitchen staff was unable to demonstrate how to test the effectiveness of the dishwasher to ensure it was sanitizing the dishes. The lack of routine checks does not reasonably protect residents from infection should the machine malfunction.</p>	
R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
<p>Inspection of the facility kitchen revealed that the walk-in refrigerator, freezer and dry storage area contained items that were opened, unsealed and were not</p>	

dated (including but not limited to sugar, lunch meat and other items).

REPEAT VIOLATION ESTABLISHED

[Reference: LSR #2019 dated 8/30/19 CAP dated 9/13/19 and LSR #2020 dated 9/29/20 CAP dated 10/10/20]

R 325.1979

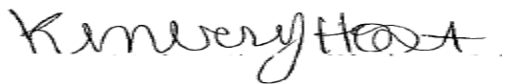
General maintenance and storage.

(3) Hazardous and toxic materials shall be stored in a safe manner.

Inspection of the memory care kitchenette area revealed kitchen cleaner that was in unlocked cabinets. Easily accessible and hazardous and toxic materials are an unnecessary ingestion and poisoning risk to residents with poor safety awareness.

IV. RECOMMENDATION

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



10/5/21

Date

Licensing Consultant