



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 7, 2025

Kari Conn
Michigan Masonic Home
1200 Wright Avenue
Alma, MI 48801

RE: License #: AH290278031
Investigation #: 2025A1021062
Michigan Masonic Home

Dear Kari Conn:

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 authorized representative 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) 335-5985.

Sincerely,

Kimberly Horst

Kimberly Horst, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH290278031
Investigation #:	2025A1021062
Complaint Receipt Date:	06/17/2025
Investigation Initiation Date:	06/20/2025
Report Due Date:	08/17/2025
Licensee Name:	Michigan Masonic Home, Inc.
Licensee Address:	1200 Wright Ave Alma, MI 48801
Licensee Telephone #:	(989) 466-3801
Administrator/ Authorized Representative:	Kari Conn
Name of Facility:	Michigan Masonic Home
Facility Address:	1200 Wright Avenue Alma, MI 48801
Facility Telephone #:	(989) 463-3141
Original Issuance Date:	09/19/2005
License Status:	REGULAR
Effective Date:	08/01/2025
Expiration Date:	07/31/2026
Capacity:	138
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
Employees are not trained, and competencies are not checked on medication administration.	Yes
Additional Findings	No

III. METHODOLOGY

06/20/2025	Special Investigation Intake 2025A1021062
06/20/2025	Special Investigation Initiated - Letter contacted complainant for additional information
06/20/2025	Contact - Document Received received additional complaint on staff training
06/26/2025	Inspection Completed On-site
08/07/2025	Exit Conference

ALLEGATION:

Employees are not trained, and competencies are not checked on medication administration.

INVESTIGATION:

On 06/20/2025, the licensing department received two separate intakes on staff training on medication administration. The complainants alleged the facility has certified nurse assistants (CNA)'s administering medications with no formal training.

On 07/02/2025 and 07/07/2025, the licensing department received additional complaints with allegations on lack of medication administration training.

On 06/26/2025, I interviewed the facility administrator Kari Conn at the facility. The administrator reported that the facility changed their staffing model from having medical assistants (MA) administer medications to having resident assistants administer medications. The administrator reported the facility held meetings to discuss this change in staffing models. The administrator reported this change was to decrease staffing costs as resident assistants are paid less than the medical assistants. The administrator reported that if there is a resident assistant that does

not feel comfortable administering medications, they will try to work with them so that they do not have to administer medications. The administrator reported for staff training the resident assistant completes a 12 hour on the job training with the facility nurse. The administrator reported that the resident assistant is responsible for administering the medications while the facility nurse is teaching and supervising them. The administrator reported that the resident assistant then completes an eight hour education course with the facility educator. The administrator reported there is to be a competency test, however, this has not been developed nor administered at this point.

On 06/26/2025, I interviewed staff person 1 (SP1) at the facility. SP1 reported that the facility is halfway through the transition process. SP1 reported the resident assistant meets with her during a 12-hour shift and completes medication administration with hands on training. SP1 reported that the resident assistant is responsible for administering insulin and other various medication administration tasks. SP1 reported there is one resident with a catheter and the resident assistant is only responsible for flushing the catheter. SP1 reported she has shown one resident assistant how to do this. SP1 reported at this time, if that resident requires catheter assistance, the direction is for the resident assistant to call the skilled nursing unit for assistance or to transfer the resident to the emergency room. SP1 reported that the resident assistant then completes the education course. SP1 reported there are only three resident assistants that are currently administering medications at this time.

On 06/26/2025, I interviewed SP2 at the facility. SP2 reported she conducts the eight-hour course with the employees. SP2 reported during the course there is discussion along with videos, PowerPoints, and handouts. SP2 reported that the course includes narcotic medications, injection medications, medication errors, and various other topics. SP2 reported during the course there was a discussion on catheter care and what the resident assistant can and cannot do. SP2 reported that she needs to speak with the facility administrator to determine what the resident assistant can and cannot do. SP2 reported at this time it has been decided to have the resident assistant contact the skilled nursing unit or to send the resident to the emergency department. SP2 reported she is in the process of developing a test to ensure competencies, however, this has not been developed or implemented at this point.

On 06/26/2025, I interviewed SP3 at the facility. SP3 reported she has met individually with each employee on their position change. SP3 reported the new position description was provided to the employees in early June 2025. SP3 reported the official transition date of this switch in the system and on the schedule is 06/29/2025. SP3 reported the employee will have an electronic acknowledgment sent to them to acknowledge the change in position. SP3 reported she was unaware three employees were already administering medications

I reviewed *HFA Medication Cart Class Competency Checklist* for SP1, SP2, and SP3 that are currently administering medications under the new staffing model. Review of the checklist did revealed there was no competency check for catheter care nor administration of injection medications.

I reviewed MA Orientation Competency documentation. This orientation was completed under the prior staffing model when MA's completed medication administration. The training stated, *"Medication Administration: 95% passing grade on Medication Administration test."*

APPLICABLE RULE	
R 325.1921	Governing bodies, administrators, and supervisors.
	(1) The owner, operator, and governing body of a home shall do all of the following: (b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.
For Reference: R 325.1901	Definitions.
	(p) "Protection" means the continual responsibility of the home to take reasonable action to ensure the health, safety, and well-being of a resident as indicated in the resident's service plan, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation while on the premises, while under the supervision of the home or an agent or employee of the home, or when the resident's service plan states that the resident needs continuous supervision.
ANALYSIS:	Interviews conducted and review of documentation revealed the facility recently transition their staffing model from MA's completing medication administration to resident assistants completing medication administration. During this process, the employee is placed on the medication cart to complete supervised medication administration and then complete a course. Investigation revealed lack of training documentation and competency check on injection medications and catheter care. In addition, the facility implemented this change without an organized program as evidenced by the three employees working in this new role had not acknowledged their position change nor was there any formal testing on medication administration.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the status of the license.

Kimberly Horst

07/02/2025

Kimberly Horst
Licensing Staff

Date

Approved By:

Andrea L. Moore

08/04/2025

Andrea L. Moore, Manager
Long-Term-Care State Licensing Section

Date