

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

January 30, 2023

Lori McLaughlin North Woods Village At Kalamazoo 6203 Stadium Dr Kalamazoo, MI 49009

> RE: License #: AH390394454 Investigation #: 2023A1028015 North Woods Village At Kalamazoo

Dear Ms. McLaughlin:

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

	ALI2002044E4
License #:	AH390394454
Investigation #:	2023A1028015
Complaint Receipt Date:	12/16/2022
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Investigation Initiation Date:	12/19/2022
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Barrart Dua Data:	02/15/2022
Report Due Date:	02/15/2023
Licensee Name:	MITN, LLC
Licensee Address:	6203 Stadium Dr
	Kalamazoo, MI 49009
Licensee Telephone #:	(574) 247-1866
Licensee relephone #.	(374) 247-1000
Administrator:	Amanda Buhl
Authorized Representative:	Lori McLaughlin
Name of Facility:	North Woods Village At Kalamazoo
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Facility Address:	6203 Stadium Dr
racinty Address.	Kalamazoo, MI 49009
	(000) 007 0000
Facility Telephone #:	(269) 397-2200
Original Issuance Date:	03/11/2019
License Status:	REGULAR
Effective Date:	09/11/2022
	00/11/2022
Funination Data	00/40/0000
Expiration Date:	09/10/2023
Capacity:	61
Program Type:	ALZHEIMERS
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## II. ALLEGATION(S)

#### Violation Established?

	Established ?
Resident A's medication is missing or stolen.	Yes
Additional Findings	No

## III. METHODOLOGY

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12/16/2022	Special Investigation Intake 2023A1028015
12/19/2022	Special Investigation Initiated
12/19/2022	APS Referral APS referred intake to Homes for the Aged (HFA).
12/20/2022	Contact - Face to Face Interviewed Admin/Amanda Buhl at the facility.
12/20/2022	Contact - Face to Face Interviewed Employee A at the facility.
12/20/2022	Contact - Face to Face Interviewed Employee B at the facility.
12/20/2022	Contact - Document Received Received Resident A's service plan and medication record from Admin/Amanda Buhl.

## ALLEGATION:

Resident A's medication is missing or stolen.

#### **INVESTIGATION:**

On 12/16/2022, the Bureau received the allegations from APS through the online complaint system.

On 12/20/2022, I interviewed the facility administrator, Amanda Buhl, who reported Resident A moved into the facility on 9/1/2022 and recently moved out of the facility on 12/16/2022 due to financial reasons. Ms. Buhl reported Resident A's authorized

representative opted to not use the facility pharmacy. The authorized representative would have their preferred pharmacy fill the prescriptions and the authorized representative would drop Resident A's prescriptions off at the facility. Ms. Buhl reported the authorized representative was encouraged to use the facility pharmacy to prevent any issues, but the authorized representative refused. Ms. Buhl reported Resident A's Trazadone HCI medication was either shorted by the pharmacy and/or missing at the end of November 2022. Ms. Buhl reported facility did not count any of the medication that was dropped off to facility by the authorized representative unless it was a narcotic. Trazadone HCI is not a narcotic. Ms. Buhl reported once it was discovered that Resident A's Trazadone HCI was short by two weeks, the authorized representative was notified and the facility offered to replace the shorted and/or missing medication. Ms. Buhl reported staff also began to count all medication dropped off by the authorized representative going forward to prevent any missing or medication shortage.

On 12/20/2022, I interviewed Employee A at the facility who reported all Resident A's medication were dropped off at the facility by the authorized representative and the medication was not counted unless it was a narcotic. Trazadone HCI is not a controlled substance or narcotic. Resident A's authorized representative was encouraged to use the facility pharmacy to prevent any issues, but the authorized representative refused. Employee A confirmed it was discovered at the end of November 2022 that Resident A was short a two-week supply of Trazadone HCI. An exact date could not be determined or provided as to when the medication was shorted and/or missing. Employee A reported once it was discovered the medication was missing or shorted, the facility notified the authorized representative immediately. The facility also offered to pay for the missing two-week supply, but Resident A's pharmacy covered the missing/shorted two-week supply. Employee B reported due to the shorted and/or missing medication, the facility began counting all medication dropped off by the authorized representative to prevent a reoccurrence.

On 12/20/2022, I interviewed Employee B at the facility whose statements are consistent with Ms. Buhl's statements and Employee A's statements.

On 12/28/2022, I reviewed Resident A's service plan which revealed Resident A is not able to take medication without assistance.

I also reviewed Resident A's medication administration record (MAR) which revealed the following:

- Resident A was to receive 1 tablet by mouth of Trazadone HCI 50mg one time per day at PM.
- Trazadone HCI was not recorded as being administered to Resident A on 11/24/2022 or 12/6/2022.
- No record of shorted or missing medication was found for Trazadone HCI from October 2022 to December 2022 in Resident A's MAR.

APPLICABLE RU	APPLICABLE RULE	
R 325.1932	Resident medications.	
	(5) A home shall take reasonable precautions to ensure or assure that prescription medication is not used by a person other than the resident for whom the medication is prescribed.	
ANALYSIS:	It was alleged Resident A's medication was stolen or missing.	
	Interviews, on-site inspection, and review of documentation reveal Resident A was missing a two-week supply of Trazadone HCI at the end of November 2022, but the exact date as to when and/or where it was missing cannot be determined. It can also not be determined if the medication was shorted by the pharmacy, as Resident A's medication is filled by an outside pharmacy and dropped off to the facility by Resident A's authorized representative.	
	Facility staff admitted they did not count Resident A's medication when it was brought to the facility by the authorized representative because Trazadone HCI is not a controlled substance or a narcotic. The facility did not ensure the medication count was accurate at the time of drop off to the facility and the facility did not take appropriate measures to ensure medication was not used or taken by someone other than Resident A.	
CONCLUSION:	VIOLATION ESTABLISHED	

# IV. RECOMMENDATION

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

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12/28/2022

Date

Approved By:

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01/27/2023

Date

Andrea L. Moore, Manager Long-Term-Care State Licensing Section