



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 28, 2024

Harry Gross
Nova Vida Inc
Box 92
1693 N Otto Road
Charlotte, MI 48813

RE: License #: AS230010636
Nova Vida Inc
4535 Bittersweet Lane
Lansing, MI 48917

Dear Harry Gross:

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 specialized certification for the developmentally disabled population, 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 black ink that reads "Cathy Cushman". The signature is written in a cursive, flowing style.

Cathy Cushman, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 615-5190

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

I. IDENTIFYING INFORMATION

License #:	AS230010636
Licensee Name:	Nova Vida Inc
Licensee Address:	Box 92 1693 N. Otto Road Charlotte, MI 48813
Licensee Telephone #:	(517) 541-2954
Licensee Designee:	Harry Gross
Administrator:	Harry Gross
Name of Facility:	Nova Vida Inc
Facility Address:	4535 Bittersweet Lane Lansing, MI 48917
Facility Telephone #:	(517) 204-6216
Original Issuance Date:	02/07/1987
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection: 06/27/2024

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable: 03/14/2024

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 4

No. of others interviewed N/A Role: [REDACTED]

- 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.
- 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 400.14204 Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (a) Reporting requirements.**
- (b) First aid.**
- (c) Cardiopulmonary resuscitation.**
- (d) Personal care, supervision, and protection.**
- (e) Resident rights.**
- (f) Safety and fire prevention.**
- (g) Prevention and containment of communicable diseases.**

FINDING: Upon review of direct care staff, Adonis Chendjou's, staff file, there was no verification he received training or was competent in required trainings such as reporting requirements, first aid, cardiopulmonary resuscitation, personal care, supervision, and protection, resident rights, safety and fire prevention, or prevention and containment of communicable diseases, as required.

R 400.14205 Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.

(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.

FINDING: Upon review of staff files, direct care staff, Adonis Chendjou, Emma Bailey, and Logan Guy did not have statements signed by a licensed physician attesting to his or her knowledge of the staff's physical health within 30 days of staff's employment with the licensee, as required.

R 400.14205 **Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.

FINDING: Upon review of direct care staff, Heather Jamison's, staff file her last TB test was completed on 01/23/2017. There was no verification of subsequent TB testing in her staff file every three years, as required.

Additionally, there was no verification a TB test had been completed for direct care staff, Adonis Chendjou or Logan Guy, upon employment or assumption of duties, as required.

[REPEAT VIOLATION ESTABLISHED, SEE RENEWAL LICENSING REPORT DATED 06/24/2022, CAP DATED 07/07/2022]

R 400.14205 **Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

(6) A licensee shall annually review the health status of the administrator, direct care staff, other employees, and members of the household. Verification of annual reviews shall be maintained by the home and shall be available for department review.

FINDING: Upon review of direct care staff, Heather Jamison's and Logan Guy's, staff files there was no verification the licensee reviewed their health status on an annual basis, as required.

[REPEAT VIOLATION ESTABLISHED, SEE RENEWAL LICENSING REPORT DATED 06/24/2022, CAP DATED 07/07/2022]

[REPEAT VIOLATION ESTABLISHED, SEE RENEWAL LICENSING REPORT DATED 07/14/2020, CAP DATED 07/28/2020]

R 400.14208 Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

(c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.

FINDING: Direct care staff, Emma Bailey, was identified as a staff who provides transportation to residents; however, a copy of her valid driver's license was not in her staff file, as required.

R 400.14208 Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

(d) Verification of the age requirement.

FINDING: Direct care staff, Adonis Chendjou and Logan Guy, did not have verification of age requirement in their staff files, as required. For example, there was no copy of a birth certificate, state identification card or driver's license confirming they are at least 18 years old.

R 400.14208 Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

(f) Verification of reference checks.

FINDING: Reference checks were not available for review or had not been completed for direct care staff, Heather Jamison, Adonis Chendjou, Emma Bailey, and Logan Guy, as required.

R 400.14208 Direct care staff and employee records.

(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:

(i) Required verification of the receipt of personnel policies and job descriptions.

FINDING: Upon review of direct care staff, Logan Guy's, staff file there was no verification he was in receipt of personnel policies and a job description, as required.

R 400.14209 Home records generally.

(1) A licensee shall keep, maintain, and make available for department review, all the following home records:

(e) A resident register.

FINDING: A resident register was not available for review during the inspection, as required.

R 400.14306 Use of assistive devices.

(2) An assistive device shall be specified in a resident's written assessment plan and agreed upon by the resident or the resident's designated representative and the licensee.

FINDING: Resident A's bed was observed with two bed rails; however, the bed rails were not specified in Resident A's assessment plan, as required.

R 400.14306 Use of assistive devices.

(3) Therapeutic supports shall be authorized, in writing, by a licensed physician. The authorization shall state the reason for the therapeutic support and the term of the authorization.

FINDING: There was no written authorization available for review stating the reason for Resident A's bed rails and the term of the use of the bed rails, as required.

[REPEAT VIOLATION ESTABLISHED, SEE RENEWAL LICENSING REPORT DATED 06/24/2022, CAP DATED 07/07/2022]

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.

FINDING: Resident medications were being stored in cabinets within a small room; however, during the inspection neither the cabinets nor the room's door were observed locked, as required. The door to the medication room was observed open making the medications accessible.

Additionally, Resident A's Medication Administration Record (MAR) documented Resident A is prescribed an "as needed" or PRN, Zofran 4 mg with the instruction of dissolve 1 tablet on the tongue once daily; however, this medication was unavailable in the facility. Subsequently, this medication could not be given to Resident A in the event he needed it, as required.

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:

- (i) The medication.**
- (ii) The dosage.**
- (iii) Label instructions for use.**
- (iv) Time to be administered.**
- (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.**
- (vi) A resident's refusal to accept prescribed medication or procedures.**

FINDING: The medication, Rizatriptan 10 mg, was observed in Resident C's medication basket; however, this medication was not documented on Resident C's Medication Administration Record (MAR), as required.

R 400.14315 Handling of resident funds and valuables.

(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.

FINDING: The licensee designee, Harry Gross, was holding \$481.47 in funds for Resident B.

[REPEAT VIOLATION ESTABLISHED, SEE RENEWAL LICENSING REPORT DATED 06/24/2022, CAP DATED 07/07/2022]

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.

FINDING: The faucet water temperature in the bathroom on the right side of the facility hallway was registering at 72 degrees Fahrenheit.

[REPEAT VIOLATION ESTABLISHED, SEE RENEWAL LICENSING REPORT DATED 06/24/2022, CAP DATED 07/07/2022]

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license and specialized certification for the developmentally disabled, are recommended.



06/28/2024

Cathy Cushman
Licensing Consultant

Date