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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

November 29, 2021

Michelle Aylor-Robbins
Brookdale Senior Living Communities, Inc.
Suite 2300
6737 West Washington St.
Milwaukee, WI 53214

RE: License #: AL130077494
Investigation #: 2022A1024009
Brookdale Battle Creek MC (MI)

Dear Ms. Aylor-Robbins:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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 (616) 356-0183.

Sincerely,

A handwritten signature in cursive script that reads "Ondrea Johnson".

Ondrea Johnson, Licensing Consultant
Bureau of Community and Health Systems
427 East Alcott
Kalamazoo, MI 49001

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL130077494
Investigation #:	2022A1024009
Complaint Receipt Date:	10/01/2021
Investigation Initiation Date:	10/05/2021
Report Due Date:	11/30/2021
Licensee Name:	Brookdale Senior Living Communities, Inc.
Licensee Address:	Suite 2300 6737 West Washington St. Milwaukee, WI 53214
Licensee Telephone #:	(414) 918-5000
Administrator:	Michelle Aylor-Robbins
Licensee Designee:	Michelle Aylor-Robbins
Name of Facility:	Brookdale Battle Creek MC (MI)
Facility Address:	197 Lois Drive Battle Creek, MI 49015
Facility Telephone #:	(269) 979-9511
Original Issuance Date:	11/03/1997
License Status:	REGULAR
Effective Date:	07/28/2020
Expiration Date:	07/27/2022
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Staff members are not changing residents regularly and are not making sure residents who cannot feed themselves are being fed.	No
Staff members do not do anything when residents have bed sores.	No

III. METHODOLOGY

10/01/2021	Special Investigation Intake 2022A1024009
10/05/2021	Contact - Telephone call made with direct care staff member Nancy Dollahan
10/08/2021	Contact - Telephone call made with medication technician Amber Spence
10/19/2021	Contact - Document Received- <i>Personal Service Plans</i> for Residents A, B, C, D, E, F, G, H, I, J, K, L, and M
11/01/2021	Contact - Telephone call made with manager Dawn Hussey and direct care staff member Olivia Robinson
11/15/2021	Contact - Telephone call made with direct care staff member Brennay Thompson
11/15/2021	Contact - Telephone call made with nurse case manager Julie Medema from Elara Caring
11/15/2021	Contact - Telephone call made with nurse Kaycie Churchman from Kindred At Home
11/22/2021	Inspection Completed On-site with administrator Tami Miles and direct care staff member Jurnisha James
11/22/2021	Exit Conference with licensee designee Michelle Aylor-Robbins

ALLEGATION:

Staff members are not changing residents regularly and are not making sure residents who cannot feed themselves are being fed.

INVESTIGATION:

On 10/1/2021, I received this complaint through the Bureau of Community and Health Systems online system. This complaint alleged direct care staff are not

changing residents regularly and are not making sure residents who cannot feed themselves are being fed. This complaint further stated residents sit in urine for 5 to 6 hours and do not get changed until after 1pm.

On 10/05/2021, I conducted an interview with direct care staff member Nancy Dollahan. Ms. Dollahan stated she has not seen residents soaked in urine after she checked residents' briefs every 2 hours. Ms. Dollahan stated she believes residents are being changed regularly throughout the day and she has not found this to be an issue. Ms. Dollahan stated she has no knowledge of residents who require feeding assistance to have issues with getting fed and has not heard of any complaints regarding this.

On 10/08/2021, I conducted an interview with medication technician Amber Spence. Ms. Spence stated she works regularly with the 13 residents in the facility and is trained to administer medications to them. Ms. Spence stated the residents are checked and changed every 2 hours. Ms. Spence stated there are some residents that can be noncompliant which requires staff to check on them more often with prompting and redirecting. Ms. Spence stated she has not witnessed residents soiled when she checks them. Ms. Spence stated there are two residents who require total assistance with feeding and staff will take their meals to their bedrooms if they refuse to leave their bed. If the residents refuse to eat, contact will be made to their family and primary physician so they are made aware, and a plan can be put in place to ensure residents are getting the appropriate food intake. Residents are usually prescribed Ensure drinks as an added supplement to their diet if a resident's eating habit becomes a cause for concern. Ms. Spence stated residents refusing to eat does not happen that often. Ms. Spence stated she does not have any concerns for staff not doing their job and residents personal needs are attended to.

On 10/19/2021, I reviewed *Personal Service Plans* (plans) for all 13 residents in the facility. According to plans, Residents C and Resident D require hands on assistance with feeding and cannot eat independently on their own.

On 11/01/2021, I conducted interviews with manager Dawn Hussey and direct care staff member Olivia Robinson. Ms. Hussey stated things are going good and she has not heard of any issues with residents not being changed or fed. Ms. Hussey stated the residents are changed every 2 hours and she has not observed any resident soaked or soiled when she changes them. Ms. Hussey stated if a resident is resistant to care a meeting is held with the family and a plan is put in place to ensure their personal care needs are still met. Ms. Hussey stated there are usually 3 to 4 people working per shift which includes the shift supervisor and medication technician. Ms. Hussey stated there are only two residents that require assistance with eating and the staff are very good about making sure they are fed.

