



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

March 27, 2020

Nicolette Cheff  
Harmony Manor LLC  
PO Box 235  
Atlas, MI 48411

RE: License #: AL250281678  
Investigation #: 2020A0576018  
Harmony Manor

Dear Ms. Cheff:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 (810) 787-7031.

Sincerely,

A handwritten signature in cursive script that reads "C. Garza".

Christina Garza, Licensing Consultant  
Bureau of Community and Health Systems  
4809 Clio Road  
Flint, MI 48504  
(810) 240-2478

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL250281678
<b>Investigation #:</b>	2020A0576018
<b>Complaint Receipt Date:</b>	02/04/2020
<b>Investigation Initiation Date:</b>	02/07/2020
<b>Report Due Date:</b>	04/04/2020
<b>Licensee Name:</b>	Harmony Manor LLC
<b>Licensee Address:</b>	PO Box 235, Atlas, MI 48411
<b>Licensee Telephone #:</b>	(248) 568-1422
<b>Administrator:</b>	Nicolette Cheff
<b>Licensee Designee:</b>	Nicolette Cheff
<b>Name of Facility:</b>	Harmony Manor
<b>Facility Address:</b>	903 E Court Street, Flint, MI 48503
<b>Facility Telephone #:</b>	(810) 762-0988
<b>Original Issuance Date:</b>	04/22/2008
<b>License Status:</b>	1ST PROVISIONAL
<b>Effective Date:</b>	09/03/2019
<b>Expiration Date:</b>	03/02/2020
<b>Capacity:</b>	15
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL, AGED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
There is concern that Resident A is not getting her Keppra medication properly.	No
Resident A found a bed bug in her room. The facility is not being treated properly for bed bugs.	No
Additional Findings	Yes

**III. METHODOLOGY**

02/04/2020	Special Investigation Intake 2020A0576018
02/04/2020	APS Referral Referral received from Adult Protective Services (APS)
02/07/2020	Special Investigation Initiated - Telephone Spoke to Resident A
02/10/2020	Inspection Completed On-site Spoke to Resident A, Resident B, Resident C, Resident D, Staff, Katorioa Woodley, and Supervisor, Lashonda Grice
02/25/2020	Contact - Document Received Receipt reviewed
02/28/2020	Contact - Document Received Email received from AFC Licensing Consultant, Christopher Holvey
03/27/2020	Exit Conference Exit Conference conducted with Licensee Designee, Nicolette Cheff

**ALLEGATION:**

There is concern that Resident A is not getting her Keppra medication properly.

**INVESTIGATION:**

On February 4, 2020, I received this referral from Adult Protective Services (APS). The intake was denied for APS investigation.

On February 7, 2020, I spoke to Resident A. Resident A reported she moved into Harmony Manor in January 2020 and continues to reside there.

On February 10, 2020, I completed an unannounced on-site inspection at Harmony Manor. I spoke to Resident A who reported she was hospitalized from November 2019 through January 14, 2020, due to mental health issues. Resident A reported she was prescribed medications upon her discharge from the hospital and she is not sure they were filled. Resident A reported she is supposed to receive a medication, Keppra twice per day and she was receiving once per day.

On February 10, 2020, I reviewed Resident A's medication and medications administration sheets. There were no concerns with Resident A's medications or that she is not receiving them as ordered. Resident A was ordered to receive Keppra twice per day and this is indicated on the medication bottle and medication administration sheets.

On February 10, 2020, I spoke to Supervisor, Lashonda Grace who reported Resident A is receiving her medications as prescribed. Ms. Grace reported Resident A's medications were ordered during her stay at the hospital and Resident A's medications are from the hospital.

<b>APPLICABLE RULE</b>	
<b>R 400.15312</b>	<b>Resident medications.</b>
	<b>(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.</b>

<b>ANALYSIS:</b>	<p>There is not a preponderance of evidence to conclude a rule violation. It was alleged that Resident A may have not been receiving her medication, Keppra, as ordered.</p> <p>On February 10, 2020, Resident A's medication and medication administration sheets were reviewed. There were no concerns noted. Resident A was ordered to receive Keppra twice per day and this is indicated on the medication bottle and medication administration sheets.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

Resident A found a bed bug in her room. The facility is not being treated properly for bed bugs.

