



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 30, 2024

Joy Mbelu
Blessed Manor LLC
5517 Starflower Dr.
Haslett, MI 48840

RE: License #: AS330272015
Blessed Manor LLC
716 Wisconsin Ave.
Lansing, MI 48915

Dear Ms. Mbelu:

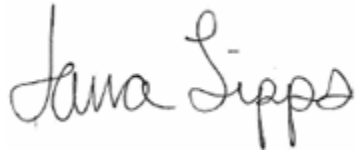
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license and special certification 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,

A handwritten signature in cursive script that reads "Jana Lipps". The signature is written in black ink on a white background.

Jana Lipps, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

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

I. IDENTIFYING INFORMATION

License #:	AS330272015
Licensee Name:	Blessed Manor LLC
Licensee Address:	5517 Starflower Dr. Haslett, MI 48840
Licensee Telephone #:	(517) 402-3952
Licensee/Licensee Designee:	Joy Mbelu, Designee
Administrator:	Joy Mbelu
Name of Facility:	Blessed Manor LLC
Facility Address:	716 Wisconsin Ave. Lansing, MI 48915
Facility Telephone #:	(517) 267-0976
Original Issuance Date:	01/07/2005
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/30/2024

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 1

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: licensee designee

- 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. Licensee Designee does not manage cash funds for any of the current residents.
- Meal preparation / service observed? Yes No If no, explain.
- 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.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: 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 S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

At the time of the on-site inspection, I observed Resident A's bedroom. Resident A had at least 12 dietary supplements sitting on his dresser. Resident A reported that he purchases these dietary supplements and takes these medications. Licensee Designee, Joy Mbelu, reported that she had been unaware of Resident A using these dietary supplements prior to this date. The supplements observed were as follows, B-Complex + Energy, Vitamin E 400 IU, Vitamin C Timed Release 1000mg, Living Defense Plus, Infowars Life Bodease, Yucca 450mg, Zinc Picolinate 25mg, Boron 3mg, Potassium 99mg, Yeast Free Chromium Picolinate 200mcg, Absorbable Selenium 200mcg, Sea Kelp 150mcg. I reviewed the *Medication Administration Record* (MAR) for Resident A for the month of May 2024. None of these supplements were listed on the MAR for Resident A as being ordered by his physician. These dietary supplements were not kept in a locked cabinet or drawer when observed in Resident A's bedroom.

R 400.14312 Resident medications.

(3) Unless a resident's physician specifically states otherwise in writing, the giving, taking, or applying of prescription medications shall be supervised by the licensee, administrator, or direct care staff.

During the on-site inspection, Resident A verbalized that he is self-administering the dietary supplements found in his resident bedroom. Ms. Mbelu reported that she had been unaware of Resident A possessing these dietary supplements. Ms. Mbelu did not have a signed order from a physician for Resident A to self-administer these medications at the time of the on-site inspection.

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.

At the time of the on-site inspection there were two heating vents/registers located in the entryway of the facility that did not have covers and appeared to be damaged. These vents will need to be repaired.

R 400.14403 Maintenance of premises.

(12) Sidewalks, fire escape routes, and entrances shall be kept reasonably free of hazards, such as ice, snow, and debris.

At the time of the on-site inspection, it was observed that the shrubs located adjacent to the main exit/entrance stairway were growing over the handrail and into the stairway. These will need to be cut back to allow for a clear pathway.

R 400.14403 Maintenance of premises.

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

During the on-site inspection I observed a recliner chair in Resident B's bedroom. This chair was significantly damaged and in need of replacing. The arms of this recliner were completely detached and lying next to the recliner on the floor. Ms. Mbelu reported that Resident B has temper tantrums and has been known to destroy property at the facility. Also, during the on-site inspection, I observed an armchair in Resident C's resident bedroom that had torn and worn fabric on the seat and arms. This chair will need to be replaced or reupholstered.

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.

At the time of the on-site inspection, one of the handrails on the front porch was found to be disconnected from the steps it was originally connected to. This handrail was loose and posed a safety hazard.

R 400.14407 Bathrooms.

(3) Bathrooms shall have doors. Only positive-latching, non-locking against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

The downstairs bathroom was noted to have a door that was not equipped with positive latching non-locking against egress hardware. This door handle will need to be replaced.

R 400.14408 Bedrooms generally.

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

During the on-site inspection I observed Resident D's bedroom door was not equipped with positive latching, non-locking against egress hardware. This door handle will need to be replaced.

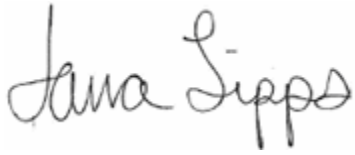
R 400.14507 Means of egress generally.

(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

During the on-site inspection I observed two exits/entrances at the back of the facility were not equipped with positive latching non-locking against egress hardware due to each door having a deadbolt lock installed that was not an emergency egress, interconnected, deadbolt. These deadbolts will need to be removed, or replaced with emergency egress, interconnected, deadbolt locks for fire safety reasons.

IV. RECOMMENDATION

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

A handwritten signature in cursive script that reads "Jana Lipps".

5/30/24

Jana Lipps
Licensing Consultant

Date