

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 26, 2022

Ryan Boutell Fessenden Adult Foster Care, LLC 4904 Onsikamme St. Montague, MI 49437

> RE: License #: AM640361441 Investigation #: 2022A0340027

> > Fessenden Adult Foster Care

Dear Mr. Boutell:

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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please 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 (616) 356-0183.

Sincerely,

Rebecca Piccard, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 (616) 446-5764

Rebecca Riccard

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM640361441
	000010010007
Investigation #:	2022A0340027
Complaint Receipt Date:	05/16/2022
	30/10/2022
Investigation Initiation Date:	05/16/2022
Report Due Date:	07/15/2022
Licensee Name:	Fessenden Adult Foster Care, LLC
Licensee Address:	4904 Onsikamme St.
	Montague, MI 49437
Licensee Telephone #:	(123) 167-0947
Licensee Telephone #.	(123) 107-0347
Administrator:	Ryan Boutell
Licensee Designee:	Ryan Boutell
Name of Facility:	Fessenden Adult Foster Care
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Facility Address:	412 Hart Street
	Hart, MI 49420
Facility Telephone #:	(231) 670-9475
r acmity relephone #.	(231) 070-9473
Original Issuance Date:	08/01/2014
License Status:	REGULAR
Effective Date:	02/01/2021
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Expiration Date:	01/31/2023
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL
	AGED

II. ALLEGATION(S)

Violation Established?

There is no Medication Administration Record (MAR) for Resident	Yes
A	

III. METHODOLOGY

05/16/2022	Special Investigation Intake 2022A0340027
05/16/2022	APS Referral
05/16/2022	Contact - Document Sent Sarah Nestell, CMH
05/23/2022	Inspection Completed On-site
05/26/2022	Contact – Telephone Call Made Licensee Ryan Boutell
05/26/2022	Exit Conference Licensee Ryan Boutell

ALLEGATION: There is no Medication Administration Record (MAR) for Resident A.

INVESTIGATION: On May 16, 2022, a complaint was filed with BCAL Online Complaints. It stated that while doing a review of Resident A's binder, it was discovered that there was no Medication Administration Record (MAR). The complainant asked staff Ella Boutell as to the whereabouts of Resident A's MAR and Ms. Boutell responded saying, the pharmacy had not sent one for May.

On May 16, 2022, while speaking with Community Mental Health (CMH) worker Sarah Nestell regarding another resident, I inquired about her involvement with Resident A. She informed me that she does not case manage Resident A but she would find out if one of her co-workers does. Ms. Nestell was unable to confirm if Resident A was case managed by CMH.

On May 23, 2022, I conducted an unannounced home inspection. Ms. Boutell was working on this day. I asked to see Resident A's MAR and Ms. Boutell handed me the MAR binder, but I did not find a MAR for Resident A. I asked her if there was one and she said that the pharmacy had still not sent one. I asked Ms. Boutell if she had filled one out by hand. She stated she had not and that she did not know she was supposed to.

I viewed the medications which are contained in a pharmacy packaged packet roll. It appeared that Resident A has been receiving his medications.

During my inspection, staff Kassandra Counterman arrived at the home. I asked Ms. Counterman about Resident A's MAR. She also stated the problems with the pharmacy (MedX), and that they had said they were going to send one but had not. I inquired about creating a handwritten MAR to be used until one is received from the pharmacy. Ms. Counterman acknowledged that they should have written one out if they didn't have one from the pharmacy. While I was present, she found a blank MAR sheet and began filling it out.

I reiterated with both Ms. Boutell and Ms. Counterman that it is always required to maintain a MAR for resident prescriptions. If in the future one is not received from the pharmacy, someone must create one at the home and fill it out. Both women acknowledged the information and agreed to follow this protocol, if necessary, in the future.

On May 26, 2022, I conducted an exit conference with Licensee Ryan Boutell. I informed him that there was no MAR for Resident A. He stated he was frustrated because his staff know they should fill one out if they do not receive one from the pharmacy. He agreed to send a Corrective Action Plan for the rule violation.

APPLICABLE RULE		
R 400.14312	Resident medications.	
	 (4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (b) Complete an individual medication log that contains all of the following information: (i) The medication. (ii) The dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given. (vi) A resident's refusal to accept prescribed medication or procedures. 	
ANALYSIS:	The allegation was made that Resident A had no MAR. I conducted an unannounced home inspection and confirmed	
	that there was no MAR for Resident A.	

	Ms. Boutell and Ms. Counterman reported that they had not received a MAR from the pharmacy and had not created one to be used to document Resident A's medications. I advised them of the requirement to create and utilize a MAR for recording resident medications whenever they do not receive one from the pharmacy.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receiving an acceptable Corrective Action Plan, I recommend no change to the current license status.

Rebecca Riccard	May 26, 2022
Rebecca Piccard Licensing Consultant	Date
Approved By:	
	May 26, 2022
Jerry Hendrick Area Manager	Date