



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

December 1, 2022

Anna Hinton  
Pioneer House, Inc.  
Suite 100  
601 Terrace St.  
Muskegon, MI 49440

RE: License #:	AM610009183 Pioneer House 1390 Brusse Avenue Muskegon, MI 49442-1315
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Dear Ms. Hinton:

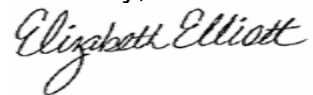
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth Elliott".

Elizabeth Elliott, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 901-0585

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM610009183
<b>Licensee Name:</b>	Pioneer House, Inc.
<b>Licensee Address:</b>	601 Terrace St. Muskegon, MI 49440
<b>Licensee Telephone #:</b>	(231) 286-8637
<b>Licensee/Licensee Designee:</b>	Anna Hinton, Designee
<b>Administrator:</b>	Anna Hinton, Administrator
<b>Name of Facility:</b>	Pioneer House
<b>Facility Address:</b>	1390 Brusse Avenue Muskegon, MI 49442-1315
<b>Facility Telephone #:</b>	(231) 777-2920
<b>Original Issuance Date:</b>	04/29/1981
<b>Capacity:</b>	12
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/16/2022

Date of Bureau of Fire Services Inspection if applicable: 02/17/2022, 03/22/2022

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 7

No. of others interviewed 1 Role: LD-Anna Hinton

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
At the time of the inspection, resident medications were not being administered.  
A review of resident medications and MAR was conducted.
- 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. This facility does not handle resident funds but a review of Funds I&I forms was conducted.
- 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? 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:	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<p>(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:</p> <p>(b) Complete an individual medication log that contains all of the following information:</p> <p>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</p>
<p>Findings: Resident DN's medication, Omeprazole, 40mg tab was not signed as administered on 11/15/2022.</p> <p>Licensee Response: Ms. Hinton and home manager, Jessica DeLeon stated resident DN's medication Omeprazole was administered on 11/15/2022, but staff forgot to sign that spot on the MAR. Staff initials are on every other medication for that date, it just appears as though it was an oversight.</p>	
<b>R 400.14401</b>	<b>Environmental health.</b>
	<p>(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.</p>
<p>Findings: Water temperature tested in several resident bathrooms; the water temperature varied between 123.8-125.1 degrees Fahrenheit.</p> <p>Licensee Response: Ms. Hinton and Ms. DeLeon stated they will request maintenance turn the hot water heater down to meet the rule requirement.</p>	
<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	<p>(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</p>

<p>Findings: The toilet cover of the toilet paper holder in the resident bathroom between rooms 9 &amp; 10 is broken and hanging down.  The window blinds in resident room #12 are broken.  The ceiling in resident shower, between rooms 1 &amp; 2 has some mold/mildew.  The resident shower tiles have what appears to be mold/mildew in the corners of the shower tiles.</p> <p>Licensee Response: Ms. Hinton and Ms. DeLeon stated they will request maintenance clean to see if they can get the mold/mildew or staining out of the shower ceiling and shower tiles.</p>	
<b>R 400.14407</b>	<b>Bathrooms.</b>
	(1) Bathrooms and toilet facilities that do not have windows shall have forced ventilation to the outside. Bathroom windows that are used for ventilation shall open easily.
<p>Findings: The exhaust fan in the bathroom between rooms 7 &amp; 8 does not work.</p> <p>Licensee Response: Ms. Hinton and Ms. DeLeon stated they will request maintenance fix or replace the fan in the bathroom.</p>	

On 11/16/2022, an exit conference was conducted with Licensee Designee, Anna Hinton. Ms. Hinton stated an acceptable corrective action plan will be submitted for the renewal of this license.

**IV. RECOMMENDATION**

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

*Elizabeth Elliott*

12/01/2022

Elizabeth Elliott  
Licensing Consultant

Date