

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  235057	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  09/26/2024
NAME OF PROVIDER OR SUPPLIER  Majestic Care of Livonia		STREET ADDRESS, CITY, STATE, ZIP CODE 28550 Five Mile Rd Livonia, MI 48154	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 40384</p> <p>This citation pertains to Intake: MI00146915.</p> <p>Based on interview and record review, the facility failed to follow hospital discharge instructions and orders for one sampled resident (R701) of one resident reviewed for continuum of care. Findings include:</p> <p>A review of Intake MI00146915 revealed the following, Patient was admitted to the hospital, oncologist very concerned as pt (patient) did not follow up for oncology treatment post dc (discharge) to [nursing facility] .Pt was to follow up to establish care and treatment plan . Appears that this did not occur which could further put patient at risk due to lack of treatment and care .</p> <p>A review of R701's medical record revealed they were admitted into the facility on [DATE] with a diagnosis of Multiple Myeloma not having achieved remission. Further review revealed that the resident was cognitively intact, and required moderate to maximum assistance for Activities of Daily Living.</p> <p>Further review of R701's medical record revealed discharge instructions from the hospital:</p> <p>Follow up with [physician] Specialty: Medical Oncology, Internal Medicine</p> <p>Within 1 week of discharge for follow up regarding myeloma and resuming treatment.</p> <p>Schedule an appointment with [physician] as soon as possible for a visit in 1 week.</p> <p>Specialty: Family Medicine, Geriatric Medicine, Hospice and Palliative Medicine</p> <p>Post hospital follow-up.</p> <p>Schedule an appointment with [physician] as soon as possible for a visit in 2 weeks</p> <p>Specialty: Neurological Surgery</p> <p>Schedule outpatient MRI (magnetic resonance imaging) under sedation; further neurosurgery recommendations.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Further review of the medical record revealed that of the three appointments that were to be scheduled, only the medical oncology appointment was scheduled however, there was no documentation noting the resident attended the appointment.</p> <p>On 9/26/24 at 10:44 AM, the Assistant Director of Nursing (ADON) was interviewed via phone regarding R701, and the facility's process for scheduling follow up appointments. The ADON explained R701 or the resident's daughter cancelled the oncology appointment, and it had to be rescheduled. The ADON could not speak to the rescheduled appointments, but acknowledged the staff member who was responsible for scheduling appointments is no longer an employee at their facility, and they have developed a new process for scheduling.</p> <p>On 9/26/24 at 11:16 AM, an interview was completed with Licensed Practical Nurse (LPN) A who also explained that R701 was scheduled for their oncology appointment on 8/19/24 however the resident cancelled the appointment. They further explained another appointment was made for the resident on 8/21/24 and 8/28/24 however, there was no documentation indicating the resident attended the scheduled appointments.</p> <p>On 9/26/24 at 11:49 AM, the Nursing Home Administrator (NHA) was asked about R701's appointments, and explained that there was some concern from the resident regarding how they were to be transported to their appointments as they wanted to be transported by stretcher, but didn't meet the criteria. The NHA did acknowledge there was a lack of documentation regarding R701's appointments and the implementation of a new process for scheduling appointments.</p> <p>A review of the facility's Physician Orders policy revealed the following, .1. Facility will maintain a schedule of diagnostic tests (laboratory and radiology) in accordance with the physician ' s orders. No diagnostic tests or consultation requests will be performed without specific physician, physician assistant, nurse practitioner or clinical nurse specialist ' s orders in accordance with State law, including scope of practice laws.5. In instances where diagnostic testing or consultations are not available to be performed on-site OR the Physician has requested that the services be performed at an off-site facility, this facility will work with the resident and their family to secure appropriate transportation arrangements for such appointments.</p>		