GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

February 15, 2024

Catherine Reese
Vibrant Life Senior Living, Superior Township, LLC
4488 Jackson Road Ste 2
Ann Arbor, MI 48103

RE: License #: AL810401931
Investigation #: 2024A0122009
Vibrant Life Senior Living, Superior 2

Dear Ms. Reese:

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) 284-9720.

Sincerely,

Vanita C. Bouldin, Licensing Consultant
Bureau of Community and Health Systems
22 Center Street
Ypsilanti, MI 48198
(734) 395-4037

Enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL810401931
Investigation #:	2024A0122009
Complaint Receipt Date:	01/11/2024
Investigation Initiation Date:	01/12/2024
Report Due Date:	03/11/2024
Licensee Name:	Vibrant Life Senior Living, Superior Township, LLC
Licensee Address:	4488 Jackson Road Ste 2 Ann Arbor, MI 48103
Licensee Telephone #:	(734) 819-7790
Administrator:	Catherine Reese
Licensee Designee:	Catherine Reese
Name of Facility:	Vibrant Life Senior Living, Superior 2
Facility Address:	1900 N. Prospect Road Ypsilanti, MI 48198
Facility Telephone #:	(734) 484-4740
Original Issuance Date:	12/23/2019
License **Status:**	REGULAR
Effective Date:	12/23/2022
Expiration Date:	12/22/2024
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Direct care staff, Jackie Jaryan and Derrick Salang, are being rough when providing care and not changing the briefs of Residents A, B, C, and D.	No
Residents A, B, C, and D are not receiving medication as prescribed.	Yes

III. METHODOLOGY

01/11/2024	Special Investigation Intake 2024A0122009 APS Referral
01/12/2024	Special Investigation Initiated - Telephone Completed interview with Complainant 1.
01/17/2023	Onsite Inspection Completed Reviewed Resident A, B, C, and D's file. Completed interviews with staff members, Kristen Malone and Tanish Coleman.
01/22/2024	Contact – Telephone calls made. Guardian A, B, C, and D. Completed interviews with Guardians A, B, C and D.
01/24/2024	Contact – telephone call made. Completed interview with Jen Delano, RN.
02/05/24	Contact – telephone call made. Left voice messages for Jackie Jaryan and Derrick Slang, staff members.
02/07/2024	Contact – telephone calls made. Completed interview with Derrick Slang, staff member. Received voice message for Jackie Jaryan, telephone number not in working order.
2/14/2024	Exit Conference Discussed findings with Catherine Reese, Licensee Designee.

ALLEGATION: Direct care staff, Jackie Jaryan and Derrick Salang, are being rough when providing care and not changing the briefs of Residents A, B, C, and D.

INVESTIGATION: On 01/12/2023, I completed an interview with Complainant 1. Complainant 1 stated he did not have specific dates but stated on the midnight shift he has observed staff members, Jackie Jaryan and Derrick Salang, being rough while providing care and not changing the briefs of Residents A, B, C, and D.

Complainant 1 stated the above issues have been reported to management, however, he doesn't feel as if the issues have been addressed.

On 01/17/2023, I interviewed direct care staff, Kristen Malone and Tanish Coleman. Both Ms. Malone and Ms. Coleman are assigned the day shift from 8:00 a.m. – 4:00 p.m. I asked both staff members if they had observed or received reports that midnight staff members Jackie Jaryan and Derrick Salang are rough while changing resident briefs or that they are not changing resident briefs as needed. Both reported an incident that happened approximately two months ago, stating that another female staff member, not Jackie Jaryan, was observed being rough when changing a resident brief. Ms. Coleman and Ms. Malone stated the incident had been reported to Jen Delano, RN and they are uncertain of how it was addressed.

Both stated they have not received reports from residents that Jackie Jaryan and Derrick Salang are rough while changing their briefs or that they were not changing briefs as needed.

On 01/24/2024, I completed an interview with Jen Delano, RN. Ms. Delano confirmed the incident that was reported by Ms. Malone and Ms. Coleman, also confirming that Jackie Jaryan was not involved in the incident. The incident happened in April 2023 and was investigated in Special Investigation Report 2023A0122023. A corrective action plan was submitted and the special investigation was closed.

