GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 30, 2024

Nichole VanNiman
Beacon Specialized Living Services, Inc.
Suite 110
890 N. 10th St.
Kalamazoo, MI 49009

RE: License #: AS390406170
Investigation #: 2024A0578050
Beacon Home at Wolf Lake

Dear Ms. VanNiman:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 contact the local office at (517) 284-9727.

Sincerely,

Eli DeLeon, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 251-4091

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS390406170
Investigation #:	2024A0578050
Complaint Receipt Date:	08/07/2024
Investigation Initiation Date:	08/09/2024
Report Due Date:	10/06/2024
Licensee Name:	Beacon Specialized Living Services, Inc.
Licensee Address:	Suite 110 890 N. 10th St. Kalamazoo, MI 49009
Licensee Telephone #:	(269) 427-8400
Administrator:	Nichole VanNiman
Licensee Designee:	Nichole VanNiman
Name of Facility:	Beacon Home at Wolf Lake
Facility Address:	10633 W. J Ave. Kalamazoo, MI 49009
Facility Telephone #:	(269) 353-1809
Original Issuance Date:	05/05/2021
License Status:	REGULAR
Effective Date:	11/05/2023
Expiration Date:	11/04/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
Direct care staff at this facility have been providing Resident A with Lexapro 10MG instead of her prescribed Lexapro 20MG for 22 days.	Yes

III. METHODOLOGY

08/07/2024	Special Investigation Intake 2024A0578050
08/09/2024	Special Investigation Initiated - On Site
08/09/2024	APS Referral
08/09/2024	Special Investigation Completed On-site -Interview with direct care staff Andrea Jackson. Interview with Resident A.
08/09/2024	Contact-Document Received -*AFC Licensing Division Incident / Accident Report* dated 07/25/2024.
08/09/2024	Contact-Document Received -*Medication Administration Records* for Resident A for July 2024.
08/09/2024	Contact-Document Received -*Packing Slips*, Kalamazoo LTC Pharmacy.
09/27/2024	Exit Conference -With the licensee designee, Nicole VanNiman.

ALLEGATION:

Direct care staff at this facility have been providing Resident A with Lexapro 10MG instead of her prescribed Lexapro 20MG for 22 days.

INVESTIGATION:

On 08/07/2024, I received this complaint through the BCHS On-line Complaint System. Complainant reported Resident A did not receive the correct dose of Lexapro from 07/02/2024 until 07/24/2024. Complainant alleged Resident A received Lexapro 10MG instead of Resident A's prescribed Lexapro 20MG for 22 days.

On 08/09/2024, accompanied by Integrated Services of Kalamazoo rights officer Suzie Suchyta, I interviewed direct care staff Andrea Jackson regarding the allegations. Andrea Jackson reported serving as the home manager for this facility. Andrea Jackson acknowledged Resident A was not provided with the correct dose of Lexapro for 22 days. Andrea Jackson reported she was on medical leave beginning 07/09/2024. Andrea Jackson reported Resident A was previously prescribed Lexapro 10MG but this dosage was increased to Lexapro 20MG on 07/03/2024. Andrea Jackson reported despite being prescribed on 07/03/2024. Resident A's Lexapro 20MG was not delivered until after 07/09/2024, which was when she went on extended leave. Andrea Jackson suspected this was why Resident A's Lexapro 10MG was not immediately changed to Lexapro 20MG.

On 08/09/2024, I reviewed an *AFC Licensing Division Incident / Accident Report* dated 07/25/2024. The *AFC Licensing Division Incident / Accident Report* was completed by direct care staff Taylor Cicala. This *AFC Licensing Division Incident / Accident Report* documented that when Taylor Cicala went to refill Resident A's Lexapro 10MG medication blister pack, she was only able to find Resident A's Lexapro 20MG medication blister pack. The *AFC Licensing Division Incident / Accident Report* documented that after reviewing the situation with the company nurse, Taylor Cicala updated Resident A's *Medication Administration Record* to reflect the Lexapro 20MG medication for Resident A.

On 08/09/2024, I reviewed the *Medication Administration Records* for Resident A for July 2024. The *Medication Administration Records* for Resident A documented Resident A was administered Lexapro 20MG for the month of July until 07/24/2024.

On 08/09/2024, I reviewed the *Packing Slips* documented at this facility and provided by Kalamazoo LTC Pharmacy. I noted a *Packing Slip* from Kalamazoo LTC Pharmacy which recorded the delivery of Resident A's Lexapro 20MG. The *Packing Slip* which included Resident A's Lexapro 20MG was signed by an unidentifiable direct care staff at this facility with a receiving signature date of 07/03/2024.

08/09/2024, accompanied by Integrated Services of Kalamazoo Rights Officer Suzie Suchyta, I interviewed Resident A regarding the allegations. Resident A acknowledged having her routine medications prepared and administered by direct care staff at this facility. Resident A denied ever missing any medications for any reason but clarified that she was aware of receiving the wrong dosage of Lexapro for a few weeks. Resident A reported she did not notice she wasn't being provided with the prescribed Lexapro dosage and denied feeling any different despite not receiving the appropriate dosage of her Lexapro medication.

While at the facility, I reviewed the *Packing Slip* from Kalamazoo LTC Pharmacy with Andrea Jackson. Andrea Jackson reported the delivery of this medication on 07/03/2024 was not communicated to her by staff, which resulted in Resident A receiving Lexapro 10MG instead of Lexapro 20MG until 07/25/2024.

APPLICABLE RULE	
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.
ANALYSIS:	Based upon my investigation, which consisted of interviews with Resident A, direct care staff Andrea Jackson, as well as observations made during an unannounced investigation on-site and a review of pertinent documentation relevant to this investigation, Resident A did not receive her Lexapro 20MG as prescribed on 07/03/2024 until 07/25/2024. Resident A instead received the improper dosage of Lexapro 10MG from 07/03/2024 until 07/24/2024.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable written plan of correction, it is recommended that this license continues on regular status.

09/27/2024

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Eli DeLeon Date
Licensing Consultant

Approved By:

09/30/2024

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Dawn N. Timm Date
Area Manager