Ms. Robinson stated she changes the residents every 2 hours, and she has not witnessed any other staff not conducting checks as required. Ms. Robinson stated during her routine checks and changes, she has not found any resident to be soiled

or soaked. Ms. Robinson stated she is familiar with two residents in need of total assistance with eating and she has no knowledge of them not getting fed.

On 11/15/2021, I conducted an interview with direct care staff member Brennay Thompson. Ms. Thompson stated things have been going well with the residents and all staff members tend to residents as required. Ms. Thompson stated she checks the residents' briefs every two hours and has not found any issues with residents being soiled. Ms. Thompson stated she works with two other staff members regularly on shift and the staff members "do their part and help each other as needed". Ms. Thompson stated the residents who require total assistance with eating are fed regularly and on time and she has not heard of any complaints regarding residents not getting fed.

On 11/15/2021, I conducted an interview with nurse case manager Julie Medema from Elaring Caring. Ms. Medema stated she works with various residents in the facility who participates in hospice care services and has not observed any of her residents to have issues with being soiled or not being fed.

On 11/15/2021, I conducted an interview with nurse Kaycie Churchman from Kindred At Home who stated she works with various residents in the facility who participates in their program and have not observed any of her residents to be soiled or not fed.

On 11/22/2021, I conducted an onsite investigation at the facility with administrator Tami Miles and direct care staff member Jurnisha James. Ms. Miles stated the staff members does a good job conducting routine checks every two hours to check to see if residents need to be changed. Ms. Miles stated she monitors by conducting her own routine checks to ensure residents have what they need. Ms. Miles stated there are two residents that requires assistance with eating, and they are fed on time without incident. Ms. Miles has no concerns regarding residents not getting their personal care needs met.

Ms. James stated she changes residents every two hours and believe all the residents in the facility are changed regularly without delay by all staff members. Ms. James stated she has not found residents to be soaked and soiled when she conducts her routine checks of the residents. Ms. James stated there are two residents that require total assistance with feeding care, and she believes they are regularly fed on time. Ms. James stated she encourages the residents to get up out of bed and eat in the dining room however there has been times the residents refuse to leave their bedroom at which time she will bring their meal to their bedroom and feed them.

APPLICABLE RULE	
R 400.15305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.
ANALYSIS:	Based on my investigation which included interviews with medication technician Amber Spence, manager Dawn Hussey, direct care staff members Olivia Robinson, Brennay Thompson, Jurnisha James, nurse case manager Kaycie Churchman, nurse Julie Medema, administrator Tami Miles, and review of resident <i>Personal Service Plans</i> there is no evidence to support the allegation staff are not changing residents regularly or making sure that the residents who cannot feed themselves are being fed. Ms. Spence, Ms. Hussey, Ms. Robinson, Ms. Thompson, Ms. James all stated they conduct routine checks and changes residents every two hours and have not found residents to be soaked or soiled nor do they have knowledge of residents not being fed. Ms. Miles stated she monitors by conducting her own routine checks to ensure residents have what they need and have not found any issues with residents getting their personal care needs met. Ms. Churchman and Ms. Medema both stated they visit the facility regularly and have not found any of their residents that they care for to have issues with not getting their personal are needs met. The personal care needs of the residents are attended to at all times.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Staff members do not do anything when residents have bed sores.

INVESTIGATION:

This complaint also alleged direct care staff members do not do anything when resident have bed sores.

On 10/05/2021, I conducted an interview with direct care staff member Nancy Dollahan regarding this allegation. Ms. Dollahan stated she has no knowledge of any residents with bed sores. Ms. Dollahan stated most of the residents are prescribed with creams and powders to manage bed sores if and when they arise. Ms. Dollahan stated if she observes a bed sore on any of the residents, she will immediately contact the medication technician who will also examine the bed sore and determine

the next steps. Ms. Dollahan has no knowledge of residents having bed sores that are not tended to properly.

On 10/08/2021, I conducted an interview with medication technician Amber Spence. Ms. Spence stated she is notified when residents have bed sores by other staff members if she does not observe them herself. Ms. Spence stated there are two residents currently with bed sores and they are being monitored by staff members as well as hospice staff. Ms. Spence stated the bed sores are of no concern and they are being managed appropriately by repositioning the residents as often as possible, applying creams and routine monitoring. Ms. Spence stated most of the residents who end up with bed sores are on hospice and are not longer able to move around as usual due to the deterioration of their health.

On 11/01/2021, I conducted interviews with manager Dawn Hussey and direct care staff member Olivia Robinson. Ms. Hussey stated Resident A had a skin breakdown which was monitored and addressed by hospice staff and Resident B had a skin breakdown due to a foot ulcer and was being monitored and addressed by an outside agency provider. Ms. Hussey stated staff members do a good job keeping the residents repositioned and will apply prescribed treatment creams as needed. Ms. Hussey also stated, if necessary, the primary care physician will get involved. Ms. Hussey stated residents with bed sores are usually already followed by hospice care staff.

