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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 25, 2022

Michael Maurice
Sugarbush Living, Inc.
15125 Northline Rd.
Southgate, MI 48195

RE: License #:	AS250316843
Investigation #:	2022A0872033
	Sugarbush Living-Woodkrest House

Dear Mr. Maurice:

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 that I am not available, and you need to speak to someone immediately, please contact the local office at (906) 226-4171.

Sincerely,

A handwritten signature in black ink that reads "Susan Hutchinson". The signature is written in a cursive, flowing style.

Susan Hutchinson, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(989) 293-5222

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS250316843
Investigation #:	2022A0872033
Complaint Receipt Date:	04/25/2022
Investigation Initiation Date:	04/26/2022
Report Due Date:	06/24/2022
Licensee Name:	Sugarbush Living, Inc.
Licensee Address:	15125 Northline Rd. Southgate, MI 48195
Licensee Telephone #:	(810) 496-0002
Administrator:	Michael Maurice
Licensee Designee:	Michael Maurice
Name of Facility:	Sugarbush Living-Woodkrest House
Facility Address:	1152 WoodKrest Flint, MI 48532
Facility Telephone #:	(810) 496-0002
Original Issuance Date:	02/29/2012
License Status:	REGULAR
Effective Date:	08/14/2020
Expiration Date:	08/13/2022
Capacity:	6
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Concerns of medical neglect, safety violations, neglect, and unsanitary living conditions regarding Resident A.	No
Additional Findings	Yes

III. METHODOLOGY

04/25/2022	Special Investigation Intake 2022A0872033
04/26/2022	Special Investigation Initiated - On Site Unannounced
04/28/2022	Contact - Document Sent I emailed the licensee designee, Mike Maurice, requesting information
05/23/2022	APS Referral I made an APS complaint via email
05/23/2022	Contact - Telephone call made I interviewed Relative A1
05/24/2022	Contact - Telephone call made I interviewed Guardian A1
05/24/2022	Exit Conference I conducted an exit conference with Mr. Maurice via telephone
05/24/2022	Inspection Completed-BCAL Sub. Compliance

ALLEGATION: Concerns of medical neglect, safety violations, neglect, and unsanitary living conditions regarding Resident A.

INVESTIGATION: On 4/26/22, I conducted an unannounced onsite inspection of Sugarbush Living-Woodkrest House. I interviewed staff Amity Thompson, Resident A, and the licensee designee, Michael Maurice.

Ms. Thompson said that she has worked at this facility since January 2022 and has worked for Sugarbush Living, Inc. for two years. According to Ms. Thompson, Resident

A's catheter was removed in January 2022. Resident A wears a brief, but she is able to change her own brief and gets herself to and from the bathroom. Resident A had a UTI in March 2022 and was prescribed antibiotics. She took her antibiotics as prescribed and said that she felt fine. Approximately one week later, Resident A showed Ms. Thompson that she had a discharge. Ms. Thompson called Resident A's doctor and they are in the process of making a referral to a urologist. Ms. Thompson said that Resident A refuses to allow staff to shower her, so her granddaughter comes in twice per week to bathe her. Ms. Thompson said that Resident A will not allow staff to wash her bedding or her clothes and insists on sending her laundry home with relatives to take care of. Resident A does not allow staff to clean her room except to vacuum. Ms. Thompson said that Resident A does not complain to staff about anything, but she will complain to family members about things.

Mr. Maurice said that Resident A has resided at this facility for approximately two years. He said that Resident A has a public guardian and Resident A's daughter has made complaint after complaint about the facility and about Resident A's guardian. According to Mr. Maurice, Resident A has always been resistant to allowing staff to shower her and now she absolutely refuses so the family has Resident A's granddaughter come in the facility to shower her. Mr. Maurice said that Resident A self-transfers from her bed to her wheelchair and she is able to toilet herself. According to Mr. Maurice, staff does a good job taking care of Resident A and none of the allegations are true.

I met with Resident A who was lying in bed, in her pajamas. She appeared to be clean and had on clean clothing. She had a cup of water by her bedside and told me that staff takes good care of her, and they always make sure she has water to drink. Resident A told me that she did have a UTI a while ago but does not have any issues now. I observed that Resident A had a lot of belongings in her room, on her surfaces but nothing hazardous and there was no odor or evidence of neglect. I asked Resident A if staff cleans her room and she initially said, "They don't have time." I then asked her if I could have staff come in her room right now to straighten things up and she said, "No, they don't need to be touching my things."

I asked Resident A if she refuses to allow staff to bathe her and initially, she said, "They don't have time to do that." I then asked Resident A if staff could come and give her a shower today and she said, "I don't want them bathing me. My granddaughter can do it." Resident A became agitated when I talked with her about staff cleaning her room and/or bathing her and said that staff is not allowed to take anything out of her room.

