



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 31, 2022

Connie Clauson
Leisure Living Mgt of Portage
Suite 203
3196 Kraft Ave SE
Grand Rapids, MI 49512

RE: License #: AL390007092
Investigation #: 2022A1024053
Fountain View Ret Vil of Port #1

Dear Mrs. Clauson:

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 #:	AL390007092
Investigation #:	2022A1024053
Complaint Receipt Date:	09/07/2022
Investigation Initiation Date:	09/09/2022
Report Due Date:	11/06/2022
Licensee Name:	Leisure Living Mgt of Portage
Licensee Address:	Suite 203 3196 Kraft Ave SE Grand Rapids, MI 49512
Licensee Telephone #:	(616) 285-0573
Administrator:	Connie Clauson
Licensee Designee:	Connie Clauson
Name of Facility:	Fountain View Ret Vil of Port #1
Facility Address:	7818 Kenmure Drive Portage, MI 49024
Facility Telephone #:	(269) 327-9595
Original Issuance Date:	05/02/1989
License Status:	REGULAR
Effective Date:	09/04/2022
Expiration Date:	09/03/2024
Capacity:	20
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Resident A is not getting his personal care needs met.	No
The facility is infested with bedbugs and nothing is being done.	No
Resident A's bedding is not changed or cleaned frequently.	No
Resident B does not have any of her clothes.	No

III. METHODOLOGY

09/07/2022	Special Investigation Intake 2022A1024053
09/09/2022	Special Investigation Initiated – Telephone call with Adult Protective Service (APS) Specialist Gene Coulter
09/09/2022	APS Referral-Complaint received from APS
09/19/2022	Inspection Completed On-site with direct care staff members Jackie Murrell, Shequala Langston, Sherry Simmons, Taria James, Tracy Bresson and regional director Karen Hodge
09/27/2022	Contact - Document Received-new allegations from intake #19058 regarding Resident B
10/25/2022	Contact-Face to Face with direct care staff member Melvina Higgins, Tasha Glover, Naquaria Ward, manager Tammy Ward, and staffing director Alexis Worley
10/25/2022	Contact-Telephone call made with Relative B1
10/25/2022	Contact-Document Received-Pest Control Contract/Invoice
10/25/2022	Contact-Document Received-email correspondence with regional director Karen Hodge
10/27/2022	Exit Conference with licensee designee Connie Clauson

ALLEGATION:

Resident A is not getting his personal care needs met.

INVESTIGATION:

On 9/7/2022, I received this complaint through the Bureau of Community and Health Systems (BCHS) online complaint system. This complaint alleged Resident A is not

getting his personal care needs met. The complaint further alleged Resident A sits in feces for long periods of time without changing his disposal underwear or getting his catheter emptied.

On 9/9/2022, I conducted an interview with Adult Protective Service (APS) Specialist Gene Coulter who stated that he is also investigating these allegations.

On 9/19/2022, I conducted an onsite investigation at the facility with direct care staff members Jackie Murrell, Shequala Langston, Sherry Simmons, Taria James, Tracy Bresson, Resident A, and regional director Karen Hodge. Ms. Murrell, Ms. Langston, Ms. Simmons, Ms. James and Ms. Bresson all stated Resident A's brief is changed regularly as needed and there has not been any issues with his catheter not getting emptied as required. Ms. Murrell stated Resident A is verbal and communicates when he needs to have his underwear or brief changed. Ms. Murrell stated she has never seen old feces in Resident A's underwear that would indicate that he is not getting changed regularly.

Ms. Langston stated she works regularly with Resident A and has observed Resident A get washed and cleaned every time staff provides dressing assistance which is daily. Ms. Langston stated Resident A uses a wheelchair and prefers to stay in his bed most of the time. Ms. Langston stated Resident A usually gets out of bed about once a day to interact with others in the common areas of the facility. Ms. Langston stated she checks to see if Resident A needs changing about every two hours and have not observed any signs of Resident A not getting changed regularly nor has she heard of any reports of this being an issue.

Ms. Simmons stated that she works regularly with Resident A and she does "rounds" every two hours to check to see if Resident A needs to be changed. Ms. Simmons stated Resident A verbalizes if he needs to be changed however will check his briefs herself to be sure he is dry. Ms. Simmons stated she has not heard of any reports that Resident A is not changed regularly, nor has she seen any issues with this.

