

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

## AMENDED REPORT

April 12, 2024

Scott Brown Renaissance Community Homes Inc P.O. Box 749 Adrian, MI 49221

### RE: License #: AS380011364 Range Road Home 6708 Range Road Jackson, MI 49201

Dear Scott Brown:

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 designee 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. 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,

Maktina Rubertius

Mahtina Rubritius, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa P.O. Box 30664 Lansing, MI 48909 (517) 262-8604

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

# I. IDENTIFYING INFORMATION

License #:	AS380011364
Licensee Name:	Renaissance Community Homes Inc
Licensee Address:	Suite C 1548 W. Maume St. Adrian, MI 49221
Licensee Telephone #:	(734) 439-0464
Licensee/Licensee Designee:	Scott Brown
Administrator:	Angel Bail
Name of Facility:	Range Road Home
Facility Address:	6708 Range Road Jackson, MI 49201
Facility Telephone #:	(517) 569-4025
Original Issuance Date:	03/30/1992
Capacity:	6
Program Type:	MENTALLY ILL

## II. METHODS OF INSPECTION

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Date of On-site Inspection(s): 03/25/2024 Date of Bureau of Fire Services Inspection if applicable: N/A Date of Environmental/Health Inspection if applicable: 12/05/2023 4 5 No. of staff interviewed and/or observed No. of residents interviewed and/or observed 0 Role: No. of others interviewed Medication pass / simulated pass observed? Yes  $\boxtimes$  No  $\square$  If no, explain. • Medication(s) and medication record(s) reviewed? Yes  $\square$  No  $\square$  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  $\boxtimes$  No  $\square$  If no, explain. Fire drills reviewed? Yes  $\boxtimes$  No  $\square$  If no, explain. • Fire safety equipment and practices observed? Yes  $\boxtimes$  No  $\square$  If no, explain. • E-scores reviewed? (Special Certification Only) Yes X No X N/A • If no, explain. Water temperatures checked? Yes  $\boxtimes$  No  $\square$  If no, explain. Incident report follow-up? Yes  $\square$  No  $\boxtimes$  If no, explain. • Incident Reports are no longer required to be submitted to LARA. Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A 🖂 Number of excluded employees followed-up? N/A• Variances? Yes  $\Box$  (please explain) No  $\Box$  N/A  $\boxtimes$ 

## **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

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 months from the date of the finding to do either of the following:

(a) Improve the score to at least the "slow" category.

The E-Score assessments were completed on 9/14/2022; however, they were not reviewed again until 11/28/2023. The E-Score assessments were not reviewed annually, as required.

R 400.14401 Environmental health.

(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.

The hot water temperature was 128 degrees Fahrenheit at the faucet. The staff adjusted the water temperature prior to the conclusion of the on-site inspection.

### R 400.14403 Maintenance of premises.

(8) Stairways shall have sturdy and securely fastened handrails. The handrails shall be not less than 30, nor more than 34, inches above the upper surface of the tread. All exterior and interior stairways and ramps shall have handrails on the open sides. All porches and decks that are 8 inches or more above grade shall also have handrails on the open sides. There was a large step leading to the front porch, which was not equipped with handrails. There were two steps on the side of front porch, and they were not equipped with handrails. The porch and the steps were not equipped with handrails, as required.

#### R 400.14511 Flame-producing equipment; enclosures.

(2) Heating plants and other flame-producing equipment located on the same level as the residents shall be enclosed in a room that is constructed of material which has a 1-hour-fire-resistance rating, and the door shall be made of 1 3/4-inch solid core wood. The door shall be hung in a fully stopped wood or steel frame and shall be equipped with an automatic self-closing device and positive-latching hardware.

The door, leading to the heat plant room, which was located in the basement and on the same level as the resident recreational room, had a crack between the door and the frame. In addition, the door was not positive-latching.

### IV. RECOMMENDATION

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

Maktina Rubertius

04/12/2024

Mahtina Rubritius Licensing Consultant Date