While at the facility, I inspected both bathrooms and found them to be clean, with no evidence of an odor. Both bathrooms had shower chairs and the necessary safety grab bars in the shower area. I was able to walk freely down the hallways and there were no barriers that would prevent a wheelchair or person from safely maneuvering throughout the facility.

On 5/23/22, I reviewed Adult Foster Care paperwork related to Resident A. According to her Health Care Appraisal, she is diagnosed with cardiomyopathy, hypertension, Type 2

diabetes, hypothyroidism, dementia, anxiety, and depression. She uses a wheelchair and is on a regular diet. According to her Assessment Plan, she does not like to socialize, and she is not very social. She requires a stand-by assist with bathing, "if she will let you." She uses a wheelchair and a hospital bed.

I reviewed a doctor's note dated 12/17/21 completed by FNP, Stephanie Fowler. Resident A was seen as a follow up from her hospital visit. She had been admitted to McLaren Hospital and was then admitted to Kith Haven for rehabilitation. FNP Fowler reported that Resident A has dementia, is a poor historian, and was unable to give an explanation as to why she was hospitalized. Resident A had a foley catheter in place and reported to FNP Fowler that it was placed because she was "lazy" and did not want to get up and go to the bathroom.

I reviewed another doctor's note dated 01/31/22 completed by Dr. Randolph Schumacher. Resident A was seen by Dr. Schumacher for a follow-up visit. Dr. Schumacher noted no concerns.

On 05/23/22, I interviewed Relative A1 via telephone. Relative A1 said she has had concerns about Resident A for several months but said that she does not have any specific allegations against Sugarbush Living-Woodkrest House. Relative A1 said that her concerns have centered around Resident A's current guardian and her doctor. She said that Resident A has been appointed a new guardian, Eric Mead, who will be taking over tomorrow.

On 05/24/22, I interviewed Guardian A1 via telephone. Guardian A1 said that she was Resident A's guardian for 3-4 years, but she resigned at the court hearing yesterday. According to Guardian A1, she has never had any concerns about the care or treatment that Resident A receives at Sugarbush Living-Woodkrest House. Guardian A1 said that she feels staff does a good job caring for Resident A.

APPLICABLE RULE	
R 400.14305	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:	<p>Staff Amity Thompson and licensee designee, Michael Maurice said that Resident A is resistant to staff bathing her and cleaning her room. Ms. Thompson and Mr. Maurice said that staff makes sure they assist Resident A with all her ADL's, and they provide care to her per doctor's orders.</p> <p>Resident A initially told me that staff "doesn't have time" to assist her with bathing or cleaning her room but she eventually admitted that she prefers her granddaughter assist her.</p> <p>Relative A1 said that she does not have any specific allegations against Sugarbush Living-Woodkrest House but has concerns about Resident A's guardian and doctor.</p> <p>Guardian A1 said that she has never had any concerns about the care or treatment that Resident A receives at Sugarbush Living-Woodkrest House.</p> <p>I conclude that there is insufficient evidence to substantiate this rule violation at this time.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION: During my onsite inspection on 04/26/22, I found a cup near Resident A's bedside that had 6 yellow pills and 1 orange pill in it. Resident A told me that the pills are valium and were prescribed to her by her doctor and that she takes them at night if she needs them. I also found a tube of Aspercreme. I brought these items to the licensee designee, Michael Maurice, and he said that he will address the issue with staff to ensure that all Resident A's medications will be kept in a locked cabinet or drawer.

I reviewed Resident A's medication logs from February-April 2022. I noted that Dr. Schumacher noted that Resident A is allowed to apply Aspercreme to her rib cage on her own. However, Resident A is prescribed 5mg of Diazepam (Valium) at bedtime, but Dr. Schumacher did not indicate that Resident A is allowed to administer this medication on her own.

APPLICABLE RULE	
R 400.14312	Resident medications.
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician

	or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.
ANALYSIS:	During my onsite inspection on 04/26/22, I found a cup near Resident A's bedside that had 6 yellow pills and 1 orange pill in it. Resident A told me that the pills are valium and were prescribed to her by her doctor and that she takes them at night if she needs them. I conclude that there is sufficient evidence to substantiate this rule violation at this time.
CONCLUSION:	VIOLATION ESTABLISHED

On 05/24/22, I conducted an exit conference with the licensee designee, Michael Maurice, via telephone. I discussed the results of my investigation and explained which rule violation I am substantiating. Mr. Maurice agreed to complete and submit a corrective action plan upon the receipt of my investigation report.

IV. RECOMMENDATION

Upon the receipt of an acceptable corrective action plan, I recommend no change in the license status.

Susan Hutchinson

May 24, 2022

Susan Hutchinson Licensing Consultant	Date
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Approved By:

Mary Holton

May 25, 2022

Mary E Holton Area Manager	Date
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