



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
MICHIGAN VETERANS AFFAIRS AGENCY
LANSING

JAMES ROBERT REDFORD
DIRECTOR

July 10, 2018

Governor Rick Snyder
State of Michigan
Romney Building
Lansing, MI 48909

Dear Governor,

SUBJECT: PA 314 of 2016 – FY '18 Third Quarter Reporting

Attached please find the quarterly report from the D.J. Jacobetti Home for Veterans and the Grand Rapids Home for Veterans, pursuant to Public Act 314 of 2016, MCL 36.10.

If you have any questions regarding this report, please contact Laurie McCullough-Benner at 517.284.5226.

Sincerely,

James Robert Redford
Director, MVAA

Attachment

cc: Arlan Meekhof, Senate Majority Leader
Tom Leonard, Speaker of the House
Margaret O'Brien, Senate MVA Committee Chair
Mike Nofs, Senate MVA Appropriations Subcommittee Chair
Jason Wentworth, House MVA Committee Chair
Dr. John Bizon, House MVA Appropriations Subcommittee Chair
Dick Posthumus, Chief of Staff
MG Greg Vadnais, DMVA Director

Pursuant to Public Act 314 of 2016, MCL 36.10 Sec. 9. (1)

No later than January 1, April 1, July 1, and October 1 of each year, the Michigan veterans affairs agency, its successor agency, or the department of military and veterans affairs shall report in writing all of the following information concerning any state veterans' facility to the governor, the senate and house committees on veterans affairs, and the senate and house appropriations subcommittees for the department of military and veterans affairs:

(a) Staffing levels and the extent to which staffing levels do or do not meet industry standards.

38 CFR Part 51.130(d) requires a minimum of 2.5 hours per-patient delivered (PPD). Actual total direct care PPD:

DJJHV – 3.42

GRHV - 4.26

(b) Number of patient complaints, average time to review a complaint and respond, and response to each complaint.

DJJHV – Five (5) Concern (complaint) forms submitted - the concerns were responded to within twenty-four hours.

Concerns (2): 4/9/2018 Member's daughter felt that her mother's legs were not being evaluated and treated on a daily basis. Per order, and documentation, member's legs were examined and treated at least twice per day. Redness was reported, and new orders were obtained, and follow-up conducted with daughter. Daughter also felt that her father's hearing aides are not always in working condition and should be cleaned on a daily basis. The Home reviewed the daily care of hearing aids with the Nurse Manager to improve cleaning methods of hearing aids.

Concern: 5/2/2018 Member upset that the kitchen continues to send food that the member dislikes and does not send food that the member requests. Food Service supervisor immediately went to see the member. When taking orders, member is often not in his room and staff attempts to seek him out for his desires. Kitchen staff now ensuring they are finding member or getting his request earlier as able to prevent the miscommunications/lack of communications.

Concern: 5/21/2018 Member concerned that his roommate's gray mat was resting on the foot of the bed, causing a fall hazard, and that his bed was pushed too far towards the window with dresser interference, preventing him from putting the head of his bed down. Member also feels night staff can be too loud, impacting his ability to sleep at night. Director of Nursing and Administrator met with member to address his concerns. Member satisfied with resolution and aligned that immediate reporting of issues to the Nurse Manager will assist in alleviating problems.

Concern: 6/27/2018 Member's family expressed general concerns at a care conference. While family is extremely happy with the care their parents are receiving, the family expressed that when water is provided the staff left the straw paper covering on the straw when giving it to the member, that the room is not sufficiently mopped, and that meals were late. The Nurse Manager has discussed with staff the importance of removing the paper straw cover, housekeeping has increased their mopping efforts, and a review of records did indeed show some late meals of up to five minutes behind schedule. The Dietitian is spot checking delivery times, and the housekeeping manager will be inspecting members' room for cleanliness.

GRHV – 20 Concern (complaint) forms submitted - all concerns were responded to within twenty-four hours.

Concern: 4/3/2018 Member complains about how care givers don't involve him in his care. The watch reported missing was returned 06/06/18 per an email from the unit's SW.

Concern: 4/3/2018 Member concerned by the speed another member drives his scooter. Member has been identified as driving scooter too fast by numerous people, staff will lower speed on scooter and member agreed to drive slower and more carefully.

Concern: 4/13/2018 C/O no Wi-Fi and computer. Activity plans to install a computer a Wi-Fi in a common area on each unit soon.

Concern: 4/13/2018 C/O another member groan. Member given options to avoid groaning sounds.

Concern: 4/16/2018 C/O another member driving his scooter too fast, almost hitting him. Turned the speed of down to 50% on scooter of Member who was driving unsafe. He had several warnings due to previous complaints.

Concern: 4/18/2018 Member c/o his pain being addressed untimely. Members medications are monitored by hospice; he and his wife are satisfied with the explanation. Issue resolved.

Concern: 4/27/2018 Member c/o he waited 45 minutes for care. The delay was actually 50 minutes and related due to an emergency with another member.