Ms. James stated she is the life enrichment director and goes to Resident A often to see if he wants to socialize in the common areas. Ms. James stated she has seen staff members check on Resident A as required and has not seen any indication that Resident A is not changed regularly, nor has she heard of any reports of this being an issue. Ms. James stated she also provides direct care assistance and assist staff as needed therefore she has emptied Resident A's catheter before and will check to see if he needs changing. Ms. James stated Resident A is getting the appropriate care he requires.

Ms. Bresson stated she works regularly with Resident A and she checks to see if Resident A needs to be changed about every two hours. Ms. Besson stated Resident A will also verbalize when he needs to be changed. Ms. Besson stated she has not seen any issues that would indicate that Resident A is not changed

regularly nor has she heard any reports of this.

Ms. Hodge stated she works daily in the facility and has not heard of any issues with Resident A not getting changed regularly nor has he made any complaints to her. Ms. Hodge stated she believes Resident A is getting his personal care needs met.

While at the facility, I interviewed Resident A who stated that he believes the staff members can be lazy at times. Resident A stated he believes staff has waited for a long period of time to check on him to see if he needs to be changed however, he does not know specifically how long the staff have waited to come in his room to check on him. Resident A stated it “seems like forever.” Resident A stated he does inform staff members when he needs to be changed as well or when he believes his catheter needs to be drained if he does not feel like draining his catheter himself as Resident A explains that he can complete this task on his own.

While at the facility, I reviewed the facility’s *Resident Evaluation* for Resident A. According to this evaluation Resident A can stand however cannot walk and uses a wheelchair. Resident A needs assistance with dressing due to weak lower extremities. Resident A requires assistance with bathing in hard-to-reach areas such as lower extremities and has a catheter that requires assistance. Staff is to monitor and report any changes to the catheter site and manage Resident A’s colostomy, catheter, and bedside commode.

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 direct care staff members Jackie Murrell, Shequala Langston, Sherry Simmons, Taria James, and Tracy Bresson, Resident A, regional director Karen Hodge and review of Resident A's <i>Resident Evaluation</i> , there is no evidence Resident A is not getting his personal care needs met. All the staff members interviewed stated Resident A is changed regularly as needed and there has not been any issues with his catheter not getting emptied as required. Staff members also reported that there have been no signs that would indicate that Resident A is not changed regularly. Ms. Hodge works regularly in the facility and has not observed any issues or have received any complaints from Resident A regarding this issue. Resident A's personal care needs are attended to at all times.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

The facility is infested with bedbugs, and nothing is being done.

INVESTIGATION:

This complaint also alleged that the facility is infested with bed bugs, and nothing is being done.

On 9/19/2022, I conducted an onsite investigation at the facility with direct care staff members Jackie Murrell, Shequala Langston, Sherry Simmons, Taria James, Tracy Bresson and regional director Karen Hodge who all stated that they have been having issues with an infestation of bedbugs for several months. All stated pest control companies inspected the facility and provided treatment however, they have yet to remedy their bedbug issue. Ms. Murrell, and Ms. Bresson both stated they have not seen bedbugs in the facility personally, however it has been reported to them that this has been an issue.

Ms. Langley stated the bedbugs are mainly in Resident A's bedroom and she has seen Orkin Pest Control company in the facility to spray Resident A's bedroom routinely. Ms. Langley stated she believes the treatments are showing improvement.

Ms. James stated they have had professional companies to treat for bedbugs in the facility since February 2022 and she believes the situation is getting better as she has not seen any bedbugs in the facility recently. Ms. James stated she has observed Orkin Pest Control in the facility multiple times a month to provide treatment for bedbugs.

Ms. Hodge stated the facility was working with Orkin Pest Control for months to treat

the facility weekly to treat for bedbugs however have recently switched to a new company to try different treatment methods that Orkin was not able to provide. Ms. Hodge stated the bedbugs are concentrated in two resident bedrooms in the facility and one of those rooms is Resident A's bedroom. Ms. Hodge stated they will continue to enact their pest control program which has included various treatment methods.

While at the facility, I also interviewed Resident A regarding this allegation who stated that he had bedbugs in his room however he has not seen any bedbugs lately. Resident A also stated he has observed companies in his room to spray for bedbugs regularly.

