

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

ORLENE HAWKS DIRECTOR

March 19, 2023

Deanna Turner Bickford of Canton 5969 N Canton Center Rd Canton, MI 48187

> RE: License #: AH820395445 Investigation #: 2023A1027038 Bickford of Canton

Dear Ms. Turner:

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 authorized representative 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) 241-1970.

Sincerely,

Essica Rogers

Jessica Rogers, Licensing Staff Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (517) 285-7433 enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH820395445
	AI 1020393443
Investigation #:	2023A1027038
	2023A1027030
Complaint Pacaint Data:	02/09/2023
Complaint Receipt Date:	02/09/2023
Investigation Initiation Data:	02/00/2022
Investigation Initiation Date:	02/09/2023
Demont Due Deter	04/11/2022
Report Due Date:	04/11/2023
	Distributed of Ocurtory 11.0
Licensee Name:	Bickford of Canton, LLC
Licensee Address:	Suite 301
	13795 S Mur-Len Rd.
	Olathe, KS 66062
Licensee Telephone #:	(913) 782-3200
Administrator:	Chanda Pantano
Licensee Designee:	Deanna Turner
Name of Facility:	Bickford of Canton
Facility Address:	5969 N Canton Center Rd
	Canton, MI 48187
Facility Telephone #:	(734) 656-5580
Original Issuance Date:	04/02/2020
License Status:	REGULAR
Effective Date:	10/02/2022
Expiration Date:	10/01/2023
	10/01/2020
Capacity	70
Capacity:	78
Due among Tama a	
Program Type:	AGED
	ALZHEIMERS

II. ALLEGATION(S)

Violation

	Established?
Resident A and B lacked care. Resident A and B lacked housekeeping services. Resident A lacked reminders for laundry services.	Yes
Additional Findings	No

The complainant identified some concerns that were not related to licensing rules and statues for a home for the aged. Therefore, only specific items pertaining to homes of the aged provisions of care were considered for investigation. The following items were that that could be considered under the scope of licensing.

III. METHODOLOGY

02/09/2023	Special Investigation Intake 2023A1027038
02/09/2023	Special Investigation Initiated - Telephone Telephone interview conducted with complainant
03/14/2023	Inspection Completed On-site
03/17/2023	Contact - Document Sent Documentation was requested at on-site inspection in which was to be emailed. Email sent to Ms. Pantano requesting documentation be emailed.
03/17/2023	Contact - Document Received Requested documentation received except shower log sheets requested
03/20/2023	Contact – Document Sent Email sent to Ms. Pantano requesting shower log sheets for Resident A and B
03/23/2023	Contact – Document Received Email received from Ms. Pantano informing licensing there were not shower logs maintained in the resident's files
03/23/2023	Inspection Completed-BCAL Sub. Compliance
04/19/2023	Exit Conference

Conducted by email with authorized representative Ms. Turner
Conducted by email with authorized representative wis. Turner

ALLEGATION:

Resident A and B lacked care. Resident A and B lacked housekeeping services. Resident A lacked reminders for laundry services.

INVESTIGATION:

On 2/9/2023, the Department received a complaint through the online complaint system in which read Resident A and B lacked care. The complaint read Resident B had soiled briefs and clothing. The complaint read Resident B's room had urine on the floor. The complaint read Resident B was in the same clothing for days due to the facility not moving his clothing from the assisted living to the memory care area. The complaint read the facility lacked laundry and housekeeping services.

On 2/9/2023, I conducted a telephone interview with the complainant who stated Resident A and B were married and admitted to the facility on 12/14/2022. The complainant stated Resident A and B discharged from the facility on 2/2/2023 and 2/1/2023 consecutively, to other facilities. The complainant stated Resident A and B initially lived in an assisted living apartment together at the facility. The complainant stated after 30 days at the facility both Resident A and B's levels of care were increased in which she felt their services plans were not being followed. The complainant stated Resident A's service plan was updated for staff to provide reminders for laundry and showers, however her plan was not followed by staff. The complainant stated Resident B was very active and wandered within the facility requiring re-direction. The complainant stated Resident B was incontinent. The complainant stated sometimes Resident B would refuse care but did not always receive his scheduled showers or shaving. The complainant stated Resident A and B's granddaughter observed Resident B in a soiled brief and clothing as well as dirty laundry in his apartment on 1/21/2023. The complainant stated Resident A and B were both diagnosed with COVID-19 in which Resident B's dementia progressed. The complainant stated Resident B moved to a memory care apartment on 1/24/2023 due to a need for isolation and closer monitoring.

