



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 26, 2022

Hemant Shah
Cranberry Park West Bloomfield LLC, Suite 230
25500 Meadowbrook Rd
Novi, MI 48375

RE: License #: AH630402042
Cranberry Park of West Bloomfield
2450 Haggerty Rd
West Bloomfield, MI 48323

Dear Mr. Shah:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 dates 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 home for the aged authorized representative and a date.

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 feel free to contact the local office at (517) 284-9730.

Sincerely,

Elizabeth Gregory-Weil, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 347-5503

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #:	AH630402042
Licensee Name:	Cranberry Park West Bloomfield LLC
Licensee Address:	Suite 230 25500 Meadowbrook Rd Novi, MI 48375
Licensee Telephone #:	(248) 692-4355
Authorized Representative:	Hemant Shah
Administrator:	Rene Parks
Name of Facility:	Cranberry Park of West Bloomfield
Facility Address:	2450 Haggerty Rd West Bloomfield, MI 48323
Facility Telephone #:	(248) 671-4204
Original Issuance Date:	03/10/2022
Capacity:	53
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/26/2022

Date of Bureau of Fire Services Inspection if applicable: 08/11/2022- temporary until 10/14/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 08/26/2022

No. of staff interviewed and/or observed 7
No. of residents interviewed and/or observed 9
No. of others interviewed 0 Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. The facility does not hold resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
The Bureau of Fire Services reviews fire drills, however facility disaster planning procedures were reviewed.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 2 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

<p>This facility was found to be in non-compliance with the following rules and public health code statutes:</p>	
MCL 333.20201	<p>Policy describing rights and responsibilities of patients or residents;</p>
	<p>(1) A health facility or agency that provides services directly to patients or residents and is licensed under this article shall adopt a policy describing the rights and responsibilities of patients or residents admitted to the health facility or agency. Except for a licensed health maintenance organization, which shall comply with chapter 35 of the insurance code of 1956, 1956 PA 218, MCL 500.3501 to 500.3580, the policy shall be posted at a public place in the health facility or agency and shall be provided to each member of the health facility or agency staff. Patients or residents shall be treated in accordance with the policy.</p>
<p>The facility did not have a copy of the resident rights policy posted.</p>	
MCL 333.20201	<p>Policy describing rights and responsibilities of patients or residents;</p>
	<p>(2) The policy describing the rights and responsibilities of patients or residents required under subsection (1) shall include, as a minimum, all of the following:</p> <p style="padding-left: 40px;">(d) A patient or resident is entitled to privacy, to the extent feasible, in treatment and in caring for personal needs with consideration, respect, and full recognition of his or her dignity and individuality.</p>

<p>An empty blister pack of medication belonging to Resident A was located on top of a med cart. The blister pack contained personal and confidential information pertaining to Resident A. Staff were not near the cart at the time of the observation.</p>	
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>
<p>At the time of my on-site inspection, I observed that Resident B had a device on his bed commonly referred to as a “bed assist” that slid underneath the mattress. The device poses a serious risk of entrapment and was not properly affixed or secured to the bed frame.</p>	
R 325.1922	Admission and retention of residents.
	<p>(5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.</p>
<p>Resident B's service plan was not updated to include the use of a bedside assistive device or the instruction(s) for its use.</p>	
R 325.1923	Employee's health.
	<p>(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005 (http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at</p>

	multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.
<p>Employees A and B did not receive their TB screens within the timeframe required by this rule. Employee A was hired on 3/23/22 and had her TB screen completed on 3/7/22. Employee B was hired on 4/4/22 and her TB screen was completed on 1/13/22. The facility was unable to produce any TB screen records for Employee C, who was hired on 6/1/22.</p>	
R 325.1932	Resident medications.
	(1) Medication shall be given, taken, or applied pursuant to labeling instructions or orders by the prescribing licensed health care professional.
<p>Resident A missed one or more doses of medication on 7/20/22, 7/21/22, 7/22/22 and 7/23/22. Staff failed to document any reason for the missed medication administrations, therefore it is unknown why the resident did not receive his scheduled medication.</p>	
R 325.1954	Meal and food records.
	The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.
<p>Per dietary staff, the facility did not maintain a meal census prior to 8/7/22.</p>	
R 325.1973	Heating.
	(1) A home shall provide a safe heating system that is designed and maintained to provide a temperature of at least 72 degrees Fahrenheit measured at a level of 3 feet above the floor in rooms used by residents.
<p>Four thermostats throughout common areas of the facility were set at temperatures below 72 degrees Fahrenheit, with the lowest being set at 68 degrees.</p>	

R 325.1976	Kitchen and dietary.
	(8) A reliable thermometer shall be provided for each refrigerator and freezer.
The mini refrigerator located in the facility's private dining room did not contain a thermometer.	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and approval from The Bureau of Fire Services, renewal of the license is recommended.



08/26/2022

Elizabeth Gregory-Weil
Licensing Consultant

Date