



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

February 1, 2023

Kimberly Gee  
Symphony of Linden Health Care Center, LLC  
30150 Telegraph Rd  
Suite 167  
Bingham Farms, MI 48025

RE: License #: AL250331306  
Investigation #: 2023A0580013  
Degas House Inn

Dear Mrs. Gee:

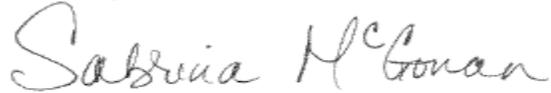
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (517) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan".

Sabrina McGowan, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 835-1019

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL250331306
<b>Investigation #:</b>	2023A0580013
<b>Complaint Receipt Date:</b>	12/21/2022
<b>Investigation Initiation Date:</b>	12/22/2022
<b>Report Due Date:</b>	02/19/2023
<b>Licensee Name:</b>	Symphony of Linden Health Care Center, LLC
<b>Licensee Address:</b>	7257 N. Lincoln Lincolnwood, IL 60712
<b>Licensee Telephone #:</b>	(810) 735-9400
<b>Administrator:</b>	Kimberly Gee
<b>Licensee Designee:</b>	Kimberly Gee
<b>Name of Facility:</b>	Degas House Inn
<b>Facility Address:</b>	202 S Bridge Street Linden, MI 48451
<b>Facility Telephone #:</b>	(810) 735-9400
<b>Original Issuance Date:</b>	05/01/2014
<b>License Status:</b>	1ST PROVISIONAL
<b>Effective Date:</b>	11/28/2022
<b>Expiration Date:</b>	05/27/2023
<b>Capacity:</b>	20
<b>Program Type:</b>	AGED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
The facility lost internet, causing their computer systems to be down. The facility did not provide evening medications on 12/19/2022 or am medication on 12/20/2022 because of the computer systems being down. Residents have gone 24 hours without receiving their medications.	No
Additional Findings	Yes

**III. METHODOLOGY**

12/21/2022	Special Investigation Intake 2023A0580013
12/22/2022	Contact - Telephone call made A call was made to the licensee designee, Ms. Kim Gee.
12/22/2022	APS Referral A referral sharing the allegations was made to APS.
12/22/2022	Special Investigation Initiated - Letter A referral was made to APS initiating the complaint.
01/04/2023	Inspection Completed On-site An onsite inspection was conducted.
01/18/2023	Inspection Completed On-site A follow-up onsite inspection was conducted.
01/18/2023	Contact - Face to Face An interview was held with Resident A.
01/18/2023	Contact - Face to Face An interview was held with Resident B.
01/18/2023	Contact - Face to Face An interview was held with Resident C.
01/25/2023	Contact - Telephone call made I spoke with staff, Ms. Kiajhua Wright.

01/25/2023	Contact - Telephone call made I spoke with former staff, Ms. DeZhaney Rice.
01/25/2023	Contact - Telephone call made I spoke with staff, Ms. Bridgett Durance.
01/25/2023	Contact - Telephone call made I spoke with Relative Guardian C.
01/27/2023	Exit Conference An exit conference was held with the licensee designee, Ms. Kim Gee.
02/01/2023	Contact - Telephone call made I spoke with Ms. Jessica Benedict, staff.

**ALLEGATION:**

The facility lost internet, causing their computer systems to be down. The facility did not provide evening medications on 12/19/2022 or am medication on 12/20/2022 because of the computer systems being down. Residents have gone 24 hours without receiving their medications.

**INVESTIGATION:**

On 12/21/2022, I received a complaint via BCAL Online complaints.

On 12/22/2022, I placed a call to the licensee, Ms. Kim Gee. A voice mail message was left requesting a return call.

On 12/22/2022, I made a referral to Adult Protective Services sharing the allegations.

On 01/04/2023, I conducted an unannounced onsite inspection at Degas House Inn. Contact was made with Ms. Stephanie Sweeney, facility manager and Ms. Melissa Sevegney, Regional Administrative Assistant. Ms. Sweeney stated that the facility currently uses the electronic MARS system for tracking and administering resident medications. There was an internet outage sometime in December. She is not sure of the length of time. Ms. Sweeney denied the allegations that residents were not given their medication during the internet outage. She stated a paper medication log was completed during the outage.

On 01/16/23, I received an email from Ms. Sevegney. She was able to confirm with the director of maintenance that the computers were down from 12 noon on

December the 19<sup>th</sup> until 9am on December 20<sup>th</sup>. Also attached was a hard copy of the December 2022 medication logs for Residents A, B, and C.

