



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 1, 2021

Rhonda Hendrickson
University Living
Suite 300
One Town Center Rd
Boca Raton, FL 33486

RE: License #: AH810401699
Investigation #: 2022A1027005
University Living

Dear Ms. Hendrickson:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed by the licensee authorized representative and dated.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. 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 (517) 241-1970.

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
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AH810401699
Investigation #:	2022A1027005
Complaint Receipt Date:	10/21/2021
Investigation Initiation Date:	10/21/2021
Report Due Date:	12/20/2021
Licensee Name:	Ann Arbor Senior Housing OPCO, LLC
Licensee Address:	Ste 310 One Town Center Rd Boca Raton, FL 33486
Licensee Telephone #:	(734) 665-2819
Administrator:	Kelly Hardy
Authorized Representative:	Rhonda Hendrickson
Name of Facility:	University Living
Facility Address:	2865 S. Main Street Ann Arbor, MI 48103
Facility Telephone #:	(734) 665-2819
Original Issuance Date:	05/26/2021
License Status:	TEMPORARY
Effective Date:	05/26/2021
Expiration Date:	11/25/2021
Capacity:	90
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Resident A did not receive his medication.	Yes
Additional Findings	No

III. METHODOLOGY

10/21/2021	Special Investigation Intake 2022A1027005
10/21/2021	Special Investigation Initiated - Letter Email sent to regional nurse Dana Dickens to inquire about missed medication
10/21/2021	Contact - Document Received Email received from regional nurse Dana Dickens with requested medication information
10/26/2021	Inspection Completed On-site
10/26/2021	Inspection Completed-BCAL Sub. Compliance
11/22/2021	Exit Conference Conducted with authorized representative Rhonda Hendrickson

ALLEGATION:

Resident A did not receive his medication.

INVESTIGATION:

On 10/20/21, the department received an incident report which read Resident A had missed a medication. The report read

“Doing missed medication report noticed Resident has not had Xarelto blood thinner in a few days. Called Pharmacy [PCA] and PCA has not been filling his medications as did not have insurance information on file.”

“Notified Luna DON and Kayla Med Tech to follow up on this issues [sic]. Kayla notified PCA and sent over his SS# and no part D was pulled. Kayla contacted family and want medication filled from PCA and will bill family.”

“Kayla notified PCA that family wants to use PCA and to bill family. PCA will send medications today 10/20/21.”

On 10/26/21, I conducted an on-site inspection at the facility. I interviewed corporate nurse Dana Dickens. Ms. Dickens stated she ran a report which had showed Resident A's had missed his Xarelto medication for approximately two weeks. Ms. Dickens stated staff had requested the pharmacy to re-order it within their medication administration system. Ms. Dickens stated once it was discovered Resident A had not received his medication, staff had reached out to the pharmacy who stated Resident A did not have prescription coverage. Ms. Dickens stated the facility was not notified by pharmacy that Resident A did not have prescription coverage. I interviewed Director of Nursing Luna Delgado whose statements were consistent with Ms. Dickens. Ms. Delgado stated the pharmacy should have reached out to them and the facility staff should have followed up on why the medication was not being delivered. Additionally, I interviewed Residents B, C and D regarding staff administering their medications. Resident B stated she had not received her medications. Residents C and D both stated they received their medications.

I reviewed Resident A's service plan which read “ALF manages medications and administers.”

I reviewed Resident A's nurses' notes.

On 9/29/21, the note read “PCA notified of need for refill of meds resident in process of change PCP. In order to obtain new scripts.”

On 10/4/21, the note read “resident seen by Doc @ Your Door new scripts to be sent to PCA.”

On 10/12/21, the note read “Received email from Marissa @ PCA asking for insurance info. Sent her SSN.”

On 10/20/21, the note read “Received word from PCA that he does not have valid insurance called family to see if they have any insurance information or if they want to pay out of pocket. Family told Markie (caller) that they will pay out of pocket. PCA called and informed.”

I reviewed copies of Resident A's medication prescriptions. The prescription read “Xarelto 15 mg (Rivaroxaban) Give 1 tablet by mouth one time a day for AFIB.”

I reviewed Resident A's medication administration records (MARs) for October. The MAR read Xarelto was marked as “Not Administered: Drug/Item Unavailable” by staff on 10/2/21, 10/3, 10/8 through 10/20. Xarelto was marked as given on 10/1, as well as 10/4 through 10/7.

I reviewed Resident B's MARs for October. The MAR read medications Aspirin, Cyanocobalamin, Sertraline was not marked as administered from 10/1 through 10/3 then 10/5 through 10/26 for reason "Not administered: drug/item unavailable." Additionally, the MAR read Cholecalciferol 1250 mcg, take one capsule every other week on Tuesday was not marked administered on 10/5, 10/12, 10/19 and 10/26 for reason "Not administered: drug/item unavailable."

I reviewed Resident C and D's MARs for October which read staff marked their medications were administered as prescribed.

APPLICABLE RULE	
R 325.1921	Governing bodies, administrators, and supervisors.
	<p>(1) The owner, operator, and governing body of a home shall do all of the following:</p> <p>(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</p>
For Reference: R 325.1901	Definitions.
	(16) "Protection" means the continual responsibility of the home to take reasonable action to ensure the health, safety, and well-being of a resident as indicated in the resident's service plan, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation while on the premises, while under the supervision of the home or an agent or employee of the home, or when the resident's service plan states that the resident needs continuous supervision.
ANALYSIS:	Staff and resident interviews along with review of facility documentation revealed Resident A and B did not always receive their medications as prescribed. Additionally, both Resident A and B did not receive their medications for most days in the month of October, thus the facility lacked an organized program to reasonably ensure resident's medications were reordered timely and medications were not missed for extended periods of time.
CONCLUSION:	VIOLATION ESTABLISHED

On 11/22/21, I shared the findings of this report with authorized representative Rhonda Hendrickson. Ms. Hendrickson verbalized understanding of the citation.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, the status of this license remains unchanged.



11/1/21

Jessica Rogers
Licensing Staff

Date

Approved By:



11/19/21

Russell B. Misiak
Area Manager

Date