



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 7, 2022

Bridget Lutzke
CSM Alger Heights, LLC
1019 28th St.
Grand Rapids, MI 49507

RE: License #: AM410384528
Investigation #: 2022A0583035
Alger Heights - South

Dear Mrs. Lutzke:

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 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 (616) 356-0183.

Sincerely,

A handwritten signature in cursive script, appearing to read "Toya Zylstra".

Toya Zylstra, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 333-9702

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM410384528
Investigation #:	2022A0583035
Complaint Receipt Date:	06/30/2022
Investigation Initiation Date:	06/30/2022
Report Due Date:	07/30/2022
Licensee Name:	CSM Alger Heights, LLC
Licensee Address:	1019 28th St. Grand Rapids, MI 49507
Licensee Telephone #:	(616) 229-0427
Administrator:	Bridget Lutzke
Licensee Designee:	Bridget Lutzke
Name of Facility:	Alger Heights - South
Facility Address:	1025 28th St. SE Grand Rapids, MI 49508
Facility Telephone #:	(616) 229-0427
Original Issuance Date:	10/25/2016
License Status:	REGULAR
Effective Date:	04/25/2021
Expiration Date:	04/24/2023
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED, AGED, DEVELOPMENTALLY DISABLED, MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Resident A was not supervised adequately by facility staff.	No
Additional Findings	Yes

III. METHODOLOGY

06/30/2022	Special Investigation Intake 2022A0583035
06/30/2022	Special Investigation Initiated - Telephone LARA Licensing Consultant Megan Aukerman
07/06/2022	Inspection Completed On-site Licensee Designee Bridget Lutzke, Staff Melanie Chelette, Resident A
07/07/2022	APS Referral
07/07/2022	Exit Conference Licensee Designee Bridget Lutzke

ALLEGATION: Resident A was not supervised adequately by facility staff.

INVESTIGATION: On 06/30/2022 complaint allegations were received from the BCAL online reporting system which alleged that Resident A “was struck by a car” because facility staff failed to “provide adequate supervision”.

On 07/06/2022 I completed an unannounced onsite investigation at the facility and privately interviewed Licensee Designee Bridget Lutzke, staff Melanie Chelette, and Resident A.

Licensee Designee Bridgette Lutzke stated Resident A is her own legal decision maker and Resident A’s Assessment Plan for AFC Residents permits Resident A to move independently within the community. Ms. Lutzke stated Resident A utilizes an electric chair for mobility. Ms. Lutzke stated that on 06/04/2022 Resident A informed staff she was leaving the facility to purchase some items from Meijer located one mile from the facility at 1540 28th St SE, Grand Rapids, MI 49508. Ms. Lutzke stated while enroute, Resident A was struck by a vehicle as Resident A utilized the crosswalk on 28th street. Ms. Lutzke stated the vehicle that struck Resident A left the scene. Ms. Lutzke stated Resident A was un-injured however Emergency Medical Services transported Resident A to the Emergency Department out of an abundance of caution and Resident A was discharged the same day. Ms. Lutzke

stated she completed an Incident Report and forwarded the document LARA for review.

Staff Melanie Chelette stated she worked at the facility on 06/04/2022. Ms. Chelette stated on that day at 11:00 am Resident A informed Ms. Chelette that Resident A would be riding her electric chair to Meijer. Ms. Chelette stated Resident A displayed no indications when she left the facility that she was disoriented or displaying any concerning behaviors that should have led staff to prevent Resident A from leaving the facility. Ms. Chelette stated at approximately 11:55 am that same day Ms. Chelette stated an officer from the Grand Rapids Police Department visited the facility and stated Resident A had been struck by a vehicle while crossing 28th street at the cross walk and was enroute to the Emergency Department as a precaution. Ms. Chelette stated Resident A returned to the facility that same day at approximately 4:00 pm with no injuries and slight damage to her electric chair.

Resident A stated she moves independently within the community and utilizes an electric chair for mobility. Resident A stated on 06/04/2022 she informed Ms. Chelette at 11:00 am that she was going to Meijer. Resident A stated while crossing 28th street via a crosswalk, she was struck by a vehicle that fled the scene. Resident A stated she did not obtain injuries and was not knocked out of her electric chair. Resident A stated her electric chair was hit by the vehicle and consequently the electric chair stopped working because the electrical system was damaged. Resident A stated two unknown passersby stopped to help push Resident A out of the street and called Emergency Medical Services. Resident A stated she was uninjured however she was transported to the Emergency Department for examination and released that same day. Resident A stated she is satisfied with the level of care provided by staff.

While onsite I observed Resident A's Assessment Plan for AFC Residents signed 03/04/2021 indicates Resident A moves independently in the community.

On 07/07/2022 I emailed complaint allegations to Adult Protective Services Centralized Intake.

On 07/07/2022 I completed an Exit Conference with Licensee Designee Bridget Lutzke via telephone. Ms. Lutzke stated she agreed with the findings.

APPLICABLE RULE	
R 400.14303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.

ANALYSIS:	<p>Resident A's Assessment Plan for AFC Residents indicates Resident A moves independently in the community.</p> <p>Resident A stated she moves independently within the community and utilizes an electric chair for mobility. Resident A stated on 06/04/2022 she informed Ms. Chelette at 11:00 am that she was going to Meijer. Resident A stated while crossing 28th street via a crosswalk, she was struck by a vehicle that fled the scene. Resident A stated she was uninjured however was transported to the Emergency Department for examination and released that same day. Resident A stated she is satisfied with the level of care provided by staff.</p> <p>Staff Melanie Chelette stated she worked at the facility on 06/04/2022. Ms. Chelette stated on that day at 11:00 am Resident A informed Ms. Chelette that Resident A would be riding her electric chair to Meijer. Ms. Chelette stated Resident A displayed no indications when Resident A left the facility that she was disoriented or displaying any concerning behaviors that should have led to staff to prevent Resident A from leaving the facility.</p> <p>A preponderance of evidence does not support violation of the applicable rule.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS: Resident A's Assessment Plan for AFC Residents was not completed annually.

INVESTIGATION: While onsite on 07/06/2022 I observed Resident A's Assessment Plan for AFC Residents is signed 03/04/2021.

On 07/07/2022 I completed and Exit Conference with Licensee Designee Bridget Lutzke via telephone. Ms. Lutzke stated she agreed with the findings and would submit an acceptable Corrective Action Plan.

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible

	agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
ANALYSIS:	While onsite on 07/06/2022 I observed Resident A's Assessment Plan for AFC Residents is signed 03/04/2021. A preponderance of evidence supports violation of the applicable rule.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable Corrective Action Plan, I recommend no change to the license.

07/07/2022

Toya Zylstra
Licensing Consultant

Date

Approved By:

07/07/2022

Jerry Hendrick
Area Manager

Date