The December 2022 medication log for Resident A does not document she received the medication Atorvastatin Calcium Tablet-40mg, to be given at bedtime on 12/05/2022. The log further does not reflect Resident A received her prescribed a Z-Guard to be applied to her buttocks at bedtime on 12/5, 12/13, and 12/19/2022. There is not documentation that Resident A received her prescribed Eucerin Advanced Repair Cream to be applied topically two times a day, on the evenings of 12/05, 12/19, and 12/24/2022 or in the morning on 12/20/2022. There is not documentation Resident A received her Metformin HCL Tablet, 500 mg, to be given orally twice a day on the evening of 12/05, 12/19 and 12/24/2022.

The December 2022 medication log for Resident B reflects that Resident B did not receive an application of Eucerin Cream to be applied to legs topically one time a day for dry skin, on 12/20/2022. Resident B is prescribed Levothyroxine Sodium Tablet 25 MCG, 1 tablet by mouth at bedtime. Resident B did not receive a dosage on 12/5, 12/13, and 12/19. The log reflects that Resident B did not receive her Lidocaine Patch 4 %, to be applied to left axilla (underarm) topically, one time a day for pain on 12/20/2022. There is not documentation Resident B received her Amiodarone HCl tablet 200 MG, 1 tablet by mouth two times a day, on the evenings of 12/6, 12/19, and 12/24/2022. There is not documentation Resident B received her prescribed Apixaban Tablet 5MG, 1 tablet to be given by mouth two times a day on the evening of 12/5, 12/19, 12/24/2022. The log does not reflect that Resident B received her prescribed Levetiracetam Oral Tablet 500 MG, 1 tablet to be given by mouth every 12 hours, on the evenings of 12/05, 12/13 and 12/19/2022 or her Primidone Tablet 50, 2 tablets to be given by mouth two times a day, on the evening of 12/05, 12/19, and 12/24/2022.

The December 2022 medication log for Resident C does not document Resident C was given her Atorvastatin Calcium Tablet 10 MG, 1 tablet to be given by mouth at bedtime, on 12/05, 12/13, and 12/19/2022. The log further does not reflect Resident C was given her Donepezil HCl Tablet 5 MG, 1 tablet to be given by mouth at bedtime, on 12/05, 12/13/ and 12/19/2022. There was not documentation that Resident C received her Lac-Hydrin Lotion 12 % (Ammonium Lactate), to be applied to both feet/ankles topically two times a day, on the evening of 12/05, 12/19, and 12/24/2022, as well as the morning of 12/20/2022.

On 01/18/2023, I conducted a follow-up onsite inspection at Degas House Inn. Contact was made with Ms. Sevegney. She stated that the December 2022 Medication Logs provided via email on 01/16/2023 are the only logs that were able to be located. No manually entered paper log verifying that the medication was administered to residents on 12/20 and 12/21/2022 was able to be found. She adds that effective 02/01/2023, she will become the new licensee designee for the Symphony of Linden Health Care Center.

While onsite I conducted an interview with Resident A. Resident A is not sure if she missed her medication on 12/19 and 12/20/2022. To her knowledge she has always gotten her medication.

Resident B was observed in the dining area with other residents of the facility while playing Bingo. When pulled away for an interview, she stated that she does not recall a time when she did not receive her medication.

Resident C was observed while in her room. She stated that she gets her medication, however, she was upset because of having been moved without being asked.

Other residents in the facility were observed in their room and playing Bingo in the dining room area. They were all groomed and neat in appearance. They appeared to be receiving proper care.

On 01/25/2023, I spoke with staff, Ms. Kiajhua Wright. She indicated that she has not been trained and does not pass medication to the residents.

On 01/25/2023, I spoke with former staff, Ms. DeZhaney Rice, identified as the medication passer on the evening on 12/19/2022. She shared that while working for the corporation she did pass medication, however, she does not recall passing medication to the Degas House residents. She recalls the internet having been done quite often. Paper medication logs were used when the internet was down.

On 01/25/2023, I spoke with Relative Guardian C. She stated that she believes that Resident A is getting her medication. She adds that Resident C can be difficult and often refuses care, however, the facility does the best they can in providing her care.

On 02/01/2023, I spoke with Ms. Jessica Benedict, staff. She confirmed that she passed morning medication to the residents on 12/20/2022 during the internet outage. She stated that staff initials were recorded on paper medication logs during that time. To her knowledge, the paper logs were kept in the medication room. She adds that at no time have the residents gone without their medication to her knowledge.

