



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

January 13, 2025

Michelle Jannenga
Thresholds
Suite 130
160 68th St. SW
Grand Rapids, MI 49548

RE: License #: AL410007104
Thresholds Eastern Group Home
4707 Eastern Avenue, SE
Grand Rapids, MI 49508-7537

Dear Ms. Jannenga:

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 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 (616) 356-0183.

Sincerely,

A handwritten signature in cursive script, appearing to read "Toya Zylstra".

Toya Zylstra, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 333-9702

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

I. IDENTIFYING INFORMATION

License #: AL410007104

Licensee Name: Thresholds

Licensee Address: Suite 130
160 68th St. SW
Grand Rapids, MI 49548

Licensee Telephone #: (616) 466-5242

Licensee/Licensee Designee: Michelle Jannenga, Designee

Administrator: Cornelia Buggs

Name of Facility: Thresholds Eastern Group Home

Facility Address: 4707 Eastern Avenue, SE
Grand Rapids, MI 49508-7537

Facility Telephone #: (616) 249-1531

Original Issuance Date: 01/10/1977

Capacity: 16

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/08/2025

Date of Bureau of Fire Services Inspection if applicable: 11/21/2024

Date of Health Authority Inspection if applicable: 01/08/2025

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 3

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

- Medication pass / simulated pass observed? Yes No If no, explain. Medications passed prior to inspection.
- 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 determined to be in substantial compliance with rules and requirements.

This facility was found to be in non-compliance with the following rules:

R 400.15312 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.

Findings: On 01/08/2025 an onsite renewal inspection was completed. While reviewing the facility's Medication Administration Record, I observed that on 12/24/2024 Resident A did not receive the following prescribed medications: Melatonin 3MG, Clonidine .01MG, Mirtazapine 30MG, Risperidone 3MG, and Divalproex 250MG. I observed that Resident A's MAR indicated that each medication was scheduled to be administered at 8:00 PM "bedtime".

Exit Conference: Administrator Cornelia Buggs agreed that a violation had occurred. Ms. Buggs stated that she did not work on 12/24/2024 and therefore could not ascertain the reason Resident A did not receive her scheduled medications. Ms. Buggs stated that a corrective action plan would be submitted.

R 400.15318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

Findings: On 01/08/2025 an onsite renewal inspection was completed. While reviewing the facility's fire drill log, I observed that during the period of April

2024, May 2024, and June 2024; the facility did not execute a drill during sleeping hours.

Exit Conference: Administrator Cornelia Buggs agreed that a violation had occurred. Ms. Buggs stated that she was not employed as the facility's administrator during the period in question and therefore could not provide a rationale regarding the facility not completing a fire drill during sleeping hours. Ms. Buggs stated that a corrective action plan would be submitted.

IV. RECOMMENDATION

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



01/13/2025

Toya Zylstra
Licensing Consultant

Date