

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

November 28, 2022

Paula Barnes Central State Community Services, Inc. Suite 201 2603 W Wackerly Rd Midland, MI 48640

> RE: License #: AS250291671 Investigation #: 2023A0580006

Vassar Road Home

Dear Ms. Barnes:

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 feel free to 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 (517) 643-7960.

Sincerely,

Sabrina McGowan, Licensing Consultant Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(810) 835-1019

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS250291671
Investigation #	2023A0580006
Investigation #:	2023A0360006
Complaint Receipt Date:	11/04/2022
Investigation Initiation Date:	11/09/2022
Report Due Date:	01/03/2023
Report Due Date.	01/03/2023
Licensee Name:	Central State Community Services, Inc.
Licensee Address:	Suite 201
	2603 W Wackerly Rd Midland, MI 48640
	Wildiand, Wil 40040
Licensee Telephone #:	(989) 631-6691
•	
Administrator:	Regina Wheaton
Licenses Decimens	Davile Dermee
Licensee Designee:	Paula Barnes
Name of Facility:	Vassar Road Home
Facility Address:	3220 Vassar Road
	Burton, MI 48519
Facility Telephone #:	(810) 742-2745
Tuesticy Totophone II.	(010) 112 21 10
Original Issuance Date:	09/12/2007
License Status:	REGULAR
Effective Date:	04/22/2022
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Expiration Date:	04/21/2024
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED
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MENTALLY ILL
AGED

II. ALLEGATION(S)

Violation Established?

Insulin type medications were not secured in a lock box and was	Yes
instead, observed in the refrigerator with the food.	

III. METHODOLOGY

11/04/2022	Special Investigation Intake 2023A0580006
11/09/2022	Special Investigation Initiated - Letter A referral sharing the allegations was made to APS.
11/09/2022	APS A referral sharing the allegations was made to APS.
11/21/2022	Inspection Completed On-site An interview was conducted with the home manager, Mr. Demarco Maynard.
11/21/2022	Contact - Face to Face An in-person observation of Resident A was made in his room.
11/22/2022	Contact - Telephone call made A call was made to Ms. Chris Havens, assigned GHS case manager for Resident A.
11/28/2022	Exit Conference An exit conference was held with the licensee designee, Ms. Paula Barnes.

ALLEGATION:

Insulin type medications were not secured in a lock box and was instead, observed in the refrigerator with the food.

INVESTIGATION:

On 11/04/2022, I received a complaint via BCAL Online Complaint.

On 11/09/2022, I made a referral to APS sharing the allegations.

On 11/21/2022, I conducted an unannounced onsite inspection at Vassar Road Home. Contact was made with the assistant home manager, Mr. Demarco Maynard. He recalled that Resident A's medication was openly placed in the fridge and not in a locked box. He stated that the reason was due to their not being any more room in the lock box. When there is an overflow of medication, they usually place it on top of the lock box. While onsite I observed inside the Frigidaire. The lock box for medication was observed. No medication was observed openly placed in the fridge.

While onsite I observed Resident A to be lying down in his room. He was awake but did not respond. Resident A is diagnosed with Autism, Bipolar Disorder and ADHD. He is non-verbal and unable to participate in an interview. Also observed were other residents observed in various states. Two residents were watching TV while one was playing a video game, and another was sitting at the kitchen table. They all appeared to be receiving adequate care.

On 11/22/2022, I spoke with Ms. Chris Ann Havens, assigned GHS case manager for Resident A. She shared that she believes that the home is working really hard to care for Resident A and meet his needs, especially with the difficulty in his behavior. She confirmed that Resident A is nonverbal, diagnosed with Autism, Bipolar Disorder and ADHD.

APPLICABLE RULE	
R 400.14312	Resident medications.
	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

ANALYSIS:	Based on my investigation, which included interviews with direct staff, Mr. Maynard, case manager, Ms. Chris Ann Havens, and an observation of Resident A, there is evidence to substantiate the allegation that Insulin type medications were not secured in a lock box.
CONCLUSION:	VIOLATION ESTABLISHED

On 11/28/2022, I conducted an exit conference with the licensee designee, Ms. Paula Barnes. Ms. Barnes was informed of the findings of this investigation.

IV. RECOMMENDATION

Upon the receipt of an approved corrective action plan, no changes to the status of the license are recommended.

abria McGonan November 28, 2022

Sabrina McGowan Licensing Consultant Date

Approved By:

November 28, 2022

Mary E. Holton Area Manager

Date