

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 3, 2023

John Winden Close To Home Assisted Living, Saginaw LLC 1805 South Raymond Bay City, MI 48706

> RE: License #: AL730398656 Investigation #: 2023A0580028

> > Close to Home Assisted Living Saginaw Side 2

Dear Mr. Winden:

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,

Sabrina McGowan, Licensing Consultant Bureau of Community and Health Systems

Salvia McGonan

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

License #:	AL730398656
Investigation #:	2023A0580028
Complaint Receipt Date:	03/13/2023
Complaint Recorpt Bate.	00/10/2020
Investigation Initiation Date:	03/16/2023
Report Due Date:	05/12/2023
Licensee Name:	Close To Home Assisted Living, Saginaw LLC
Licenses italie.	Globb To Hellie / tobleted Elving, Edginaw EEG
Licensee Address:	1805 South Raymond
	Bay City, MI 48706
Licensee Telephone #:	(989) 401-3581
Licensee relephone #.	(909) 401-5561
Administrator:	John Winden
Licensee Designee:	John Winden
Name of Facility:	Close to Home Assisted Living Saginaw Side 2
Name of Facility.	Glose to Florite Assisted Living Gaginaw Glde 2
Facility Address:	2160 N. Center Rd
	Saginaw, MI 48603
Escility Tolonbono #:	(989) 778-2575
Facility Telephone #:	(969) 116-2313
Original Issuance Date:	07/07/2020
License Status:	REGULAR
Effective Date:	01/07/2023
Lifective Date.	01/01/2023
Expiration Date:	01/06/2025
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED
i rogiani rype.	DEVELOPMENTALLY DISABLED
	AGED

TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

Violation Established?

Pictures posted to Facebook depicted a photo of a bed with	Yes
feces-stained mattress.	

III. METHODOLOGY

03/13/2023	Special Investigation Intake 2023A0580028
03/13/2023	APS Referral This complaint was denied by APS for investigation.
03/16/2023	Special Investigation Initiated - On Site An unannounced onsite inspection was conducted.
03/16/2023	Contact - Document Received Copy of Assessment plan for Resident A.
04/18/2023	Inspection Completed On-site Unannounced onsite was conducted.
05/03/2023	Contact – Telephone call made Call to Mr. Tom Kubiak, Supports Coordinator at A & D Waiver.
05/03/2023	Exit Conference An exit conference was held with the licensee designee, Mr. Winden.

ALLEGATION:

Pictures posted to Facebook depicted a photo of a bed with feces-stained mattress.

INVESTIGATION:

On 03/16/2023, I received a complaint via BCAL Online complaints. This complaint was denied by APS for investigation. The complaint depicted of a photo taken inside Close to Home Assisted Living, which showed a resident's bed sheets and box spring mattress stained with feces. The resident's face was not shown.

On 03/16/2023, I conducted an unannounced onsite inspection at Close to Home Assisted Living, Side 1. Contact was made with the home manger, Ms. Stacey Rinnert. Ms. Rinnert stated that a staff member just recently quit and decided to put old camera footage and photos on Facebook as a means of retaliation. She stated that the photos were taken some time in October in 2022.

While onsite I observed Resident A while in his room, #22. Resident A was observed sleeping lying in is bed at the time of the visit. His mattress has since been replaced since the photo was taken. His room, as well as his mattress, bed, and bedding were all observed as being clean. No feces was observed.

On 03/16/2023, while onsite I observed resident rooms #23-#33, with the exception of room 32, occupied by a husband-and-wife couple that were under quarantine due to being positive for Covid 19. The rooms observed were observed as being adequately cleaned. The residents observed in each of the room were observed adequately cleaned, appearing to be receiving proper care. No residents were observed lying or sitting in urine and feces as alleged.

On 03/16/2023, I received an emailed copy of the AFC assessment plan for Resident A. It indicates that Resident A requires 1 assist with toileting every 2 hours and 1 assist with wiping and briefs. This plan is signed and dated by the licensee and Resident A on 04/28/2022.

On 04/18/2023, an unannounced onsite inspection was conducted at Close to Home Assisted Living, Side 1. A follow-up observation of Resident A's room was made while onsite. The room, bed and bedding were once again, observed as being clean.

On 05/03/2023, I placed a call to Mr. Tom Kubiak, Supports Coordinator at A & D Waiver, assigned to Resident A. He was very surprised and stated that he had not been made aware of the photos. He stated that Resident A has not expressed any concerns or complained about the care he receives in the home. He has not had any concerns with Resident A's care or cleanliness when he has visited the facility.

Special Investigation Report #2022A0872023 dated 04/04/2022 found violation to R 400.15304 due to staff, Ms. Julie Hoag, pulling Resident A's pants down and clean

her bottom with her bedroom door open, not taking her privacy into consideration. The corrective action plan dated 04/05/2023, signed and dated by the licensee designee, Mr. John Winden, indicated the staff was terminated as of 02/17/2022, and an in-service training for all remaining staff concerning proper peri care and residents' rights that were completed as of 02/22/2022.

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:	A photo taken inside Close to Home Assisted Living, which showed a resident's bed sheets and box spring mattress stained with feces.	
	Manager, Ms. Rinnert stated that a staff member just recently quit and decided to put old camera footage and photos on Facebook as a means of retaliation. She stated that the photos were taken some time in October in 2022.	
	Resident A, his room, as well as his mattress, bed, and bedding were all observed as being clean at 2 separate unannounced onsite inspections.	
	The AFC assessment plan for Resident A indicates that Resident A requires 1 assist with toileting every 2 hours and 1 assist with wiping and briefs. This plan is signed and dated by the licensee and Resident A on 04/28/2022.	
	Based on the interviews conducted with the manager, Ms. Rinnert, Supports Coordinator, Mr. Kubiak, paperwork reviewed and photo depicting a resident's bed sheets and box spring mattress stained with feces, there is enough evidence to support the rule violation.	
CONCLUSION:	REPEAT VIOLATION ESTABLISHED Special Investigation Report #2022A0872023 dated 04/04/2022.	

On 05/03/2023, I conducted an exit conference with the licensee designee, Mr. John Winden. Mr. Winden 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.

Sabria	McGonan May 3, 2023
Sabrina McGowan Licensing Consultar	Date

Approved By:

May 3, 2023

Mary E. Holton Date Area Manager