**INVESTIGATION:**

On February 10, 2020, I spoke to Resident A at Harmony Manor. Resident A reported that on February 3, 2020, she saw a bug on her pillow and was not sure if it was a bed bug. Resident A reported she looked up a picture of bed bugs on-line and she believed the bug she found to be a bed bug.

On February 10, 2020, I spoke to Staff, Katorioa Woodley. Ms. Woodley reported the facility has been treated for bed bugs. Ms. Woodley reported she has not seen any bed bugs at the facility. Ms. Woodley denied staff or residents have made her aware of bed bugs at the home.

On February 10, 2020, I spoke to Resident B who reported she has lived at her home for 7 months. Resident B reported she likes her home when asked. Resident A reported there are no bed bugs at the home. Resident B reported the facility was sprayed for bed bugs withing the last 6 months. Resident B reported all the rooms were sprayed and resident bedding is washed. Resident B denied any concerns. Resident B's bed was inspected, and no bed bugs or evidence of bed bugs was seen.

On February 10, 2020, I spoke to Resident C who reported she has lived at her home for 3 years and likes her home. Resident C reported she saw a bed bug last year and none recently. Resident C denied getting bit by any bed bugs. I inspected Resident C's bed and second bed that was in her room and there were no bed bugs seen.

On February 10, 2020, I spoke to Resident D who reported there is not a bed bug problem at the home. Resident D reported she is not getting bit from bugs. Resident D denied seeing any bed bugs at her home. I inspected Resident D's bed and second bed that was in her room and no bed bugs were seen. I viewed the remaining resident beds in the home and did not see bed bugs on any beds.

On February 10, 2020, I spoke to Supervisor, Lashonda Grace who reported she has worked at the facility for 6 years. Ms. Grace reported the home has been treated for bed bugs by a pest control company. Ms. Grace reported the home was last treated for bed bugs a month ago.

On February 25, 2020, I reviewed a receipt from Bugs Be Gone dated for February 17, 2020. The receipt is for bed bug treatment at Avon Manor. The receipt indicates a bed bug treatment was completed November 20, 2019.

On February 28, 2020, I received an email from Adult Foster Care Licensing Consultant, Christopher Holvey. Mr. Holvey advised he completed an inspection at the Harmony Manor on February 25, 2020 and he found no evidence of bed bugs. Mr. Holvey advised several staff and residents confirmed this.

<b>APPLICABLE RULE</b>	
<b>R 400.15401</b>	<b>Environmental health.</b>
	<b>(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.</b>
<b>ANALYSIS:</b>	There is not a preponderance of evidence to conclude a rule violation. It was alleged the facility has bed bugs and not being properly treated for the pests.  On February 10, 2020, I inspected all resident beds and did not see any evidence of bed bugs. I spoke to several residents who reside at the facility who reported the facility does not have bed bugs at this time. I reviewed a receipt indicating the facility was treated for bed bugs.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

On February 10, 2020, I completed an unannounced on-site inspection at Harmony Manor. I reviewed Resident A's medication administration sheets for February 2020. There were no staff initials noted for medications administered on February 1, 2020 at 8am and 8pm and also for medications administered on February 2, 2020 at 8am.

<b>APPLICABLE RULE</b>	
<b>R 400.15312</b>	<b>Resident medications.</b>
	<p><b>(4)(b) Complete an individual medication log that contains all of the following information:</b></p> <ul style="list-style-type: none"> <li><b>(i) The medication.</b></li> <li><b>(ii) The dosage.</b></li> <li><b>(iii) Label instructions for use.</b></li> <li><b>(iv) Time to be administered.</b></li> <li><b>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</b></li> <li><b>(vi) A resident's refusal to accept prescribed medication or procedures.</b></li> </ul>
<b>ANALYSIS:</b>	There is a preponderance of evidence to conclude a rule violation. On February 1, 2020, and February 2, 2020, the initials of the person who administered Resident A's medications were not entered on the medication log.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On March 27, 2020, I completed an Exit Conference with License Designee, Nicolette Cheff. I advised Ms. Cheff that I would be requesting a corrective action plan with respect to the cited rule violation.



**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, no change in the license status is recommended.



3/27/2020

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Christina Garza  
Licensing Consultant

Date

Approved By:



3/27/2020

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Mary E Holton  
Area Manager

Date