

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 5, 2021

Janice Hurst
Progressive Residential Services Inc
Suite # 165
6001 N. Adams Road
Bloomfield Hills, MI 48304

RE: License #: AS130359802

Homer Road House 19030 Homer Rd. Marshall, MI 49068

Dear Mrs. Hurst:

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. 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, you may contact the local office at (517) 284-9730.

Sincerely,

Sawa M. Campbell

Dawn Campbell, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (517) 899-5607

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

I. IDENTIFYING INFORMATION

License #: AS130359802

Licensee Name: Progressive Residential Services Inc

Licensee Address: Suite # 165

6001 N. Adams Road

Bloomfield Hills, MI 48304

Licensee Telephone #: (248) 641-7200

Licensee/Licensee Designee: Janice Hurst, Designee

Administrator:

Name of Facility: Homer Road House

Facility Address: 19030 Homer Rd.

Marshall, MI 49068

Facility Telephone #: (269) 781-3648

Original Issuance Date: 11/14/2014

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s):		04/27/2021		
Date of Bureau of Fire Services Inspection if applicable:				
Date of Enviro	onmental/Hea	lth Inspection if applic	able:	02/22/2021
Inspection Ty	pe:	☐ Interview and Obe	servatior	∩
No. of staff in No. of resider No. of others	nts interviewed	/or observed d and/or observed Role: 0		2 5
Medication	on pass / simu	llated pass observed?	Yes ⊠	No 🗌 If no, explain.
Medication	on(s) and med	lication record(s) revie	ewed? Y	es 🗵 No 🗌 If no, explain.
 Resident funds and associated documents reviewed for at least one resident? Yes ☐ No ☒ If no, explain. No funds to review at this time. Meal preparation / service observed? Yes ☐ No ☐ If no, explain. 				
Fire drills	reviewed? Y	es 🛛 No 🗌 If no, e	xplain.	
Fire safe	ty equipment a	and practices observe	d? Yes	☐ No ☐ If no, explain.
If no, exp	lain.	pecial Certification Or ecked? Yes ⊠ No [
Incident r	eport follow-u	p? Yes⊠ No ☐ If	no, expla	ain.
N/	Α 🗌	compliance verified?		CAP date/s and rule/s: N/A ⊠
		ease explain) No		

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Three resident records reviewed did not contain verification that a written annual health care appraisal was completed.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

Three resident records reviewed did not contain written verification that a written assessment plan was completed with the resident or his/her designated representative annually.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and

responsible agency, if applicable, at least annually or more often if necessary.

Three resident records reviewed did not contain written verification that a written resident care agreement was completed annually with the resident or his/her designated representative annually.

IV. RECOMMENDATION

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

Saux M. Campbell 05/05/2021

Dawn Campbell Date

Licensing Consultant