



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

December 15, 2021

Connie Clauson
Hume Home of Muskegon
1244 W Southern Avenue
Muskegon, MI 49441-2271

RE: License #: AH610236822
Hume Home of Muskegon
1244 W Southern Avenue
Muskegon, MI 49441-2271

Dear Mrs. Clauson:

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 home for the aged authorized representative and a date.

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

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 feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in blue ink that reads "Lauren Wohlfert".

Lauren Wohlfert, Licensing Staff
Bureau of Community and Health Systems
350 Ottawa NW Unit 13, 7th Floor
Grand Rapids, MI 49503
(616) 260-7781

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH610236822
Licensee Name:	The Hume Home of Muskegon
Licensee Address:	1244 W Southern Ave. Muskegon, MI 49441
Licensee Telephone #:	(616) 285-0573
Authorized Representative:	Connie Clauson
Administrator:	Shawna Carlisle
Name of Facility:	Hume Home of Muskegon
Facility Address:	1244 W Southern Avenue Muskegon, MI 49441-2271
Facility Telephone #:	(231) 755-1715
Original Issuance Date:	01/01/2000
Capacity:	34
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/14/21

Date of Bureau of Fire Services Inspection if applicable:

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 12/15/21

No. of staff interviewed and/or observed 5
No. of residents interviewed and/or observed 11
No. of others interviewed 0 Role No visitors at time of inspection

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. No resident funds held in trust
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Bureau of Fire Services reviews drills, disaster plans were reviewed with staff
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
Special Investigation Report (SIR) 2022A1021002 rules 1917(1) and 1931(5) dated 11/9/21
- Number of excluded employees followed up? 1 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

R 325.1923	Employee's health.
	(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR “Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005” (http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf), Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. Each home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not need to conduct annual TB testing for employees.
ANALYSIS:	Review of the facility’s TB documents revealed an annual TB risk assessment was not completed for this renewal period.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1942	Resident records.
	(2) A home shall assure that a current resident record is maintained and that all entries are dated and signed.
ANALYSIS:	Review of Resident F’s resident record revealed his initial service plan was not signed by himself and/or his responsible person.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1944	Employee records and work schedules.
	(1) A home shall maintain a record for each employee which shall include all of the following: (d) Summary of experience, education, and training.
ANALYSIS:	Review of employee records revealed staff person Holly Rainbolt did not have record of disaster plan training, resident rights training, and containment of infectious disease and standard precautions training.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(5) The kitchen and dietary area, as well as all food being stored, prepared, served, or transported, shall be protected against potential contamination from dust, flies, insects, vermin, overhead sewer lines, and other sources.
ANALYSIS:	Inspection of one of the reach in refrigerators in the kitchen revealed several trays of beverages were stored without being covered. The beverages were exposed to potential contamination.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

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

Lauren Wohlfart

12/15/21

Licensing Consultant

Date