On 01/17/2024, Jen Delano, RN reported that Residents A, B, C, and D wear incontinent garments, either briefs or pull-ups. Ms. Delano stated she has not received reports from staff members, residents, nor family members that Residents A, B, C, and D's incontinent garments are not being changed as needed or that staff members Jackie Jaryan and Derrick Salang are being rough with the residents while providing care.

On 01/17/2024, I reviewed Residents A, B, C, and D's files. The documents showed that all residents had medical assessments by their primary care physicians, medical personnel when hospitalized, physical and occupational therapists. None of the completed forms documented concerns for the adult foster care services received from the staff members of Vibrant Life Senior Living, Superior 2.

On 01/22/2024, I completed an interview with Guardian A. Guardian A reported concerns with Resident A's briefs being changed in a timely manner, as he has developed a pressure sore. She is also concerned about staff administering a barrier cream that she has purchased for Resident A to help prevent pressure sores. Guardian A stated that Resident A was assessed by a physician in the first week of January and no pressure sore was observed at that time. During my file review on 01/17/2024 I did not find documentation that addressed Resident A having a pressure sore. I made a request that Guardian A provide documentation that Resident A had a pressure sore that was being treated by a physician. To date I have received no documentation from Guardian A.

Resident A's Patient First Care Drs at your Door Assessment dated 01/04/2024 written by Dr. Adriana Gonzales assessed his skin as, "no rashes or nonhealing lesions, skin is warm and dry. No rash noted, no cyanosis (a bluish discoloration of the skin resulting from poor circulation or inadequate oxygenation of the blood). Jen Delano, RN submitted a statement dated 01/22/2024 assessing Resident A's skin as, "overall in good condition. No open areas noted. Will continue to monitor."

On 01/22/2024, I completed an interview with Guardian B. Guardian B reported that he is happy with the care that Resident B is receiving from the staff members, he further reported 90% of the time they do a "good job" with assisting Resident B with toileting which includes assistance with brief changes. He stated at times there may be a lot going on with other residents or issues and there may be a delay in assisting Resident B. Guardian B does not have any issues with staff members being rough when assisting Resident B with brief changes. Overall Guardian B reported no issues with the care Resident B receives from the staff members of Vibrant Life Senior Living, Superior 2.

On 01/22/2024, I completed an interview with Guardian C. Guardian C reported that Resident C does not wear briefs nor needs assistance with toileting. Guardian C reported no issues or concerns with the care Resident C is receiving from the staff members of Vibrant Life Senior Living, Superior 2.

On 01/22/2024, I completed an interview with Guardian D. Guardian D reported no problems with Resident D receiving assistance with toileting from staff members, specifically with changing his briefs. Guardian D stated she has observed his briefs to be cleaned during her visitation. Guardian D reported that she has not observed staff members being rough with providing care/assistance to Resident D.

On 02/07/2024, I completed an interview with Derrick Salang, direct care staff. Mr. Salang denied being rough when aiding Residents A, B, C, and D. He stated he changes their briefs as needed. Mr. Salang stated he has never received complaints from relatives or Jen Delano about being rough with residents or not changing their briefs as needed.

On 02//2024, I completed an Exit Conference with Catherine Reese, Licensee Designee. Ms. Resse agreed with my findings.

