

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

April 5, 2022

Lauren Gowman Grand Pines Assisted Living Center 1410 S. Ferry St. Grand Haven, MI 49417

> RE: License #: AH700299440 Investigation #: 2022A1028028

> > **Grand Pines Assisted Living Center**

Dear Mrs. Gowman:

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 feel free to 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 I am not available, and you need to speak to someone immediately, please contact the local office at (616) 356-0100.

Sincerely,

Julie Viviano, Licensing Staff Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 Cell (616) 204-4300

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

I. IDENTIFYING INFORMATION

| License #: | AH700299440 |
|--------------------------------|--|
| | |
| Investigation #: | 2022A1028028 |
| | |
| Complaint Receipt Date: | 02/04/2022 |
| | |
| Investigation Initiation Date: | 02/04/2022 |
| | 32.7 11.2 2 |
| Report Due Date: | 03/06/2022 |
| | |
| Licensee Name: | Grand Pines Assisted Living LLC |
| | grama i masa i masa a maga maga maga maga maga maga ma |
| Licensee Address: | 950 Taylor Ave. |
| | Grand Haven, MI 49417 |
| | Grana Havon, im 10 Hi |
| Licensee Telephone #: | (616) 846-4700 |
| Liconoco releptione #: | (010) 010 1100 |
| Administrator: | Lauren Gowman |
| Administrator: | Eddicii Gowindii |
| Authorized Representative: | Nancy Baar |
| Authorized Representative: | Trainey Baar |
| Name of Facility: | Grand Pines Assisted Living Center |
| rume of ruomity. | Grand I mes / toolsted Living Center |
| Facility Address: | 1410 S. Ferry St. |
| Tuolity Address. | Grand Haven, MI 49417 |
| | Grand Flavon, IVII 40417 |
| Facility Telephone #: | (616) 850-2150 |
| r domey receptions in: | (010) 000 2100 |
| Original Issuance Date: | 07/08/2009 |
| Original localito Bato. | 01700/2000 |
| License Status: | REGULAR |
| Licenses status: | THE OCE III |
| Effective Date: | 05/12/2021 |
| Lilotivo Dato. | 00/12/2021 |
| Expiration Date: | 05/11/2022 |
| Expiration Date. | 00/11/2022 |
| Capacity: | 177 |
| Capacity. | 111 |
| Program Type: | ALZHEIMERS, AGED |
| Program Type: | ALZHEIIVIERO, AGED |

II. ALLEGATION(S)

Violation Established?

| Resident A fell at the facility resulting in injury due to being intoxicated. | Yes |
|---|-----|
| intoxicated. | |

III. METHODOLOGY

| 02/04/2022 | Special Investigation Intake 2022A1028028 |
|------------|--|
| 02/04/2022 | Special Investigation Initiated - Letter APS referral emailed to Centralized Intake |
| 02/04/2022 | APS Referral APS referral emailed to Centralized Intake |
| 02/04/2022 | Contact - Document Received Received Resident A's contact MAR, service plan, and contact information from facility record coordinator Angela Breitwisch. |
| 03/8/2022 | Contact – Telephone call made Interviewed care staff Mikayla Thomas by telephone |
| 03/8/2022 | Contact – Telephone call made Interviewed care staff Donna Dear by telephone |
| 03/8/2022 | Contact – Telephone call made Attempt to interview Zach Birmingham by telephone. No contact made. |
| 04/05/2022 | Exit Interview |

ALLEGATION:

Resident A fell at the facility resulting in injury due to being intoxicated.

INVESTIGATION:

On 2/4/2022, the Bureau investigation was opened due to a facility incident report.

On 2/4/2022, Adult Protective Services (APS) made the referral to Centralized Intake.

On 2/4/2022, I received email correspondence from facility record manager, Angela Breitwisch. Ms. Breitwisch's email correspondence read "So we do not have a alcohol policy due to HFA. Once a resident has shown they abuse it then doctor steps in and writes an order for consumption/staff admin. Debora is meeting with Tania Vandyke, NP on Wednesday of this week to discuss the drinking. Resident purchases own groceries through Shipt and gets it through there. Debora verbally told staff that she was drunk when she fell, and also speaks of it to staff." Ms. Breitwisch also provided a copy of Resident A's service plan and medication administration record (MAR) for my review. Ms. Breitwisch reported Resident A does not have an authorized representative and is in charge of self and own power of attorney.

On 3/8/2022, I interviewed care staff Mikayla Thomas by telephone. Ms. Thomas reported Resident A fell resulting in a skin tear. Ms. Thomas reported Resident A is modified independent except for showers in which Resident A requires supervision for overall safety. Ms. Thomas reported she found Resident A on the floor in front of the recliner and when asked what happened, Resident A reported, "I'm drunk". Ms. Thomas called the med technician and the supervisor per protocol to assess Resident A and it was discovered Resident A had skin tear to the left elbow requiring treatment. Ms. Thomas reported Resident A has alcohol delivered regularly through a local grocery service with the most recent delivery on 3/7/2022. Resident A eats all meals and drinks in [their] room. Ms. Thomas reported to her knowledge the facility does not have a policy concerning the consumption of alcohol by residents and there has been no staff training provided concerning residents and the consumption of alcohol.

