GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 31, 2023

Jennifer Hescott
University Living
Suite 300
One Town Center Rd
Boca Raton, FL 33486

RE: License #: AH810401699
Investigation #: 2023A1027063
University Living

Dear Ms. Hescott:

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 877-458-2757.

Sincerely,

Jessica 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 #:	AH810401699
Investigation #:	2023A1027063
Complaint Receipt Date:	04/24/2023
Investigation Initiation Date:	04/25/2023
Report Due Date:	06/24/2023
Licensee Name:	Ann Arbor Senior Housing OPCO, LLC
Licensee Address:	Ste 310 One Town Center Rd Boca Raton, FL 33486
Licensee Telephone #:	(517) 294-0534
Administrator:	Kelly Hardy
Authorized Representative:	Jennifer Hescott
Name of Facility:	University Living
Facility Address:	2865 S. Main Street Ann Arbor, MI 48103
Facility Telephone #:	(734) 669-3030
Original Issuance Date:	05/26/2021
License Status:	REGULAR
Effective Date:	11/26/2022
Expiration Date:	11/25/2023
Capacity:	90
Program Type:	ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Resident A lacked care and medical treatment.	Yes
Additional Findings	No

III. METHODOLOGY

04/24/2023	Special Investigation Intake 2023A1027063
04/25/2023	Special Investigation Initiated - Letter Email sent to administrator Kelly Hardy requesting Resident A's face sheet and service plan
04/25/2023	Contact - Document Received Email received from Ms. Hardy with requested documentation
05/18/2023	Inspection Completed On-site
05/23/2023	Contact - Document Sent Email sent to Ms. Hardy requesting additional documentation
05/23/2023	Contact - Document Received Email received from Ms. Hardy with requested documentation
05/25/2023	Contact - Telephone call made Telephone interview conducted with Employee #2
05/26/2023	Inspection Completed-BCAL Sub. Compliance
06/02/2023	Exit Conference Conducted by voicemail then by email with authorized representative Jennifer Hescott

ALLEGATION:

Resident A lacked care and medical treatment.

INVESTIGATION:

On 4/24/2023, the Department received a complaint through the online complaint system which read Resident A admitted to Michigan Medicine with a "*significant rash/dermatitis in her genital region*." The complaint read Resident A transferred from the facility on 4/19/2023 with vaginal bleeding and was found to have a "UTI"

[urinary tract infection]. The complaint read facility staff stated the rash began on 4/9/2023 in which they were checking her every two hours, conducting brief changes, washing her with warm soapy water and applying barrier creams. The complaint read providers felt Resident A was not receiving adequate brief changes and may have delayed seeking medical care for her given the severity of her rash and now UTI. The complaint read Resident A's DPOA [durable power of attorney] was not notified until she transferred to the hospital.

On 5/18/2023, I conducted an on-site inspection at the facility. I interviewed administrator Kelly Hardy who stated Resident A had blood in her urine and was sent to the hospital. Ms. Hardy stated Resident A returned to the facility with concerns for possible bladder cancer and a foley catheter, however required hospitalization again and remained hospitalized at the time of inspection.

While on-site, I interviewed Employee #1 who stated she observed blood in Resident A's brief and reported it to Employee #2.

While on-site, I interviewed Employee #3 who stated she applied Calmoseptine cream to Resident A's buttock area, however she had not observed staff on the shift prior had applied the cream.

On 5/25/2023, I conducted a telephone interview with Employee #2 who stated Resident A had developed a rash in which the physician through *Drs At Your Door* was notified and agreed for staff to administer over-the-counter ointment called Z-guard. Employee #2 stated the facility kept Z-guard ointment in-stock in which a tube with Resident A's name on it was placed in the medication cart. Employee #2 stated she sent a message to staff by telephone to communicate that Resident A required the ointment, as well as wrote it on the board in the medication room. Employee #2 stated Resident A was sent out for blood in her urine later in April 2023, then returned to the facility with a foley catheter in place. Employee #2 stated Resident A was sent back to the hospital for blood in her catheter shortly after returning from the hospital in April 2023. Employee #2 stated Resident A had transferred to the hospital twice in May 2023 and was currently at the hospital. Employee #2 stated Resident A's authorized representative provided a written 30-day notice of discharge to the facility to move Resident A to a place with more care.

I reviewed the facility's admission contract which read in part:

> *"Emergency Medical Treatment: The Resident/Legal Representative hereby authorizes the Community to arrange for any emergency medical treatment the Community deems necessary, or to the Resident's transfer to a hospital or other medical community that can provide needed medical care. The cost of such medical care and transportation will be borne by the Resident/Legal Representative. "*

I reviewed Resident A's face sheet which read in part she moved into the facility on 1/30/2022 to the memory care unit and her emergency contact was Relative A1.