On 11/15/2021, I conducted an interview with direct care staff member Brennay Thompson. Ms. Brennay stated she has no knowledge of any resident with bed sores. Ms. Brennay stated if she notices a bed sore on any resident, she will immediately notify the medication technician. Ms. Brennay stated there have been residents who have been placed on hospice and received bed sores due to limited mobility. Ms. Brennay stated these residents are visited by their hospice nurse weekly and their bed sores are monitored and addressed by hospice staff. Ms. Thompson stated in the past she has routinely repositioned residents and applied prescription creams to manage bed sores on residents.

On 11/15/2021, I conducted an interview with nurse case manager Julie Medema from Elaring Caring. Ms. Medema stated she saw Resident A once a week and never observed any concerns with the care that was provided to Resident A by staff members. Ms. Medema stated Resident A developed shearing due to wearing an adult brief and lack of movement caused by her declining health. Ms. Medema stated she was notified by staff members right away when Resident A's skin breakdown began to develop. Ms. Medema stated the staff members did a fantastic job applying creams to Resident A's sore and repositioning Resident A every two hours. Ms. Medema stated she is regularly in the facility with various residents and the staff members have her personal cell phone number where she can be contacted at any time regarding Resident A's care needs. Ms. Medema stated the staff does a good job communicating with her and she has no concerns.

On 11/15/2021, I conducted an interview with nurse Kaycie Churchman from Kindred At Home regarding this allegation. Ms. Churchman stated she went to the facility two times a week to see Resident B who had a foot ulcer that was being monitored and addressed by her as well as his primary physician, Dr. Chung. Ms. Churchman stated wound physician orders were adjusted as needed depending on the condition of the ulcer. Ms. Churchman stated the staff members also did what was required of them by applying treatment creams and communicating to her as needed regarding Resident B. Ms. Churchman stated she has no concerns and believe the staff members tended to Resident B's foot ulcer as required.

On 11/22/2021, I conducted an onsite investigation at the facility with administrator Tami Miles and direct care staff member Jurnisha James. Ms. Miles stated residents who are placed on hospice care will often develop bed sores due to their lack of mobility and the staff members are very attentive to the resident wound care needs when bed sores develop which are reported to the medication technician upon their initial appearance for further instructions. Ms. Miles stated the staff members and hospice care staff work together to ensure the resident gets the appropriate treatment and stays as comfortable as possible.

Ms. James stated she has knowledge of one resident who currently has a sore due to an ulcer on his foot which is being monitored by hospice. Ms. James stated when she observes a skin breakdown, she will immediately notify the medication technician and manager. Ms. James stated hospice staff are often involved when a resident has a skin breakdown and provides additional monitoring and treatment to the resident's bed sore. Ms. James stated in the past she has applied prescribed powders and creams to the bed sore and repositions the resident every two hours to give relief to the bed sore. Ms. James has no knowledge of any resident with a bed sore that wasn't attended to.

APPLICABLE RULE	
R 400.15310	Resident health care.
	(4) In case of an accident or sudden adverse change in a resident's physical condition or adjustment, a group home shall obtain needed care immediately.

ANALYSIS:	<p>Based on my investigation which included interviews with medication technician Amber Spence, manager Dawn Hussey, direct care staff members Olivia Robinson, Brennay Thompson, Jurnisha James, nurse case manager Kaycie Churchman, nurse Julie Medema, and administrator Tami Miles there is no evidence to support the allegation staff does not do anything when residents have bed sores. Ms. Spence, Ms. Hussey, Ms. Robinson, Ms. Thompson, Ms. James all stated that residents are repositioned, and treatment creams are applied to manage bed sores along with additional monitoring and evaluation from hospice care staff. Ms. Miles stated residents who are placed on hospice care will often develop bed sores due to their lack of mobility and the staff members are very attentive to the resident wound care needs when bed sores develop which are reported to the medication technician upon their initial appearance for further instructions. Ms. Miles stated the staff members and hospice care staff work together to ensure the resident gets the appropriate treatment and stays as comfortable as possible. Ms. Churchman stated she visits Resident B and monitors his skin breakdown Ms. Churchman stated the staff members also did what was required of them by applying treatment creams and communicating to her as needed regarding Resident B. Ms. Churchman stated she has no concerns and believe the staff members tended to Resident B's foot ulcer as required. Ms. Medema stated she saw Resident A once a week and never observed any concerns with the care that was provided to Resident A by staff members. Ms. Medema stated she was notified by staff members right away when Resident A's skin breakdown began to develop. Ms. Medema stated the staff members did a fantastic job applying creams to Resident A's sore and repositioning Resident A every two hours. The facility obtains immediate care immediately when bed sores occur.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 11/22/2021 I conducted an exit conference with Michelle Aylor-Robbins. I informed Ms. Aylor-Robbins of my findings and allowed her an opportunity to ask questions and make comments.

IV. RECOMMENDATION

I recommend the current license status remain unchanged.



Ondrea Johnson
Licensing Consultant

11/22/2021
Date

Approved By:



11/29/2021

Dawn N. Timm
Area Manager

Date