



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

August 28, 2024

Daniel Fessler  
Arden Courts (Bingham Farms)  
24005 W. 13 Mile Rd.  
Bingham Farms, MI 48025

RE: License #: AH630292963

Dear Licensee:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. Failure to submit an acceptable corrective action plan may result in disciplinary action. 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 dates 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 home for the aged authorized representative and a date.

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 feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in blue ink, appearing to read "Elizabeth Gregory-Weil".

Elizabeth Gregory-Weil, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 347-5503

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH630292963
<b>Licensee Name:</b>	Arden Courts of Bingham Farms MI, LLC
<b>Licensee Address:</b>	24005 W. 13 Mile Rd. Bingham Farms, MI 48025
<b>Licensee Telephone #:</b>	(419) 252-5500
<b>Authorized Representative:</b>	Daniel Fessler
<b>Administrator:</b>	Michelle Bojaj
<b>Name of Facility:</b>	Arden Courts (Bingham Farms)
<b>Facility Address:</b>	24005 W. 13 Mile Rd. Bingham Farms, MI 48025
<b>Facility Telephone #:</b>	(248) 644-8100
<b>Original Issuance Date:</b>	05/21/2009
<b>Capacity:</b>	56
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/27/2024

Date of Bureau of Fire Services Inspection if applicable: 04/23/2024 – “C” rating

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 08/28/2024

No. of staff interviewed and/or observed 13

No. of residents interviewed and/or observed 44

No. of others interviewed 0 Role

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication records(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. The facility does not hold resident funds in trust.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
The Bureau of Fire Services is responsible for reviewing fire drills, however facility disaster planning procedures were reviewed.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 2 N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following administrative rules regulating home for the aged facilities:	
<b>R 325.1923</b>	<b>Employee's health.</b>
	<p><b>(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005 (<a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a>), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.</b></p>
<p>Employees 1, 2, and 3's files did not contain evidence that initial TB testing was completed within the timeframe requirements outlined by this rule. Employee 1's hire date is 4/18/23 and her initial TB test was completed on 3/11/23. Employee 2's hire date is 5/10/22 and her TB test was completed on 3/17/22. Employee 3's hire date is 10/2/23 and her initial TB test was completed on 8/18/23.</p> <p>[REPEAT VIOLATION ESTABLISHED]</p>	
<b>R 325.1931</b>	<b>Employees; general provisions.</b>
	<p><b>(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:</b></p> <ul style="list-style-type: none"> <li><b>(a) Reporting requirements and documentation.</b></li> <li><b>(b) First aid and/or medication, if any.</b></li> <li><b>(c) Personal care.</b></li> <li><b>(d) Resident rights and responsibilities.</b></li> <li><b>(e) Safety and fire prevention.</b></li> <li><b>(f) Containment of infectious disease and standard precautions.</b></li> </ul>

	<b>(g) Medication administration, if applicable.</b>
Employee 4 was hired as a caregiver on 3/12/24 and works independently providing care to residents. Her employee file lacked proof of training specific to her position to demonstrate competency.	
<b>R 325.1932</b>	<b>Resident medications.</b>
	<b>(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.</b>

Medication administration records (MAR) were reviewed for Residents A, B, C, D and E for the previous eight weeks. The following observations were made:

Resident A missed one or more doses of scheduled Melatonin, Mirtazapine and Quetiapine on 7/5/24, 8/6/24, 8/15/24 and 8/19/24. The MAR was blank on these dates and staff failed to document a reason for the missed doses.

Resident B missed one or more doses of scheduled Senna on 7/8/24, 7/9/24, 7/11/24-7/20/24 and 7/22/24-7/31/24. The MAR was blank on these dates and staff failed to document a reason for the missed doses.

Resident C missed one or more scheduled doses of Alprazolam on 8/4/24, Fenofibrate on 7/8/24, 7/22/24 and 8/19/24, Escitalopram on 8/19/24 and Ensure on 7/24/24. The MAR was blank on these dates and staff failed to document a reason for the missed doses.

Resident D missed one or more scheduled doses of Prostate on 7/14/24, Ensure on 7/20/24 and Modafinil on 8/2/24, 8/4/24 and 8/17/24. Additionally, Resident D's MAR instructed that Resident D receive one tablet of Depakote twice daily, however staff only administered one tablet from 7/2/24-7/31/24 and didn't administer any on 7/21/24. The MAR was blank on these dates and staff failed to document a reason for the missed doses.

Resident E missed one or more scheduled doses of Docusate on 7/29/24, 7/31/24 and 8/8/24, Levothyroxine on 7/20/24, Lidocaine patch on 7/1/24 and 7/7/24, Microgaurd on 7/7/24, 7/8/24, 7/9/24, 7/26/24, 8/3/24, 8/5/24, 8/6/24, 8/7/24, 8/11/24, 8/12/24, 8/13/24, 8/15/24, 8/16/24, 8/17/24, 8/18/24, 8/19/24, 8/21/24, 8/22/24, 8/23/24, 8/24/24, 8/25/24, 8/26/27 and 8/27/24, Loratadine on 8/1/24 and 8/24/24, Memantine on 8/5/24 and 8/6/24 and Metoprolol on 8/5/24 and 8/6/24. The MAR was blank on these dates and staff failed to document a reason for the missed doses.

<b>R 325.1932</b>	<b>Resident medications.</b>
	<b>(3) Staff who supervise the administration of medication for residents who do not self-administer shall comply with all of the following:</b>  <b>(iv) The time when the prescribed medication is to be administered and when the medication was administered.</b>

The facility utilizes a handwritten, paper medication administration record system and staff do not document the time that medications are administered.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.</b>
Prepackaged food items (included but not limited to chicken breasts, vegetables, meatballs and tater tots) located in the walk in freezer has their packaging opened but were not dated to indicate their age.	
<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(3) Hazardous and toxic materials shall be stored in a safe manner.</b>
A cleaning agent was observed in an unlocked cabinet in the "Harvest Glen" kitchen, which poses an unnecessary ingestion and subsequent poisoning risk to those residents that lack safety awareness.	

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and receipt of annual fee payment, renewal of the license is recommended.



08/28/2024

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Elizabeth Gregory-Weil  
Licensing Consultant

Date