I reviewed Resident A's service plan updated on 2/1/2023 which read in part she had intermittent episodes of incontinence. The plan read in part she required physical assistance with toileting, as well as changing her incontinence products and clothing. The plan read in part Resident A required physical assistance with bathing/showering at least twice weekly.

I reviewed Resident A's service plan updated on 4/30/2023 which read in part she was continent of bowel and bladder and required employee assistance with her toileting needs. The plan read in part Resident A had a new foley catheter in which home health staff were to manage and change monthly. The plan read in part staff were to change the foley catheter bag when it was full, as well as to clean around her perineal area daily to prevent infection and to always get all the soap out and dry her.

I reviewed Resident A's April 2023 progress notes which read:

> 4/9/2023 10:41 PM "*Resident has a rash on her bottom that progressively got worst [sp] to the point of bleeding. Resident needs to be changed every hour with mild soap and water with a light layer of cream and antifungal powder*."
>
> 4/19/2023 11:07 PM "*Resident got sent out for vaginal bleeding/rash, family notified.*"
>
> 4/22/2023 7:43 PM "*21 has returned at 7:40 on a foley catheter.*"

I reviewed Resident A's hospital discharge paperwork which read in part she was discharged with a foley catheter and an order for home health services. The paperwork read a referral was made to urology and an appointment was scheduled for 5/2/2023. The paperwork read medications ordered were ketoconazole, miconazole, nitrofurantoin, and triamcinolone.

I reviewed Resident A's physician notes dated 5/2/2023 which read in part Resident A had multiple ongoing chronic disease illnesses that required frequent monitoring and management. The note read in part Resident A was experiencing hematuria and was went to the emergency room.

I reviewed Resident A's April and May 2023 medication administration records (MAR) which read in part Resident A was in facility from 4/1/2023 to 4/19/2023; 4/28/2023 to 4/30/2023. The April 2023 MAR read in part medications miconazole nitrate and ketoconazole/triamcinolone creams were started 4/24/2023, however read Resident A was in the hospital. The April 2023 MAR read in part medication nitrofurantoin was ordered from 4/24/2023 to 4/26/2023 in which Resident A was also hospitalized at

that time. The May 2023 MAR read in part Resident A was hospitalized from 5/16/2023 to 5/18/2023.

I reviewed Resident A's shower/bed bath record dated March, April and May 2023 which read Resident A had laundry completed on 3/19/2023 and 4/7/2023. The record read Resident A had bed baths on 5/3/2023 and 5/11/2023.

I reviewed the facility's Medication Administration and Disposal policy which read in part:

> *"All medications must be given per a physician's (or other licensed health professional's) written orders. This includes over-the-counter medications. The community will record, in writing, any instructions regarding resident's medications."*

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 325.1901	**Definitions. Rule 1. As used in these rules:**
	(t) "Service plan" means a written statement prepared by the home in cooperation with a resident, the resident's authorized representative, or the agency responsible for a resident's placement, if any, that identifies the specific care and maintenance, services, and resident activities appropriate for the individual resident's physical, social, and behavioral needs and well-being, and the methods of providing the care and services while taking into account the preferences and competency of the resident.
For Reference: R 325.1933	**Personal care of residents.**
	(2) A home shall afford a resident the opportunity and instructions when necessary for daily bathing, oral and personal hygiene, daily shaving, and hand washing before meals. A home shall ensure that a resident bathes at least weekly and more often if necessary.

ANALYSIS:	Review of facility records revealed Resident A resided in memory care and required staff assistance for her activities of daily living. Review of Resident A's service plan revealed the updated version read inconsistent with the previous version regarding if she was continent of bowel and bladder or not. Additionally, the plan lacked specific care needs pertaining to her rash as documented in chart note dated 4/9/2023. Furthermore, the plan revealed Resident A was to receive showers twice weekly, however her shower records lacked documentation and read inconsistent with her service plan. Review of Resident A's April 2023 MARs revealed they read inconsistent with the facility's medication administration policy in which there was not an order for Z-guard or any other ointment from 4/9/2023 to 4/19/2023. Although there was insufficient evidence to support the allegation that Resident A lacked medical treatment, review of the facility's documentation revealed she lacked care consistent with her service plan and the facility's policies, thus 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.

05/31/2023

Jessica Rogers — Date
Licensing Staff

Approved By:

06/01/2023

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