



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 17, 2023

Amanda Brenner
CSM Serenity, LLC
61 Sheldon Ave., SE
Grand Rapids, MI 49503

RE: License #: AL030393312
Investigation #: 2023A1024023
Macatawa West

Dear Ms. Brenner:

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 (616) 356-0183.

Sincerely,

A handwritten signature in black ink that reads "Ondrea Johnson". The signature is written in a cursive style with a large initial "O".

Ondrea Johnson, Licensing Consultant
Bureau of Community and Health Systems
427 East Alcott
Kalamazoo, MI 49001

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL030393312
Investigation #:	2023A1024023
Complaint Receipt Date:	02/22/2023
Investigation Initiation Date:	02/23/2023
Report Due Date:	04/23/2023
Licensee Name:	CSM Serenity, LLC
Licensee Address:	61 Sheldon Ave., SE Grand Rapids, MI 49503
Licensee Telephone #:	(616) 745-4675
Administrator:	Paula Randall, Administrator
Licensee Designee:	Amanda Brenner, Designee
Name of Facility:	Macatawa West
Facility Address:	1714 West 32nd St Holland, MI 49423
Facility Telephone #:	(616) 699-2015
Original Issuance Date:	05/10/2018
License Status:	REGULAR
Effective Date:	11/07/2022
Expiration Date:	11/06/2024
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A has not been given her insulin medication by direct care staff members.	Yes

III. METHODOLOGY

02/22/2023	Special Investigation Intake 2023A1024023
02/23/2023	Special Investigation Initiated – Telephone with APS Specialist Michael McClellan
02/24/2023	APS Referral- APS already involved.
03/22/2023	Inspection Completed On-site with Resident A
03/27/2023	Contact - Document Received- <i>Medication Administration Record (MAR)</i> Request
04/06/2023	Contact - Telephone call made with direct care staff member Emily Brown, Keyona Carson and licensee designee Amanda Brenner.
04/07/2023	Contact - Document Received- <i>Medication Administration Audit Report</i>
04/07/2023	Contact - Telephone call made with direct care staff member Emily Brown
04/07/2023	Contact - Telephone call made-text correspondence with licensee designee Amanda Brenner
04/11/2023	Exit Conference with licensee designee Amanda Brenner

ALLEGATION:

Resident A has not been given her insulin medication by direct care staff members.

INVESTIGATION:

On 2/22/2023, I received this complaint through the Bureau of Community and Health Systems (BCHS) online complaint system. This complaint alleged Resident A has not been given her insulin medication by direct care staff members.

On 2/23/2023, I conducted an interview with APS Specialist Michael McClellan who stated that while visiting this facility another resident was upset about an unrelated matter and informed him Resident A has not been given her insulin.

On 3/22/2023, AFC Licensing Consultant Eli Deleon conducted an onsite investigation at the facility with Resident A who stated that that she has been living at the facility for two years and has never missed getting her insulin medication. Resident A stated she receives medications daily in addition to insulin medication which she receives three times a day. Resident A denied having any issues with getting her medications and stated she had no concerns.

While at the facility, Mr. Deleon requested Resident A's *Medication Administration Record (MAR)* for the months of January 2023, February 2023, and March 2023 to be sent via email. This request was made to licensee designee Amanda Brenner.

On 3/27/2023, Ms. Brenner sent Mr. Deleon Resident A's *Medication Administration Audit Report* via email. In response to this email, Mr. Deleon requested Resident A's Medication Administration Record (MAR) for the months of January 2023, February 2023, and March 2023 in addition to the above received reports.

On 4/6/2023, I conducted interviews with direct care staff members Emily Brown and Keyona Carson who both stated that they work regularly with Resident A and they have no knowledge of Resident A not getting her insulin medication for any reason. Ms. Brown and Ms. Carson further stated they have not heard of any complaints or reports of Resident A not getting her insulin.

I also conducted an interview with licensee designee Amanda Brenner who stated Resident A is given her medications including insulin as prescribed and she has not missed getting any of her medications. Ms. Brenner stated the resident who may have made this complaint makes up stories and is delusional due to a head injury. During this interview, I requested Resident A's MAR for the months of January 2023, February 2023, and March 2023.

On 4/6/2023, I sent a follow-up email to Mr. Brenner requesting Resident A's MAR for the months of January 2023, February 2023, and March 2023, as those had not yet been received.

On 4/7/2023, I received and reviewed Resident A's *Medication Administration Audit* Report. According to this report, from January 1, 2023 through April 6, 2023, Resident A had not missed any medications during this timeframe. It should be noted this report did not show any other information for Resident A.

On 4/7/2023, I requested Resident A's MARs from Ms. Brown who stated she will contact other direct care staff members to assist her in retrieving Resident A's MAR for the department to review.

On 4/7/2023, I requested Resident A's MARs for the months of January 2023, February 2023 and March 2023 from Ms. Brenner for the third time. Ms. Brenner stated she sent Resident A's audit report, and she is out of town on vacation. I explained to Ms. Brenner that Resident A's MAR was needed to verify the administration of Resident A's medications.

APPLICABLE RULE	
R 400.15312	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:	Although Ms. Brown, Ms. Carson, Ms. Brenner and Resident A all stated Resident A has not missed getting her medications including her insulin medication, Ms. Brenner was not able to provide Resident A's MARs despite multiple requests therefore, I was not able to verify the administration of Resident A's medications for the requested months of January 2023, February 2023, and March 2023. It is unknown if Resident A has been administered her insulin medication as prescribed.
CONCLUSION:	VIOLATION ESTABLISHED

On 4/11/2023, I conducted an exit conference with licensee designee Amanda Brenner. I informed Ms. Brenner of my findings and allowed her an opportunity to ask questions or make comments.

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the current license status remain unchanged.

Ondrea Johnson

4/11/2023

Ondrea Johnson
Licensing Consultant

Date

Approved By:

Dawn Timm

04/17/2023

Dawn N. Timm
Area Manager

Date