On 3/14/2023, I conducted an on-site inspection at the facility. I interviewed administrator Chanda Pantano who stated Resident B's clothing was moved to memory care (referred to as the Mary B's unit). Ms. Pantano stated resident's laundry service days were in their service plans. Ms. Pantano stated the facility's housekeeper was recently on leave in which caregivers completed the housekeeping, however she was on duty currently and worked five days per week as well as some weekends.

While on-site, I interviewed memory care staff Employee #1 and #2 who both stated Resident B was resistive to care at times, however they provided care consistent with his service plan. Employee #1 and #2 stated residents were provided showers twice weekly and as needed in which their shower days were located on a schedule for staff to follow. Employee #1 and #2 stated the laundry process consisted of afternoon shift staff putting each resident's laundry requiring washing in a basket in the laundry room. Employee #1 and #2 stated midnight staff picked up the resident's laundry from outside their rooms, washed the clothing, and folded it, then dayshift staff put the laundry away.

While on-site, I interviewed assisted living staff Employee #3 who stated Resident B had wandered and attempted to leave the building. Employee #3's statements were consistent with Employee #1 and #2 regarding laundry services.

While on-site, I interviewed Employee #4 whose statements were consistent with Ms. Pantano. Employee #4 stated her work hours were Monday through Friday, from 8:00 AM to 5:00 PM and every other weekend, then on alternate weekends, she worked four hours on Saturday. Employee #4 stated she cleaned the common areas daily which included but was not limited to sweeping and mopping the floors, disinfecting surfaces, removing trash, cleaning the public restrooms, and vacuuming the front entrance. Employee #4 stated her cleaning schedule was: Monday: 100 hallway resident rooms, Tuesday: 200 hallway resident rooms, Wednesday: finish 200 hallway resident rooms, then 300 hallway resident rooms, Thursday: Mary B's unit and 400 hallway resident rooms, Friday: resident rooms, salon, and gym.

While on-site, I interviewed a randomly chosen assisted living Resident C who stated she thought the care was good at the facility. Resident C stated she was independent with her care; however, she initially had moved into the facility with her spouse who required total care in which his care was excellent. Resident C stated she thought the laundry days were supposed to be on her shower days, however she did not require assistance with showers, so she was not certain; however, she stated her laundry was completed. Resident C stated the housekeeper was excellent and cleaned her apartment consistently.

While on-site, I reviewed the Mary B and assisted living resident shower schedules with read consistent with staff interviews. The schedule read most residents received showers twice weekly. The schedule read the resident's laundry was to be completed on midnight shift on the day of the resident's shower.

While on-site, I observed the front entrance, two public restrooms, all hallways of the assisted living and Mary B's unit, the assisted living common areas including the sitting area and dining spaces, the Mary B common areas including the sitting area and dining spaces which all appeared clean. I observed the laundry room in which a sign titled *Laundry Process* read consistent with staff interviews. I observed the laundry room maintained laminated room numbers for all residents to ensure each resident's laundry was labeled.

I reviewed Resident B's admission agreement dated 12/14/2022 and signed by Relative A2. The agreement read in part housekeeping services shall include cleaning of community space, and availability of cleaning of apartment, including cleaning of the bathroom, kitchen area and other living space. The agreement read in part linen laundry services shall be provided and personal laundry service shall be available. The agreement read residents received a "standard of 2 baths per week." The agreement read in part the resident shall receive assistance with monitoring health care, ordering supplies/supplemental services, arranging medical care, assistance with medication, bowel and bladder management, nighttime care, personal hygiene, bathing, dressing, ambulation, eating, orientation, communication, counseling, behavior management, socialization, and monitoring of safety.

I reviewed Resident A and B's face sheet which read both residents moved into the facility on 12/14/2022 at a level two. The face sheet read on 1/18/2023, a 30-day assessment was completed in which Resident A was a level three and Resident B was a level four. The face sheet read Relative A1, and his spouse were their primary financial contact.

I reviewed Resident A's service plan updated on 1/18/2023 which read she had resided in the assisted living in apartment 108. The plan read housekeeping was to be completed once per week on Monday. The plan read personal laundry was to be completed once weekly in which staff were to do laundry on Monday including flat linens, towels, and personal laundry. The plan read afternoon staff would collect all soiled laundry and place into laundry basket in the laundry room. The plan read night staff would wash, dry, fold, and replace the laundry back into the laundry basket and leave it in the laundry room. The plan read on Tuesday, day shift staff would deliver, hang-up and put away the laundry in the resident's apartment. The plan read staff were to remove the trash multiple times per day for incontinence. The plan read Resident A received a regular diet and liked bran flakes and oranges, as well prune juice daily with breakfast. The plan read Resident A could independently ambulate with a walker to and from the dining room. The plan read Resident A required reminding to put her dentures in. The plan read Resident A was independent with her morning and evening care. The plan read Resident A liked to sleep in pajamas, a top and bottom, as well as a pray, read, watch television, or request fruit prior to going to bed. The plan read Resident A was independent with toileting and wore pull ups. The plan read Resident A preferred baths in which staff were to assist her in the spa bath on Sunday and Wednesday after breakfast. The plan read staff were to turn the heat lamp on the in bathroom and provide one caregiver assistance to assist with bathing, washing her hair, dressing, and undressing. The plan read for staff to never leave her unattended when taking a spa bath. The plan read to check on Resident A once nightly for safety and comfort. The plan read Resident A may wake up at night and request a snack, and staff were to offer toileting. The plan read staff were to administer Resident A's medications and treatments. The plan read staff were to crush Resident A's medications and place them into vanilla or chocolate pudding due to pocketing pills. The plan read Resident A could independently choose activities to attend in which she liked television, reading and praying groups,