While at the facility I reviewed the facility's pest control statements and contracts with Orkin. According to the statement, weekly standard bedbug services were provided and billed to the facility for service dates 7/26/2022, 8/2/2022, 8/9/2022, 8/16/2022, and 8/24/2022. I reviewed the facility's *Commercial Services Agreement* from Orkin dated 4/13/2022 which stated that three rooms will be serviced for bedbugs for a period of 11 months. I also reviewed a *Bed Bug Protect Agreement* from Rentokil Ehrlich dated 8/26/2022. This agreement stated bedbug services will be provided for every 6 months.

On 10/25/2022, I conducted interviews with direct care staff members Melvina Higgins, Tasha Glover, Naquaria Ward, manager Tammy Ward, and staffing director Alexis Worley who all stated that a new company was hired to perform bedbug treatments in the facility and they have not seen any bedbugs in the facility in the past month.

On 10/25/2022, I reviewed the facility's *Bed Bug Protect Agreement* from Rentokil Ehrlich dated 9/28/2022 which stated that bed service was completed. I reviewed another agreement from Rentokil Ehrlich dated 10/4/2022 that stated that Ehrlich will provide two services at six-month intervals to pretreat each unit for bedbugs.

On 10/25/2022, I received email correspondence from Ms. Hodge who stated the new pest control company Ehrlich has begun treating the facility for bedbugs and she has not seen any bed bug activity in Resident A's bedroom in the last couple of months. Ms. Hodge stated they have spent thousands of dollars trying to combat their bed bug issue and they are doing everything they can to fix the problem.

APPLICABLE RULE	
R 400.15401	Environmental health.
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.

ANALYSIS:	Based on my investigation which included interviews with direct care staff members Jackie Murrell, Shequala Langston, Sherry Simmons, Taria James, Tracy Bresson, Melvina Higgins, Tasha Glover, Naquaria Ward, manager Tammy Ward, and staffing director Alexis Worley, Resident A, regional director Karen Hodge and a review of the facility's pest control statements and contracts there is no evidence facility administrators are doing nothing to address the bedbug issue at the facility. According to Ms. Murrell, Ms. Langston, Ms. Simmons, Ms. James, and Ms. Bresson they have been having issues with an infestation of bedbugs for several months and there have been pest control companies in the facility to inspect and have provided services regularly. Ms. Hodge stated they have been working with two different pest control companies that have provided different methods to treat bedbugs in their facility. I reviewed facility invoices that provided service dates and contracts with pest control company Orkin and Ehrlich that stated that bedbug services will be provided and have been provided in the facility therefore a pest control program is maintained and carried out.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident A's bedding is not changed or cleaned frequently.

INVESTIGATION:

This complaint also alleged Resident A's bedding is not changed or cleaned frequently.

On 9/19/2022, I conducted an onsite investigation at the facility with direct care staff members Jackie Murrell, Shequala Langston, Sherry Simmons, Taria James, Tracy Bresson who all stated Resident A's bedding is changed at least twice a week on the days that he takes a bath. Ms. Langston stated Resident A prefers to stay in his bedroom and eats breakfast and dinner in his bed therefore there are some days Resident A's linen is changed more frequently if he has spills in his bed.

Ms. James stated she believes staff members do a good job keeping Resident A's bedding changed. Ms. James stated she has been in Resident A's bedroom while he is eating in bed and has seen Resident A's linen with food particles and stains however, staff members will change them right away if his bedding gets soiled.

Ms. Hodge stated Resident A's bedding is changed twice a week on his shower days and she has not observed Resident A to have dirty linens on his bed.

Resident A stated he likes to stay in bedroom and stay to himself therefore he does not leave his bedroom that often. Resident A stated he believes his bedding is only changed every four days.

