

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

July 9, 2021

James Maxson Grand Vista Properties, LLC 13711 Lyopawa Island Coldwater, MI 49036

RE: License #: AL120406800

Grand Vista Properties 99 Vista Drive

Coldwater, MI 49036

Dear Mr. Maxson:

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 (313) 456-0380.

Sincerely,

Maktina Rubeitius

Mahtina Rubritius, Licensing Consultant Bureau of Community and Health Systems Cadillac Place 3026 W. Grand Blvd., Ste. #9-100 Detroit, MI 48202 (517) 262-8604

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

I. IDENTIFYING INFORMATION

License#: AL120406800

Licensee Name: Grand Vista Properties, LLC

Licensee Address: 13711 Lyopawa Island

Coldwater, MI 49036

Licensee Telephone #: (517) 227-5225

Licensee/Licensee Designee: James Maxson

Administrator: Amanda Burritt

Name of Facility: Grand Vista Properties

Facility Address: 99 Vista Drive

Coldwater, MI 49036

Facility Telephone #: (517) 227-5225

Original Issuance Date: 12/29/2020

Capacity: 20

Program Type: AGED

II. METHODS OF INSPECTION

Date	e of On-site Inspection(s): 06/28/2021
Date	e of Bureau of Fire Services Inspection if applicable: 12/08/2020
Date	e of Health Authority Inspection if applicable: 12/28/2020
Insp	ection Type:
No.	of staff interviewed and/or observed 5 of residents interviewed and/or observed 5 of others interviewed 0 Role:
•	Medication pass / simulated pass observed? Yes \boxtimes No \square If no, explain.
•	Medication(s) and medication record(s) reviewed? Yes \boxtimes No \square If no, explain
•	Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. Meal preparation / service observed? Yes No If no, explain.
•	Fire drills reviewed? Yes ⊠ No □ If no, explain.
•	Fire safety equipment and practices observed? Yes 🗵 No 🗌 If no, explain.
•	E-scores reviewed? (Special Certification Only) Yes No N/A N/A If no, explain. Water temperatures checked? Yes No If no, explain.
•	Incident report follow-up? Yes ⊠ No □ If no, explain.
•	Corrective action plan compliance verified? Yes \boxtimes CAP date/s and rule/s: R 400. 15402 (2)(6), R 400. 15306 (3), R 400. 15310 (3), R 400. 14315 (3) & R 400. 15316 (1)(a) N/A \square Number of excluded employees followed-up? N/A \boxtimes
•	Variances? Yes ☐ (please explain) No ☐ N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 400.15204 Direct care staff; qualifications and training.

- (3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:
 - (a) Reporting requirements.
 - There was no documentation that Employee #1 had been trained in Reporting Requirements.

R 400.15205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

- (3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.
 - A health review was not completed within 30 days of hire for Employee #1.

R 400.15205

Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

- (6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.
 - The annual health review was outdated for Employee #2.

R 400.15208 Direct care staff and employee records.

- (1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information: (f) Verification of reference checks.
 - There was no documentation to demonstrate that reference checks had been completed for Employee #1.

R 400.15306 Use of assistive devices.

- (3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.
 - There was no written authorization, for the use of a wheelchair, in one resident file (Resident A).

IV. RECOMMENDATION

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

Mahtina Rubeitius	07/09/2021
Mahtina Rubritius Licensing Consultant	Date