



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

August 8, 2023

Kristen Wright
LifeSpan...A Community Service
PO Box 1978
524 North Jackson Street
Jackson, MI 49201-1978

RE: License #: AS380389411
Hampton Drive
1218 Hampton Drive
Jackson, MI 49203

Dear Kristen Wright:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan: You are to submit a Statement of Correction by August 23, 2023.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 (313) 456-0380.

Sincerely,

A handwritten signature in cursive script that reads "Mahtina Rubritius".

Mahtina Rubritius, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd., Ste. #9-100
Detroit, MI 48202
(517) 262-8604

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

I. IDENTIFYING INFORMATION

License #: AS380389411

Licensee Name: LifeSpan...A Community Service

Licensee Address: PO Box 1978
524 North Jackson Street
Jackson, MI 49201-1978

Licensee Telephone #: (517) 784-4426

Licensee/Licensee Designee: Kristen Wright

Administrator: Lisa Stewart

Name of Facility: Hampton Drive

Facility Address: 1218 Hampton Drive
Jackson, MI 49203

Facility Telephone #: (517) 917-6876

Original Issuance Date: 02/11/2019

Capacity: 4

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/02/2023

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 4

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.
The on-site inspection was not concurrent with the mealtimes.
- 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.
There were no incident reports recently submitted that required follow-up.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
R 330.1803 (6), R 400.14315 (3), R 400.14318(1), R 400.14401(2), R 400.14403 (1), R 400. 14403 (11), R 400.14403 (8) and R 400.14511 (4). 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:

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.

- Resident A and Resident B's medications were kept in the refrigerator. They were not kept in a locked container or safeguarded as required.

R 400.14403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

- The dryer vent was equipped with a foil duct. This must be replaced with a flexible metal duct.
- The filters above the stove required repair or replacement.
- There were multiple oxygen tanks stored (upright) in the home front closet. There were books, games, and other items also stored in the closet area. The oxygen tanks must be stored, upright, in an area that is not utilized for any other storage.
- While the licensee completed three fire drills, each quarter, as required; there were two evening hour fire drills (05/02/2022 & 08/02/2022) that were five minutes or longer.

R 400.14511 Flame-producing equipment; enclosures.

(1) If the heating plant is located in the basement of a small group home, standard building material may be used for the floor separation. Floor separation shall also include at least 1

3/4-inch solid core wood door or equivalent to create a floor separation between the basement and the first floor.

- The fire door, which provides for floor separation, did not adequately close and latch.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license and the special certification is recommended.

Mahtina Rubritius

8/8/2023

Mahtina Rubritius
Licensing Consultant

Date