APPLICABLE RULE	
R 400.15411	Linens.
	(1) A licensee shall provide clean bedding that is in good condition. The bedding shall include 2 sheets, a pillow case, a minimum of 1 blanket, and a bedspread for each bed. Bed linens shall be changed and laundered at least once a week or more often if soiled.
ANALYSIS:	Based on my investigation which included interviews with direct care staff members Jackie Murrell, Shequala Langston, Sherry Simmons, Taria James, Tracy Bresson, Resident A, and regional director Karen Hodge, there is no evidence Resident A's bedding is not changed or cleaned frequently. Staff members interviewed all stated Resident A's bedding is changed at least twice a week on the days that he takes a bath. Ms. Langston and Ms. James both stated Resident A's bedding is changed more frequently if his linen gets soiled as Resident A likes to eat in bed. Ms. Hodge stated Resident A's bedding is changed twice a week on his shower days, and she has not observed Resident A to have dirty linens on his bed. Resident A stated he believes his bedding is changed every 4 days. Clean bedding is provided for Resident A and it is changed and laundered at least once a week.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Resident B does not have any of her clothes.

INVESTIGATION:

On 9/27/2022, additional allegations were received through the BCHS online complaint system stating that Resident B does not have any of her clothes.

On 10/25/2022, I conducted interviews with direct care staff members Melvina Higgins, Tasha Glover, Naquaria Ward, manager Tammy Ward, and staffing director Alexis Worley who all stated that they have no knowledge of Resident B not having her clothes.

Ms. Higgins stated she has been talking to all the family members which includes Resident B's daughter and two sisters and she has not received any reports

Resident B does not have her clothes. Ms. Higgins stated Resident B was admitted to the facility recently on an emergency and she arrived with very few clothing items.

Ms. Ward stated Resident B came to the facility on 9/19/2022 and she has the clothes that she came with. Ms. Ward stated Resident B came with three small bags of clothes on an emergency admission. Ms. Ward stated she was told that one of Resident B's relatives would be bringing in more clothes from a storage in the next couple of days.

On 10/25/2022, I conducted an interview with Relative B1 who stated she believes a family member took some clothes out of Resident B's room that she is not going to be able to wear for fall and winter. Relative B1 stated she has relatives that cause trouble and constantly create problems so she believes one of them may have made the complaint as she does not get along with them. Relative B1 stated she is the power of attorney for Resident B and she plans to bring more clothing suitable for fall and winter this weekend to the home. Relative B1 stated she did not send a large amount of clothes with Resident B when she arrived at the facility because she did not feel she needed many clothes in her possession all at once. Relative B1 stated her plan is to bring Resident B clothes in intervals as the seasons change.

On 10/25/2022, received email correspondence from Karen Hodge who stated Resident B brought very few items when she was admitted to the home however, Ms. Hodge observed Resident B to have a closet full of clothes as of today. Ms. further stated Resident B was an emergency admission placed by Adult Protect Services and she was informed that Relative B1 was planning to bring Resident B more clothes that are currently in storage.

APPLICABLE RULE	
R 400.15304	Resident rights; licensee responsibilities.
	(1) Upon a resident's admission to the home, a licensee shall inform a resident or the resident's designated representative of, explain to the resident or the resident's designated representative, and provide to the resident or the resident's designated representative, a copy of all of the following resident rights: (j) The right of reasonable access to and use of his or her personal clothing and belongings. (2) A licensee shall respect and safeguard the resident's rights specified in subrule (1) of this rule.

ANALYSIS:	Based on my investigation which included interviews with direct care staff members Melvina Higgins, Tasha Glover, Naquaria Ward, manager Tammy Ward, staffing director Alexis Worley, and regional director Karen Hodge there is no evidence Resident B does not have any of her clothes. Staff members interviewed all stated that that they have no knowledge of Resident B not having her clothes. Ms. Higgins, Ms. Ward and Ms. Hodge all stated that Resident B arrived with very few items when she arrived as an emergency placement. Relative B1 believes a family may have taken some of Resident B's clothes that were not appropriate for the season and plans to bring additional clothing for Resident B. Relative B1 also stated she did not provide a large amount of clothes for Resident B as she did not feel having an abundance of clothing in Resident B's possession was necessary. Ms. Hodge stated that she observed Resident B to have a closet full of clothes. Resident B has access to her clothes.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 10/27/2022, I conducted an exit conference with licensee designee Connie Clauson. I informed Ms. Clauson of my findings and allowed her an opportunity to ask questions or make comments.

IV. RECOMMENDATION

I recommend the current license status remain unchanged.



Ondrea Johnson
Licensing Consultant

10/27/2022
Date

Approved By:



10/31/2022

Dawn N. Timm
Area Manager

Date