



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

October 27, 2023

Neil Hinkson  
Straits Area Senior Living Community  
255 S. Airport Rd.  
St. Ignace, MI 49781

RE: License #:	AH490411476 Straits Area Senior Living Community 255 S. Airport Rd. St. Ignace, MI 49781
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Dear Mr. Hinkson:

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 home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 feel free to contact the local office at (517) 284-9730.

Sincerely,

Kimberly Horst, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
Lansing, MI 48909

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH490411476
<b>Licensee Name:</b>	Straits Area Senior Living Community, Inc.
<b>Licensee Address:</b>	2979 County Road 413 McMillan, MI 49853
<b>Licensee Telephone #:</b>	(906) 984-2030
<b>Authorized Representative/ Administrator:</b>	Neil Hinkson
<b>Name of Facility:</b>	Straits Area Senior Living Community
<b>Facility Address:</b>	255 S. Airport Rd. St. Ignace, MI 49781
<b>Facility Telephone #:</b>	(906) 984-2030
<b>Original Issuance Date:</b>	05/15/2023
<b>Capacity:</b>	48
<b>Program Type:</b>	AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/24/2023

Date of Bureau of Fire Services Inspection if applicable: 04/26/2023

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 10/27/2023

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 4

No. of others interviewed 0 Role N/A

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication records(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. Resident funds not kept in trust
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
Disaster plan reviewed and staff interviewed
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:
- Number of excluded employees followed up? N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<b>(1) A home shall have a written resident admission contract, program statement, admission and discharge policy and a resident's service plan for each resident.</b>
Review of Resident A's admission agreement revealed Relative A1 signed the admission agreement. Review of Resident A's paperwork revealed Resident A was competent to make decisions. The facility had Relative A sign the admission agreement and not Resident A. Therefore, the admission agreement is not valid as it was not appropriately signed.	
<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<b>(3) At the time of an individual's admission, a home or the home's designee shall complete a written resident admission contract between the resident and/or the resident's authorized representative, if any, and the home. The resident admission contract shall, at a minimum, specify all of the following: (e) The home's admission and discharge policy. (g) The resident's rights and responsibilities, which shall include those rights and responsibilities specified in MCL 333.20201(2) and (3) and MCL 333.20202.</b>
Review of Resident A's admission agreement revealed the admission agreement did not specify the admission and discharge policy and Resident Rights and Responsibilities.	
<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<b>(5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.</b>

Review of Resident A's service plan revealed it was not updated to reflect Resident A's involvement with hospice.	
<b>R 325.1922</b>	<b>Admission and retention of residents.</b>
	<p><b>(7) An individual admitted to residence in the home shall have evidence of tuberculosis screening on record in the home that was performed within 12 months before admission. Initial screening may consist of an intradermal skin test, a blood test, a chest x-ray, or other methods recommended by the public health authority. The screening type and frequency of routine tuberculosis (TB) testing shall be determined by a risk assessment as described in the 2005 MMWR ?Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005? (<a href="http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf">http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf</a>) , Appendices B and C, and any subsequent guidelines as published by the centers for disease control and prevention. A home, and each location or venue of care, if a home provides care at multiple locations, shall complete a risk assessment annually. Homes that are low risk do not have to conduct annual TB testing for residents.</b></p>
Review of Resident A's records revealed Resident A did not have a tuberculosis test within 12 months of admission.	
<b>R 325.1931</b>	<b>Employees; general provisions.</b>
	<p><b>(6) The home shall establish and implement a staff training program based on the home's program statement, the residents service plans, and the needs of employees, such as any of the following:</b></p> <ul style="list-style-type: none"> <li><b>(b) First aid and/or medication, if any.</b></li> <li><b>(c) Personal care.</b></li> <li><b>(e) Safety and fire prevention.</b></li> <li><b>(f) Containment of infectious disease and standard precautions.</b></li> <li><b>(g) Medication administration, if applicable.</b></li> </ul>

Review of staff person 1 (SP1) employee record reviewed SP1 did not complete the staff training program.	
<b>R 325.1931</b>	<b>Employees; general provisions.</b>
	<b>(7) The home's administrator or its designees are responsible for evaluating employee competencies.</b>
Review of SP1 employee record revealed the facility administrator or designee did not evaluate SP1's competencies.	
<b>R 325.1932</b>	<b>Resident medications.</b>
	<b>(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.</b>
Review of Resident A's medication administration record (MAR) revealed Resident A had an order for Acetaminophen 5-325mg tablet with instruction to administer one table by mouth every 6 hours as needed for pain. Review of Resident A's MAR revealed Resident D received this medication 10/09-10/24. Resident A was administered medication every day for 21 days. However, the order was written to administer the medication on an as needed basis. The facility did not ensure the medication was administered as written by the prescribing health care professional.	
<b>R 325.1953</b>	<b>Menus.</b>
	<b>(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.</b>
Inspection of the facility revealed the weekly menu was not posted.	
<b>R 325.1954</b>	<b>Meal and food records.</b>
	<b>The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.</b>

Inspection of the facility revealed the facility did not keep a meal census.	
<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.</b>
Inspection of the facility kitchen revealed that the walk-in refrigerator, freezer and dry storage area contained items that were opened, unsealed and were not dated (including cheese, ham, pepperoni, ice cream).	

#### IV. RECOMMENDATION

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

*Kimberly Host*

10/27/2023

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Licensing Consultant

Date