<b>APPLICABLE RULE</b>	
<b>R 400.15312</b>	<b>Resident medications.</b>
	<b>(2) Medication shall be given, taken, or applied pursuant to label instructions.</b>

<b>ANALYSIS:</b>	<p>It was alleged that Residents did not receive their medication during an internet outage on 12/19/2022 and 12/20/2022.</p> <p>Manager, Ms. Stephanie Sweeney denied the allegations, stating the medication was recorded on paper medication logs.</p> <p>Regional Administrative Assistant, Ms. Melissa Sevegney, stated that December 2022 medication logs for Residents A, B and C, manually entered on 12/19/2022 and 12/20/2022 during the internet outage could not be located.</p> <p>Resident A stated that she is not sure if she missed her medication on 12/19 and 12/20/2022. To her knowledge she has always gotten her medication.</p> <p>Resident B she stated that she does not recall a time when she did not receive her medication. Resident C stated that she gets her medication.</p> <p>Staff Ms. Jessica Benedict and former staff Ms. DeZhaney Rice both stated that paper medication logs are used when the internet is down.</p> <p>Relative Guardian C stated that she believes that Resident A is getting her medication and facility does the best they can in providing her care.</p> <p>Based on the interviews with staff, residents, Relative Guardian C, and the documents reviewed, there is insufficient evidence to support the rule violation.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

Ms. Sevegney, Regional Administrative Assistant, stated that December 2022 medication logs for Residents A, B and C, were manually entered on 12/19/2022 and 12/20/2022 during the internet outage could not be located.

Medication logs for Residents A, B, and C did not reflect the initials of the staff person that administered the medication, on various dates during the month of December 2022.

The December 2022 medication log for Resident A does not document she received the medication Atorvastatin Calcium Tablet-40mg, to be given at bedtime on 12/05/2022. The log further does not reflect Resident A received her prescribed a Z-Guard to be applied to her buttocks at bedtime on 12/5, 12/13, and 12/19/2022. There is not documentation that Resident A received her prescribed Eucerin Advanced Repair Cream to be applied topically two times a day, on the evenings of 12/05, 12/19, and 12/24/2022 or in the morning on 12/20/2022. There is not documentation Resident A received her Metformin HCL Tablet, 500 mg, to be given orally twice a day on the evening of 12/05, 12/19 and 12/24/2022.

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The log for Resident C does not document Resident C was given her Atorvastatin Calcium Tablet 10 MG, 1 tablet to be given by mouth at bedtime, on 12/05, 12/13, and 12/19/2022. The log further does not reflect Resident C was given her Donepezil HCl Tablet 5 MG, 1 tablet to be given by mouth at bedtime, on 12/05, 12/13/ and 12/19/2022. There was not documentation that Resident C received her Lac-Hydrin Lotion 12 % (Ammonium Lactate), to be applied to both feet/ankles topically two times a day, on the evening of 12/05, 12/19, and 12/24/2022, as well as the morning of 12/20/2022.

On 02/01/2023, I spoke with Ms. Jessica Benedict, staff. She confirmed that she passed morning medication to the residents on 12/20/2022 during the internet outage. She stated that staff initials were recorded on paper medication logs during that time. To her knowledge, the paper logs were kept in the medication room. She adds that at no time have the residents gone without their medication to her knowledge.

<b>APPLICABLE RULE</b>	
<b>R 400.15312</b>	<b>Resident medications.</b>
	<b>(4)(b) Complete an individual medication log that contains all of the following information:</b> <b>(i) The medication.</b>

	<p>(ii) The dosage.</p> <p>(iii) Label instructions for use.</p> <p>(iv) Time to be administered.</p> <p>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</p>
<b>ANALYSIS:</b>	A review of the medication logs for Residents A, B and C indicate that Resident medications were not documented as administered on 12/5/22, 12/13/22, 12/19/22 and 12/24/22 for these residents. Based on the December 2022 medication logs reviewed, there is enough evidence to support the rule violation.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 01/27/2023, I conducted an exit conference with the licensee designee, Ms. Kim Gee. Ms. Gee was informed of the findings of this investigation.

#### IV. RECOMMENDATION

Upon the receipt of an approved corrective action plan, no change to the status of the license is recommended.

*Sabrina McGowan*

February 1, 2023

Sabrina McGowan  
Licensing Consultant

Date

Approved By:

*Mary Holton*

February 1, 2023

Mary E. Holton  
Area Manager

Date