as well as bingo. The plan read she enjoyed spending time with her husband who resided with her. The plan read Resident A was a moderate fall risk in which provided ways to maintain her safety. The plan was signed and dated by the facility's director, nurse and Relative A2.

I reviewed Resident B's service plan updated on 1/18/2023 which read he had resided in the assisted living in apartment 108. The plan read consistent with Resident A's service plan pertaining housekeeping, laundry, and trash removal. The plan read Resident B received a regular diet and had a "sweet tooth" in which he loved ice cream, coke, water, coffee with six tablespoons of sugar with cream. The plan read Resident B disliked salmon and salads. The plan read Resident B could ambulate independently but sometimes he used a cane. The plan read Resident B needed reminding to use his cane. The plan read Resident B was independent with morning care needs. The plan read Resident B was independent with evening care and staff were to lay his clothes out daily. The plan read Resident B required curing for toileting and needed routine assistance with peri care, before and after meals, before bed, before outings and as needed. The plan read staff were to change Resident B's pull ups. The plan read Resident B's showers were Monday and Wednesday. The plan read to allow Resident B as much independence with showering, but if he had difficulty to assist him. The plan read staff were to gather all necessary supplies for Resident B's shower and prewarm the water. The plan read staff were "NOT" to leave Resident B unattended while showering. The plan read staff were to conduct night checks and round on Resident B at least three times per night. The plan read if Resident B was awake to offer him toileting and a pull up change. The plan read staff were to ensure the bathroom light was kept on during the night. The plan read Resident B wandered and required frequent checks throughout the night. The plan read staff were to administer Resident B's medications and treatments. The plan read for staff to encourage Resident B to participate in activities. The plan read Resident B enjoyed working with his hands, liked the outdoors, waking, and criminal action movies. The plan read to never leave Resident B unattended. The plan read Resident B was a moderate fall risk in which provided ways to maintain his safety. The plan was signed and dated by the facility's director, nurse and Relative A2.

I reviewed Resident A's chart notes from 12/14/2022 through 2/2/2023. Chart note dated 1/17/2023 read in part a 30-day assessment was completed in which Resident A's care needs were unchanged. The note read her "LOC" changed from two to three due to bathing desire in which she preferred a spa bath after breakfast twice weekly. Note dated 2/2/2023 read Resident A's medications were given to her family.

I reviewed Resident B's chart notes dated from 12/15/2022 through 2/1/2023. Chart note dated 1/19/2023 read in part Resident B wandered into other resident's rooms. Chart note dated 1/20/2023 read in part Resident B was combative and wandered into other resident's rooms. The note read staff took Resident B to the Mary B's unit. Note dated 2/1/2023 read Resident B's medications were given to family.

APPLICABLE RULE		
R 325.1931	Employees; general provisions.	
	(2) A home shall treat a resident with dignity and his or her personal needs, including protection and safety, shall be attended to consistent with the resident's service plan.	
For Reference: R 325.1922	Admission and retention of residents.	
	(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.	
ANALYSIS:	Review of Resident A and B medical records revealed both residents initially resided in an assisted living apartment together and required staff assistance with their activities of daily living. Staff and resident attestations, as well as observations revealed the facility maintained an organized program to complete resident's laundry and housekeeping services. Interview with the complainant, staff attestations as well as review of the facility's chart notes, revealed Resident B had moved from the assisted living apartment to the Mary B's unit after his 30-day assessment was completed. Although Resident A and B's service plans provided specific care needs; their plans were not updated to reflect Resident B's transition to Mary B's, thus lacked ensuring staff provided adequate protection, supervision, and services consistent with his needs in Mary B's. Based on this information, this allegation was substantiated.	
CONCLUSION:	VIOLATION ESTABLISHED	

IV. RECOMMENDATION

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

Jossica Rogers

3/21/2023

Jessica Rogers Licensing Staff

Date

Approved By:

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04/18/2023

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

Date