



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 2, 2022

Connie Clauson
Pleasant Homes I L.L.C.
Suite 203
3196 Kraft Ave SE
Grand Rapids, MI 49512

RE: License #: AL390007095
Park Place Living Centre #D
4222 S Westnedge
Kalamazoo, MI 49008

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

Upon receipt of an acceptable corrective plan and an approved Bureau of Fire Services report, 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,

A handwritten signature in black ink that reads "Cathy Cushman". The signature is written in a cursive, flowing style.

Cathy Cushman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 615-5190

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

I. IDENTIFYING INFORMATION

License #: AL390007095

Licensee Name: Pleasant Homes I L.L.C.

Licensee Address: Suite 203
3196 Kraft Ave SE
Grand Rapids, MI 49512

Licensee Telephone #: (616) 285-0573

Licensee Designee: Connie Clauson

Administrator: Janet White

Name of Facility: Park Place Living Centre #D

Facility Address: 4222 S Westnedge
Kalamazoo, MI 49008

Facility Telephone #: (269) 388-7303

Original Issuance Date: 09/21/1989

Capacity: 20

Program Type: PHYSICALLY HANDICAPPED
AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection: 05/31/2022

Date of Bureau of Fire Services Inspection if applicable: 09/17/2021

Date of Health Authority Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 2
No. of residents interviewed and/or observed 17
No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes No 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
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 CAP date/s and rule/s:
N/A
- Number of excluded employees followed-up? 5 N/A
- 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.**

(1) Direct care staff shall not be less than 18 years of age and shall be able to complete required reports and follow written and oral instructions that are related to the care and supervision of residents.

FINDING: Upon review of direct care staff files, Staff1, had a date of birth of 07/28/2004 making her under 18 years of age. Direct care staff shall not be less than 18 years of age.

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:

- (b) First aid.**
- (c) Cardiopulmonary resuscitation.**
- (f) Safety and fire prevention.**
- (g) Prevention and containment of communicable diseases.**

FINDING: Upon review of direct care staff files, I did not find verification of training for CPR/1st aid for direct care staff, Deja Farmer, Keanue Austin-Whitfield, and Jimmasia Atlas.

I also did not find verification of training of safety and fire prevention for direct care staff, Keanue Austin-Whitfield and Allison Hill.

I did not find verification of training on the prevention and containment of communicable diseases for direct care staff, Keanue Austin-Whitfield.

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.

FINDING: Upon review of direct care staff files, there was no copy of direct care staff, Keanue Austin-Whitfield's, initial medical. Ms. Austin-Whitfield's hire date was indicated as 11/18/2021,

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.

FINDING: Upon review of direct care staff files, there was no verification of an annual health status for direct care staff, Allison Hill, in 2021 or direct care staff, Lynette Gabbidon. Ms. Gabbidon's last health status review was 09/2020.

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:

(d) Verification of the age requirement.

FINDING: Upon review of direct care staff, Jimmasia Atlas', employee file, there was no verification of age requirement (i.e. a copy of a driver's license or state ID).

R 400.15301 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.

FINDING: I reviewed 17 resident files and out of these files, eight did not have Health Care Appraisals (HCA) completed on an annual basis, as required.

- Resident B's last HCA was dated 09/28/2020
- Resident E's last HCA was dated 12/23/2020
- Resident G's last HCA was dated 12/20/2019.
- Resident H's last HCA was dated 10/17/2020.
- Resident N's last HCA was dated 07/17/2020.

- Resident F did not have an HCA dated for 2021.
- Resident P did not have an HCA dated for 2021.
- Resident Q did not have an HCA dated for 2021.

The facility's Administrator, Janet White, indicated she sent requests to the above resident's respective physicians on or around 09/2021 requesting they complete the HCA's however, she hadn't gotten a response from any of the physicians. She reported she followed up again in May 2022, which is when she received updated HCA's for Resident F, Resident P, and Resident Q.

R 400.15301 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.

FINDING: Upon review of Resident N's resident file, her last completed assessment was dated 12/02/2020, indicating this was not completed on an annual basis, as required.

R 400.15301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between

the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A

resident care agreement shall include all of the following:

- (a) An agreement to provide care, supervision, and protection and to assure transportation services to the resident as indicated in the resident's written assessment plan and health care appraisal.**
 - (b) A description of services to be provided and the fee for the service.**
 - (c) A description of additional costs in addition to the basic fee that is charged.**
 - (d) A description of the transportation services that are provided for the basic fee that is charged and the transportation services that are provided at an extra cost.**
 - (e) An agreement by the resident or the resident's designated representative or responsible agency to provide necessary intake information to the licensee, including health-related information at the time of admission.**
 - (f) An agreement by the resident or the resident's designated representative to provide a current health care appraisal as required by subrule (10) of this rule.**
 - (g) An agreement by the resident to follow the house rules that are provided to him or her.**
 - (h) An agreement by the licensee to respect and safeguard the resident's rights and to provide a written copy of these rights to the resident.**
 - (i) An agreement between the licensee and the resident or the resident's designated representative to follow the home's discharge policy and procedures.**
 - (j) A statement of the home's refund policy. The home's refund shall meet the requirements of R 400.14315.**
- 46 of 146 ADULT FOSTER CARE GROUP HOME
TECHNICAL ASSISTANCE MANUAL 06/01/2019
STATE OF MICHIGAN Department of Licensing and
Regulatory Affairs**
- (k) A description of how a resident's funds and valuables will be handled and how the incidental needs of the resident will be met.**
 - (l) A statement by the licensee that the home is licensed by the department to provide foster care to adults.**

FINDING: I reviewed all 17 resident files and determined the facility's Administrator, Janet White, was reviewing and signing Resident Care Agreements in lieu of the facility's licensee/licensee designee. A Resident Care Agreement is a document established between the resident and the "licensee" and must contain all the required signatures and dates.

R 400.15315 Handling of resident funds and valuables.

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

FINDING: Resident A, who was admitted to the facility on 04/01/2022, did not have a Resident Funds I form in her resident file, as required.

R 400.15408 Bedrooms generally.

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, nonlocking-against-egress hardware.

FINDING: Bedroom 13 had a locking against egress door handle.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and an approved Bureau of Fire Services report, renewal of the license is recommended.



06/02/2022

Licensing Consultant

Date