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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

August 15, 2023

Regina Williams Beacon Harbor Homes, Inc. Suite 1 3689 Fashion Square Blvd Saginaw, MI 48603

RE: License #: AS730249967

Piper Home 806 Piper

Saginaw, MI 48604

#### Dear Regina Williams:

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 documentation of compliance.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license and special certification 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 (517) 284-9730.

Sincerely,

Christina Garza, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (810) 240-2478

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

#### I. IDENTIFYING INFORMATION

**License #:** AS730249967

**Licensee Name:** Beacon Harbor Homes, Inc.

Licensee Address: Suite 1

3689 Fashion Square Blvd

Saginaw, MI 48603

**Licensee Telephone #:** (989) 792-1888

Licensee/Licensee Designee: Regina Williams

Administrator: Regina Williams

Name of Facility: Piper Home

Facility Address: 806 Piper

Saginaw, MI 48604

**Facility Telephone #:** (989) 754-2933

Original Issuance Date: 08/01/2002

Capacity: 6

Program Type: MENTALLY ILL

Certified Programs: MENTALLY ILL

### II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	08/15/2023	
Date	e of Bureau of Fire Services Inspection if applicable:	N/A	
Date	e of Environmental/Health Inspection if applicable:	N/A	
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed  1 Role: Licensee Designe	2 4 ee	
•	Medication pass / simulated pass observed? Yes $\boxtimes$	No 🗌 If no, explain.	
•	Medication(s) and medication record(s) reviewed? Ye	es 🗵 No 🗌 If no, explain.	
•	Resident funds and associated documents reviewed for at least one resident? Yes $\boxtimes$ No $\square$ If no, explain.  Meal preparation / service observed? Yes $\square$ No $\boxtimes$ If no, explain. It was not meal time at time of inspection.  Fire drills reviewed? Yes $\boxtimes$ No $\square$ If no, explain.		
•	Fire safety equipment and practices observed? Yes	⊠ No ☐ If no, explain.	
•	E-scores reviewed? (Special Certification Only) Yes  No NA NA If no, explain.  Water temperatures checked? Yes No If no, explain.		
•	Incident report follow-up? Yes ⊠ No ☐ If no, explain	in.	
•	Corrective action plan compliance verified? Yes  CAP date/s and rule/s: 4/8/21 AS301(2)(c) N/A  Number of excluded employees followed-up? 2 N/A		
•	Variances? Yes ☐ (please explain) No ☐ N/A ☒		

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was determined to be in substantial compliance with rules and requirements.

This facility was found to be in non-compliance with the following rules:

#### R 330.1803 Facility environment; fire safety.

- (6) Evacuation assessments shall be conducted within 30 days after the admission of each new client and at least annually thereafter. The specialized program shall forward a copy of each completed assessment to the responsible agency and retain a copy in the home for inspection. A home that is assessed as having an evacuation difficulty index of "impractical" using appendix f of the life safety code of the national fire protection association shall have a period of 6 month from the date of the finding to either of the following:
- (a) Improve the score to at least the "slow" category.
- (b) Bring the home into compliance with the physical plant standards for "Impractical" homes contained in chapter 21 of the 1985 life safety code of the national fire protection association, which are adopted by reference in these rules and which may be obtained from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost, or from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of the chapter 21 standards. A price quote for copying of these pages may be obtained from the national fire protection association.

At time of inspection, evacuation assessments were not conducted within 30 days after the admission of each new client and at least annually thereafter.

#### R 400.14312 Resident medications.

(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:

## (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

At time of inspection, reason for each administration of as needed medication was not recorded.

A corrective action plan was requested and approved on 08/15/2023. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license and special certification.

#### IV. RECOMMENDATION

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

C. Danja	8/15/2023
Christina Garza	Date
Licensing Consultant	