



STATE OF MICHIGAN
 DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
 LANSING

GRETCHEN WHITMER
 GOVERNOR

ORLENE HAWKS
 DIRECTOR

March 30, 2023

Amy Borzymowski
 Brookdale Delta MC (MI)
 7235 Delta Commerce Dr.
 Lansing, MI 48917

RE: License #:	AH230236932 Brookdale Delta MC (MI) 7235 Delta Commerce Dr. Lansing, MI 48917
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Dear Ms. Borzymowski:

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. 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.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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,

Kimberly Horst, Licensing Staff
 Bureau of Community and Health Systems
 611 W. Ottawa Street
 Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH230236932
Licensee Name:	Brookdale Senior Living Communities, Inc.
Licensee Address:	Suite 2300 6737 West Washington St. Milwaukee, WI 53214
Licensee Telephone #:	(414) 918-5000
Authorized Representative:	Amy Borzymowski
Administrator:	Michael Kegley
Name of Facility:	Brookdale Delta MC (MI)
Facility Address:	7235 Delta Commerce Dr. Lansing, MI 48917
Facility Telephone #:	(517) 886-5200
Original Issuance Date:	07/01/1999
Capacity:	38
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/27/2023

Date of Bureau of Fire Services Inspection if applicable: 03/27/2023

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 03/30/2023

No. of staff interviewed and/or observed 4
No. of residents interviewed and/or observed 10
No. of others interviewed 0 Role N/A

- 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. Resident funds not kept in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Diasterp plans reviewed and staff interviewed.
- 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:
AH230236932_SIR_2023A1021022 CAP dated 02/17/2023
- R325.1922 (1); (D) R 325.1922(5)
- AH230236932_SIR_2021A1021050 CAP dated 11/01/2021 R 325.1954
- Number of excluded employees followed up? 5 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
MCL 333.20201	Policy describing rights and responsibilities of patients or residents; adoption; posting and distribution; contents; additional requirements; discharging, harassing, retaliating, or discriminating against patient exercising protected right; exercise of rights by patient's representative; informing patient or resident of policy; designation of person to exercise rights and responsibilities; additional patients' rights; definitions.
	(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.
Inspection of the facility revealed Resident Rights and Responsibilities was not posted.	
R 325.1922	Admission and retention of residents.
	(7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority. 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. A home,

	and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents.
Review of Resident A's record revealed the facility did not have record of tuberculosis testing prior to admission to the facility.	
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.
Review of Resident B's medication administration record (MAR) revealed Resident B was prescribed Morphine Sulfate Solution with instruction to administer 0.25ml by mouth every four hours as needed for pain. In addition, Resident B was prescribed Acetaminophen 500mg tablet with instruction to administer one tablet by mouth every four hours as needed for pain. There is no instruction for staff to know whether to administer one over the other or if both can be given at the same time. The lack of instruction places residents at an unnecessary risk of harm due to administration based on what the staff feel is appropriate verses what the physician intended.	
R 325.1932	Resident medications.
	(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.
Review of Resident B's MAR revealed Resident B was prescribed Ativan 1mg tablet with instruction to administer one tablet by mouth every 6 hours as needed for anxiety/restlessness. Review of Resident B's service plan lacked detailed information on how the resident demonstrates anxiety/agitation and what behaviors require the administration of the medication or if staff can use nonpharmaceutical interventions.	
R 325.1953	Menus.
	(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.

Inspection of the facility revealed the weekly menu was not posted.	
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.
Inspection of the facility kitchen revealed the facility was not completing and maintaining a meal census.	
R 325.1964	Interiors.
	(9) Ventilation shall be provided throughout the facility in the following manner: (b) Bathing rooms, beauty shops, toilet rooms, soiled linen rooms, janitor closets, and trash holding rooms shall be provided with a minimum of 10 air changes per hour of continuously operated exhaust ventilation that provide discernable air flow into each of these rooms.
Inspection of the facility revealed the public restroom did not have continuously operated exhaust ventilation.	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and fire safety inspection, renewal of the license is recommended.

Kennedy Host

03/30/2023

Date

Licensing Consultant