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:	On 01/12/2024, Complainant 1 reported that staff members Jackie Jaryan and Derrick Salang, are rough while providing care to Residents A, B, C, and D and they do not change their briefs as needed. On 01/17/2024, Residents A, B, C, and D files review disclosed no findings that their briefs/pull-ups are not changed as needed. On 01/17/2024, staff members Kristen Malone and Tanish Coleman stated they have not received reports from residents that Jackie Jaryan and Derrick Salang are rough while providing care or that they were not changing briefs of Residents A, B, C, and D as needed. On 01/22/2024, Guardian A reported concerns that Resident A's brief was not changed by staff as needed. No documentation was provided to support that Resident A's brief is not changed as needed. On 01/22/2024. Guardians B, C, and D reported that had neither observed nor received reports that Residents B, C, and D's briefs/pull-ups were not changed as needed. They had not received reports that Jackie Jaryan and Derrick Salang are rough while providing care to Residents A, B, C, and D. On 02/07/2024, Derric Salang, denied being rough when providing care to Residents A, B, C, and D. He reported that he changes their briefs/pull-ups as needed. Based upon my investigation I find no evidence to support that staff members, Jackie Jaryan and Derric Salang are rough while providing care to Residents A, B, C, and D. I find no evidence to support the allegation that Ms. Jaryan and Mr. Salang do not change Residents A, B, C, and D's briefs/pull-ups as needed. Therefore, residents of the Vibrant Life Senior Living, Superior 2 are treated with dignity and their personal needs are attended to.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ALLEGATION: Residents A, B, C, and D are not receiving medications as prescribed.

INVESTIGATION: On 01/12/2023, I completed an interview with Complainant 1. Complainant 1 stated Residents A, B, C, and D do not receive their medications as prescribed but gave no specific dates nor names of medications.

On 01/18/2023, I completed an onsite inspection reviewing Residents A, B, C, and D's medication administration sheets and medication on-site. Resident D's medication administration sheets and medication on-site was found in compliance with the licensing study rules. Resident D's medication administration sheets had the correction listing of the name of the medications, dosages, and times to administer the medication. Resident D's medication on-site matched was stored in appropriate pharmacy container stating the same information listed on the medication administration sheets.

Errors were found when reviewing Resident A, B, and C's medication administration sheets and medication on-site. Resident A had the following listed on his medication administration sheet: Lorazepam (Ativan) 0.5mg, take one tablet by mouth 4 hours as needed. However, the medication was not on-site and there was no documentation submitted that the medication had been discontinued.

Resident B had the following medication on-site: Potassium CL ER 20meq tab, take 1 tablet by mouth daily, however, the medication was not listed on the medication administration sheet. The pharmacy container was opened, and pills were missing. There was no documentation submitted stating that the medication had been discontinued and no documentation giving information of when the missing pills had been administered.

Resident C had the following medication on-site: Propranolol ER 60mg cap, however, the medication was not listed on the medication administration sheet. The pharmacy container was opened, and pills were missing. There was no documentation submitted stating that the medication had been discontinued and no documentation giving information of when missing pills had been administered.

On 02//2024, I completed an Exit Conference with Catherine Reese, Licensee Designee. Ms. Resse agreed with my findings and stated she would submit a corrective action plan to address the rule violation found.

APPLICABLE RULE	
R 400.15312	**Resident medications.**
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

ANALYSIS:	On 01/18/2024, Resident A had the following listed on his medication administration sheet: Lorazepam (Ativan) 0.5mg, take one tablet by mouth 4 hours as needed. However, the medication was not on-site and there was no documentation submitted the medication had been discontinued. On 01/18/2024, Resident B had the following medication on-site: Potassium CL ER 20meq tab, take 1 tablet by mouth daily, however, the medication was not listed on the medication administration sheet. The pharmacy container was opened, and pill were missing. There was no documentation submitted stating that the medication had been discontinued and no documentation giving information of when the missing pills had been administered. On 01/18/2024, Resident C had the following medication on-site: Propranolol ER 60mg cap, however the medication was not listed on the medication administration sheet. The pharmacy container was opened, and pills were missing. There was no documentation submitted stating that the medication had been discontinued and no documentation giving information of when missing pills had been administered. Based upon my investigation I find that Residents A, B, and C are not receiving medications as prescribed. Medications in pharmacy containers with missing pills were found on site, however, not listed on the medication administration sheets. There was no evidence to support the medications were discontinued and the medication administration sheets were not completed documenting administration to the residents.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt and approval of a corrective action plan I recommend no change to the status of the license.

Vanita C. Bouldin Date: 02/14/2024
Licensing Consultant

Approved By:

Ardra Hunter Date: 02/15/2024
Area Manager