

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

MARLON I. BROWN, DPA DIRECTOR

August 5, 2024

Christopher Schott The Westland House 36000 Campus Drive Westland, MI 48185

> RE: License #: AH820409556 Investigation #: 2024A1035053 The Westland House

Dear Christopher Schott:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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) 284-9730.

Sincerely,

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Jennifer Heim, Licensing Staff Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (313) 410-3226

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH820409556
Investigation #:	2024A1035053
Complaint Receipt Date:	06/14/2024
Investigation Initiation Date:	06/26/2024
Report Due Date:	08/14/2024
Licensee Name:	WestlandOPS, LLC
Licensee Address:	2nd Floor
	600 Stonehenge Pkwy Dublin, OH 43017
Licensee Telephone #:	(614) 420-2763
Administrator:	Christopher Schott
Authorized Representative:	Christopher Schott
Name of Facility:	The Westland House
Facility Address:	36000 Campus Drive Westland, MI 48185
Facility Telephone #:	(734) 326-6537
Original Issuance Date:	02/25/2022
License Status:	REGULAR
Effective Date:	08/11/2023
Expiration Date:	08/10/2024
Capacity:	102
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
Residents on first floor are not appropriate for assisted living.	No
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

06/14/2024	Special Investigation Intake 2024A1035053
06/26/2024	Special Investigation Initiated - Letter
07/10/2024	Contact - Face to Face
08/05/2024	Inspection Completed BCAL Compliance
08/05/2024	Exit Conference Conducted by email with authorized representative

ALLEGATION:

Residents on first floor are not appropriate for assisted living.

INVESTIGATION:

On June 14, 2024, the department received an anonymous complaint through the BCAL online complaint system which read: "First floor is full of residents that do not belong in an assisted living facility. None of them can walk or assist in any way."

On July 7, 2024, Christopher "Chris" Schott AR provided requested documentation. Facility average daily census is fifty-one residents with three residents requiring two-person assistance.

On July 10, 2024, an onsite investigation was conducted. While onsite I interviewed Chris Schott, AR, who stated all residents within the home are appropriate for assisted living, residents requiring more assistance have extra services such as hospice and home care.

While onsite I interviewed Staff Person (SP)1 who states all residents within the facility are appropriate for the environment. SP1 states she was trained through her agency and the facility on transfer training and resident care. SP1 states residents requiring wound care or additional services have home care and hospice services.

While onsite, I interviewed SP2 who states there are three residents that require twoperson assistance with transfers, no one requires a Hoyer Lift or Sit to Stand. SP2 states she received transfer training and resident care training during orientation.

While onsite, I interviewed Resident A who states her needs are met and the staff take good care of her.

While onsite, I interviewed Resident B who requires a two-person transfer. Resident B states she feels safe during transfers and the staff do a good job.

APPLICABLE F	RULE
R 325.1922	Admission and retention of residents.
	 (2) The admission policy shall specify all of the following: (a) That at the time of admission, the home shall document the needs of each individual seeking admission. The documented needs shall be used to develop the resident's service plan. (b) That a home shall not accept an individual seeking admission unless the individual's needs can be adequately and appropriately met within the scope of the home's program statement. (c) That the individual seeking admission and his or her authorized representative, if any, shall participate in the development of the individual's service plan. (d) That the home has developed and implemented a communicable disease policy governing the assessment and baseline screening of residents.

While onsite, I interviewed Resident C who states her needs are met.

ANALYSIS:	Through record review and interview, there are three residents requiring two-person assistance with transfers within the facility. Residents interviewed state their needs are being met and they feel safe during transfers. Staff interviews provided confirmation that residents within the home are appropriate for the facility. Based on the information noted above this allegation has not been substantiated.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

I recommend the status of this license remain unchanged.

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Jennifer Heim Licensing Staff

08/04/2024 Date

Approved By:

(mohear) Moore

08/05/2024

Andrea L. Moore, ManagerDateLong-Term-Care State Licensing Section