Concern: 5/11/2018 Member making noises disturbing others. New Members yelling has decreased; also, unit SW offered coping strategies to effected member.

Concern: 5/16/2018 Complaint r/t change in staff. Member provided an explanation.

Concern: 5/18/2018 Member denied a refrigerator in her room to manage health concerns. Member will be provided a box with a lock to secure her food in the pantry refrigerator.

Concern: 5/29/2018 Member accidentally given too much insulin. Issue investigated, and staff reeducated.

Concern: 6/4/2018 Members medical needs not being met. Member and his wife had no problems with his care. Family meeting held to address concerns and improve communication

Concern: 6/4/2018 Issues with sleep problems. Member prescribed pain Medications and undergoing medical tests to determine the cause of his pain. He's now able to sleep.

Concern: 6/4/2018 Member upset because another member couldn't sell him cigarettes. Director of SW explained the policy and worked with the member to obtain his cigarette another way.

Concern: 6/7/2018 Members room is too cold; problem not being addressed. Member room temperature increased to warmer and thermostat replaced

Concern: 6/12/2018 Member c/o of being disciplined due to being placed in Manuel chair. Member was removed from his electric scooter due to safety issues, not disciplinary action. Medical tests and studies being done to determine cause of sleep disturbances.

Concern: 6/14/2018 Caregiver accidentally knocked members pipe off his table and broke it. Member's pipe replaced by the facility.

Concern: 6/14/2018 Member c/o re Activity. Member's did not like how the new ATA was playing BINGO. Vote taken with all member and Bingo is now played the way it used to be.

Concern: 6/15/2018 Members room too cold. Heat recorded in room at 76 degrees and turned up to 78 for member comfort.

Concern: 6/28/2018 Member's parking space was taken. Security assisted member park his car in his spot until them person parking in his spot could be identified.

(c) Timeliness of distribution of pharmaceutical drugs.

DJJHV - Pharmaceutical drugs are delivered to the medication rooms and medication carts at the Home every two weeks for distribution for the following two week period.

GRHV - Pharmaceutical drugs are delivered daily to the nursing units. Non-controlled medications are delivered to the card key access only medication rooms. Controlled substance medications are signed for by nursing staff at the time of delivery. Medications are filled after a refill request is made through the NTT Electronic Medical Record system. Nurse's request refills 3 to 5 days in advance of need. Per policy, medications required to be filled more than 5 days early require authorization from a nursing supervisor.

(d) Security provided for pharmaceutical drugs in the facility, including the title of the individuals providing the security.

DJJHV - Pharmaceutical drugs are locked in the pharmacy, to which only the licensed pharmacists listed below have access. The pharmacy is equipped with an alarm. Narcotics are double locked within the pharmacy. On the unit(s), the medication rooms are locked, as are medication carts, and narcotics are double locked. The medication nurse on duty on any given shift is the only employee with the key to medications on the unit(s).

The following individuals provide the security and oversight of pharmaceutical drugs:

Brad Harvala, Pharmacy Director
Lori Krueger, Pharmacist
Barb Salmela, Pharmacist

GRHV - Pharmaceutical drugs are locked in the pharmacy, to which only the licensed pharmacists listed below have access. The pharmacy is equipped with an alarm. Narcotics are double locked within the pharmacy. On the units, the medication rooms are locked, as are medication carts, and narcotics are double locked. The medication nurse on duty on any given shift is the only employee with the key to medications on the units(s).

A PYXIS Medication Station, located in the pharmacy entry way is available afterhours. The front entry is only accessible via key card access when the pharmacy is closed. They PYXIS medication station is accessed via fingerprint or individual sigh on with password. The pharmacy entryway has a security camera.

On the units, the medication rooms are locked, as are medication carts and narcotics are double locked. An opportunity for improvement in security has been identified and the medication cart policy will be revised to rotating changes in passwords.

Returned medications to pharmacy are handled via nursing generated and signed form. The returned medications are restocked when appropriate or destroyed. The returned medications are logged into the QS1 pharmacy system.

The following individuals provide the security and oversight of pharmaceutical drugs:

John Carlson, RPh
Jordain Kraai, PharmD
Fred Ammerman, RPh
Mary Butlevics, PharmD

(e) How patient money is accounted for, including the name and title of the individual who supervises patient spending accounts.

DJJHV - Patient monies *held by the facility* are accounted for using generally accepted accounting principles, with interest applied to the balances quarterly.

The following individual supervises patient spending accounts:

Sean Depuydt, Business Manager

GRHV - Patient monies *held by the facility* are accounted for using generally accepted accounting principles, with interest applied to the balances quarterly.

The following individual supervises patient spending accounts:

Erica Tucker, Business Office Manager

(f) Number of facility resident deaths that occurred since the most recent report.

DJJHV – 22 facility resident deaths

GRHV – 13 facility resident deaths

(2) The department of military and veterans affairs shall place the reports required under subsection (1) on its public website in a prominent and conspicuous manner.

This report has been published at www.michiganveterans.com