On 3/8/2022, I interviewed care staff Donna Dear by telephone. Ms. Dear reported Resident A eats all meals and consumes alcohol in [their] room. Resident A has the alcohol delivered by a local grocery store. Ms. Dear reported Resident A fell with injury, and she asked Resident A what happened, Resident A responded, "I was too drunk to remember". Ms. Dear reported while she has not witnessed Resident A drink, there is alcohol in Resident A's room, and it is being ordered and replaced regularly. Ms. Dear reported Resident A uses a walker in the room and only requires assistance with showers for overall safety. Ms. Dear reported to her knowledge there is no policy or procedures concerning the consumption of alcohol by residents and she has not participated in any staff training about this either.

On 3/8/2022, I reviewed Resident A's medication administration record which revealed Resident A takes the following daily:

- Takes two tablets of Acetaminophen (1000mg) by mouth three times daily.
- Takes one tablet of Buspirone (5mg) by mouth twice daily.
- Takes one tablet of Cetirizine (mg) by mouth daily.
- Takes one tablet of Duloxetine (30mg) one time daily.
- Takes one tablet of Ferrous Sulf EC (325mg) by mouth twice daily.
- Takes one tablet of Metoprolol PO daily.
- Takes one tablet of Buspar (10mg) PO BID.

There is no evidence in the MAR of a physician order granting clearance for Resident A to consume alcohol while taking medications.

I reviewed Resident A's incident report which revealed Resident A was found in the supine position in front the recliner on 1/26/2022 at 9pm. Resident A incurred a skin tear to the left elbow requiring treatment. Resident A denied any pain and ROM (range of motion) was WNL (within normal limits). A camel device was used to assist Resident A to a standing position. Resident A "mentioned being drunk and missed the chair and started laughing. PCP was faxed and awaiting staff order for staff to admin/monitor use of alcohol".

I reviewed Resident A's service plan which revealed Resident A requires one person assist for showers, dressing, and peri care. Resident A cannot leave the building unattended, and all medication is managed by care staff.

| APPLICABLE RULE | | |
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| R 325.1921 | Governing bodies, administrators, and supervisors. | |
| | (1) The owner, operator, and governing body of a home shall do all of the following: | |
| | (a) Assume full legal responsibility for the overall conduct and operation of the home. | |
| | (b) Assure that the home maintains an organized program to provide room and board, protection, | |
| | supervision, assistance, and supervised personal care for its residents. | |
| | (c) Assure the availability of emergency medical care required by a resident. | |
| | (d) Appoint a competent administrator who is | |
| | responsible for operating the home in accordance with the established policies of the home. | |

| 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:

On 1/26/22, Resident A fell in room resulting in skin tear. Resident A self-reported to be intoxicated during this incident. Resident A has alcohol delivered regularly to the facility through a local grocery service, with the most recent delivery on 3/7/2022.

Review of Resident A's service plan revealed Resident A requires assist with showers, dressing, and peri care. Resident A's medications are managed by care staff. However, review of Resident A's medication record revealed there is no physician order in place allowing Resident A to consume alcohol when taking medications. Resident A takes the following medications daily that are contraindicated with the consumption of alcohol:

- Takes two tablets of Acetaminophen (1000mg) by mouth three times daily. The Mayo Clinic reports an excessive amount of alcohol should not be consumed with Acetaminophen due to severe risk of liver damage.
- Takes one tablet of Buspirone (5mg) by mouth twice daily. The Mayo Clinic reports the use of alcohol should be avoided with the use of Buspirone. Alcohol can increase the nervous system side effects such as dizziness, drowsiness, and difficulty concentrating. Some people may also experience impairment in thinking and judgment.
- Takes one tablet of Cetirizine (mg) by mouth daily.
 The Mayo Clinic reports mixing Cetirizine with alcohol can cause drowsiness or make a person less alert.
- Takes one tablet of Duloxetine (30mg) one time daily.
 The Mayo Clinic reports combining Duloxetine and
 alcohol can cause serious side effects to occur.
 Alcohol should be avoided when taking this
 medication.
- Takes one tablet of Ferrous Sulf EC (325mg) by mouth twice daily. The Mayo Clinic reports alcohol consumption should be limited when taking this medication.

| Not having a facility resident alcohol consumption policy are procedures in place when resident medication is managed care staff presents a significant risk of harm to Resident A other residents who have prescribed medications in which alcohol has contradictory effect when consumed together. | by | |
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| | | |
| Takes one tablet of Buspar (10mg) PO BID. The Clinic reports alcohol should be avoided when ta this medication as it may increase any drowsines dizziness. | king | |
| Takes one tablet of Metoprolol PO daily. The Ma Clinic reports a person should avoid drinking alconducted due to increased drowsiness and dizziness. | | |

IV. RECOMMENDATION

Contingent upon an approved correction plan, I recommend the status of this license remain unchanged.

| Julio hnano | |
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| V | 3/8/2022 |
| Julie Viviano Licensing Staff | Date |
| Approved By: | |
| (mohed) Maore | 04/05/2022 |
| Andrea L. Moore, Manager Long-Term-Care State Licensing S | Date Section |