

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR

August 5, 2016

Heartland Health Care Center-Ionia (34-4020) Frederick Massoll, Administrator 814 E. Lincoln Avenue Ionia, MI 48846

Subject: State Nursing Home Licensure Survey

Frederick Massoll,

A state licensure survey was completed on June 16, 2016 at Heartland Health Care Center-Ionia (34-4020) pursuant to the Michigan Public Health Code, Act 368 of 1978 Part 217 Section 333.21711. The Act requires a nursing home to be licensed.

The survey identified non-compliance with the following requirements:

333.21782: Retention of documents for public inspection: The facility did not have all the information required in the statute available for review upon request. The information available for review did not include a copy of the patient contract, a list of licensed personnel, and information regarding the owner/entity as required.

The non-compliance was corrected when the facility added the information listed above to a binder. The facility posted documents available for public inspection and location of the binder. The non-compliance was corrected during the survey and verified on-site. No further action is necessary.

R 325.20401: Administrative policy manual available for inspection Sub Rule (2): Administrative polices reviewed by governing body annually. Facility did not have evidence that the administrative policy manual was reviewed annually by the governing body as required; and R 325.20502: Policies and procedures for care: The facility was unable to demonstrate policies and procedures for patient care were reviewed annually by the patient care committee. During interview with the administrator, it was verified that there was no evidence the manuals (as applicable) were reviewed on an annual basis by the governing body and/or patient care committee.

The facility submitted evidence of compliance via email on 6/28/16. The evidence was reviewed and demonstrated the manuals were reviewed by the patient care committee and owner/entity as applicable. The evidence submitted was reviewed and accepted. Verification of compliance will be evaluated at the next on-site visit.

333.21734: Bed rails. There was no evidence that the facility notified residents of their option regarding the use of bed side rails, as required by this statute. This was confirmed during interview with the Administrator and Director of Nursing during the survey process.

The facility submitted evidence of compliance via email on 6/28/16. The evidence was reviewed and demonstrated the facility provided residents written notification regarding their option for the use of bed side rails. The notification was included in the information provided to residents at the time of admission into the facility. The facility has a policy and procedure to assess and maintain bed side rails. The evidence submitted was reviewed and accepted. Verification of compliance will be evaluated at the next on-site visit.

R 325.21302: Floor plans. The facility did not have a floor plan that included the size of the room and number of beds in the room.

The facility submitted evidence that the floor plan was updated to include the size of the room and the number of beds licensed for that room. The evidence submitted was reviewed and accepted. Verification of compliance will be evaluated at the next on-site visit.

333.21723: Receiving and investigating complaints: The facility did not list the name and location of the individual who was on-site in the nursing home 24 hours a day, seven days a week, responsible for receiving complaints and initiating investigations.

The facility submitted evidence to correct the non-compliance and has added the name, location, and telephone number of the individual who is responsible for receiving and initiating the investigation of complaints 24 hours a day, seven days a week. The facility added the name(s) to their daily resident census and nurse staffing hour sheet, which is posted in the facility and accessible to residents, families, and visitors. The evidence submitted was reviewed and accepted. Verification of compliance will be evaluated at the next on-site visit.

Heartland Health Care Center-Ionia (34-4020) is in substantial compliance with the Michigan Public Health Code (excerpt) Act 368 of 1978, Article 17 Nursing Homes; Michigan Public Health Code Act 368 (Sections 20201 through 20203); Public Act 28 of 2006 (Criminal Background Checks) and the Michigan Administrative Rules for Nursing Homes and Nursing Care Facilities.

Shawne Cripps, LMSW, Health Care Surveyor

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